

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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.

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [] a single-employer plan [X] a DFE (specify) C
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. []
D Check box if filing under: [] Form 5558 [] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: INDEXSELECT CONSERVATIVE 2035 FUND
1b Three-digit plan number (PN): 312
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): GREAT GRAY TRUST COMPANY, LLC
2b Employer Identification Number (EIN): 81-4515825
2c Plan Sponsor's telephone number: 866-427-6885
2d Business code (see instructions)

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

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

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

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
A Name of plan <u>INDEXSELECT CONSERVATIVE 2035 FUND</u>	B Three-digit plan number (PN) ▶ <u>312</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	D Employer Identification Number (EIN) <u>81-4515825</u>

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COMMODITY INDEX DAILY FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4616854-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>DEVELOPED REAL ESTATE INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-2659367-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BR MSCI ACWI EX-US IMI INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4955447-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14361307</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL 1000 INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3357216-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>28668987</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>RUSSELL 2000 INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3318704-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>761504</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>U.S. TIPS FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>36-4495972-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GREAT GRAY TRUST STABLE VALUE FUND</u>		
b Name of sponsor of entity listed in (a): <u>GREAT GRAY TRUST COMPANY, LLC</u>		
c EIN-PN <u>38-4065313-339</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>38160963</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM CREDIT BOND INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 87-1467186-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4011299
a Name of MTIA, CCT, PSA, or 103-12 IE: LONG TERM GOVT BOND INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 83-3997809-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9384723
a Name of MTIA, CCT, PSA, or 103-12 IE: 0-5 YEAR U.S. TREASURY INFLATION PR		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 47-3988722-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6950057
a Name of MTIA, CCT, PSA, or 103-12 IE: ENHANCED ROLL YIELD INDEX FUND		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-3833244-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2252333
a Name of MTIA, CCT, PSA, or 103-12 IE: FTSE NAREIT ALL EQUITY REITS INDEX		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-3288435-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1844768
a Name of MTIA, CCT, PSA, or 103-12 IE: GLOBAL CORE INFRASTRUCTURE INDEX FU		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 99-2814912-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 858032
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 A & H ELECTRIC CO. 401(K) PLAN	
b	Name of plan sponsor A & H ELECTRIC CO., LLC	c EIN-PN 74-2053998-001
a	Plan name A & I FLOOR COVERING, INC 401K PLAN	
b	Name of plan sponsor A & I FLOOR COVERING INC	c EIN-PN 72-1528606-001
a	Plan name A360 INC. 401(K) PLAN	
b	Name of plan sponsor A360 INC.	c EIN-PN 81-4491906-001
a	Plan name AA TRANSPORTATION, INC. 401(K) PLAN	
b	Name of plan sponsor AA TRANSPORTATION, INC.	c EIN-PN 04-3323452-001
a	Plan name AAK LAW 401(K) PLAN	
b	Name of plan sponsor ANDERSON, AGOSTINO & KELLER, P.C.	c EIN-PN 35-2105523-002
a	Plan name AC FOODS WHOLESALE 401(K) PLAN	
b	Name of plan sponsor A.C. FAMILY, INC. DBA AC FOODS WHOLESALE	c EIN-PN 46-0494814-001
a	Plan name ACADIAN ARCHITECTURAL WOODWORK 401(K) PLAN	
b	Name of plan sponsor WYNDSTON MILLWORK LLC D/B/A ACADIAN ARCHITECTURAL WOODWORK	c EIN-PN 82-4897514-002
a	Plan name ACCURATE ANSWERING SERVICE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SIGNA MESSAGE CORP.	c EIN-PN 01-0772752-001
a	Plan name ACME TRUCK LINE 401(K) PLAN	
b	Name of plan sponsor ACME TRUCK LINE, INC.	c EIN-PN 72-0540787-001
a	Plan name ADAMS GROUP 401(K) PLAN & TRUST	
b	Name of plan sponsor ADAMS BROS. CABINETRY, INC. D/B/A ADAMS GROUP	c EIN-PN 59-2479450-001
a	Plan name ADVANCE PRINTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ADVANCE PRINTING, INC.	c EIN-PN 52-1167653-001
a	Plan name AFFILIATED DERMATOLOGY 401(K) PLAN	
b	Name of plan sponsor RICHARD LEE AVERITTE, JR., PLLC DBA AFFILIATED DERMATOLOGY	c EIN-PN 74-3037351-001

