

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) P, 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: AMERICAN CENTURY MID CAP VALUE FUND (IS PLATFORM) (SA4BV)
1b Three-digit plan number (PN): 850
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): EMPOWER ANNUITY INSURANCE COMPANY
2b Employer Identification Number (EIN): 06-1050034
2c Plan Sponsor's telephone number: 800-338-4015
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, Date, and Name. Rows include plan administrator, employer/plan sponsor, and DFE.

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

Form 5500 (2024) v. 240311

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number																				
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name EMPOWER ANNUITY INSURANCE COMPANY c Plan Name AMERICAN CENTURY MID CAP VALUE FUND IS PLATFORM	4b EIN 06-1050034 4d PN 850																				
5 Total number of participants at the beginning of the plan year	5																				
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:10%;">6a(1)</td><td></td></tr> <tr><td>6a(2)</td><td></td></tr> <tr><td>6b</td><td></td></tr> <tr><td>6c</td><td></td></tr> <tr><td>6d</td><td style="text-align: right;">0</td></tr> <tr><td>6e</td><td></td></tr> <tr><td>6f</td><td></td></tr> <tr><td>6g(1)</td><td></td></tr> <tr><td>6g(2)</td><td></td></tr> <tr><td>6h</td><td></td></tr> </table>	6a(1)		6a(2)		6b		6c		6d	0	6e		6f		6g(1)		6g(2)		6h	
6a(1)																					
6a(2)																					
6b																					
6c																					
6d	0																				
6e																					
6f																					
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan <u>AMERICAN CENTURY MID CAP VALUE FUND (IS PLATFORM) (SA4BV)</u>	B Three-digit plan number (PN)	<u>850</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>EMPOWER ANNUITY INSURANCE COMPANY</u>	D Employer Identification Number (EIN) <u>06-1050034</u>	

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

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	1ST ADVANTAGE FEDERAL CREDIT UNION 401K PLAN ANDTRUST	
b	Name of plan sponsor	1ST ADVANTAGE FEDERAL CREDIT UNION 401K PLAN ANDTRUST	c EIN-PN 54-0623618-001
a	Plan name	2P PROCESSING, INC. 401(K) PLAN	
b	Name of plan sponsor	2P PROCESSING, INC. 401(K) PLAN	c EIN-PN 82-2517667-001
a	Plan name	401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF SPECIAL OLYMPICS NORTH DAKOTA	
b	Name of plan sponsor	401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF SPECIAL OLY	c EIN-PN 45-0355704-001
a	Plan name	ABC 123 DENTAL, LLC 401(K) PLAN	
b	Name of plan sponsor	ABC 123 DENTAL, LLC 401(K) PLAN	c EIN-PN 27-2145951-001
a	Plan name	ABC 401(K) PLAN	
b	Name of plan sponsor	ABC 401(K) PLAN	c EIN-PN 99-9876876-001
a	Plan name	ACCUVEIN INC. 401(K) PLAN	
b	Name of plan sponsor	ACCUVEIN INC. 401(K) PLAN	c EIN-PN 76-0823560-001
a	Plan name	ACMA 401(K) PLAN	
b	Name of plan sponsor	ACMA 401(K) PLAN	c EIN-PN 52-1144059-001
a	Plan name	ACME FIREWORKS, LLC SAMPLE PLAN	
b	Name of plan sponsor	ACME FIREWORKS, LLC SAMPLE PLAN	c EIN-PN 99-9990010-001
a	Plan name	ACRYLTECH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACRYLTECH, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 13-4105837-001
a	Plan name	ACTION ENTERPRISE 401K PLAN	
b	Name of plan sponsor	ACTION ENTERPRISE 401K PLAN	c EIN-PN 82-3184072-001
a	Plan name	ACTIVE FOOT AND ANKLE CARE CENTER 401(K) PLAN	
b	Name of plan sponsor	ACTIVE FOOT AND ANKLE CARE CENTER 401(K) PLAN	c EIN-PN 22-2886826-001
a	Plan name	ADERANS USA SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	ADERANS USA SAVINGS AND RETIREMENT PLAN	c EIN-PN 95-4233663-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name ADNET SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor ADNET SYSTEMS, INC. 401(K) PLAN	c EIN-PN 52-1731575-001
a	Plan name ADVANCED POWER SERVICES, LLC PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ADVANCED POWER SERVICES, LLC PROFIT SHARING PLAN AND TR	c EIN-PN 06-1515967-001
a	Plan name AFA INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor AFA INDUSTRIES, INC. 401(K) PLAN	c EIN-PN 38-2738992-001
a	Plan name AFFILIATED NURSING AND REHABILITATION CENTERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor AFFILIATED NURSING AND REHABILITATION CENTERS 401(K) RE	c EIN-PN 27-3075436-001
a	Plan name AG DENTAL STUDIO 401(K) PLAN	
b	Name of plan sponsor AG DENTAL STUDIO 401(K) PLAN	c EIN-PN 46-1175217-001
a	Plan name AG SOURCING LLC	
b	Name of plan sponsor AG SOURCING LLC	c EIN-PN 82-4637853-001
a	Plan name AGQ 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor AGQ 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 27-1769718-001
a	Plan name AGRIPRO ENTERPRISES OF IOWA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AGRIPRO ENTERPRISES OF IOWA, INC. 401(K) PROFIT SHARING	c EIN-PN 42-1136930-001
a	Plan name AIR INDUSTRIES GROUP 401(K) PLAN	
b	Name of plan sponsor AIR INDUSTRIES GROUP 401(K) PLAN	c EIN-PN 80-0948413-001
a	Plan name AJINOMOTO HEALTH AND NUTRITION NORTH AMERICA INC. 401(K) PLAN	
b	Name of plan sponsor AJINOMOTO HEALTH AND NUTRITION NORTH AMERICA INC. 401(K)	c EIN-PN 47-2979265-001
a	Plan name ALASKA CONSERVATION LAND TRUST 401(K) PLAN	
b	Name of plan sponsor ALASKA CONSERVATION LAND TRUST 401(K) PLAN	c EIN-PN 82-2472154-001
a	Plan name ALEA TRAINING AND CONSULTING 401(K) PLAN	
b	Name of plan sponsor ALEA TRAINING AND CONSULTING 401(K) PLAN	c EIN-PN 82-5223360-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	ALL CITY LEASING AND WAREHOUSING, INC. 401(K) PLAN	
b	Name of plan sponsor	ALL CITY LEASING AND WAREHOUSING, INC. 401(K) PLAN	c EIN-PN 11-2393081-001
a	Plan name	ALLEGHENY SUPPLY AND MAINTENANCE CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLEGHENY SUPPLY AND MAINTENANCE CO., INC. 401(K) PROFI	c EIN-PN 25-1233780-001
a	Plan name	ALOK KRISHNA, M.D. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALOK KRISHNA, M.D. 401(K) PROFIT SHARING PLAN	c EIN-PN 46-0907936-001
a	Plan name	ALPHA GAMMA RHO 401(K) PLAN	
b	Name of plan sponsor	ALPHA GAMMA RHO 401(K) PLAN	c EIN-PN 37-0152080-001
a	Plan name	ALPINE CHIROPRACTIC AND DECOMPRESSION 401(K) PLAN	
b	Name of plan sponsor	ALPINE CHIROPRACTIC AND DECOMPRESSION 401(K) PLAN	c EIN-PN 87-4637866-001
a	Plan name	AMARIN PHARMA INC. 401(K) PLAN	
b	Name of plan sponsor	AMARIN PHARMA INC. 401(K) PLAN	c EIN-PN 26-1285275-001
a	Plan name	AMBERWOODS 401K PLAN	
b	Name of plan sponsor	AMBERWOODS 401K PLAN	c EIN-PN 88-4396084-001
a	Plan name	AMERICAN ART THERAPY ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	AMERICAN ART THERAPY ASSOCIATION 401(K) PLAN	c EIN-PN 36-3823033-001
a	Plan name	AMERICAN BANK 401(K) PLAN	
b	Name of plan sponsor	AMERICAN BANK 401(K) PLAN	c EIN-PN 81-0305954-001
a	Plan name	AMERICAN BUS ASSOCIATION 401(K) RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	AMERICAN BUS ASSOCIATION 401(K) RETIREMENT PLAN AND TRU	c EIN-PN 53-0114680-001
a	Plan name	AMERICAN JERSEY CATTLE ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	AMERICAN JERSEY CATTLE ASSOCIATION 401(K) PLAN	c EIN-PN 31-4383429-001
a	Plan name	AMERICAN MEDICAL STAFFING 401(K) PLAN	
b	Name of plan sponsor	AMERICAN MEDICAL STAFFING 401(K) PLAN	c EIN-PN 30-0213088-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name AMERICAN PUBLIC TRANSPORTATION ASSOCIATION TAX DEFERRED SAVINGS	
b	Name of plan sponsor AMERICAN PUBLIC TRANSPORTATION ASSOCIATION TAX DEFERRED	c EIN-PN 52-1007674-001
a	Plan name AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES 401(K) PLAN	
b	Name of plan sponsor AMERICAN SOCIETY OF ASSOCIATION EXECUTIVES 401(K) PLAN	c EIN-PN 53-0026940-001
a	Plan name AMERICAN SURVEYING AND ENGINEERING, LTD. RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN SURVEYING AND ENGINEERING, LTD. RETIREMENT PLA	c EIN-PN 36-3307274-001
a	Plan name AMERICAN TRANSIT INSURANCE COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AMERICAN TRANSIT INSURANCE COMPANY 401(K) PROFIT SHARIN	c EIN-PN 13-2724937-001
a	Plan name ANDREW M. SCHWARTZ, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANDREW M. SCHWARTZ, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 47-5151584-001
a	Plan name ANGLER'S COVEY 401(K) PLAN	
b	Name of plan sponsor ANGLERS COVEY 401(K) PLAN	c EIN-PN 84-0915634-001
a	Plan name ANTHONY BARATTA LLC 401(K) PLAN	
b	Name of plan sponsor ANTHONY BARATTA LLC 401(K) PLAN	c EIN-PN 38-4084387-001
a	Plan name ANTON KERN GALLERY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANTON KERN GALLERY 401(K) PROFIT SHARING PLAN	c EIN-PN 13-3896859-001
a	Plan name APPALACHIAN DRILLING SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor APPALACHIAN DRILLING SERVICES 401(K) PROFIT SHARING PLA	c EIN-PN 45-1479253-001
a	Plan name ARTISAN STONEWORKS CORP. RETIREMENT PLAN	
b	Name of plan sponsor ARTISAN STONEWORKS CORP. RETIREMENT PLAN	c EIN-PN 11-3215887-001
a	Plan name ASIS INTERNATIONAL RETIREMENT PLAN	
b	Name of plan sponsor ASIS INTERNATIONAL RETIREMENT PLAN	c EIN-PN 53-0234507-001
a	Plan name ASK LLP PARTNERSHIP PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor ASK LLP PARTNERSHIP PROFIT SHARING 401(K) PLAN	c EIN-PN 41-1916951-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ASPIRE RURAL HEALTH SYSTEM 401(K) PLAN	
b	Name of plan sponsor	ASPIRE RURAL HEALTH SYSTEM 401(K) PLAN	c EIN-PN 38-1619577-001
a	Plan name	ASSOCIATION FOR MATERIALS PROTECTION AND PERFORMANCE	
b	Name of plan sponsor	ASSOCIATION FOR MATERIALS PROTECTION AND PERFORMANCE	c EIN-PN 45-3527806-001
a	Plan name	ASSOCIATION OF ACADEMIC PHYSIATRISTS 401(K) PLAN	
b	Name of plan sponsor	ASSOCIATION OF ACADEMIC PHYSIATRISTS 401(K) PLAN	c EIN-PN 31-1145375-001
a	Plan name	ATLANTA GLADIATORS 401(K) PLAN	
b	Name of plan sponsor	ATLANTA GLADIATORS 401(K) PLAN	c EIN-PN 92-0418737-001
a	Plan name	ATLANTIC CIVIL CONSTRUCTORS RETIREMENT PLAN	
b	Name of plan sponsor	ATLANTIC CIVIL CONSTRUCTORS RETIREMENT PLAN	c EIN-PN 73-1707896-001
a	Plan name	ATLANTIC SURGICAL ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC SURGICAL ASSOCIATES 401(K) PLAN	c EIN-PN 46-0676836-001
a	Plan name	AURORA CASKET COMPANY, LLC UNION EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	AURORA CASKET COMPANY, LLC UNION EMPLOYEES 401(K) PLAN	c EIN-PN 13-4006999-001
a	Plan name	AUTO DR. LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AUTO DR. LLC 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 45-5578371-001
a	Plan name	AUTO EXPO 401K PLAN	
b	Name of plan sponsor	AUTO EXPO 401K PLAN	c EIN-PN 11-3530626-001
a	Plan name	AUTOCHLOR SERVICES EMPLOYEES' SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	AUTOCHLOR SERVICES EMPLOYEES SAVINGS PLAN AND TRUST	c EIN-PN 72-0927398-001
a	Plan name	B. TODARO CUSTOM HOUSE BROKER INC. 401(K) PLAN	
b	Name of plan sponsor	B. TODARO CUSTOM HOUSE BROKER INC. 401(K) PLAN	c EIN-PN 11-3028397-001
a	Plan name	B.H. 401(K) PLAN	
b	Name of plan sponsor	B.H. 401(K) PLAN	c EIN-PN 13-3010860-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	B.H. MULTI COLOR CORP 401(K) PLAN	
b	Name of plan sponsor	B.H. MULTI COLOR CORP 401(K) PLAN	c EIN-PN 13-3744251-001
a	Plan name	BANDL PLUMBING 401(K) PLAN	
b	Name of plan sponsor	BANDL PLUMBING 401(K) PLAN	c EIN-PN 84-1496560-001
a	Plan name	BANK OZK 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BANK OZK 401(K) RETIREMENT SAVINGS PLAN	c EIN-PN 71-0130170-001
a	Plan name	BANKSTAR FINANCIAL RETIREMENT PLAN	
b	Name of plan sponsor	BANKSTAR FINANCIAL RETIREMENT PLAN	c EIN-PN 46-0122650-001
a	Plan name	BARBARA A. HESSEL MD PLLC RETIREMENT PLAN	
b	Name of plan sponsor	BARBARA A. HESSEL MD PLLC RETIREMENT PLAN	c EIN-PN 02-0562941-001
a	Plan name	BARTLETT COCKE GENERAL CONTRACTORS 401(K) PLAN	
b	Name of plan sponsor	BARTLETT COCKE GENERAL CONTRACTORS 401(K) PLAN	c EIN-PN 74-1654769-001
a	Plan name	BARTNIK TRUCKING, INC. 401(K) PLAN	
b	Name of plan sponsor	BARTNIK TRUCKING, INC. 401(K) PLAN	c EIN-PN 39-1319469-001
a	Plan name	BASYS PROCESSING 401(K) PLAN	
b	Name of plan sponsor	BASYS PROCESSING 401(K) PLAN	c EIN-PN 01-0633775-001
a	Plan name	BAZINI ENGINEERING, PC RETIREMENT PLAN	
b	Name of plan sponsor	BAZINI ENGINEERING, PC RETIREMENT PLAN	c EIN-PN 27-3622153-001
a	Plan name	BECK, GOGOLSKI AND CO., INC. 401(K) PLAN	
b	Name of plan sponsor	BECK, GOGOLSKI AND CO., INC. 401(K) PLAN	c EIN-PN 26-3397779-001
a	Plan name	BELAY TECHNOLOGIES INC 401(K) PLAN	
b	Name of plan sponsor	BELAY TECHNOLOGIES INC 401(K) PLAN	c EIN-PN 26-2606590-001
a	Plan name	BELLA'S BURRITO SHOP	
b	Name of plan sponsor	BELLAS BURRITO SHOP	c EIN-PN 11-1111166-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	BENIACH CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BENIACH CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARIN	c EIN-PN 37-1321233-001
a	Plan name	BEYOND BOUNDARIES SLT 401(K) PLAN	
b	Name of plan sponsor	BEYOND BOUNDARIES SLT 401(K) PLAN	c EIN-PN 20-8976315-001
a	Plan name	BILL MELENDEZ PRODUCTIONS INC. 401(K) PLAN	
b	Name of plan sponsor	BILL MELENDEZ PRODUCTIONS INC. 401(K) PLAN	c EIN-PN 95-2319431-001
a	Plan name	BIMART CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BIMART CORPORATION 401(K) RETIREMENT PLAN	c EIN-PN 95-4159373-001
a	Plan name	BKK 54, INC 401K PLAN	
b	Name of plan sponsor	BKK 54, INC 401K PLAN	c EIN-PN 20-0517871-001
a	Plan name	BLACKSTONE INDUSTRIES, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BLACKSTONE INDUSTRIES, LLC 401(K) PROFIT SHARING PLAN A	c EIN-PN 46-3082747-001
a	Plan name	BLOUNTSTOWN HEALTH AND REHAB 401(K) PLAN	
b	Name of plan sponsor	BLOUNTSTOWN HEALTH AND REHAB 401(K) PLAN	c EIN-PN 87-3508681-001
a	Plan name	BOB BROWN CHEVROLET, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	BOB BROWN CHEVROLET, INC. PROFIT SHARING PLAN	c EIN-PN 42-0846759-001
a	Plan name	BOSTON NORTH 401(K) PLAN	
b	Name of plan sponsor	BOSTON NORTH 401(K) PLAN	c EIN-PN 03-0516365-001
a	Plan name	BOSTON RETAIL PRODUCTS RETIREMENT PLAN	
b	Name of plan sponsor	BOSTON RETAIL PRODUCTS RETIREMENT PLAN	c EIN-PN 04-2440547-001
a	Plan name	BRAZOS PILOTS ASSOCIATION RETIREMENT PLAN	
b	Name of plan sponsor	BRAZOS PILOTS ASSOCIATION RETIREMENT PLAN	c EIN-PN 76-0294908-001
a	Plan name	BRICK HOUSE CONSULTING AND INVESTING, INC 401(K) PLAN	
b	Name of plan sponsor	BRICK HOUSE CONSULTING AND INVESTING, INC 401(K) PLAN	c EIN-PN 93-3856235-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name BRITZ, INC. 401(K) PLAN	
b	Name of plan sponsor BRITZ, INC. 401(K) PLAN	c EIN-PN 94-1116996-001
a	Plan name BROOKS RIGGING CORP. 401 (K) PLAN	
b	Name of plan sponsor BROOKS RIGGING CORP. 401 (K) PLAN	c EIN-PN 16-1077445-001
a	Plan name BRUCE MCKITTRICK RARE BOOKS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor BRUCE MCKITTRICK RARE BOOKS, INC. PROFIT SHARING PLAN	c EIN-PN 23-2447091-001
a	Plan name BURR LAW FIRM PLLC 401(K) PLAN	
b	Name of plan sponsor BURR LAW FIRM PLLC 401(K) PLAN	c EIN-PN 11-3740932-001
a	Plan name CAESARS ENTERTAINMENT, INC. 401(K) PLAN	
b	Name of plan sponsor CAESARS ENTERTAINMENT, INC. 401(K) PLAN	c EIN-PN 46-3657681-001
a	Plan name CAMERON WELDING SUPPLY, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CAMERON WELDING SUPPLY, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 95-2253183-001
a	Plan name CAMICO SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor CAMICO SAVINGS AND INVESTMENT PLAN	c EIN-PN 77-0105482-001
a	Plan name CAMP CHAMPIONS 401(K) PLAN	
b	Name of plan sponsor CAMP CHAMPIONS 401(K) PLAN	c EIN-PN 74-2761313-001
a	Plan name CAPITAL LOGISTICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAPITAL LOGISTICS 401(K) PROFIT SHARING PLAN	c EIN-PN 27-0917600-001
a	Plan name CAPITAL LOGISTICS INTERNATIONAL, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAPITAL LOGISTICS INTERNATIONAL, LLC 401(K) PROFIT SHAR	c EIN-PN 81-1558186-001
a	Plan name CARBON REDUCTION CAPITAL, LLC	
b	Name of plan sponsor CARBON REDUCTION CAPITAL, LLC	c EIN-PN 27-4646060-001
a	Plan name CARERITE CENTERS, LLC 401(K) PLAN	
b	Name of plan sponsor CARERITE CENTERS, LLC 401(K) PLAN	c EIN-PN 45-2505538-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name CARERITE CENTERS, LLC CORPORATE 401K PROFIT SHARING PLAN	
b	Name of plan sponsor CARERITE CENTERS, LLC CORPORATE 401K PROFIT SHARING PLA	c EIN-PN 45-2505538-001
a	Plan name CARR'S AIR MAINTENANCE 401 (K) PLAN	
b	Name of plan sponsor CARRS AIR MAINTENANCE 401 (K) PLAN	c EIN-PN 36-3849281-001
a	Plan name CD NETWORK, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor CD NETWORK, LLC PROFIT SHARING PLAN	c EIN-PN 13-4116501-001
a	Plan name CDI ENGINEERING SOLUTIONS, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor CDI ENGINEERING SOLUTIONS, LLC 401(K) SAVINGS PLAN	c EIN-PN 23-1341909-001
a	Plan name CENTERPOINT LANDSCAPING SERVICES 401(K) PLAN	
b	Name of plan sponsor CENTERPOINT LANDSCAPING SERVICES 401(K) PLAN	c EIN-PN 81-1057481-001
a	Plan name CENTURION ANESTHESIA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CENTURION ANESTHESIA 401(K) PROFIT SHARING PLAN	c EIN-PN 81-4504190-001
a	Plan name CHEYENNE RADIOLOGY GROUP SAMPLE 401(K) PLAN	
b	Name of plan sponsor CHEYENNE RADIOLOGY GROUP SAMPLE 401(K) PLAN	c EIN-PN 83-0215517-001
a	Plan name CHIQUITA/FRESH EXPRESS SAVINGS AND INVESTMENT PLAN CHQ	
b	Name of plan sponsor CHIQUITA/FRESH EXPRESS SAVINGS AND INVESTMENT PLAN CHQ	c EIN-PN 04-1923360-001
a	Plan name CHIQUITA/FRESH EXPRESS SAVINGS AND INVESTMENT PLAN FEX	
b	Name of plan sponsor CHIQUITA/FRESH EXPRESS SAVINGS AND INVESTMENT PLAN FEX	c EIN-PN 94-2591533-001
a	Plan name CITY EVENTIONS USA LLC 401(K) PLAN	
b	Name of plan sponsor CITY EVENTIONS USA LLC 401(K) PLAN	c EIN-PN 38-4084387-001
a	Plan name CITY FRESH FOODS 401(K) PLAN	
b	Name of plan sponsor CITY FRESH FOODS 401(K) PLAN	c EIN-PN 04-3236052-001
a	Plan name CITY WIDE 401(K) PLAN	
b	Name of plan sponsor CITY WIDE 401(K) PLAN	c EIN-PN 86-1767458-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CLAYCO, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CLAYCO, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 43-1339079-001
a	Plan name	CMHCO EMPLOYEE PLAN	
b	Name of plan sponsor	CMHCO EMPLOYEE PLAN	c EIN-PN 13-3965594-001
a	Plan name	CMI 401(K) PLAN	
b	Name of plan sponsor	CMI 401(K) PLAN	c EIN-PN 41-2055499-001
a	Plan name	COADY BUILT, INC. 401(K) PLAN	
b	Name of plan sponsor	COADY BUILT, INC. 401(K) PLAN	c EIN-PN 85-2472646-001
a	Plan name	COASTAL TILE AND MARBLE, INC. 401(K) PLAN	
b	Name of plan sponsor	COASTAL TILE AND MARBLE, INC. 401(K) PLAN	c EIN-PN 13-3681985-001
a	Plan name	COLLECTION B. INC. 401(K) PLAN	
b	Name of plan sponsor	COLLECTION B. INC. 401(K) PLAN	c EIN-PN 90-0130436-001
a	Plan name	COLLECTION BUREAU SERVICES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	COLLECTION BUREAU SERVICES, INC. PROFIT SHARING PLAN	c EIN-PN 81-0361156-001
a	Plan name	COLLING GILBERT WRIGHT 401(K) AND P/S PLAN	
b	Name of plan sponsor	COLLING GILBERT WRIGHT 401(K) AND P/S PLAN	c EIN-PN 20-2159235-001
a	Plan name	COLORS BODY SHOP 401K PLAN	
b	Name of plan sponsor	COLORS BODY SHOP 401K PLAN	c EIN-PN 63-1196883-001
a	Plan name	COLORS PRECISION PAINT AND BODY, INC. 401(K) PLAN	
b	Name of plan sponsor	COLORS PRECISION PAINT AND BODY, INC. 401(K) PLAN	c EIN-PN 63-1196883-001
a	Plan name	COMMERCIAL CONTRACTING GROUP PS401K	
b	Name of plan sponsor	COMMERCIAL CONTRACTING GROUP PS401K	c EIN-PN 38-1250507-001
a	Plan name	COMMUNITY BUILDERS OF KANSAS CITY RETIREMENT PLAN	