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	AFFORDABLE HOUSING NETWORK LLC DBA GOSECTION8.COM 401(K) PLAN	
b	Name of plan sponsor	AFFORDABLE HOUSING NETWORK, LLC DBA GOSECTION8.COM	c EIN-PN 20-1309425-001
a	Plan name	AIY PROPERTIES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	AIY PROPERTIES, INC.	c EIN-PN 26-0378911-001
a	Plan name	ALANIZ AND PEREZ GARAGE, INC. 401(K) PLAN	
b	Name of plan sponsor	ALANIZ AND PEREZ GARAGE, INC.	c EIN-PN 27-4358398-001
a	Plan name	ALASKA CENTRAL EXPRESS, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor	ALASKA CENTRAL EXPRESS, INC.	c EIN-PN 92-0133124-001
a	Plan name	ALBRIGHT WELDING SUPPLY CO. INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALBRIGHT WELDING SUPPLY CO. INC.	c EIN-PN 34-0691967-001
a	Plan name	ALLERGY ASSOCIATES HOLDINGS, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLERGY ASSOCIATES HOLDINGS, LTD.	c EIN-PN 39-1138480-003
a	Plan name	ALLERGY CLINIC OF TULSA 401(K) PLAN	
b	Name of plan sponsor	ALLERGY CLINIC OF TULSA, INC.	c EIN-PN 73-0803441-002
a	Plan name	ALLIED EXHAUST SYSTEMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLIED EXHAUST SYSTEMS, INC.	c EIN-PN 68-0136255-002
a	Plan name	ALLYN INTERNATIONAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	ALLYN INTERNATIONAL SERVICES, INC.	c EIN-PN 65-0313967-001
a	Plan name	ALTERNATIVE BUSINESS FURNITURE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALTERNATIVE BUSINESS FURNITURE, INC.	c EIN-PN 41-1752492-001
a	Plan name	AMERICAN VULKAN CORPORATION SAVINGS PLAN	
b	Name of plan sponsor	AMERICAN VULKAN CORPORATION	c EIN-PN 59-1372818-002
a	Plan name	ANESTHESIOLOGISTS ASSOC 401K PLAN	
b	Name of plan sponsor	ANESTHESIOLOGISTS ASSOCIATED,P.C.	c EIN-PN 63-0577011-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ANGELICA NURSERIES, INC. 401(K) PLAN	
b	Name of plan sponsor	ANGELICA NURSERIES, INC.	c EIN-PN 23-1809386-003
a	Plan name	APPLIED SOFTWARE TECHNOLOGY, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	APPLIED SOFTWARE TECHNOLOGY, LLC.	c EIN-PN 58-1484413-001
a	Plan name	ARCTIC ICE 401(K) PLAN	
b	Name of plan sponsor	ARCTIC ICE, INC.	c EIN-PN 43-0917192-001
a	Plan name	ARCXIS 401(K) PLAN	
b	Name of plan sponsor	DPIS ENGINEERING, LLC D/B/A ARCXIS	c EIN-PN 47-2374293-004
a	Plan name	ARMADA PARENT, INC. 401 (K) PLAN	
b	Name of plan sponsor	ARMADA PARENT, INC.	c EIN-PN 87-2821244-001
a	Plan name	ASCEND ELEMENTS, INC. 401(K) PLAN	
b	Name of plan sponsor	ASCEND ELEMENTS, INC.	c EIN-PN 82-2222893-001
a	Plan name	ASHBERRY ACQUISITION CO 401K PLAN	
b	Name of plan sponsor	ASHBERRY ACQUISITION COMPANY	c EIN-PN 58-2631904-001
a	Plan name	ASHCOMBE FARM AND GREENHOUSES 401(K) SAVINGS PLAN	
b	Name of plan sponsor	GRO-GREEN CORP T/A ASHCOMBE FARM & GREENHOUSES	c EIN-PN 23-2098159-001
a	Plan name	ASSOCIATED ELECTRO-MECHANICS, INC. RETIREMENT READINESS 401(K) PLAN	
b	Name of plan sponsor	ASSOCIATED ELECTRO-MECHANICS, INC.	c EIN-PN 04-2578755-001
a	Plan name	ASSOCIATED MASONRY PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor	ASSOCIATED MASONRY PRODUCTS, INC.	c EIN-PN 20-1174202-002
a	Plan name	ATLANTIC CORPORATE INTERIORS 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC CORPORATE INTERIORS, INC.	c EIN-PN 52-1857032-001
a	Plan name	AUCTOR CORPORATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor	AUCTOR CORPORATION	c EIN-PN 35-1828775-001