b	Name of plan sponsor	COMMUNITY BUILDERS OF KANSAS CITY RETIREMENT PLAN	c EIN-PN 43-1583953-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name COMPASS STRATEGIES PUBLIC AFFAIRS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor COMPASS STRATEGIES PUBLIC AFFAIRS LLC 401(K) PROFIT SHA	c EIN-PN 20-4509198-001
a	Plan name CONNECTICUT STATE MEDICAL SOCIETY, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONNECTICUT STATE MEDICAL SOCIETY, INC 401(K) PROFIT SH	c EIN-PN 06-0665164-001
a	Plan name CONNECTIONS EMPLOYER SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor CONNECTIONS EMPLOYER SOLUTIONS LLC 401(K) PLAN	c EIN-PN 82-1098739-001
a	Plan name CONSTRUCTION SPECIFICATIONS INSTITUTE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CONSTRUCTION SPECIFICATIONS INSTITUTE RETIREMENT SAVING	c EIN-PN 53-0242938-001
a	Plan name CONTROLLED COMFORT HVAC 401(K) PLAN	
b	Name of plan sponsor CONTROLLED COMFORT HVAC 401(K) PLAN	c EIN-PN 45-1631992-001
a	Plan name COOKIE MONSTER 401K TEST	
b	Name of plan sponsor COOKIE MONSTER 401K TEST	c EIN-PN 01-8921901-001
a	Plan name COSMOPLASTIC SURGERY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor COSMOPLASTIC SURGERY 401(K) PROFIT SHARING PLAN AND TRU	c EIN-PN 46-3628489-001
a	Plan name COX HOSPITALITY CONSTRUCTION SERVICES 401(K) PLAN	
b	Name of plan sponsor COX HOSPITALITY CONSTRUCTION SERVICES 401(K) PLAN	c EIN-PN 80-0548357-001
a	Plan name CRETE AND CO 401(K) PLAN	
b	Name of plan sponsor CRETE AND CO 401(K) PLAN	c EIN-PN 81-4240473-001
a	Plan name CRIBBS CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor CRIBBS CONSTRUCTION COMPANY 401(K) PLAN	c EIN-PN 26-1108159-001
a	Plan name CRIMSON WINE GROUP, 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CRIMSON WINE GROUP, 401(K) PROFIT SHARING PLAN	c EIN-PN 90-0609506-001
a	Plan name CROSS COUNTRYCOMPUTER CORP. EMPLOYEES' PROFIT SHARING PLAN	
b	Name of plan sponsor CROSS COUNTRYCOMPUTER CORP. EMPLOYEES PROFIT SHARING P	c EIN-PN 11-2357829-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	CUDJOE SALES PROFIT SHARING PLAN	
b	Name of plan sponsor	CUDJOE SALES PROFIT SHARING PLAN	c EIN-PN 65-0899731-001
a	Plan name	CURTIS PACKAGING CORPORATION MASTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CURTIS PACKAGING CORPORATION MASTER 401(K) RETIREMENT P	c EIN-PN 06-1032297-001
a	Plan name	DANTZLER FARMS	
b	Name of plan sponsor	DANTZLER FARMS	c EIN-PN 83-0508392-001
a	Plan name	DAPRILE INSURANCE GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	DAPRILE INSURANCE GROUP LLC 401(K) PLAN	c EIN-PN 45-4244862-001
a	Plan name	DATUM MANUFACTURING LLC 401(K) PLAN	
b	Name of plan sponsor	DATUM MANUFACTURING LLC 401(K) PLAN	c EIN-PN 87-1430865-001
a	Plan name	DAVID KORINS DESIGN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DAVID KORINS DESIGN, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 20-1135367-001
a	Plan name	DAVIDOFF LAW, PC	
b	Name of plan sponsor	DAVIDOFF LAW, PC	c EIN-PN 38-3877707-001
a	Plan name	DAVIS TIRE GROUP 401K PLAN	
b	Name of plan sponsor	DAVIS TIRE GROUP 401K PLAN	c EIN-PN 82-3773442-001
a	Plan name	DAWN FOODS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	DAWN FOODS RETIREMENT SAVINGS PLAN	c EIN-PN 38-0467200-001
a	Plan name	DAWN FOODS UNION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	DAWN FOODS UNION RETIREMENT SAVINGS PLAN	c EIN-PN 38-0467200-001
a	Plan name	DBH 401(K) PLAN	
b	Name of plan sponsor	DBH 401(K) PLAN	c EIN-PN 87-2236938-001
a	Plan name	DECERINA UY MD, PC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	DECERINA UY MD, PC 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 38-4084387-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	DEEPNERD MEDIA LLC	
b	Name of plan sponsor	DEEPNERD MEDIA LLC	c EIN-PN 85-2956991-001
a	Plan name	DEEPNERD MEDIA LLC 401(K) PLAN	
b	Name of plan sponsor	DEEPNERD MEDIA LLC 401(K) PLAN	c EIN-PN 85-2956991-001
a	Plan name	DEFENSE PLANNING GROUP 401K PLAN	
b	Name of plan sponsor	DEFENSE PLANNING GROUP 401K PLAN	c EIN-PN 93-3427026-001
a	Plan name	DELCID EROSION CONTROL 401K PLAN	
b	Name of plan sponsor	DELCID EROSION CONTROL 401K PLAN	c EIN-PN 84-2328870-001
a	Plan name	DELRAN BUILDERS COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	DELRAN BUILDERS COMPANY, INC. 401(K) PLAN	c EIN-PN 23-2035036-001
a	Plan name	DELTA DELTA DELTA 401(K) PLAN	
b	Name of plan sponsor	DELTA DELTA DELTA 401(K) PLAN	c EIN-PN 36-2374316-001
a	Plan name	DEUGEN DEVELOPMENT 401(K) PROFIT SHARING AND TRUST	
b	Name of plan sponsor	DEUGEN DEVELOPMENT 401(K) PROFIT SHARING AND TRUST	c EIN-PN 45-2493633-001
a	Plan name	DIDA HOME, LLC 401(K) PLAN	
b	Name of plan sponsor	DIDA HOME, LLC 401(K) PLAN	c EIN-PN 45-3770725-001
a	Plan name	DIGERONIMO COMPANIES RETIREMENT SAVINGS TRUST AND PLAN	
b	Name of plan sponsor	DIGERONIMO COMPANIES RETIREMENT SAVINGS TRUST AND PLAN	c EIN-PN 34-0938274-001
a	Plan name	DOUGLAS C. WRIGHT ARCHITECTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DOUGLAS C. WRIGHT ARCHITECTS 401(K) PROFIT SHARING PLAN	c EIN-PN 47-1500815-001
a	Plan name	DRW TRADING GROUP PROFIT SHARING AND SALARY DEFERRAL PLAN	
b	Name of plan sponsor	DRW TRADING GROUP PROFIT SHARING AND SALARY DEFERRAL PL	c EIN-PN 36-4331072-001
a	Plan name	DUER CONSTRUCTION CO. INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DUER CONSTRUCTION CO. INC. 401(K) RETIREMENT PLAN	c EIN-PN 34-0843784-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	DUVALL FORD COMPANY, INC.	
b Name of plan sponsor	DUVALL FORD COMPANY, INC.	c EIN-PN 58-1538949-001
a Plan name	DWM, INC. 401(K) PLAN	
b Name of plan sponsor	DWM, INC. 401(K) PLAN	c EIN-PN 14-1788965-001
a Plan name	E.N.T. PROFESSIONAL SERVICES, P.C.	
b Name of plan sponsor	E.N.T. PROFESSIONAL SERVICES, P.C.	c EIN-PN 42-0957750-001
a Plan name	EAGLE RIDGE HOSPITALITY, LLC 401(K) PLAN	
b Name of plan sponsor	EAGLE RIDGE HOSPITALITY, LLC 401(K) PLAN	c EIN-PN 83-4394814-001
a Plan name	EAGLE RIVER HEATING AND MECHANICAL 401K	
b Name of plan sponsor	EAGLE RIVER HEATING AND MECHANICAL 401K	c EIN-PN 88-2260928-001
a Plan name	EASTSIDE PHARMACY 401(K) PLAN	
b Name of plan sponsor	EASTSIDE PHARMACY 401(K) PLAN	c EIN-PN 20-5487059-001
a Plan name	EAT'N PARK HOSPITALITY GROUP 401(K) RETIREMENT PLAN	
b Name of plan sponsor	EATN PARK HOSPITALITY GROUP 401(K) RETIREMENT PLAN	c EIN-PN 25-1596974-001
a Plan name	EDGE NEW JERSEY, INC. 401(K) PLAN	
b Name of plan sponsor	EDGE NEW JERSEY, INC. 401(K) PLAN	c EIN-PN 22-3184794-001
a Plan name	EDUCATION FINANCE COUNCIL, INC. 401(K)	
b Name of plan sponsor	EDUCATION FINANCE COUNCIL, INC. 401(K)	c EIN-PN 52-1801566-001
a Plan name	ELECTRA LINK, INC. 401(K) PLAN	
b Name of plan sponsor	ELECTRA LINK, INC. 401(K) PLAN	c EIN-PN 76-0151304-001
a Plan name	ELITE CIVIL CONSTRUCTION 401(K) PLAN	
b Name of plan sponsor	ELITE CIVIL CONSTRUCTION 401(K) PLAN	c EIN-PN 84-4905616-001
a Plan name	ELLSWORTH CORPORATION 401(K) SAVINGS PLAN	
b Name of plan sponsor	ELLSWORTH CORPORATION 401(K) SAVINGS PLAN	c EIN-PN 39-1225837-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	ELMHURST CLINIC	
b Name of plan sponsor	ELMHURST CLINIC	c EIN-PN 36-4266808-001
a Plan name	EMAGIA CORPORATION 401(K) PLAN	
b Name of plan sponsor	EMAGIA CORPORATION 401(K) PLAN	c EIN-PN 77-0507476-001
a Plan name	EMERALD STEEL, INC. 401(K) PLAN AND TRUST	
b Name of plan sponsor	EMERALD STEEL, INC. 401(K) PLAN AND TRUST	c EIN-PN 87-0762126-001
a Plan name	EMERGE TECHNOLOGIES, INC. 401(K) P/S PLAN	
b Name of plan sponsor	EMERGE TECHNOLOGIES, INC. 401(K) P/S PLAN	c EIN-PN 20-1455040-001
a Plan name	EMERGENCY PHYSICIANS OF NORTHWEST OHIO, INC.	
b Name of plan sponsor	EMERGENCY PHYSICIANS OF NORTHWEST OHIO, INC.	c EIN-PN 81-0547599-001
a Plan name	EMPLOYEES' PROFIT SHARING PLAN AND TRUST OF BOCH ENTERPRISES	
b Name of plan sponsor	EMPLOYEES PROFIT SHARING PLAN AND TRUST OF BOCH ENTERP	c EIN-PN 04-2050016-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 34-1832544-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN BLAIR CAPITAL GROUP, LLC DBA SAGE PRIVATE WEALTH SERVIC	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN BLAIR CAPI	c EIN-PN 34-1832544-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN BWT FINANCIAL, LLC	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN BWT FINANC	c EIN-PN 34-1832544-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN C.D.A. OPERATIONAL SUPPORT, LLC	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN C.D.A. OPE	c EIN-PN 34-1832544-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN CJR CONSULTING LLC	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN CJR CONSUL	c EIN-PN 34-1832544-001
a Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR 5 STONE HOLDINGS, LLC	
b Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR 5 STON	c EIN-PN 34-1832544-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR A. HUGG, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR A. HUG	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AB DYNAMIC SOLUTIONS, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AB DYN	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ABSOLUTE GROUP, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ABSOLU	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AEGIS FP SERVICES, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AEGIS	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AMTA, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR AMTA,	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ASHFORD WEALTH ADVISORS, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ASHFOR	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BEN C SMITH JR	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BEN C	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BERISS AND ASSOCIATES, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BERISS	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BERLIN AND ASSOCIATES, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BERLIN	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BOBBY D. HARRIS	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BOBBY	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BRAD A. SWARTZWELDER, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR BRAD A	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CALANDER WEALTH MANAGEMENT, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CALAND	c EIN-PN 34-1832544-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CAPUTO INSURANCE AGENCY, INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CAPUTO	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CCWF2, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CCWF2,	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CHARLES M. EVANS	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CHARLE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CHRISTOPHER M. GURLEY	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CHRIST	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CIRKSENA, KNIGHT, JACOBSEN, SIEPS AND KRESSE, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR CIRKSE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR COOP, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR COOP,	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DAVID M KLEINER, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DAVID	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DAVID M MEDICK, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DAVID	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DILWORTH MANAGEMENT GROUP LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DILWOR	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DLIGHT INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DLIGHT	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DSW ENTERPRISES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR DSW EN	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR EDWARD M. TILGHMAN	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR EDWARD	c EIN-PN 34-1832544-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ELAINA A. CARLSON	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ELAINA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR EMPLOYSHARE, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR EMPLOY	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ER GREEN OPERATIONAL SERVICES, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ER GRE	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ESCO AND ASSOCIATES, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ESCO A	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FINANCIAL PLANNING PARTNERS, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FINANC	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FINN FINANCIAL, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FINN F	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FP MATTERS, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FP MAT	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FRENCH COMPASS LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FRENCH	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FRONTLINE GROUP, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR FRONTL	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GEORGE G. SMOJVER	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GEORGE	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GREAT SERVICE MODEL, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GREAT	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GREEN VISTA, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR GREEN	c EIN-PN 34-1832544-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HAMTECH, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HAMTEC	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HAWKINS AND ASSOCIATES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HAWKIN	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HH BMD ENTERPRISES LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HH BMD	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HURWITZ AND ASSOCIATES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR HURWIT	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ILSK, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ILSK,	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR IRONSIDES OPERATIONAL SUPPORT, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR IRONSI	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR J AND R OPERATIONS, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR J AND	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR J. LYNNE CONSULTING, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR J. LYN	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JASON D. DUNN	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JASON	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JEFF M. CROSBY	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JEFF M	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JEFFERY N EVANS	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JEFFER	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JIN AND ASSOCIATES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR JIN AN	c EIN-PN 34-1832544-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR KIMBERLEE M.O., LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR KIMBER	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LANDJ OPERATIONS LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LANDJ	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LBYD, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LBYD,	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LEVI SHANE BRANDRISS	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LEVI S	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LFS MANAGEMENT, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LFS MA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LIFE VA. LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LIFE V	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LLLII, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LLLII,	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LUNG, SHIRING AND ASSOCIATES, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR LUNG,	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MARBAN AND ASSOCIATES, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MARBAN	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MATTHEW D ORMAN	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MATTHE	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MBS MANAGEMENT, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MBS MA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR METZLER MANAGEMENT COMPANY, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR METZLE	c EIN-PN 34-1832544-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MICHAEL T. BREZOVEC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MICHAEL	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MMM CONSULTING GROUP, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MMM CO	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MORTGAGE LENDING SOLUTIONS, INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR MORTGA	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR NINTH AVENUE, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR NINTH	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ONE TEN PARTNERS, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ONE TE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ORION MOULTON, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR ORION	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR OUTLIER OPERATIONAL SERVICES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR OUTLIE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PLNR GROUP, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PLNR G	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PRO STANDARD PRIVATE WEALTH, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PRO ST	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PROFESSIONAL MANAGEMENT GROUP	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR PROFES	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R AND D HOLDINGS, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R AND	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R.O. MILLS MANAGEMENT LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R.O. M	c EIN-PN 34-1832544-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R7 WEALTH MANAGEMENT LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR R7 WEA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR RANDAL J FARABAUGH	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR RANDAL	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR REDEFINED HORIZONS, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR REDEFI	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR S.E. WATER TOWER OPERATIONAL SUPPORT, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR S.E. W	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SANLEO GROUP, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SANLEO	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SAVOR, INC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SAVOR,	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SECOND BASE ADVISORS, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SECOND	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SHIVA P. BHASHYAM	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SHIVA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SKYLER TEBO	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SKYLER	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SOMMERVILLE PARTNERS, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SOMMER	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SOUTHAMPTON BUSINESS GROUP, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SOUTHA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SPOKEN DESTINY, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR SPOKEN	c EIN-PN 34-1832544-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR STANLEY C. LEONG	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR STANLE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR STEVEN T MARSHALL	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR STEVEN	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THE DEHONEY GROUP, INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THE DE	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THE OBRIEN GROUP	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THE OB	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THOMAS P SHORTREED AND ASSOCIATES, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR THOMAS	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR TMGQG, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR TMGQG,	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR VAN TASSEL LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR VAN TA	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR VELOCITY CAPITAL MANAGEMENT, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR VELOCI	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WAYPOINTE OPERATIONAL SERVICES LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WAYPOI	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WDA, INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WDA, I	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WEALTH INSIGHT GROUP, LLC	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WEALTH	c EIN-PN 34-1832544-001
a	Plan name	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WILLIAMSON FINANCIAL PLANNING, INC.	
b	Name of plan sponsor	EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN FOR WILLIA	c EIN-PN 34-1832544-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN KUPAA OPERATIONAL SUPPORT, LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN KUPAA OPER	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN MARGUERITA M. CHENG	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN MARGUERITA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN MICHAEL MATUS	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN MICHAEL MA	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN PROVENZANO GROUP	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN PROVENZANO	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN SEO AND ASSOCIATES	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN SEO AND AS	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN SWAG PRO LLC	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN SWAG PRO L	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN TEMPLATE	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN TEMPLATE	c EIN-PN 34-1832544-001
a	Plan name EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN THE HALPIN COMPANY, INC.	
b	Name of plan sponsor EMPLOYSHARE, INC. 401(K) PROFIT SHARING PLAN THE HALPIN	c EIN-PN 34-1832544-001
a	Plan name EMPOWERME WELLNESS, LLC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor EMPOWERME WELLNESS, LLC. RETIREMENT SAVINGS PLAN	c EIN-PN 85-3862973-001
a	Plan name ENCOUNTER LOGISTICS 401(K) PLAN	
b	Name of plan sponsor ENCOUNTER LOGISTICS 401(K) PLAN	c EIN-PN 36-4659301-001
a	Plan name ENDEAVOR 401(K) PLAN	
b	Name of plan sponsor ENDEAVOR 401(K) PLAN	c EIN-PN 80-0967078-001
a	Plan name ENGAGE PSYCHOTHERAPY LCSW PLLC 401(K)	
b	Name of plan sponsor ENGAGE PSYCHOTHERAPY LCSW PLLC 401(K)	c EIN-PN 85-4045715-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name ENPROTECH INDUSTRIAL TECHNOLOGIES, LLC 401(K) PLAN	
b	Name of plan sponsor ENPROTECH INDUSTRIAL TECHNOLOGIES, LLC 401(K) PLAN	c EIN-PN 36-4416658-001
a	Plan name ENTOMOLOGICAL SOCIETY OF AMERICA 401(K) PLAN	
b	Name of plan sponsor ENTOMOLOGICAL SOCIETY OF AMERICA 401(K) PLAN	c EIN-PN 52-0622480-001
a	Plan name EQUIPT TRUCK AND MACHINERY, INC. 401(K) PLAN	
b	Name of plan sponsor EQUIPT TRUCK AND MACHINERY, INC. 401(K) PLAN	c EIN-PN 87-1442877-001
a	Plan name EQUITY MANAGEMENT, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor EQUITY MANAGEMENT, INC. PROFIT SHARING PLAN	c EIN-PN 81-0474920-001
a	Plan name ESCANDON DIAGNOSTIC CLINIC 401(K) PLAN	
b	Name of plan sponsor ESCANDON DIAGNOSTIC CLINIC 401(K) PLAN	c EIN-PN 47-3345905-001
a	Plan name ESCOTO CUSTOMS BROKERS 401(K) PLAN	
b	Name of plan sponsor ESCOTO CUSTOMS BROKERS 401(K) PLAN	c EIN-PN 74-2982521-001
a	Plan name ESCUELA VIVA 401(K) PLAN	
b	Name of plan sponsor ESCUELA VIVA 401(K) PLAN	c EIN-PN 20-1566393-001
a	Plan name ESTHETICA 401(K) PLAN	
b	Name of plan sponsor ESTHETICA 401(K) PLAN	c EIN-PN 02-2297901-001
a	Plan name EVANS GENERAL CONTRACTORS, LLC 401(K) PLAN	
b	Name of plan sponsor EVANS GENERAL CONTRACTORS, LLC 401(K) PLAN	c EIN-PN 58-2602425-001
a	Plan name EVEREST CAMPUS SERVICES COMPANY, LLC 401(K) PLAN	
b	Name of plan sponsor EVEREST CAMPUS SERVICES COMPANY, LLC 401(K) PLAN	c EIN-PN 47-2588173-001
a	Plan name EXCEL PACKAGING 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor EXCEL PACKAGING 401(K) RETIREMENT SAVINGS PLAN	c EIN-PN 33-0500234-001
a	Plan name EXHIBITUS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor EXHIBITUS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 26-1101415-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	EXPRESSTEK 401(K) PLAN	
b	Name of plan sponsor	EXPRESSTEK 401(K) PLAN	c EIN-PN 45-0471633-001
a	Plan name	FAMILY INVESTORS COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	FAMILY INVESTORS COMPANY, INC. 401(K) PLAN	c EIN-PN 22-1715407-001
a	Plan name	FAMILY RESIDENCES RETIREMENT AND 401(K) SAVINGS PLAN	
b	Name of plan sponsor	FAMILY RESIDENCES RETIREMENT AND 401(K) SAVINGS PLAN	c EIN-PN 11-2420547-001
a	Plan name	FAWN GALLI INTERIOR DESIGN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FAWN GALLI INTERIOR DESIGN, INC. 401(K) PROFIT SHARING	c EIN-PN 26-0517379-001
a	Plan name	FG PROPERTY MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	FG PROPERTY MANAGEMENT 401(K) PLAN	c EIN-PN 95-4587127-001
a	Plan name	FIGLIA AND SONS INC. 401(K) PLAN	
b	Name of plan sponsor	FIGLIA AND SONS INC. 401(K) PLAN	c EIN-PN 13-1917182-001
a	Plan name	FINANCIAL ESSENTIALS, LLC 401(K) PLAN	
b	Name of plan sponsor	FINANCIAL ESSENTIALS, LLC 401(K) PLAN	c EIN-PN 46-2621090-001
a	Plan name	FIRST GABRIELSON AGENCY 401(K)	
b	Name of plan sponsor	FIRST GABRIELSON AGENCY 401(K)	c EIN-PN 42-1235843-001
a	Plan name	FISCHER TESTING, LLC 401(K) PLAN	
b	Name of plan sponsor	FISCHER TESTING, LLC 401(K) PLAN	c EIN-PN 47-2528974-001
a	Plan name	FIVE IRON LOUISVILLE, LLC 401(K) PLAN	
b	Name of plan sponsor	FIVE IRON LOUISVILLE, LLC 401(K) PLAN	c EIN-PN 99-0508578-001
a	Plan name	FIX MEDIA	
b	Name of plan sponsor	FIX MEDIA	c EIN-PN 26-3311903-001
a	Plan name	FIXLER AND LAGATTUTA, LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	FIXLER AND LAGATTUTA, LLP 401(K) PROFIT SHARING PLAN AN	c EIN-PN 20-0726956-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FKB 401(K) PLAN	
b	Name of plan sponsor	FKB 401(K) PLAN	c EIN-PN 26-2397045-001
a	Plan name	FLEET SERVICES CO., INC. 401(K) PLAN	
b	Name of plan sponsor	FLEET SERVICES CO., INC. 401(K) PLAN	c EIN-PN 45-4727643-001
a	Plan name	FLUIDMASTER, INC. SAVINGS PLAN	
b	Name of plan sponsor	FLUIDMASTER, INC. SAVINGS PLAN	c EIN-PN 95-1942465-001
a	Plan name	FLUSHING BANK 401(K) SAVINGS PLAN	
b	Name of plan sponsor	FLUSHING BANK 401(K) SAVINGS PLAN	c EIN-PN 41-2231564-001
a	Plan name	FLYWHEEL DATA, LLC 401(K)PROFIT SHARING PLAN	
b	Name of plan sponsor	FLYWHEEL DATA, LLC 401(K)PROFIT SHARING PLAN	c EIN-PN 46-4289264-001
a	Plan name	FORCHELLI DEEGAN TERRANA, LLP ASSOCIATES' 401(K) PLAN	
b	Name of plan sponsor	FORCHELLI DEEGAN TERRANA, LLP ASSOCIATES 401(K) PLAN	c EIN-PN 38-4084387-001
a	Plan name	FORCHELLI DEEGAN TERRANA, LLP PROFIT SHARING PLAN II	
b	Name of plan sponsor	FORCHELLI DEEGAN TERRANA, LLP PROFIT SHARING PLAN II	c EIN-PN 38-4084387-001
a	Plan name	FORGED FRAMING AND DRYWALL LLC 401(K) PLAN	
b	Name of plan sponsor	FORGED FRAMING AND DRYWALL LLC 401(K) PLAN	c EIN-PN 84-2615431-001
a	Plan name	FRATELLO CONSTRUCTION CORP. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FRATELLO CONSTRUCTION CORP. 401(K) PROFIT SHARING PLAN	c EIN-PN 11-2992307-001
a	Plan name	FRESH EXPRESS PLANT WORKERS SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	FRESH EXPRESS PLANT WORKERS SAVINGS AND INVESTMENT PLAN	c EIN-PN 94-2591533-001
a	Plan name	FSELLIOTT CO., LLC SAFE HARBOR 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	FSELLIOTT CO., LLC SAFE HARBOR 401(K) AND PROFIT SHARIN	c EIN-PN 11-3703424-001
a	Plan name	G.T. WATER PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	G.T. WATER PRODUCTS, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 95-2694264-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GABRIELSON CLINIC FOR WOMEN PLC 401(K) PLAN	
b	Name of plan sponsor	GABRIELSON CLINIC FOR WOMEN PLC 401(K) PLAN	c EIN-PN 27-0544282-001
a	Plan name	GAC TEST PROD CO PLAN 10.31 MIMU	
b	Name of plan sponsor	GAC TEST PROD CO PLAN 10.31 MIMU	c EIN-PN 11-1111180-001
a	Plan name	GAC TEST TX 10.31 MIMU	
b	Name of plan sponsor	GAC TEST TX 10.31 MIMU	c EIN-PN 11-1111181-001
a	Plan name	GEMOLOGICAL APPRAISAL LAB OF AMERICA, INC. 401K/PROFIT SHARING PLAN	
b	Name of plan sponsor	GEMOLOGICAL APPRAISAL LAB OF AMERICA, INC. 401K/PROFIT	c EIN-PN 13-1335655-001
a	Plan name	GENESEE PATRONS COOPERATIVE INSURANCE COMPANY 401(K) PLAN	
b	Name of plan sponsor	GENESEE PATRONS COOPERATIVE INSURANCE COMPANY 401(K) PL	c EIN-PN 16-0446095-001
a	Plan name	GEORGE HILDEBRANDT 401(K) PLAN	
b	Name of plan sponsor	GEORGE HILDEBRANDT 401(K) PLAN	c EIN-PN 14-1422092-001
a	Plan name	GETHMANN CONSTRUCTION CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GETHMANN CONSTRUCTION CO., INC. 401(K) PROFIT SHARING P	c EIN-PN 42-0271670-001
a	Plan name	GIBSON CORRUGATED 401K PLAN	
b	Name of plan sponsor	GIBSON CORRUGATED 401K PLAN	c EIN-PN 64-0908083-001
a	Plan name	GILLAN AND HARTMAN, INC. PROFIT SHARING / 401(K) PLAN	
b	Name of plan sponsor	GILLAN AND HARTMAN, INC. PROFIT SHARING / 401(K) PLAN	c EIN-PN 23-1898177-001
a	Plan name	GINART LAW FIRM 401(K) PLAN	
b	Name of plan sponsor	GINART LAW FIRM 401(K) PLAN	c EIN-PN 47-2599991-001
a	Plan name	GLENDALE ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	GLENDALE ENTERPRISES 401(K) PLAN	c EIN-PN 72-1367234-001
a	Plan name	GLOBAL MARITEK SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	GLOBAL MARITEK SYSTEMS, INC. 401(K) PLAN	c EIN-PN 36-4526480-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	GOIDEL LAW GROUP PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GOIDEL LAW GROUP PLLC 401(K) PROFIT SHARING PLAN	c EIN-PN 45-3690725-001
a	Plan name	GRANGETTO'S FARM AND GARDEN SUPPLY 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	GRANGETTOS FARM AND GARDEN SUPPLY 401(K) PROFIT SHARIN	c EIN-PN 95-2561657-001
a	Plan name	GRATITUDE WITH AN ATTITUDE 401(K) PLAN	
b	Name of plan sponsor	GRATITUDE WITH AN ATTITUDE 401(K) PLAN	c EIN-PN 43-1829594-001
a	Plan name	GRCH ARCHITECTURE PC 401(K) PLAN	
b	Name of plan sponsor	GRCH ARCHITECTURE PC 401(K) PLAN	c EIN-PN 27-2186737-001
a	Plan name	GREEN BELT BANK AND TRUST 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GREEN BELT BANK AND TRUST 401(K) PROFIT SHARING PLAN	c EIN-PN 42-1279302-001
a	Plan name	GREEN HILLS HEALTH CARE CENTER, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GREEN HILLS HEALTH CARE CENTER, INC. 401(K) RETIREMENT	c EIN-PN 42-1490784-001
a	Plan name	GREENWOOD TREE EXPERTS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	GREENWOOD TREE EXPERTS INC 401(K) PROFIT SHARING PLAN A	c EIN-PN 22-1904727-001
a	Plan name	GUETTLER AND GUETTLER, INC. 401(K) PLAN	
b	Name of plan sponsor	GUETTLER AND GUETTLER, INC. 401(K) PLAN	c EIN-PN 59-2000711-001
a	Plan name	GULF COAST LIMESTONE INC 401(K) PLAN	
b	Name of plan sponsor	GULF COAST LIMESTONE INC 401(K) PLAN	c EIN-PN 74-1610650-001
a	Plan name	GULFSPAN INDUSTRIAL PLAN	
b	Name of plan sponsor	GULFSPAN INDUSTRIAL PLAN	c EIN-PN 45-0910052-001
a	Plan name	GUMUCHIAN FILS, LTD. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	GUMUCHIAN FILS, LTD. 401(K) AND PROFIT SHARING PLAN	c EIN-PN 13-2974396-001
a	Plan name	HAMPTON PEDIATRIC DENTAL ASSOCIATES, P.C. 401(K) PLAN	
b	Name of plan sponsor	HAMPTON PEDIATRIC DENTAL ASSOCIATES, P.C. 401(K) PLAN	c EIN-PN 11-3153636-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name HANLEY WOOD DBA ZONDA 401(K) PLAN	
b	Name of plan sponsor HANLEY WOOD DBA ZONDA 401(K) PLAN	c EIN-PN 80-0956936-001
a	Plan name HARBORFIELDS ELECTRICAL CONTRACTING, INC. 401(K) PLAN	
b	Name of plan sponsor HARBORFIELDS ELECTRICAL CONTRACTING, INC. 401(K) PLAN	c EIN-PN 75-3130962-001
a	Plan name HARRY JHO, LLC 401(K) P/S PLAN	
b	Name of plan sponsor HARRY JHO, LLC 401(K) P/S PLAN	c EIN-PN 77-0684522-001
a	Plan name HARTLEY, MICHON, ROBB, HANNON LLP	
b	Name of plan sponsor HARTLEY, MICHON, ROBB, HANNON LLP	c EIN-PN 13-4299300-001
a	Plan name HARVEY ANIMAL HOSPITAL 401K SAVINGS PLAN	
b	Name of plan sponsor HARVEY ANIMAL HOSPITAL 401K SAVINGS PLAN	c EIN-PN 45-5393694-001
a	Plan name HASTINGS ARCHITECTURE 401(K) PLAN	
b	Name of plan sponsor HASTINGS ARCHITECTURE 401(K) PLAN	c EIN-PN 56-2313715-001
a	Plan name HAZARD CONSTRUCTION COMPANY RETIREMENT PLAN	
b	Name of plan sponsor HAZARD CONSTRUCTION COMPANY RETIREMENT PLAN	c EIN-PN 33-0807734-001
a	Plan name HEALTHCARE STRATEGIES, INC. 401(K) PLAN	
b	Name of plan sponsor HEALTHCARE STRATEGIES, INC. 401(K) PLAN	c EIN-PN 23-2848954-001
a	Plan name HEALTHCARE STRATEGIES, INC. CBU 401(K) PLAN	
b	Name of plan sponsor HEALTHCARE STRATEGIES, INC. CBU 401(K) PLAN	c EIN-PN 23-2848954-001
a	Plan name HEART FAILURE SOCIETY OF AMERICA 401(K) PLAN	
b	Name of plan sponsor HEART FAILURE SOCIETY OF AMERICA 401(K) PLAN	c EIN-PN 06-1416238-001
a	Plan name HELBRAUN AND LEVEY, LLP 401(K) PLAN	
b	Name of plan sponsor HELBRAUN AND LEVEY, LLP 401(K) PLAN	c EIN-PN 27-1420384-001
a	Plan name HENNEN FLOOR COVERING, INC PROFIT SHARING AND 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor HENNEN FLOOR COVERING, INC PROFIT SHARING AND 401(K) SA	c EIN-PN 41-1958297-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name HENNEN LUMBER COMPANY, INC. PROFIT SHARING AND 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor HENNEN LUMBER COMPANY, INC. PROFIT SHARING AND 401(K) S	c EIN-PN 41-0681810-001
a	Plan name HENWAY MFG, INC. SAFE HARBOR PLAN	
b	Name of plan sponsor HENWAY MFG, INC. SAFE HARBOR PLAN	c EIN-PN 41-1474734-001
a	Plan name HERA SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor HERA SOLUTIONS 401(K) PLAN	c EIN-PN 85-2001515-001
a	Plan name HERMAN MANUFACTURING CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HERMAN MANUFACTURING CO., INC. 401(K) PROFIT SHARING PL	c EIN-PN 41-1286729-001
a	Plan name HERZFELD AND RUBIN, P.C. EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor HERZFELD AND RUBIN, P.C. EMPLOYEES 401(K) PLAN	c EIN-PN 13-2688520-001