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	AUSTIN RIDGE BIBLE CHURCH 403(B) PLAN	
b	Name of plan sponsor	WESTLAKE BIBLE CHURCH, INC. DBA AUSTIN RIDGE BIBLE CHURCH	c EIN-PN 74-2132967-403
a	Plan name	AVID BIOSERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	AVID BIOSERVICES, INC.	c EIN-PN 95-3698422-001
a	Plan name	BARFIELD, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BARFIELD, INC.	c EIN-PN 59-0556588-001
a	Plan name	BARING INDUSTRIES, INC 401(K) PLAN	
b	Name of plan sponsor	BARING INDUSTRIES, INC	c EIN-PN 27-3265801-002
a	Plan name	BARTLETT, LOEB, HINDS & THOMPSON P.A	
b	Name of plan sponsor	BARTLETT, LOEB, HINDS, & THOMPSON P.A.	c EIN-PN 87-4186606-001
a	Plan name	BAY LINEN, INC. 401(K) PLAN	
b	Name of plan sponsor	BAY LINEN, INC.	c EIN-PN 59-3047014-001
a	Plan name	BAY SHORE DEVELOPMENT CORPORATION 401(K) PLAN	
b	Name of plan sponsor	BAY SHORE DEVELOPMENT CORPORATION	c EIN-PN 52-0695942-001
a	Plan name	BAY SURGICAL SPECIALISTS, P.A. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	BAY SURGICAL SPECIALISTS, P.A.	c EIN-PN 59-3159954-003
a	Plan name	BDG ARCHITECTS, LLP 401(K) PLAN	
b	Name of plan sponsor	BDG ARCHITECTS, LLP	c EIN-PN 59-3730398-001
a	Plan name	BELLEAIR COUNTRY CLUB 401K PLAN	
b	Name of plan sponsor	BELLEVIEW BILTMORE COUNTRY CLUB CORP.	c EIN-PN 25-1235483-001
a	Plan name	BENIACH CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BENIACH CONSTRUCTION COMPANY, INC.	c EIN-PN 37-1321233-001
a	Plan name	BFS SERVICES, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	BFS SERVICES, INC.	c EIN-PN 75-1567376-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	BLACKBIRD, L.L.C. 401(K) PLAN	
b	Name of plan sponsor	BLACKBIRD, LLC	c EIN-PN 46-3045676-001
a	Plan name	BLOOMFIELD COOLING, HEATING & ELECTRIC, INC. 401(K) PLAN	
b	Name of plan sponsor	BLOOMFIELD COOLING, HEATING & ELECTRIC, INC.	c EIN-PN 22-3137393-001
a	Plan name	BLUEGRASS INGREDIENTS, INC 401(K) PLAN	
b	Name of plan sponsor	BLUEGRASS INGREDIENTS INC	c EIN-PN 27-2854599-001
a	Plan name	BOETTCHER-HLAVINKA 401(K) PLAN	
b	Name of plan sponsor	BOETTCHER-HLAVINKA COMPANY	c EIN-PN 74-1505981-003
a	Plan name	BRANDON DERMATOLOGY, PA 401K PLAN	
b	Name of plan sponsor	BRANDON DERMATOLOGY, PA	c EIN-PN 05-0548764-001
a	Plan name	BRAZELTON LEASING INC. 401(K) PLAN	
b	Name of plan sponsor	BRAZELTON LEASING INC.	c EIN-PN 43-1964683-001
a	Plan name	BRIGHTPET 401(K) PLAN	
b	Name of plan sponsor	BRIGHTPET NUTRITION GROUP, LLC	c EIN-PN 81-2276321-001
a	Plan name	BRYAN PHARMACY 401(K) PLAN	
b	Name of plan sponsor	BRYAN PHARMACY, INC.	c EIN-PN 20-1693312-001
a	Plan name	BURNET HOSPICE CARE, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BURNET HOSPICE CARE, INC.	c EIN-PN 45-1783432-001
a	Plan name	C G TECH 401(K) PLAN	
b	Name of plan sponsor	C G TECH	c EIN-PN 33-0274436-001
a	Plan name	CABIN CREEK HEALTH SYSTEMS, INC., 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CABIN CREEK HEALTH SYSTEMS, INC.	c EIN-PN 55-0709223-001
a	Plan name	CALIFORNIA BANK OF COMMERCE, NA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CALIFORNIA BANK OF COMMERCE, N.A.	c EIN-PN 33-0956417-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CALIFORNIA VIBRATORY FEEDERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CALIFORNIA VIBRATORY FEEDERS, INC.	c EIN-PN 95-2793530-001
a	Plan name CALUMET TANK & EQUIPMENT CO., INC. 401(K) PLAN	
b	Name of plan sponsor CALUMET TANK & EQUIPMENT CO., INC.	c EIN-PN 36-3613757-001
a	Plan name CANYON CONSULTING 401(K) PLAN	
b	Name of plan sponsor CANYON CONSULTING	c EIN-PN 22-3943890-001
a	Plan name CAPITOL IMAGING, LLC RETIREMENT PLAN	
b	Name of plan sponsor CAPITOL IMAGING, LLC	c EIN-PN 47-4549323-001
a	Plan name CAREY COLOR, INC. EMPLOYEES PROFIT SHARING & 401(K) RETIREMENT PLAN	
b	Name of plan sponsor CAREY COLOR, INC.	c EIN-PN 31-1000581-001
a	Plan name CARL WALKER CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARL WALKER CONSTRUCTION	c EIN-PN 27-1071378-001
a	Plan name CARLISLE PRODUCTIONS RETIREMENT PLAN	
b	Name of plan sponsor CARLISLE PRODUCTIONS INC	c EIN-PN 25-1803776-001
a	Plan name CARLSON MEISSNER HART & HAYSLETT, PA 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CARLSON MEISSNER HART & HAYSLETT, PA	c EIN-PN 59-1547838-001
a	Plan name CASCADE FLOORING AMERICA 401(K) PLAN	
b	Name of plan sponsor CASCADE FLOORING AMERICA, LLC	c EIN-PN 54-2077601-001
a	Plan name CAVU INTERNATIONAL, LLC 401(K) PLAN	
b	Name of plan sponsor CHR MANAGEMENT, INC.	c EIN-PN 84-2192249-001
a	Plan name CERTIFIED ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CERTIFIED ENGINEERING, INC.	c EIN-PN 35-1667227-001
a	Plan name CHAMPIONS FOR CHILDREN 401K PLAN	
b	Name of plan sponsor CHAMPIONS FOR CHILDREN, INC.	c EIN-PN 59-1807551-001