a	Plan name HILEX EMPLOYEES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HILEX EMPLOYEES RETIREMENT SAVINGS PLAN	c EIN-PN 38-2073086-001
a	Plan name HITT CONTRACTING INC. 401(K) SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor HITT CONTRACTING INC. 401(K) SAVINGS AND PROFIT SHARING	c EIN-PN 54-0248192-001
a	Plan name HOFFMAN ENTERPRISES 401(K) SAVINGS PLAN	
b	Name of plan sponsor HOFFMAN ENTERPRISES 401(K) SAVINGS PLAN	c EIN-PN 06-1012275-001
a	Plan name HOLCOMB COLLISION 401(K)	
b	Name of plan sponsor HOLCOMB COLLISION 401(K)	c EIN-PN 45-1635781-001
a	Plan name HOLMATRO, INC. 401(K) PLAN	
b	Name of plan sponsor HOLMATRO, INC. 401(K) PLAN	c EIN-PN 52-1353852-001
a	Plan name HOME BASE COLLABORATIVE COUNSELING 401(K) PS PLAN	
b	Name of plan sponsor HOME BASE COLLABORATIVE COUNSELING 401(K) PS PLAN	c EIN-PN 45-4788473-001
a	Plan name HOPE SHORES ALLIANCE 401(K) PLAN	
b	Name of plan sponsor HOPE SHORES ALLIANCE 401(K) PLAN	c EIN-PN 38-2245793-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	HORIBA INSTRUMENTS INCORPORATED 401(K) PLAN	
b	Name of plan sponsor	HORIBA INSTRUMENTS INCORPORATED 401(K) PLAN	c EIN-PN 33-0820160-001
a	Plan name	HOTCHKISS INSURANCE MANAGERS, LLC 401(K) PLAN	
b	Name of plan sponsor	HOTCHKISS INSURANCE MANAGERS, LLC 401(K) PLAN	c EIN-PN 90-0341290-001
a	Plan name	HRBC 401(K) PLAN FOR UFCW COLLECTIVE BARGAINING UNIT	
b	Name of plan sponsor	HRBC 401(K) PLAN FOR UFCW COLLECTIVE BARGAINING UNIT	c EIN-PN 94-1272509-001
a	Plan name	HUCKSTEP HOLDING, CORP. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	HUCKSTEP HOLDING, CORP. 401(K) PLAN AND TRUST	c EIN-PN 84-1540882-001
a	Plan name	HUMAN CARE SERVICES FOR FAMILIES AND CHILDREN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HUMAN CARE SERVICES FOR FAMILIES AND CHILDREN, INC. 401	c EIN-PN 11-3338946-001
a	Plan name	HUMANE RESCUE ALLIANCE 401(K) PLAN	
b	Name of plan sponsor	HUMANE RESCUE ALLIANCE 401(K) PLAN	c EIN-PN 53-0219724-001
a	Plan name	HUNSAKER AND ASSOCIATES IRVINE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	HUNSAKER AND ASSOCIATES IRVINE, INC. PROFIT SHARING PLA	c EIN-PN 95-3123103-001
a	Plan name	HUSTONTILLOTSON UNIVERSITY 401(K) PLAN	
b	Name of plan sponsor	HUSTONTILLOTSON UNIVERSITY 401(K) PLAN	c EIN-PN 74-1180151-001
a	Plan name	ID TEST PLAN 9.26 MIMUNON NY	
b	Name of plan sponsor	ID TEST PLAN 9.26 MIMUNON NY	c EIN-PN 11-1111172-001
a	Plan name	ID TEST PLAN NY MIMU 9.26	
b	Name of plan sponsor	ID TEST PLAN NY MIMU 9.26	c EIN-PN 11-1111173-001
a	Plan name	IDSA 401(K) PLAN	
b	Name of plan sponsor	IDSA 401(K) PLAN	c EIN-PN 13-2517431-001
a	Plan name	ILONA GENIS, M.D., P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ILONA GENIS, M.D., P.C. 401(K) PROFIT SHARING PLAN	c EIN-PN 51-0435568-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	IMPACT ARCHITECTS 401(K) PLAN	
b	Name of plan sponsor	IMPACT ARCHITECTS 401(K) PLAN	c EIN-PN 82-4141495-001
a	Plan name	IMPROVING 401(K) PLAN	
b	Name of plan sponsor	IMPROVING 401(K) PLAN	c EIN-PN 34-2013309-001
a	Plan name	INDEPENDENT LUBRICANT MANUFACTURERS ASSN 401(K) P/S PLAN	
b	Name of plan sponsor	INDEPENDENT LUBRICANT MANUFACTURERS ASSN 401(K) P/S PLA	c EIN-PN 44-0554072-001
a	Plan name	INFRASTRUCTURE REPAIR EMPLOYEES' PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	INFRASTRUCTURE REPAIR EMPLOYEES PROFIT SHARING AND 401	c EIN-PN 22-3434925-001
a	Plan name	INSITE SOFTWARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INSITE SOFTWARE 401(K) PROFIT SHARING PLAN	c EIN-PN 16-1332881-001
a	Plan name	INTERNATIONAL BENEFITS ADMINISTRATORS, LLC 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INTERNATIONAL BENEFITS ADMINISTRATORS, LLC 401 (K) PROF	c EIN-PN 11-3293162-001
a	Plan name	IPG AUTOMOTIVE USA, INC. 401(K) PLAN	
b	Name of plan sponsor	IPG AUTOMOTIVE USA, INC. 401(K) PLAN	c EIN-PN 36-4813731-001
a	Plan name	IPS MC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	IPS MC 401(K) RETIREMENT SAVINGS PLAN	c EIN-PN 74-2940468-001
a	Plan name	IPSIS 401(K) PLAN	
b	Name of plan sponsor	IPSIS 401(K) PLAN	c EIN-PN 94-3160988-001
a	Plan name	JEMS FOOT CARE 401(K) PLAN	
b	Name of plan sponsor	JEMS FOOT CARE 401(K) PLAN	c EIN-PN 87-2143678-001
a	Plan name	JOHANNES BUS SERVICE, INC.	
b	Name of plan sponsor	JOHANNES BUS SERVICE, INC.	c EIN-PN 36-2554115-001
a	Plan name	JOHN J. MALM AND ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JOHN J. MALM AND ASSOCIATES, P.C. 401(K) PROFIT SHARING	c EIN-PN 36-4458554-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	JOURNEY DENTAL LLC 401(K) PLAN	
b	Name of plan sponsor	JOURNEY DENTAL LLC 401(K) PLAN	c EIN-PN 85-2859371-001
a	Plan name	JUAN A. MANTILLA, M.D., P.A. 401(K) PLAN	
b	Name of plan sponsor	JUAN A. MANTILLA, M.D., P.A. 401(K) PLAN	c EIN-PN 04-3721515-001
a	Plan name	JUDD PUMPS AND PLUMBING LLC 401(K) PLAN	
b	Name of plan sponsor	JUDD PUMPS AND PLUMBING LLC 401(K) PLAN	c EIN-PN 42-1661512-001
a	Plan name	JUSTIN STORMS INSURANCE AGENCY 401(K) PLAN	
b	Name of plan sponsor	JUSTIN STORMS INSURANCE AGENCY 401(K) PLAN	c EIN-PN 84-1476655-001
a	Plan name	JUSTRITE SAFETY GROUP 401(K) PLAN	
b	Name of plan sponsor	JUSTRITE SAFETY GROUP 401(K) PLAN	c EIN-PN 36-3950371-001
a	Plan name	K AND K HARDWARE LLC 401(K) PLAN	
b	Name of plan sponsor	K AND K HARDWARE LLC 401(K) PLAN	c EIN-PN 42-0672620-001
a	Plan name	KAM MARKETING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KAM MARKETING, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 22-3346916-001
a	Plan name	KEET O'GARY CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	KEET OGARY CONSTRUCTION 401(K) PLAN	c EIN-PN 46-4445388-001
a	Plan name	KEMP SMITH LLP 401(K) PLAN	
b	Name of plan sponsor	KEMP SMITH LLP 401(K) PLAN	c EIN-PN 04-3657264-001
a	Plan name	KILLBUCK SAVINGS BANK COMPANY 401(K)	
b	Name of plan sponsor	KILLBUCK SAVINGS BANK COMPANY 401(K)	c EIN-PN 34-0330520-001
a	Plan name	KINDERKARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KINDERKARE 401(K) PROFIT SHARING PLAN	c EIN-PN 38-4084387-001
a	Plan name	KKR, INC 401(K) PLAN	
b	Name of plan sponsor	KKR, INC 401(K) PLAN	c EIN-PN 72-1220814-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	KURIEN OUELLETTE LLC 401(K) PLAN	
b	Name of plan sponsor	KURIEN OUELLETTE LLC 401(K) PLAN	c EIN-PN 82-1815163-001
a	Plan name	L AND F DISTRIBUTORS 401(K) PLAN	
b	Name of plan sponsor	L AND F DISTRIBUTORS 401(K) PLAN	c EIN-PN 74-2200646-001
a	Plan name	L.A.S. CORPORATION 401(K) PLAN	
b	Name of plan sponsor	L.A.S. CORPORATION 401(K) PLAN	c EIN-PN 46-2427882-001
a	Plan name	L.I. ORAL MAXILLOFACIAL SURGERY, P.C. RETIREMENT TRUST PROFIT SHARING PLAN	
b	Name of plan sponsor	L.I. ORAL MAXILLOFACIAL SURGERY, P.C. RETIREMENT TRUST	c EIN-PN 11-2366457-001
a	Plan name	LADAS AND PARRY LLP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	LADAS AND PARRY LLP 401(K) SAVINGS PLAN	c EIN-PN 13-0945670-001
a	Plan name	LAKE HARTWELL DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	LAKE HARTWELL DENTISTRY 401(K) PLAN	c EIN-PN 99-3449656-001
a	Plan name	LANDC BILLING SERVICES 401(K) PLAN	
b	Name of plan sponsor	LANDC BILLING SERVICES 401(K) PLAN	c EIN-PN 42-1351406-001
a	Plan name	LANDMARK BANCORP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LANDMARK BANCORP, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 43-1930755-001
a	Plan name	LANE ROOFING, LLC 401(K) PLAN	
b	Name of plan sponsor	LANE ROOFING, LLC 401(K) PLAN	c EIN-PN 46-2421264-001
a	Plan name	LAROE RIDGE DEVELOPERS, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LAROE RIDGE DEVELOPERS, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 93-3436218-001
a	Plan name	LAW OFFICES OF EDMOND C. CHAKMAKIAN, P.C.	
b	Name of plan sponsor	LAW OFFICES OF EDMOND C. CHAKMAKIAN, P.C.	c EIN-PN 11-3445781-001
a	Plan name	LAW OFFICES OF MATHYS AND SCHNEID 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	LAW OFFICES OF MATHYS AND SCHNEID 401K PROFIT SHARING P	c EIN-PN 20-4240446-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name LCB SENIOR LIVING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LCB SENIOR LIVING LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 38-3900044-001
a	Plan name LEGACY SCHOOLS 401K PLAN	
b	Name of plan sponsor LEGACY SCHOOLS 401K PLAN	c EIN-PN 81-2601194-001
a	Plan name LEGAL MONKEYS 401(K) PLAN	
b	Name of plan sponsor LEGAL MONKEYS 401(K) PLAN	c EIN-PN 35-2826724-001
a	Plan name LIBERTY WEALTH MANAGEMENT, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor LIBERTY WEALTH MANAGEMENT, LLC PROFIT SHARING PLAN	c EIN-PN 38-4019328-001
a	Plan name LIFELENS TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor LIFELENS TECHNOLOGIES, INC. 401(K) PLAN	c EIN-PN 47-4416879-001
a	Plan name LIVERPOOL 401K	
b	Name of plan sponsor LIVERPOOL 401K	c EIN-PN 83-8383838-001
a	Plan name LMH QUALITY PRODUCTS 401(K) PLAN	
b	Name of plan sponsor LMH QUALITY PRODUCTS 401(K) PLAN	c EIN-PN 47-3840053-001
a	Plan name LOBSTER MAINEIA RETIREMENT TRUST	
b	Name of plan sponsor LOBSTER MAINEIA RETIREMENT TRUST	c EIN-PN 46-2021351-001
a	Plan name LOUISIANA PAROLE PROJECT 401(K) PLAN	
b	Name of plan sponsor LOUISIANA PAROLE PROJECT 401(K) PLAN	c EIN-PN 81-3399508-001
a	Plan name M AND S BLASTING LLC 401(K) PLAN	
b	Name of plan sponsor M AND S BLASTING LLC 401(K) PLAN	c EIN-PN 06-1595716-001
a	Plan name M* FEED TEST NON NY TRANSFERMIMU 8.14	
b	Name of plan sponsor M* FEED TEST NON NY TRANSFERMIMU 8.14	c EIN-PN 11-1111161-001
a	Plan name MAGNET SCHOOLS OF AMERICA 401(K) PLAN	
b	Name of plan sponsor MAGNET SCHOOLS OF AMERICA 401(K) PLAN	c EIN-PN 76-0428386-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MAHANKE METHOD 401(K) PLAN	
b	Name of plan sponsor	MAHANKE METHOD 401(K) PLAN	c EIN-PN 82-5390946-001
a	Plan name	MAIGEN'S CANDY SHOP SAMPLE 401(K)	
b	Name of plan sponsor	MAIGENS CANDY SHOP SAMPLE 401(K)	c EIN-PN 99-9990003-001
a	Plan name	MANHATTAN MIDTOWN DENTAL, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MANHATTAN MIDTOWN DENTAL, P.C. 401(K) PROFIT SHARING PL	c EIN-PN 46-4117967-001
a	Plan name	MANHATTAN PAIN MEDICINE, PLLC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	MANHATTAN PAIN MEDICINE, PLLC 401K PROFIT SHARING PLAN	c EIN-PN 46-4362827-001
a	Plan name	MARIO TREGLIA CPA PROFIT SHARING PLAN	
b	Name of plan sponsor	MARIO TREGLIA CPA PROFIT SHARING PLAN	c EIN-PN 13-3412540-001
a	Plan name	MARTINSBURG ANIMAL HOSPITAL 401(K) PLAN	
b	Name of plan sponsor	MARTINSBURG ANIMAL HOSPITAL 401(K) PLAN	c EIN-PN 99-3930487-001
a	Plan name	MARY ANN LIEBERT, INC. 401(K) PLAN	
b	Name of plan sponsor	MARY ANN LIEBERT, INC. 401(K) PLAN	c EIN-PN 13-3025783-001
a	Plan name	MASSACHUSETTS BAR ASSOCIATION DEFINED CONTRIBUTION PENSION PLAN	
b	Name of plan sponsor	MASSACHUSETTS BAR ASSOCIATION DEFINED CONTRIBUTION PENS	c EIN-PN 04-1589785-001
a	Plan name	MASSACHUSETTS BAR ASSOCIATION RETIREMENT AND 401(K) PLAN	
b	Name of plan sponsor	MASSACHUSETTS BAR ASSOCIATION RETIREMENT AND 401(K) PLA	c EIN-PN 04-1589785-001
a	Plan name	MATTHEWS INTERNATIONAL CORPORATION 401(K) PLAN	
b	Name of plan sponsor	MATTHEWS INTERNATIONAL CORPORATION 401(K) PLAN	c EIN-PN 13-4006999-001
a	Plan name	MATTHEWS INTERNATIONAL MEMORIALIZATION GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MATTHEWS INTERNATIONAL MEMORIALIZATION GROUP 401(K) RET	c EIN-PN 13-4006999-001
a	Plan name	MATTHEWS INTERNATIONAL SGK GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MATTHEWS INTERNATIONAL SGK GROUP 401(K) RETIREMENT PLAN	c EIN-PN 13-4006999-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	MAW/BOZEMAN 401(K) PLAN	
b	Name of plan sponsor	MAW/BOZEMAN 401(K) PLAN	c EIN-PN 81-0526955-001
a	Plan name	MB HEALTHCARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MB HEALTHCARE 401(K) PROFIT SHARING PLAN	c EIN-PN 47-2351628-001
a	Plan name	MC MANAGEMENT COMPANY 401(K) PLAN	
b	Name of plan sponsor	MC MANAGEMENT COMPANY 401(K) PLAN	c EIN-PN 06-1574152-001
a	Plan name	MCCLELLAN CHIROPRACTIC CLINIC, PC 401(K) PLAN	
b	Name of plan sponsor	MCCLELLAN CHIROPRACTIC CLINIC, PC 401(K) PLAN	c EIN-PN 63-0961557-001
a	Plan name	MCKENZIE HEALTH SYSTEM 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MCKENZIE HEALTH SYSTEM 401(K) RETIREMENT PLAN	c EIN-PN 38-1738615-001
a	Plan name	MEDINA AGRICULTURE PRODUCTS CO., INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	MEDINA AGRICULTURE PRODUCTS CO., INC. PROFIT SHARING PL	c EIN-PN 74-1467506-001
a	Plan name	MELISSA CHOWNING MEDIA LLC 401(K) PLAN	
b	Name of plan sponsor	MELISSA CHOWNING MEDIA LLC 401(K) PLAN	c EIN-PN 82-2032856-001
a	Plan name	MERIDIAN COLLISION CENTER, INC. RETIREMENT PLAN	
b	Name of plan sponsor	MERIDIAN COLLISION CENTER, INC. RETIREMENT PLAN	c EIN-PN 91-1183560-001
a	Plan name	MERIDIAN TITLE CORPORATION EMPLOYEE'S SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	MERIDIAN TITLE CORPORATION EMPLOYEES SAVINGS AND PROFI	c EIN-PN 35-0134643-001
a	Plan name	METZGER AND SON TRUCKING COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	METZGER AND SON TRUCKING COMPANY, INC. 401(K) RETIREMEN	c EIN-PN 35-1683639-001
a	Plan name	MID DAKOTA TRANSPORT INC. 401(K) PLAN	
b	Name of plan sponsor	MID DAKOTA TRANSPORT INC. 401(K) PLAN	c EIN-PN 27-3330778-001
a	Plan name	MIDAMERICA HOLDINGS, LTD. 401(K) PLAN	
b	Name of plan sponsor	MIDAMERICA HOLDINGS, LTD. 401(K) PLAN	c EIN-PN 20-0709088-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	MILLION DOLLAR ROUND TABLE 401(K) THRIFT PLAN	
b	Name of plan sponsor	MILLION DOLLAR ROUND TABLE 401(K) THRIFT PLAN	c EIN-PN 36-2138427-001
a	Plan name	MILLS ROOFING, INC. 401(K) PLAN	
b	Name of plan sponsor	MILLS ROOFING, INC. 401(K) PLAN	c EIN-PN 68-0103114-001
a	Plan name	MILSO CASKET RETIREMENT PLAN	
b	Name of plan sponsor	MILSO CASKET RETIREMENT PLAN	c EIN-PN 13-4006999-001
a	Plan name	MIRRORWEB INC. 401(K) PLAN	
b	Name of plan sponsor	MIRRORWEB INC. 401(K) PLAN	c EIN-PN 32-0578428-001
a	Plan name	MJM FITCH INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MJM FITCH INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 26-1520063-001
a	Plan name	MNRC 401(K) PLAN	
b	Name of plan sponsor	MNRC 401(K) PLAN	c EIN-PN 27-3537392-001
a	Plan name	MONTROSE FAMILY CHIROPRACTIC 401(K) PLAN	
b	Name of plan sponsor	MONTROSE FAMILY CHIROPRACTIC 401(K) PLAN	c EIN-PN 27-0191974-001
a	Plan name	MORRELL INSTRUMENT CO., INC.	
b	Name of plan sponsor	MORRELL INSTRUMENT CO., INC.	c EIN-PN 11-2343150-001
a	Plan name	MRN DENTAL, PC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	MRN DENTAL, PC 401K PROFIT SHARING PLAN	c EIN-PN 38-4084387-001
a	Plan name	NANCY TAYLOR BUBES REAL ESTATE COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NANCY TAYLOR BUBES REAL ESTATE COMPANY 401(K) PROFIT SH	c EIN-PN 81-0956359-001
a	Plan name	NATIONAL ASSOCIATION FOR PROTON THERAPY 401(K) PLAN	
b	Name of plan sponsor	NATIONAL ASSOCIATION FOR PROTON THERAPY 401(K) PLAN	c EIN-PN 54-1519061-001
a	Plan name	NATIONAL ASSOCIATION OF TAX PROFESSIONALS EMPLOYEE PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	NATIONAL ASSOCIATION OF TAX PROFESSIONALS EMPLOYEE PROF	c EIN-PN 39-1342053-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name NATIONAL INVESTMENT CENTER FOR SENIORS HOUSING AND CARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NATIONAL INVESTMENT CENTER FOR SENIORS HOUSING AND CARE	c EIN-PN 52-1802714-001
a	Plan name NATIONAL SOCIETY OF PUBLIC ACC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor NATIONAL SOCIETY OF PUBLIC ACC 401(K) PROFIT SHARING PL	c EIN-PN 53-0219755-001
a	Plan name NATURALISTS AT LARGE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NATURALISTS AT LARGE 401(K) PROFIT SHARING PLAN	c EIN-PN 95-4201765-001
a	Plan name NET NATIVES INC. 401(K) PLAN	
b	Name of plan sponsor NET NATIVES INC. 401(K) PLAN	c EIN-PN 61-1787451-001
a	Plan name NEVADA JUSTICE ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor NEVADA JUSTICE ASSOCIATION 401(K) PLAN	c EIN-PN 88-0138768-001
a	Plan name NEW HORIZON	
b	Name of plan sponsor NEW HORIZON	c EIN-PN 88-4360770-001
a	Plan name NEW ROAD CM 401(K) PLAN	
b	Name of plan sponsor NEW ROAD CM 401(K) PLAN	c EIN-PN 22-2319966-001
a	Plan name NEWBURY PARK PHYSICAL THERAPY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NEWBURY PARK PHYSICAL THERAPY, INC. 401(K) PROFIT SHARI	c EIN-PN 80-0015375-001
a	Plan name NEWCO MECHANICAL CONTRACTING 401K AND PROFIT SHARING PLAN	
b	Name of plan sponsor NEWCO MECHANICAL CONTRACTING 401K AND PROFIT SHARING PL	c EIN-PN 99-4036406-001
a	Plan name NEWMARKET DENTISTRY 401(K)	
b	Name of plan sponsor NEWMARKET DENTISTRY 401(K)	c EIN-PN 99-0434536-001
a	Plan name NICHOLAS N. GADLER, D.D.S., INC. 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor NICHOLAS N. GADLER, D.D.S., INC. 401 (K) PROFIT SHARING	c EIN-PN 33-0922570-001
a	Plan name NO SLEEP TOMORROW 401(K) PLAN	
b	Name of plan sponsor NO SLEEP TOMORROW 401(K) PLAN	c EIN-PN 52-2359487-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name NOBLE, WICKERSHAM AND HEART, LLP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor NOBLE, WICKERSHAM AND HEART, LLP 401(K) RETIREMENT PLAN	c EIN-PN 33-1030718-001
a	Plan name NORTHERN DIVERSIFIED SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor NORTHERN DIVERSIFIED SOLUTIONS 401(K) PLAN	c EIN-PN 84-3817226-001
a	Plan name NORTHERN HORIZONS SOLWAY 401(K) PLAN	
b	Name of plan sponsor NORTHERN HORIZONS SOLWAY 401(K) PLAN	c EIN-PN 82-3836576-001
a	Plan name NORTHFIELD MANUFACTURING, INC. EMPLOYEES P.S. PLAN 401(K)	
b	Name of plan sponsor NORTHFIELD MANUFACTURING, INC. EMPLOYEES P.S. PLAN 401(K)	c EIN-PN 38-2062374-001
a	Plan name NORTHWAY 8 GOLF SHOP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor NORTHWAY 8 GOLF SHOP, INC. PROFIT SHARING PLAN	c EIN-PN 14-1670936-001
a	Plan name NORTHWEST SUPPORTED LIVING, INC. 401(K) PLAN	
b	Name of plan sponsor NORTHWEST SUPPORTED LIVING, INC. 401(K) PLAN	c EIN-PN 84-5100896-001
a	Plan name NYC CREDIT AND FUNDING INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor NYC CREDIT AND FUNDING INC. 401(K)/PROFIT SHARING PLAN	c EIN-PN 02-0644649-001
a	Plan name OCEANIA PHARMACY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OCEANIA PHARMACY, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 11-3352033-001
a	Plan name ODDO PROPERTY MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor ODDO PROPERTY MANAGEMENT 401(K) PLAN	c EIN-PN 87-4385185-001
a	Plan name OGEN AND SEDAGHATI, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OGEN AND SEDAGHATI, P.C. 401(K) PROFIT SHARING PLAN	c EIN-PN 11-3582909-001
a	Plan name OILFIELD INDUSTRIAL SUPPLY OF LOUISIANA 401(K) PLAN	
b	Name of plan sponsor OILFIELD INDUSTRIAL SUPPLY OF LOUISIANA 401(K) PLAN	c EIN-PN 20-2140560-001
a	Plan name OMNI ABSTRACT CORP. 401(K) PLAN	
b	Name of plan sponsor OMNI ABSTRACT CORP. 401(K) PLAN	c EIN-PN 11-2467566-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	OPTIKS SOLUTIONS, INC 401(K) PLAN	
b	Name of plan sponsor	OPTIKS SOLUTIONS, INC 401(K) PLAN	c EIN-PN 81-4138513-001
a	Plan name	OPTIMAL WATER 401(K) PLAN	
b	Name of plan sponsor	OPTIMAL WATER 401(K) PLAN	c EIN-PN 47-4519049-001
a	Plan name	ORCHARD MEDICAL 401(K) PLAN	
b	Name of plan sponsor	ORCHARD MEDICAL 401(K) PLAN	c EIN-PN 20-8814258-001
a	Plan name	OREGON MOBILE PHYSICAL THERAPY LLC 401(K) PSP	
b	Name of plan sponsor	OREGON MOBILE PHYSICAL THERAPY LLC 401(K) PSP	c EIN-PN 88-3358823-001
a	Plan name	ORLANDO SPORTS HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor	ORLANDO SPORTS HOLDINGS, LLC 401(K) PLAN	c EIN-PN 26-1550157-001
a	Plan name	OSG, INC. SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	OSG, INC. SAVINGS AND RETIREMENT PLAN	c EIN-PN 22-3168044-001
a	Plan name	OUTDOOR LIFESTYLE STRATEGIES 401(K) PLAN	
b	Name of plan sponsor	OUTDOOR LIFESTYLE STRATEGIES 401(K) PLAN	c EIN-PN 84-4914946-001
a	Plan name	OXY LLC 401(K) PLAN	
b	Name of plan sponsor	OXY LLC 401(K) PLAN	c EIN-PN 85-2264344-001
a	Plan name	P.K.M.M. INC. 401(K) PLAN	
b	Name of plan sponsor	P.K.M.M. INC. 401(K) PLAN	c EIN-PN 22-2873648-001
a	Plan name	PALACIOS LAW GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PALACIOS LAW GROUP 401(K) PROFIT SHARING PLAN	c EIN-PN 20-3187871-001
a	Plan name	PALADIN BUSINESS SERVICES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PALADIN BUSINESS SERVICES 401(K) PROFIT SHARING PLAN	c EIN-PN 88-4422929-001
a	Plan name	PAUL SMITHEY'S CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	PAUL SMITHEYS CONSTRUCTION 401(K) PLAN	c EIN-PN 64-0727854-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PEACE OF MIND 401(K) PLAN	
b	Name of plan sponsor PEACE OF MIND 401(K) PLAN	c EIN-PN 20-1642248-001
a	Plan name PENN COLOR, INC. INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor PENN COLOR, INC. INCENTIVE SAVINGS PLAN	c EIN-PN 22-1661347-001
a	Plan name PENSACOLA HEALTH PARTNERS 401K PLAN	
b	Name of plan sponsor PENSACOLA HEALTH PARTNERS 401K PLAN	c EIN-PN 88-0867677-001
a	Plan name PEP SMART NATIONAL POOLED EMPLOYER PLAN, ADOPTED BY M2 PROPERTY GROUP, LLC	
b	Name of plan sponsor PEP SMART NATIONAL POOLED EMPLOYER PLAN, ADOPTED BY M2	c EIN-PN 27-2935039-001
a	Plan name PEPPERELL QUALITY MARKET 401(K) PLAN	
b	Name of plan sponsor PEPPERELL QUALITY MARKET 401(K) PLAN	c EIN-PN 85-4346506-001
a	Plan name PEPSI COLA OGDENSBURG BOTTLERS, INC. 401(K) PLAN	
b	Name of plan sponsor PEPSI COLA OGDENSBURG BOTTLERS, INC. 401(K) PLAN	c EIN-PN 15-0611554-001
a	Plan name PEPSI COLA OGDENSBURG BOTTLERS, INC. 401(K) PLAN	
b	Name of plan sponsor PEPSI COLA OGDENSBURG BOTTLERS, INC. 401(K) PLAN	c EIN-PN 15-0611554-001
a	Plan name PETER ROSENSTEIN, DMD 401(K) PLAN	
b	Name of plan sponsor PETER ROSENSTEIN, DMD 401(K) PLAN	c EIN-PN 27-3828144-001
a	Plan name PETRILLOS USED AUTO PARTS, INC. 401(K) PS PLAN	
b	Name of plan sponsor PETRILLOS USED AUTO PARTS, INC. 401(K) PS PLAN	c EIN-PN 06-0973616-001
a	Plan name PGCAR 401(K) PLAN	
b	Name of plan sponsor PGCAR 401(K) PLAN	c EIN-PN 52-0692242-001
a	Plan name PHOENIX WAREHOUSE 401(K) PLAN	
b	Name of plan sponsor PHOENIX WAREHOUSE 401(K) PLAN	c EIN-PN 22-3499090-001
a	Plan name PILOT VENTURES 401(K) PLAN	
b	Name of plan sponsor PILOT VENTURES 401(K) PLAN	c EIN-PN 81-3657022-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name PINNACLE MULTICARE NURSING AND REHABILITATION CENTER 401(K) PLAN	
b	Name of plan sponsor PINNACLE MULTICARE NURSING AND REHABILITATION CENTER 40	c EIN-PN 20-3917285-001
a	Plan name PIONEER DESIGN GROUP, INC. 401K PLAN	
b	Name of plan sponsor PIONEER DESIGN GROUP, INC. 401K PLAN	c EIN-PN 16-1678832-001
a	Plan name PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) MARTERA, INC.	
b	Name of plan sponsor PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) MARTE	c EIN-PN 25-1115153-001
a	Plan name PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) PITT OHIO EXPRESS, LLC	
b	Name of plan sponsor PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) PITT	c EIN-PN 25-1841122-001
a	Plan name PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) PITT OHIO GROUND	
b	Name of plan sponsor PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) PITT	c EIN-PN 27-1286921-001
a	Plan name PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) UNITED STATES CARGO AND COURIER	
b	Name of plan sponsor PITT OHIO EXPRESS, LLC PROFIT SHARING PLAN 401(K) UNITE	c EIN-PN 27-5369317-001
a	Plan name POHLAD COMPANIES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor POHLAD COMPANIES RETIREMENT SAVINGS PLAN	c EIN-PN 37-1452807-001
a	Plan name POST ACUTE PARTNERS RETIREMENT PLAN	
b	Name of plan sponsor POST ACUTE PARTNERS RETIREMENT PLAN	c EIN-PN 27-3027795-001
a	Plan name POWER 401K PLAN	
b	Name of plan sponsor POWER 401K PLAN	c EIN-PN 25-1643651-001
a	Plan name POWERS TRUCK EQUIPMENT AND 401(K) PLAN	
b	Name of plan sponsor POWERS TRUCK EQUIPMENT AND 401(K) PLAN	c EIN-PN 71-0806310-001
a	Plan name PRESTIGE BEVERAGE GROUP OF 401(K) PLAN	
b	Name of plan sponsor PRESTIGE BEVERAGE GROUP OF 401(K) PLAN	c EIN-PN 80-0472338-001
a	Plan name PRESTIGE WORLDWIDE 401(K) PLAN	
b	Name of plan sponsor PRESTIGE WORLDWIDE 401(K) PLAN	c EIN-PN 46-2070507-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PRIME MEDICAL CARE, LLC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	PRIME MEDICAL CARE, LLC 401K PROFIT SHARING PLAN	c EIN-PN 32-0080987-001
a	Plan name	PRJ INSURANCE AND WEALTH MANAGEMENT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PRJ INSURANCE AND WEALTH MANAGEMENT 401(K) PROFIT SHARI	c EIN-PN 84-2659156-001
a	Plan name	PROCARE MMS RETIREMENT PLAN	
b	Name of plan sponsor	PROCARE MMS RETIREMENT PLAN	c EIN-PN 56-2289407-001
a	Plan name	PROD TEST 8.28 MIMU STARTUP	
b	Name of plan sponsor	PROD TEST 8.28 MIMU STARTUP	c EIN-PN 11-1111167-001
a	Plan name	PROD TEST PLAN 1.13.25 NON NY TRANSFER MIMU	
b	Name of plan sponsor	PROD TEST PLAN 1.13.25 NON NY TRANSFER MIMU	c EIN-PN 11-1111100-001
a	Plan name	PROD TEST RS 8/6 1	
b	Name of plan sponsor	PROD TEST RS 8/6 1	c EIN-PN 33-0490437-001
a	Plan name	PSYCHONOMIC SOCIETY 401(K) PLAN	
b	Name of plan sponsor	PSYCHONOMIC SOCIETY 401(K) PLAN	c EIN-PN 95-6195800-001
a	Plan name	PUNGITORE IRRIGATION AND FERTILIZER, INC. 401(K) PLAN	
b	Name of plan sponsor	PUNGITORE IRRIGATION AND FERTILIZER, INC. 401(K) PLAN	c EIN-PN 47-4954903-001
a	Plan name	PYURE BRANDS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	PYURE BRANDS LLC 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 26-3156379-001
a	Plan name	QUEST ENERGY GROUP, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	QUEST ENERGY GROUP, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 20-2123784-001
a	Plan name	R AND D TOOL AND ENGINEERING COMPANY PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	R AND D TOOL AND ENGINEERING COMPANY PROFIT SHARING PLA	c EIN-PN 43-1237713-001
a	Plan name	R AND J COMPONENTS CORP. PROFIT SHARING PLAN	
b	Name of plan sponsor	R AND J COMPONENTS CORP. PROFIT SHARING PLAN	c EIN-PN 13-1932425-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RACKET CLUB 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor	RACKET CLUB 401(K) / PROFIT SHARING PLAN	c EIN-PN 83-4441388-001
a	Plan name	RANGEWATER 401(K) PLAN	
b	Name of plan sponsor	RANGEWATER 401(K) PLAN	c EIN-PN 26-3956259-001
a	Plan name	READY SELECT	
b	Name of plan sponsor	READY SELECT	c EIN-PN 33-1084908-001
a	Plan name	READY SELECT 5.16 FL MIMU TRANSFER	
b	Name of plan sponsor	READY SELECT 5.16 FL MIMU TRANSFER	c EIN-PN 27-3058507-001
a	Plan name	READY SELECT 5.16 TRANSFER LA	
b	Name of plan sponsor	READY SELECT 5.16 TRANSFER LA	c EIN-PN 75-2122095-001
a	Plan name	READY SELECT 5.17 TRANSFER NYMIMU	
b	Name of plan sponsor	READY SELECT 5.17 TRANSFER NYMIMU	c EIN-PN 23-2984519-001
a	Plan name	READY SELECT 5.20 TRANSFER	
b	Name of plan sponsor	READY SELECT 5.20 TRANSFER	c EIN-PN 52-1375898-001
a	Plan name	READY SELECT 5.20 TRANSFER MD	
b	Name of plan sponsor	READY SELECT 5.20 TRANSFER MD	c EIN-PN 57-0926523-001
a	Plan name	READY SELECT 5.23 TRANSFER CAMIMU	
b	Name of plan sponsor	READY SELECT 5.23 TRANSFER CAMIMU	c EIN-PN 95-3877798-001
a	Plan name	READY SELECT 6.10 MIMU TRANSFER CA	
b	Name of plan sponsor	READY SELECT 6.10 MIMU TRANSFER CA	c EIN-PN 95-4467063-001
a	Plan name	READY SELECT 6.3 STARTUP NY	
b	Name of plan sponsor	READY SELECT 6.3 STARTUP NY	c EIN-PN 95-3646362-001
a	Plan name	READY SELECT 6.5 MIMU TRANSFER PLAN	
b	Name of plan sponsor	READY SELECT 6.5 MIMU TRANSFER PLAN	c EIN-PN 12-3456787-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	READY SELECT 6.9 PROD TEST MIMU TRANSFER	
b	Name of plan sponsor	READY SELECT 6.9 PROD TEST MIMU TRANSFER	c EIN-PN 27-1238088-001
a	Plan name	READY SELECT 7.8 STARTUP NYMIMU	
b	Name of plan sponsor	READY SELECT 7.8 STARTUP NYMIMU	c EIN-PN 11-1111148-001
a	Plan name	READY SELECT CA STARTUP 5.16 MIMU	
b	Name of plan sponsor	READY SELECT CA STARTUP 5.16 MIMU	c EIN-PN 20-5632174-001
a	Plan name	READY SELECT INV TEST 7.2 TRANSFER NYMIMU	
b	Name of plan sponsor	READY SELECT INV TEST 7.2 TRANSFER NYMIMU	c EIN-PN 11-1111134-001
a	Plan name	READY SELECT INV TEST 7.8 NONNY TRANSFER MIMU	
b	Name of plan sponsor	READY SELECT INV TEST 7.8 NONNY TRANSFER MIMU	c EIN-PN 11-1111147-001
a	Plan name	READY SELECT INV TEST 7.8 NY TRANSFER MIMU	
b	Name of plan sponsor	READY SELECT INV TEST 7.8 NY TRANSFER MIMU	c EIN-PN 11-1111141-001
a	Plan name	READY SELECT LONG PLAN NAME OF EMPOWER FOR TESTING AT ABOUT 80 CHARACTERS	
b	Name of plan sponsor	READY SELECT LONG PLAN NAME OF EMPOWER FOR TESTING AT A	c EIN-PN 99-9998010-001
a	Plan name	READY SELECT MIMU 6.3 TRANSFER ME	
b	Name of plan sponsor	READY SELECT MIMU 6.3 TRANSFER ME	c EIN-PN 94-3053151-001
a	Plan name	READY SELECT MIMU 6.3 TRANSFER NY	
b	Name of plan sponsor	READY SELECT MIMU 6.3 TRANSFER NY	c EIN-PN 45-2703848-001
a	Plan name	READY SELECT NON NY STARTUP EPS 7.17MIMU	
b	Name of plan sponsor	READY SELECT NON NY STARTUP EPS 7.17MIMU	c EIN-PN 26-4403335-001
a	Plan name	READY SELECT NONNY MIMU 7.2 STARTUP	
b	Name of plan sponsor	READY SELECT NONNY MIMU 7.2 STARTUP	c EIN-PN 11-1111137-001
a	Plan name	READY SELECT NONNY MIMU 7.2 TRANSFER	
b	Name of plan sponsor	READY SELECT NONNY MIMU 7.2 TRANSFER	c EIN-PN 11-1111136-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	READY SELECT NY STARTUP 5.14	
b	Name of plan sponsor	READY SELECT NY STARTUP 5.14	c EIN-PN 52-2311741-001
a	Plan name	READY SELECT NY TRANSFER 7.3 MIMU	
b	Name of plan sponsor	READY SELECT NY TRANSFER 7.3 MIMU	c EIN-PN 11-1111139-001
a	Plan name	READY SELECT PEA TEST 7.10 NON NY STARTUPMIMU	
b	Name of plan sponsor	READY SELECT PEA TEST 7.10 NON NY STARTUPMIMU	c EIN-PN 11-1111150-001
a	Plan name	READY SELECT PEA TEST 7.10 NY STARTUPMIMU	
b	Name of plan sponsor	READY SELECT PEA TEST 7.10 NY STARTUPMIMU	c EIN-PN 11-1111145-001
a	Plan name	READY SELECT PEA TEST 7.10 NY TRANSFERMIMU	
b	Name of plan sponsor	READY SELECT PEA TEST 7.10 NY TRANSFERMIMU	c EIN-PN 11-1111149-001
a	Plan name	READY SELECT PROD HI 5.14 MIMU	
b	Name of plan sponsor	READY SELECT PROD HI 5.14 MIMU	c EIN-PN 20-8548344-001
a	Plan name	READY SELECT PROD TEST 6.12 MIMU	
b	Name of plan sponsor	READY SELECT PROD TEST 6.12 MIMU	c EIN-PN 35-1439290-001
a	Plan name	READY SELECT PROD TRANSFER NY6.13 MIMU	
b	Name of plan sponsor	READY SELECT PROD TRANSFER NY6.13 MIMU	c EIN-PN 68-0067337-001
a	Plan name	READY SELECT PROD TRANSFER PLAN 6.13MIMU	
b	Name of plan sponsor	READY SELECT PROD TRANSFER PLAN 6.13MIMU	c EIN-PN 22-2272332-001
a	Plan name	READY SELECT STARTUP 6.3 MIMU IL	
b	Name of plan sponsor	READY SELECT STARTUP 6.3 MIMU IL	c EIN-PN 37-0580723-001
a	Plan name	READY SELECT STARTUP CALIFORNIA 5/14	
b	Name of plan sponsor	READY SELECT STARTUP CALIFORNIA 5/14	c EIN-PN 56-1245400-001
a	Plan name	READY SELECT STARTUP CO 5.16 MIMU	
b	Name of plan sponsor	READY SELECT STARTUP CO 5.16 MIMU	c EIN-PN 38-1617113-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	READY SELECT STARTUP NEW YORK	
b	Name of plan sponsor	READY SELECT STARTUP NEW YORK	c EIN-PN 11-1111140-001
a	Plan name	READY SELECT STARTUP NEW YORK 7.17MIMU EPS	
b	Name of plan sponsor	READY SELECT STARTUP NEW YORK 7.17MIMU EPS	c EIN-PN 11-1111151-001
a	Plan name	READY SELECT STARTUP NON NY 5.17 MIMU	
b	Name of plan sponsor	READY SELECT STARTUP NON NY 5.17 MIMU	c EIN-PN 94-3389602-001
a	Plan name	READY SELECT STARTUP NONNYMIMU 6.13 PROD	
b	Name of plan sponsor	READY SELECT STARTUP NONNYMIMU 6.13 PROD	c EIN-PN 45-4233482-001
a	Plan name	READY SELECT STARTUP NY 6.13PROD MIMU	
b	Name of plan sponsor	READY SELECT STARTUP NY 6.13PROD MIMU	c EIN-PN 46-1730030-001
a	Plan name	READY SELECT TEST PLAN 6.27 MIMU	
b	Name of plan sponsor	READY SELECT TEST PLAN 6.27 MIMU	c EIN-PN 11-1111133-001
a	Plan name	READY SELECT TEST STARTUP INV STARTUP 7.2MIMU	
b	Name of plan sponsor	READY SELECT TEST STARTUP INV STARTUP 7.2MIMU	c EIN-PN 11-1111135-001
a	Plan name	READY SELECT TRANSFER 5.16 IL MIMU	
b	Name of plan sponsor	READY SELECT TRANSFER 5.16 IL MIMU	c EIN-PN 31-0795034-001
a	Plan name	READY SELECT TRANSFER 5.22 MIMU IL	
b	Name of plan sponsor	READY SELECT TRANSFER 5.22 MIMU IL	c EIN-PN 47-2247746-001
a	Plan name	READY SELECT TRANSFER KS 5.16 MIMU	
b	Name of plan sponsor	READY SELECT TRANSFER KS 5.16 MIMU	c EIN-PN 43-2718844-001
a	Plan name	READY SELECT TRANSFER MIMU7.17 EPS NY	
b	Name of plan sponsor	READY SELECT TRANSFER MIMU7.17 EPS NY	c EIN-PN 11-1111250-001
a	Plan name	READY SELECT TRANSFER NON NY 7.2 MIMU	
b	Name of plan sponsor	READY SELECT TRANSFER NON NY 7.2 MIMU	c EIN-PN 11-1111138-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name READY SELECT TX 5.20 MIMU TRANSFER	
b	Name of plan sponsor READY SELECT TX 5.20 MIMU TRANSFER	c EIN-PN 20-3238380-001
a	Plan name REEBIE STORAGE AND MOVING CO., INC. 401(K) PLAN	
b	Name of plan sponsor REEBIE STORAGE AND MOVING CO., INC. 401(K) PLAN	c EIN-PN 36-1671764-001
a	Plan name REEF INDUSTRIES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor REEF INDUSTRIES, INC. 401(K) RETIREMENT PLAN	c EIN-PN 74-1365491-001
a	Plan name REGAL HEALTHCARE MANAGEMENT, LLC 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor REGAL HEALTHCARE MANAGEMENT, LLC 401(K)/PROFIT SHARING	c EIN-PN 82-3326635-001
a	Plan name RELIANT FUND SERVICES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RELIANT FUND SERVICES, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 85-0756268-001
a	Plan name RIEMER HESS LLC 401(K) PLAN	
b	Name of plan sponsor RIEMER HESS LLC 401(K) PLAN	c EIN-PN 20-1703578-001
a	Plan name RIGHT ANGLE 401(K) PLAN	
b	Name of plan sponsor RIGHT ANGLE 401(K) PLAN	c EIN-PN 20-3251984-001
a	Plan name RIGHT QUESTION INSTITUTE 401(K) PLAN	
b	Name of plan sponsor RIGHT QUESTION INSTITUTE 401(K) PLAN	c EIN-PN 04-3099027-001
a	Plan name RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY PORTFOLIO CO S FBO AGILE UPPER HOLDCO, LLC	
b	Name of plan sponsor RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY	c EIN-PN 59-3708427-001
a	Plan name RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY PORTFOLIO CO'S FBO CRENLO CAB PRODUCTS	
b	Name of plan sponsor RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY	c EIN-PN 59-3708427-001
a	Plan name RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY PORTFOLIO CO'S FBO DATA CLEAN LLC	
b	Name of plan sponsor RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY	c EIN-PN 59-3708427-001
a	Plan name RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY PORTFOLIO CO'S FBO RALOID CORPORATION AND PREM	
b	Name of plan sponsor RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY	c EIN-PN 59-3708427-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY PORTFOLIO CO'S FBO ROBEX, LLC	
b	Name of plan sponsor RISK STRATEGIES POOLED EMPLOYER PLAN FOR PRIVATE EQUITY	c EIN-PN 59-3708427-001
a	Plan name ROBB WETTA LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor ROBB WETTA LLC 401(K) AND PROFIT SHARING PLAN	c EIN-PN 93-2786380-001
a	Plan name ROBBINS LLC 401(K) PLAN	
b	Name of plan sponsor ROBBINS LLC 401(K) PLAN	c EIN-PN 82-1080808-001
a	Plan name ROBIN S. WEINGAST AND ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROBIN S. WEINGAST AND ASSOCIATES, INC. 401(K) PROFIT SH	c EIN-PN 11-2859146-001