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 CHEMGLASS 401(K) SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor CHEMGLASS, INC	c EIN-PN 21-0672397-001
a	Plan name CHOCTAW REGIONAL MEDICAL CENTER 457(B) PLAN	
b	Name of plan sponsor CHOCTAW REGIONAL MEDICAL CENTER	c EIN-PN 47-1298267-004
a	Plan name CHRISTIAN COUNTY DEVELOPMENT CORPORATION SAVINGS PLAN	
b	Name of plan sponsor CHRISTIAN COUNTY DEVELOPMENT CORPORATION	c EIN-PN 36-4548312-001
a	Plan name CINCINNATI CATHOLIC GROUP TRUST 401(K) PLAN	
b	Name of plan sponsor CINCINNATI CATHOLIC GROUP TRUST	c EIN-PN 92-6050273-001
a	Plan name CLARK & CO HOMES 401(K) PLAN	
b	Name of plan sponsor CLARK & CO. HOMES	c EIN-PN 45-4218019-001
a	Plan name CLEAR LAKE BANK AND TRUST COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CLEAR LAKE BANK AND TRUST COMPANY	c EIN-PN 42-0185531-001
a	Plan name CLEAR LAKE SPECIALTIES, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CLS HEALTH PLLC	c EIN-PN 20-2798379-001
a	Plan name CLEMENT & MURPHY, PLLC 401(K) PLAN	
b	Name of plan sponsor CLEMENT & MURPHY, PLLC	c EIN-PN 88-2935780-001
a	Plan name COGAN AND GEORGE ORTHODONTICS LLC 401(K) PLAN	
b	Name of plan sponsor COGAN AND GEORGE ORTHODONTICS LLC	c EIN-PN 54-2148445-001
a	Plan name COLORADO SLEEP INSTITUTE PROFESSIONAL SERVICES 401(K) PLAN	
b	Name of plan sponsor ELAN SLEEP LLC	c EIN-PN 45-5453170-001
a	Plan name COMMUNITY ACTION AGENCY OF SOUTH CENTRAL MICHIGAN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COMMUNITY ACTION AGENCY OF SOUTH CENTRAL MICHIGAN	c EIN-PN 38-1794361-001
a	Plan name COMPASS MORTGAGE, INC. 401K PLAN	
b	Name of plan sponsor COMPASS MORTGAGE, INC.	c EIN-PN 36-4322204-001