a	Plan name ROSEWOOD REHABILITATION AND NURSING CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROSEWOOD REHABILITATION AND NURSING CENTER 401(K) PROFI	c EIN-PN 45-4826038-001
a	Plan name RS 5.31 MIMU MT TRANSFER	
b	Name of plan sponsor RS 5.31 MIMU MT TRANSFER	c EIN-PN 45-3094688-001
a	Plan name RS 6.4 MIMU TRANSFER PLAN LA	
b	Name of plan sponsor RS 6.4 MIMU TRANSFER PLAN LA	c EIN-PN 81-0799921-001
a	Plan name RS 6/5	
b	Name of plan sponsor RS 6/5	c EIN-PN 12-3456781-001
a	Plan name RS PLAN PROD TEST 7/19 0	
b	Name of plan sponsor RS PLAN PROD TEST 7/19 0	c EIN-PN 99-9848998-001
a	Plan name RS PLAN PROD TEST 8/18	
b	Name of plan sponsor RS PLAN PROD TEST 8/18	c EIN-PN 99-9876886-001
a	Plan name RS PROD 12/12 DAY ONE FUND TEST	
b	Name of plan sponsor RS PROD 12/12 DAY ONE FUND TEST	c EIN-PN 11-1111183-001
a	Plan name RS PROD 6/5 WITH SAP	
b	Name of plan sponsor RS PROD 6/5 WITH SAP	c EIN-PN 20-6714741-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name	RS PROD 7/21 2	
b Name of plan sponsor	RS PROD 7/21 2	c EIN-PN 23-0000001-001
a Plan name	RS PROD PLAN 7/21 2	
b Name of plan sponsor	RS PROD PLAN 7/21 2	c EIN-PN 77-0159033-001
a Plan name	RS PROD PLAN 9/11 2	
b Name of plan sponsor	RS PROD PLAN 9/11 2	c EIN-PN 99-9874848-001
a Plan name	RS PROD PLAN TEST 7/18 AR	
b Name of plan sponsor	RS PROD PLAN TEST 7/18 AR	c EIN-PN 99-9948484-001
a Plan name	RS PROD PLAN TEST 7/19 5	
b Name of plan sponsor	RS PROD PLAN TEST 7/19 5	c EIN-PN 99-9238979-001
a Plan name	RS PROD TEST 1/10 FFS	
b Name of plan sponsor	RS PROD TEST 1/10 FFS	c EIN-PN 80-0279999-001
a Plan name	RS PROD TEST 1/22	
b Name of plan sponsor	RS PROD TEST 1/22	c EIN-PN 45-1625999-001
a Plan name	RS PROD TEST 1/22 VALIDATION 1	
b Name of plan sponsor	RS PROD TEST 1/22 VALIDATION 1	c EIN-PN 13-1731999-001
a Plan name	RS PROD TEST 1/26	
b Name of plan sponsor	RS PROD TEST 1/26	c EIN-PN 99-9923432-001
a Plan name	RS PROD TEST 1/27 BC NEVADA DAY ONE FUNDS	
b Name of plan sponsor	RS PROD TEST 1/27 BC NEVADA DAY ONE FUNDS	c EIN-PN 99-8408999-001
a Plan name	RS PROD TEST 1/29	
b Name of plan sponsor	RS PROD TEST 1/29	c EIN-PN 52-1776999-001
a Plan name	RS PROD TEST 10/16 1125	
b Name of plan sponsor	RS PROD TEST 10/16 1125	c EIN-PN 45-2599999-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RS PROD TEST 10/16 3	
b	Name of plan sponsor	RS PROD TEST 10/16 3	c EIN-PN 52-1743999-001
a	Plan name	RS PROD TEST 10/16 DO NOT NOTIFY ADVISOR	
b	Name of plan sponsor	RS PROD TEST 10/16 DO NOT NOTIFY ADVISOR	c EIN-PN 48-0682999-001
a	Plan name	RS PROD TEST 10/16 NOTIFY TPA	
b	Name of plan sponsor	RS PROD TEST 10/16 NOTIFY TPA	c EIN-PN 80-0235999-001
a	Plan name	RS PROD TEST 11/14 1	
b	Name of plan sponsor	RS PROD TEST 11/14 1	c EIN-PN 37-5847676-001
a	Plan name	RS PROD TEST 11/18	
b	Name of plan sponsor	RS PROD TEST 11/18	c EIN-PN 99-9516156-001
a	Plan name	RS PROD TEST 12/11	
b	Name of plan sponsor	RS PROD TEST 12/11	c EIN-PN 26-1623999-001
a	Plan name	RS PROD TEST 12/12	
b	Name of plan sponsor	RS PROD TEST 12/12	c EIN-PN 38-2030392-001
a	Plan name	RS PROD TEST 12/19 FFS NONNY	
b	Name of plan sponsor	RS PROD TEST 12/19 FFS NONNY	c EIN-PN 31-1459999-001
a	Plan name	RS PROD TEST 12/6	
b	Name of plan sponsor	RS PROD TEST 12/6	c EIN-PN 99-9991199-001
a	Plan name	RS PROD TEST 12/8 NONNY FFS	
b	Name of plan sponsor	RS PROD TEST 12/8 NONNY FFS	c EIN-PN 99-9799999-001
a	Plan name	RS PROD TEST 5/29 4	
b	Name of plan sponsor	RS PROD TEST 5/29 4	c EIN-PN 22-2437399-001
a	Plan name	RS PROD TEST 5/30	
b	Name of plan sponsor	RS PROD TEST 5/30	c EIN-PN 94-2264775-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RS PROD TEST 6/19	
b	Name of plan sponsor	RS PROD TEST 6/19	c EIN-PN 99-9998864-001
a	Plan name	RS PROD TEST 7/31 TEST	
b	Name of plan sponsor	RS PROD TEST 7/31 TEST	c EIN-PN 47-3919706-001
a	Plan name	RS PROD TEST 8/6	
b	Name of plan sponsor	RS PROD TEST 8/6	c EIN-PN 93-0755313-001
a	Plan name	RS PROD TEST 9/25 TEST TEST	
b	Name of plan sponsor	RS PROD TEST 9/25 TEST TEST	c EIN-PN 99-9797876-001
a	Plan name	RS PROD TEST 9/4 TEST	
b	Name of plan sponsor	RS PROD TEST 9/4 TEST	c EIN-PN 27-4635576-001
a	Plan name	RS PROD TEST NY 9/25 PLAN # TEST	
b	Name of plan sponsor	RS PROD TEST NY 9/25 PLAN # TEST	c EIN-PN 99-9979678-001
a	Plan name	RS PROD TEST PLAN 5/22 TRANSFER NONNY	
b	Name of plan sponsor	RS PROD TEST PLAN 5/22 TRANSFER NONNY	c EIN-PN 77-0284133-001
a	Plan name	RS PROD TEST PLAN 6/18	
b	Name of plan sponsor	RS PROD TEST PLAN 6/18	c EIN-PN 99-9898988-001
a	Plan name	RS PROD TEST PLAN SAP TEST 5/23 2	
b	Name of plan sponsor	RS PROD TEST PLAN SAP TEST 5/23 2	c EIN-PN 99-9988555-001
a	Plan name	RS PROD TEST SAP NY	
b	Name of plan sponsor	RS PROD TEST SAP NY	c EIN-PN 31-0996865-001
a	Plan name	RS PROD TEST SAP NY 2	
b	Name of plan sponsor	RS PROD TEST SAP NY 2	c EIN-PN 59-1427677-001
a	Plan name	RS PRODUCTION TEST 7/24	
b	Name of plan sponsor	RS PRODUCTION TEST 7/24	c EIN-PN 99-9898988-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	RS TEST 5/22 TRANSFER NY	
b	Name of plan sponsor	RS TEST 5/22 TRANSFER NY	c EIN-PN 99-9994400-001
a	Plan name	RS TEST PLAN 5/13 TRANSFER PLAN	
b	Name of plan sponsor	RS TEST PLAN 5/13 TRANSFER PLAN	c EIN-PN 94-2593611-001
a	Plan name	RS TEST PLAN 5/16 NH STARTUP	
b	Name of plan sponsor	RS TEST PLAN 5/16 NH STARTUP	c EIN-PN 42-7262620-001
a	Plan name	RS TEST PLAN 5/16 NY TRANSFER	
b	Name of plan sponsor	RS TEST PLAN 5/16 NY TRANSFER	c EIN-PN 99-9898989-001
a	Plan name	RS TEST PROD PLAN 5/14	
b	Name of plan sponsor	RS TEST PROD PLAN 5/14	c EIN-PN 91-0927987-001
a	Plan name	RTC SOUTHERN NEVADA 457(B) PLAN	
b	Name of plan sponsor	RTC SOUTHERN NEVADA 457(B) PLAN	c EIN-PN 90-0036752-001
a	Plan name	S.O.S. STEEL COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	S.O.S. STEEL COMPANY, INC. 401(K) PLAN	c EIN-PN 77-0100526-001
a	Plan name	SACRED ARMS 401K PROFIT SHARING	
b	Name of plan sponsor	SACRED ARMS 401K PROFIT SHARING	c EIN-PN 34-1955908-001
a	Plan name	SADDLE RIVER MEDICAL GROUP LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SADDLE RIVER MEDICAL GROUP LLC 401(K) PROFIT SHARING PL	c EIN-PN 47-5249441-001
a	Plan name	SADDLERIDGE SOLUTIONS LLC, 401K PLAN	
b	Name of plan sponsor	SADDLERIDGE SOLUTIONS LLC, 401K PLAN	c EIN-PN 85-3817919-001
a	Plan name	SAFETIVA LABS 401(K) PLAN	
b	Name of plan sponsor	SAFETIVA LABS 401(K) PLAN	c EIN-PN 85-2250327-001
a	Plan name	SAGE DENTAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SAGE DENTAL 401(K) PROFIT SHARING PLAN	c EIN-PN 20-5104456-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SAKR DENTAL ARTS INC.	
b	Name of plan sponsor	SAKR DENTAL ARTS INC.	c EIN-PN 59-3501477-001
a	Plan name	SALARIED EMPLOYEES' 401(K) RETIREMENT PLAN OF MONTEFIORE CEMETERY CORPORATION	
b	Name of plan sponsor	SALARIED EMPLOYEES 401(K) RETIREMENT PLAN OF MONTEFIOR	c EIN-PN 13-1057890-001
a	Plan name	SALARIED EMPLOYEES' 401(K) RETIREMENT PLAN OF SPRINGFIELD L.I. CEMETERY SOCIETY	
b	Name of plan sponsor	SALARIED EMPLOYEES 401(K) RETIREMENT PLAN OF SPRINGFIE	c EIN-PN 13-1335655-001
a	Plan name	SALLY BEAUTY 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	SALLY BEAUTY 401(K) AND PROFIT SHARING PLAN	c EIN-PN 66-0492477-001
a	Plan name	SAMPLE	
b	Name of plan sponsor	SAMPLE	c EIN-PN 58-0521233-001
a	Plan name	SAMPLE	
b	Name of plan sponsor	SAMPLE	c EIN-PN 99-9991115-001
a	Plan name	SAMPLE 007 401K PLAN	
b	Name of plan sponsor	SAMPLE 007 401K PLAN	c EIN-PN 99-9990006-001
a	Plan name	SAMPLE 401K PLAN	
b	Name of plan sponsor	SAMPLE 401K PLAN	c EIN-PN 99-9990011-001
a	Plan name	SAMPLE ABC CORP	
b	Name of plan sponsor	SAMPLE ABC CORP	c EIN-PN 13-3484990-001
a	Plan name	SAMPLE CUSTOM INSULATION COMPANY, INC 401(K) PLAN	
b	Name of plan sponsor	SAMPLE CUSTOM INSULATION COMPANY, INC 401(K) PLAN	c EIN-PN 04-2994918-001
a	Plan name	SAMPLE SAVINGS PLUS	
b	Name of plan sponsor	SAMPLE SAVINGS PLUS	c EIN-PN 99-8990012-001
a	Plan name	SAMPLE STARTUP 401(K) PLAN	
b	Name of plan sponsor	SAMPLE STARTUP 401(K) PLAN	c EIN-PN 99-9990008-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SAN JUAN MEDICAL GROUP, P.C. 401(K) PLAN	
b	Name of plan sponsor	SAN JUAN MEDICAL GROUP, P.C. 401(K) PLAN	c EIN-PN 85-0438294-001
a	Plan name	SAULIUS J. SKEIVYS MD PC 401(K) PLAN	
b	Name of plan sponsor	SAULIUS J. SKEIVYS MD PC 401(K) PLAN	c EIN-PN 38-4084387-001
a	Plan name	SCHAWK 401(K) PLAN	
b	Name of plan sponsor	SCHAWK 401(K) PLAN	c EIN-PN 13-4006999-001
a	Plan name	SCHAWK UNION 401(K) PLAN	
b	Name of plan sponsor	SCHAWK UNION 401(K) PLAN	c EIN-PN 13-4006999-001
a	Plan name	SCHEIMPFLUG PHOTO EQUIPMENT CO. 401(K)PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHEIMPFLUG PHOTO EQUIPMENT CO. 401(K)PROFIT SHARING PL	c EIN-PN 20-1561809-001
a	Plan name	SCHWIEGER HOGS LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHWIEGER HOGS LLP 401(K) PROFIT SHARING PLAN	c EIN-PN 46-3125449-001
a	Plan name	SD ELECTRICAL CONTRACTING 401K PLAN	
b	Name of plan sponsor	SD ELECTRICAL CONTRACTING 401K PLAN	c EIN-PN 46-2043751-001
a	Plan name	SEALED INC. 401(K) PLAN	
b	Name of plan sponsor	SEALED INC. 401(K) PLAN	c EIN-PN 45-3478769-001
a	Plan name	SEASIDE HELICOPTERS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEASIDE HELICOPTERS, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 93-2429819-001
a	Plan name	SEFTEL PRODUCTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEFTEL PRODUCTIONS, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 27-0705435-001
a	Plan name	SEGUE HEALTH MANAGEMENT CORP 401(K) PLAN	
b	Name of plan sponsor	SEGUE HEALTH MANAGEMENT CORP 401(K) PLAN	c EIN-PN 37-1870580-001
a	Plan name	SEMPER PIE 401(K) PLAN	
b	Name of plan sponsor	SEMPER PIE 401(K) PLAN	c EIN-PN 47-5340602-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SERENITY LIVING CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	SERENITY LIVING CENTER, INC. 401(K) PLAN	c EIN-PN 46-1128000-001
a	Plan name	SERVICE IDEAS, INC. 401(K) PLAN	
b	Name of plan sponsor	SERVICE IDEAS, INC. 401(K) PLAN	c EIN-PN 41-0686037-001
a	Plan name	SEVREND CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEVREND CORPORATION 401(K) PROFIT SHARING PLAN	c EIN-PN 43-1786523-001
a	Plan name	SHEBAZ, INC. 401(K) PLAN	
b	Name of plan sponsor	SHEBAZ, INC. 401(K) PLAN	c EIN-PN 46-2131942-001
a	Plan name	SHEET METAL WORKERS LOCAL UNION NO. 12 ANNUITY FUND	
b	Name of plan sponsor	SHEET METAL WORKERS LOCAL UNION NO. 12 ANNUITY FUND	c EIN-PN 25-1478389-001
a	Plan name	SHREWSBURY PEDIATRIC DENTISTRY LLC 401K	
b	Name of plan sponsor	SHREWSBURY PEDIATRIC DENTISTRY LLC 401K	c EIN-PN 46-0897425-001
a	Plan name	SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT SHARING PLAN PETERSON MEDICAL ASSOCIATION	
b	Name of plan sponsor	SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT	c EIN-PN 27-2184637-001
a	Plan name	SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT SHARING PLAN SID PETERS	
b	Name of plan sponsor	SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT	c EIN-PN 74-2557820-001
a	Plan name	SIGNATURE TITLE PROFESSIONALS 401(K) PLAN	
b	Name of plan sponsor	SIGNATURE TITLE PROFESSIONALS 401(K) PLAN	c EIN-PN 14-4705865-001
a	Plan name	SILVER STATE MASONRY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SILVER STATE MASONRY 401(K) RETIREMENT PLAN	c EIN-PN 88-0203855-001
a	Plan name	SMA CPA 401(K) PLAN	
b	Name of plan sponsor	SMA CPA 401(K) PLAN	c EIN-PN 87-3523115-001
a	Plan name	SMALL LAW FIRM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SMALL LAW FIRM 401(K) PROFIT SHARING PLAN	c EIN-PN 13-1057890-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SO MARYLAND ELECTRIC COOP INC	
b	Name of plan sponsor SO MARYLAND ELECTRIC COOP INC	c EIN-PN 52-0492367-001
a	Plan name SO MARYLAND ELECTRIC COOP INC 02	
b	Name of plan sponsor SO MARYLAND ELECTRIC COOP INC 02	c EIN-PN 52-0492367-001
a	Plan name SOCKEYE MEDIA 401(K) PLAN	
b	Name of plan sponsor SOCKEYE MEDIA 401(K) PLAN	c EIN-PN 02-0573957-001
a	Plan name SODERHOLM AND ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SODERHOLM AND ASSOCIATES, INC. 401(K) PROFIT SHARING PL	c EIN-PN 41-0836048-001
a	Plan name SOMA 401(K) PLAN	
b	Name of plan sponsor SOMA 401(K) PLAN	c EIN-PN 83-3318326-001
a	Plan name SOMERSET SMILES 401(K) PLAN	
b	Name of plan sponsor SOMERSET SMILES 401(K) PLAN	c EIN-PN 85-3619444-001
a	Plan name SORBOTICS 401(K) PLAN	
b	Name of plan sponsor SORBOTICS 401(K) PLAN	c EIN-PN 82-1465899-001
a	Plan name SOURCE ONE PACKAGING LLC 401(K) PLAN	
b	Name of plan sponsor SOURCE ONE PACKAGING LLC 401(K) PLAN	c EIN-PN 11-3499584-001
a	Plan name SOUTH BAY WORKFORCE INVESTMENT BOARD, INC. 401(K) PLAN	
b	Name of plan sponsor SOUTH BAY WORKFORCE INVESTMENT BOARD, INC. 401(K) PLAN	c EIN-PN 01-0611872-001
a	Plan name SOUTHERN FOREST PRODUCTS ASSOCIATION EMPLOYEES SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor SOUTHERN FOREST PRODUCTS ASSOCIATION EMPLOYEES SAVINGS	c EIN-PN 72-0322750-001
a	Plan name SOUTHWEST PRECISION 401(K) PLAN	
b	Name of plan sponsor SOUTHWEST PRECISION 401(K) PLAN	c EIN-PN 42-1505417-001
a	Plan name SPIRE HOSPITALITY, LLC 401(K) PLAN	
b	Name of plan sponsor SPIRE HOSPITALITY, LLC 401(K) PLAN	c EIN-PN 36-3087906-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	SPOK HOLDINGS, INC. SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	SPOK HOLDINGS, INC. SAVINGS AND RETIREMENT PLAN	c EIN-PN 16-1694797-001
a	Plan name	SPONSOR ID TEST 7.24MIMU	
b	Name of plan sponsor	SPONSOR ID TEST 7.24MIMU	c EIN-PN 11-1111155-001
a	Plan name	SPRUCE 401K PLAN	
b	Name of plan sponsor	SPRUCE 401K PLAN	c EIN-PN 46-5413004-001
a	Plan name	SPUD SOFTWARE 401(K) PLAN	
b	Name of plan sponsor	SPUD SOFTWARE 401(K) PLAN	c EIN-PN 38-3344039-001
a	Plan name	SQUILLACE AND ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SQUILLACE AND ASSOCIATES, P.C. 401(K) PROFIT SHARING PL	c EIN-PN 20-8557934-001
a	Plan name	ST. JOHN OF GOD 401(K) PLAN	
b	Name of plan sponsor	ST. JOHN OF GOD 401(K) PLAN	c EIN-PN 22-6088881-001
a	Plan name	ST. JOSEPH THE WORKER 401(K) PLAN	
b	Name of plan sponsor	ST. JOSEPH THE WORKER 401(K) PLAN	c EIN-PN 86-0600437-001
a	Plan name	STANTON AUTOMATICS, INC. 401(K) PLAN	
b	Name of plan sponsor	STANTON AUTOMATICS, INC. 401(K) PLAN	c EIN-PN 16-1250247-001
a	Plan name	STARTUP 401K	
b	Name of plan sponsor	STARTUP 401K	c EIN-PN 99-9990009-001
a	Plan name	STEET TOYOTA, INC 401(K) PLAN	
b	Name of plan sponsor	STEET TOYOTA, INC 401(K) PLAN	c EIN-PN 16-1468681-001
a	Plan name	STEVEN PHILLIPS M.D., P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STEVEN PHILLIPS M.D., P.C. 401(K) PROFIT SHARING PLAN	c EIN-PN 20-0119118-001
a	Plan name	STEWART STAINLESS SUPPLY, INC. 401 (K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STEWART STAINLESS SUPPLY, INC. 401 (K) PROFIT SHARING P	c EIN-PN 58-1497878-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name STONE MANUFACTURING AND SUPPLY CO., INC. EMPLOYEES 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor STONE MANUFACTURING AND SUPPLY CO., INC. EMPLOYEES 401(c EIN-PN 43-1470003-001
a	Plan name STUART L. DAITCH, DMD, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STUART L. DAITCH, DMD, P.C. 401(K) PROFIT SHARING PLAN	c EIN-PN 13-3675213-001
a	Plan name SUNCOAST ELEVATOR 401(K) PLAN	
b	Name of plan sponsor SUNCOAST ELEVATOR 401(K) PLAN	c EIN-PN 45-3862137-001
a	Plan name SUNCOAST ELEVATOR 401K PLAN	
b	Name of plan sponsor SUNCOAST ELEVATOR 401K PLAN	c EIN-PN 45-3862137-001
a	Plan name SUNCOAST HEALTH PARTNERS 401(K) PLAN	
b	Name of plan sponsor SUNCOAST HEALTH PARTNERS 401(K) PLAN	c EIN-PN 88-3948133-001
a	Plan name SUNDOWN WINDOW TINT, INC. 401(K) PLAN	
b	Name of plan sponsor SUNDOWN WINDOW TINT, INC. 401(K) PLAN	c EIN-PN 87-3935800-001
a	Plan name SUNDOWN WINDOW TINTING 401(K) PLAN	
b	Name of plan sponsor SUNDOWN WINDOW TINTING 401(K) PLAN	c EIN-PN 87-3935800-001
a	Plan name SUNMAID GROWERS DISTILLERY WORKERS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUNMAID GROWERS DISTILLERY WORKERS RETIREMENT SAVINGS P	c EIN-PN 94-0908760-001
a	Plan name SUNMAID GROWERS OF CALIFORNIA	
b	Name of plan sponsor SUNMAID GROWERS OF CALIFORNIA	c EIN-PN 94-3196145-001
a	Plan name SURGICAL SPECIALISTS OF GREATER NEW YORK LLC 401(K) PLAN	
b	Name of plan sponsor SURGICAL SPECIALISTS OF GREATER NEW YORK LLC 401(K) PLA	c EIN-PN 27-4695026-001
a	Plan name SUSSEX IM 401(K) PLAN	
b	Name of plan sponsor SUSSEX IM 401(K) PLAN	c EIN-PN 90-0508625-001
a	Plan name SUSTAIN SEED AND SOIL 401(K) PLAN	
b	Name of plan sponsor SUSTAIN SEED AND SOIL 401(K) PLAN	c EIN-PN 46-2627328-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	SWEET REWARDS RETIREMENT PLAN	
b	Name of plan sponsor	SWEET REWARDS RETIREMENT PLAN	c EIN-PN 22-1812634-001
a	Plan name	SWISSCO, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SWISSCO, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 13-3953843-001
a	Plan name	SYSTEMS TECHNOLOGY, INC. 401(K) EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	SYSTEMS TECHNOLOGY, INC. 401(K) EMPLOYEE STOCK OWNERSHI	c EIN-PN 95-1957989-001
a	Plan name	T.A. PELSUE COMPANY 401(K) SAVINGS PLAN	
b	Name of plan sponsor	T.A. PELSUE COMPANY 401(K) SAVINGS PLAN	c EIN-PN 84-0575187-001
a	Plan name	TANGRAM INTERIORS EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	TANGRAM INTERIORS EMPLOYEES RETIREMENT PLAN	c EIN-PN 37-1428740-001
a	Plan name	TAXFAVORED SAVINGS PROGRAM	
b	Name of plan sponsor	TAXFAVORED SAVINGS PROGRAM	c EIN-PN 47-0095156-001
a	Plan name	TCA 401(K) PLAN	
b	Name of plan sponsor	TCA 401(K) PLAN	c EIN-PN 74-2885694-001
a	Plan name	TECHDATA SERVICE COMPANY 401(K) PLAN	
b	Name of plan sponsor	TECHDATA SERVICE COMPANY 401(K) PLAN	c EIN-PN 23-3064123-001
a	Plan name	TERRA INNOVATIONS 401(K) PLAN	
b	Name of plan sponsor	TERRA INNOVATIONS 401(K) PLAN	c EIN-PN 26-1697841-001
a	Plan name	TEST 7.24 NY PRODMIMU	
b	Name of plan sponsor	TEST 7.24 NY PRODMIMU	c EIN-PN 11-1111158-001
a	Plan name	TEST 9.10 TRANSFER MIMU	
b	Name of plan sponsor	TEST 9.10 TRANSFER MIMU	c EIN-PN 11-1111168-001
a	Plan name	TEST PEGA PLAN MIMU NON NY TRANSFER	
b	Name of plan sponsor	TEST PEGA PLAN MIMU NON NY TRANSFER	c EIN-PN 11-1111170-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name TEST PLAN 1.12 MIMU TRANSFER	
b	Name of plan sponsor TEST PLAN 1.12 MIMU TRANSFER	c EIN-PN 11-1111192-001
a	Plan name TEST PLAN 112 MIMU STARTUP PLAN	
b	Name of plan sponsor TEST PLAN 112 MIMU STARTUP PLAN	c EIN-PN 11-1111191-001
a	Plan name TEST PROD API 1.18.25 MIMU	
b	Name of plan sponsor TEST PROD API 1.18.25 MIMU	c EIN-PN 11-1111192-001
a	Plan name TEST PROD PLANVESTING MIMU 6.26	
b	Name of plan sponsor TEST PROD PLANVESTING MIMU 6.26	c EIN-PN 11-1111122-001
a	Plan name TEST READY SELECT 6.26 RELEASE TESTING MIMU	
b	Name of plan sponsor TEST READY SELECT 6.26 RELEASE TESTING MIMU	c EIN-PN 41-1976680-001
a	Plan name TEST SAFE HARBOR READY SELECT MIMU 6.26	
b	Name of plan sponsor TEST SAFE HARBOR READY SELECT MIMU 6.26	c EIN-PN 56-4512121-001
a	Plan name TEST SCENARIO 4	
b	Name of plan sponsor TEST SCENARIO 4	c EIN-PN 99-9848999-001
a	Plan name TESTAWSPRODTEST226/01	
b	Name of plan sponsor TESTAWSPRODTEST226/01	c EIN-PN 12-3456781-001
a	Plan name TESTING 10/16 INSTALL 3	
b	Name of plan sponsor TESTING 10/16 INSTALL 3	c EIN-PN 12-3456781-001
a	Plan name TESTING AIS READY SELECT 7.17 MIMU NON NY	
b	Name of plan sponsor TESTING AIS READY SELECT 7.17 MIMU NON NY	c EIN-PN 11-1111152-001
a	Plan name TESTING PIXS2 1/24	
b	Name of plan sponsor TESTING PIXS2 1/24	c EIN-PN 12-3456781-001
a	Plan name TEXAS DENTAL ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor TEXAS DENTAL ASSOCIATION 401(K) PLAN	c EIN-PN 75-0608460-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE APMP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	THE APMP RETIREMENT SAVINGS PLAN	c EIN-PN 87-0469987-001
a	Plan name	THE AUTOMATED BUILDING SYSTEMS, INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	THE AUTOMATED BUILDING SYSTEMS, INC. PROFIT SHARING AND	c EIN-PN 06-1173852-001
a	Plan name	THE BARNS 401(K) PLAN SAMPLE	
b	Name of plan sponsor	THE BARNS 401(K) PLAN SAMPLE	c EIN-PN 99-9990007-001
a	Plan name	THE BARRY FOUNDATION 401(K) PLAN	
b	Name of plan sponsor	THE BARRY FOUNDATION 401(K) PLAN	c EIN-PN 20-5767275-001
a	Plan name	THE FIFTH THIRD BANCORP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	THE FIFTH THIRD BANCORP 401(K) SAVINGS PLAN	c EIN-PN 31-0854434-001
a	Plan name	THE FIFTH THIRD BANCORP FROZEN SUCCESSOR PLAN	
b	Name of plan sponsor	THE FIFTH THIRD BANCORP FROZEN SUCCESSOR PLAN	c EIN-PN 31-0854434-001
a	Plan name	THE FINAL COUNTDOWN 401K	
b	Name of plan sponsor	THE FINAL COUNTDOWN 401K	c EIN-PN 90-2333333-001
a	Plan name	THE LINDSEY FIRM 401(K) PLAN	
b	Name of plan sponsor	THE LINDSEY FIRM 401(K) PLAN	c EIN-PN 58-2585458-001
a	Plan name	THE NEW YORK BUTCHER SHOPPE 401(K) PLAN	
b	Name of plan sponsor	THE NEW YORK BUTCHER SHOPPE 401(K) PLAN	c EIN-PN 88-0568029-001
a	Plan name	THE ROOMPLACE PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor	THE ROOMPLACE PROFIT SHARING AND SAVINGS PLAN	c EIN-PN 45-3745864-001
a	Plan name	THE ROSENBLUM LAW FIRM, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE ROSENBLUM LAW FIRM, P.C. 401(K) PROFIT SHARING PLAN	c EIN-PN 26-3348718-001
a	Plan name	THE ROTH LAW FIRM PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE ROTH LAW FIRM PLLC 401(K) PROFIT SHARING PLAN	c EIN-PN 33-1044281-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE WELD TRUST 401(K) PLAN	
b	Name of plan sponsor	THE WELD TRUST 401(K) PLAN	c EIN-PN 74-2358522-001
a	Plan name	THREDPARTNERS 401(K) PLAN	
b	Name of plan sponsor	THREDPARTNERS 401(K) PLAN	c EIN-PN 20-3891107-001
a	Plan name	TOTAL MARKETING ASSOCIATES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TOTAL MARKETING ASSOCIATES, INC. RETIREMENT SAVINGS PLA	c EIN-PN 36-3101638-001
a	Plan name	TPN HOLDINGS LLC 401(K) PLAN	
b	Name of plan sponsor	TPN HOLDINGS LLC 401(K) PLAN	c EIN-PN 45-3826910-001
a	Plan name	TRICAL GROUP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	TRICAL GROUP 401(K) SAVINGS PLAN	c EIN-PN 83-3977647-001
a	Plan name	TROUGAL LLC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	TROUGAL LLC 401K PROFIT SHARING PLAN	c EIN-PN 87-1855636-001
a	Plan name	TRUSTED TRANSPORTATION SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	TRUSTED TRANSPORTATION SOLUTIONS 401(K) PLAN	c EIN-PN 20-3247293-001
a	Plan name	TUDOR INVESTMENT CORP 401(K) SAVINGS AND PROFITSHARING PLAN	
b	Name of plan sponsor	TUDOR INVESTMENT CORP 401(K) SAVINGS AND PROFITSHARING	c EIN-PN 22-2514825-001
a	Plan name	TUFIN SOFTWARE NORTH AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor	TUFIN SOFTWARE NORTH AMERICA, INC. 401(K) PLAN	c EIN-PN 26-2112841-001
a	Plan name	TUSCAN BRANDS, LLC 401(K) PLAN	
b	Name of plan sponsor	TUSCAN BRANDS, LLC 401(K) PLAN	c EIN-PN 46-0637989-001
a	Plan name	UNITY BANK EMPLOYEES' SAVINGS AND PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	UNITY BANK EMPLOYEES SAVINGS AND PROFIT SHARING PLAN A	c EIN-PN 22-3110915-001
a	Plan name	UPPERCUT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	UPPERCUT 401(K) PROFIT SHARING PLAN	c EIN-PN 36-4725558-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	URBAN SCIENCE APPLICATIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	URBAN SCIENCE APPLICATIONS, INC. 401(K) PROFIT SHARING	c EIN-PN 38-2134622-001
a	Plan name	USA RICE FEDERATION 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor	USA RICE FEDERATION 401(K)/PROFIT SHARING PLAN	c EIN-PN 54-1727616-001
a	Plan name	UTAH VALLEY DENTAL 401(K)	
b	Name of plan sponsor	UTAH VALLEY DENTAL 401(K)	c EIN-PN 27-5027918-001
a	Plan name	VALENTIN AND KALICH JEWELRY MFG LTD 401 (K) PLAN	
b	Name of plan sponsor	VALENTIN AND KALICH JEWELRY MFG LTD 401 (K) PLAN	c EIN-PN 13-2950583-001
a	Plan name	VANGOLD INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor	VANGOLD INDUSTRIES 401(K) PLAN	c EIN-PN 84-1895554-001
a	Plan name	VANGUARD IDENTIFICATION SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	VANGUARD IDENTIFICATION SYSTEMS, INC. 401(K) PLAN	c EIN-PN 33-2086865-001
a	Plan name	VANGUARD IDENTIFICATION SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	VANGUARD IDENTIFICATION SYSTEMS, INC. 401(K) PLAN	c EIN-PN 23-2851464-001
a	Plan name	VECTOR LABORATORIES 401(K) PLAN	
b	Name of plan sponsor	VECTOR LABORATORIES 401(K) PLAN	c EIN-PN 94-2519610-001
a	Plan name	VIEJAS RETIREMENT PROGRAM	
b	Name of plan sponsor	VIEJAS RETIREMENT PROGRAM	c EIN-PN 33-0409825-001
a	Plan name	VIRGINIA WATERS AND WETLANDS, INC. RATE GROUP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	VIRGINIA WATERS AND WETLANDS, INC. RATE GROUP 401(K) PR	c EIN-PN 82-0538788-001
a	Plan name	VITAL AIR SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	VITAL AIR SYSTEMS 401(K) PLAN	c EIN-PN 92-2621269-001
a	Plan name	VOLT MASTER ELECTRIC 401(K) PLAN	
b	Name of plan sponsor	VOLT MASTER ELECTRIC 401(K) PLAN	c EIN-PN 76-0325562-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name VS ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor VS ENGINEERING, INC. 401(K) PLAN	c EIN-PN 35-1494479-001
a	Plan name W.K.W. CONSTRUCTION, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor W.K.W. CONSTRUCTION, LLC 401(K) PROFIT SHARING PLAN	c EIN-PN 54-1921743-001
a	Plan name WAMIC 401(K) PLAN	
b	Name of plan sponsor WAMIC 401(K) PLAN	c EIN-PN 39-1140747-001
a	Plan name WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SHARING PLAN FIRST CHICAGO INSURANCE COMPANY	
b	Name of plan sponsor WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SH	c EIN-PN 36-0901240-001
a	Plan name WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SHARING PLAN PREFERRED RISK INSURANCE SERVI	
b	Name of plan sponsor WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SH	c EIN-PN 36-4407378-001
a	Plan name WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SHARING PLAN WARRIOR INVICTUS HOLDING COMPANY	
b	Name of plan sponsor WARRIOR INVICTUS HOLDING COMPANY, INC. 401(K) PROFIT SH	c EIN-PN 36-4407380-001
a	Plan name WATSON AND MACHADO, LLP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor WATSON AND MACHADO, LLP 401(K) PROFIT SHARING PLAN AND	c EIN-PN 94-1176937-001
a	Plan name WAUNAKEE VETERINARY SERVICES, S.C. 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor WAUNAKEE VETERINARY SERVICES, S.C. 401(K) SAFE HARBOR P	c EIN-PN 39-1186036-001
a	Plan name WDS AND BOFS 401(K) PLAN	
b	Name of plan sponsor WDS AND BOFS 401(K) PLAN	c EIN-PN 84-3409571-001
a	Plan name WEALTHNEST PLANNERS 401(K) PLAN	
b	Name of plan sponsor WEALTHNEST PLANNERS 401(K) PLAN	c EIN-PN 26-3868233-001
a	Plan name WELD TOOLING CORPORATION SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor WELD TOOLING CORPORATION SAVINGS AND RETIREMENT PLAN	c EIN-PN 25-0938384-001
a	Plan name WELL PHARMA MEDICAL RESEARCH CORP. 401(K) PLAN	
b	Name of plan sponsor WELL PHARMA MEDICAL RESEARCH CORP. 401(K) PLAN	c EIN-PN 20-8725496-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name WESTERN INDUSTRIAL RESOURCES CORP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WESTERN INDUSTRIAL RESOURCES CORP RETIREMENT SAVINGS PL	c EIN-PN 86-1007205-001
a	Plan name WHITEHARDT 401(K) PLAN	
b	Name of plan sponsor WHITEHARDT 401(K) PLAN	c EIN-PN 02-0631016-001
a	Plan name WICHITA COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor WICHITA COUNTRY CLUB 401(K) PLAN	c EIN-PN 48-0477370-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN ATLANTIC LIFT TRUCK, INC.	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN ATLANTIC LIFT TRUC	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN DIRECT CONNEX, LLC	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN DIRECT CONNEX, LLC	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN HUBNETIC	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN HUBNETIC	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN JR AUTOMATION, INC.	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN JR AUTOMATION, INC	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN MATERIALS MANAGEMENT COMPANY, INC.	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN MATERIALS MANAGEME	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN MINNESOTA SUPPLY CO.	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN MINNESOTA SUPPLY C	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN UNION 777	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN UNION 777	c EIN-PN 43-0633084-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN UNION LOCAL NO. 618	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN UNION LOCAL NO. 61	c EIN-PN 43-1904788-001
a	Plan name WIESE PROFIT SHARING AND 401(K) PLAN WIESE USA, INC.	
b	Name of plan sponsor WIESE PROFIT SHARING AND 401(K) PLAN WIESE USA, INC.	c EIN-PN 43-0633084-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name WIESE RETIREMENT PLAN FOR CERTAIN UNION EMPLOYEES	
b	Name of plan sponsor WIESE RETIREMENT PLAN FOR CERTAIN UNION EMPLOYEES	c EIN-PN 43-0633084-001
a	Plan name WILKINS SERVICES L.L.C. 401(K) PLAN	
b	Name of plan sponsor WILKINS SERVICES L.L.C. 401(K) PLAN	c EIN-PN 82-4482512-001
a	Plan name WILLOUGHBY REHABILITATION AND HEALTHCARE CENTER 401K PSP	
b	Name of plan sponsor WILLOUGHBY REHABILITATION AND HEALTHCARE CENTER 401K PS	c EIN-PN 11-3597679-001
a	Plan name WINEGAR INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor WINEGAR INC 401K PROFIT SHARING PLAN	c EIN-PN 41-1348098-001
a	Plan name WIRED UP ELECTRICAL, LLC 401(K) PLAN	
b	Name of plan sponsor WIRED UP ELECTRICAL, LLC 401(K) PLAN	c EIN-PN 45-2967111-001
a	Plan name WIRELESS EXPERIENCE GROUP INC. 401(K) PLAN	
b	Name of plan sponsor WIRELESS EXPERIENCE GROUP INC. 401(K) PLAN	c EIN-PN 45-4166124-001
a	Plan name WOLFFER ESTATE VINEYARD, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor WOLFFER ESTATE VINEYARD, INC. 401(K) SAVINGS PLAN	c EIN-PN 13-1057890-001
a	Plan name WOMEN'S HEALTH ADMIN. 401K PLAN	
b	Name of plan sponsor WOMENS HEALTH ADMIN. 401K PLAN	c EIN-PN 99-0302185-001
a	Plan name WOOD WORKS, LLC 401(K) PLAN	
b	Name of plan sponsor WOOD WORKS, LLC 401(K) PLAN	c EIN-PN 84-3763564-001
a	Plan name WOODMERE MEDICAL ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WOODMERE MEDICAL ASSOCIATES, P.C. 401(K) PROFIT SHARING	c EIN-PN 11-2626984-001
a	Plan name WOODRUFF SAWYER PEP BY CARLILE MACY, INC.	
b	Name of plan sponsor WOODRUFF SAWYER PEP BY CARLILE MACY, INC.	c EIN-PN 68-0130630-001
a	Plan name WOODRUFF SAWYER PEP BY EB INDUSTRIES, LLC	
b	Name of plan sponsor WOODRUFF SAWYER PEP BY EB INDUSTRIES, LLC	c EIN-PN 11-3445792-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name WOODRUFF SAWYER PEP BY SYSERCO, INC.	
b	Name of plan sponsor WOODRUFF SAWYER PEP BY SYSERCO, INC.	c EIN-PN 94-2209546-001
a	Plan name WOODRUFF SAWYER PEP, ADOPTED BY KHOSLA VENTURES, LLC	
b	Name of plan sponsor WOODRUFF SAWYER PEP, ADOPTED BY KHOSLA VENTURES, LLC	c EIN-PN 42-1468222-001
a	Plan name WWANDS CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor WWANDS CONSTRUCTION 401(K) PLAN	c EIN-PN 87-3984970-001
a	Plan name YAMATO TRANSPORT 401(K) PLAN	
b	Name of plan sponsor YAMATO TRANSPORT 401(K) PLAN	c EIN-PN 13-3019110-001
a	Plan name YES MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor YES MANAGEMENT, LLC 401(K) PLAN	c EIN-PN 26-1286379-001
a	Plan name YODER'S MEATS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor YODERS MEATS, INC. 401(K) PROFIT SHARING PLAN	c EIN-PN 23-1925665-001
a	Plan name YORK ENGINEERING 401K PLAN	
b	Name of plan sponsor YORK ENGINEERING 401K PLAN	c EIN-PN 46-4145121-001
a	Plan name YURIY VERPUKHOVSKIY, M.D., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor YURIY VERPUKHOVSKIY, M.D., INC. 401(K) PROFIT SHARING P	c EIN-PN 26-0360511-001
a	Plan name YURIY VERPUKHOVSKIY, M.D., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor YURIY VERPUKHOVSKIY, M.D., INC. 401(K) PROFIT SHARING P	c EIN-PN 26-0360511-001
a	Plan name ZIPP AND TANNENBAUM PROFIT SHARING PLAN	
b	Name of plan sponsor ZIPP AND TANNENBAUM PROFIT SHARING PLAN	c EIN-PN 22-3771630-001
a	Plan name ZONES, LLC 401(K) PLAN	
b	Name of plan sponsor ZONES, LLC 401(K) PLAN	c EIN-PN 91-1431894-001
a	Plan name ZUFFA LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ZUFFA LLC 401(K) PROFIT SHARING PLAN AND TRUST	c EIN-PN 88-0482750-001

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

a Plan name	RETIREMENT PLAN FOR EES OF SMECO	
b Name of plan sponsor	RETIREMENT PLAN FOR EES OF SMECO	c EIN-PN 52-0492367-001

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

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

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

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

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b Name of plan sponsor		c EIN-PN

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

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

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan AMERICAN CENTURY MID CAP VALUE FUND (IS PLATFORM) (SA4BV)	B Three-digit plan number (PN) ▶ 850
C Plan sponsor's name as shown on line 2a of Form 5500 EMPOWER ANNUITY INSURANCE COMPANY	D Employer Identification Number (EIN) 06-1050034

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

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	4188129
		766744
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	8296715
(2) U.S. Government securities	1c(2)	4090819
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	205804851
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	218289695	278197316
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	3529336	9930
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	3529336	9930
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	214760359	278187386

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	298890	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		298890
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	7083236	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		7083236
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	9710140	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	6513789	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		-105500
d Total income. Add all income amounts in column (b) and enter total	2d		23500555

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	6782	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	1192437	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	6979	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		1206198
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1206198

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		22294357
l Transfers of assets:			
(1) To this plan	2l(1)		184302879
(2) From this plan	2l(2)		143170209

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name:

(2) EIN:

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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