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 CONSILIO CORPORATION	
b	Name of plan sponsor CONSILIO CORPORATION	c EIN-PN 83-3769054-001
a	Plan name CONSULTNET, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CONSULTNET, LLC	c EIN-PN 87-0562976-001
a	Plan name COOPER MACHINE COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor COOPER MACHINE COMPANY, INC.	c EIN-PN 58-0974587-001
a	Plan name CORE X GROUP 401(K) PLAN	
b	Name of plan sponsor CORE X PARTNERS LLC	c EIN-PN 85-2497082-002
a	Plan name COSMED GROUP INC 401(K) PLAN AND TRUST	
b	Name of plan sponsor COSMED GROUP INC	c EIN-PN 52-1598781-001
a	Plan name COURTYARD MIRAMAR NON UNION EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor AXTMAYER ENTERPRISES, INC.	c EIN-PN 66-0265087-002
a	Plan name COURTYARD MIRAMAR UNION EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor AXTMAYER ENTERPRISES, INC.	c EIN-PN 66-0265087-001
a	Plan name CPS INSURANCE SERVICES 401(K) PLAN	
b	Name of plan sponsor CPS INSURANCE SERVICES	c EIN-PN 95-3339518-001
a	Plan name CSI 401(K) PLAN	
b	Name of plan sponsor COMMERCIAL SERVICES, INC.	c EIN-PN 75-2844595-001
a	Plan name CTO REALTY GROWTH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CTO REALTY GROWTH, INC.	c EIN-PN 59-0483700-003
a	Plan name CUDLIE ACCESSORIES, LLC 401(K) PLAN	
b	Name of plan sponsor CUDLIE ACCESSORIES, LLC	c EIN-PN 13-3977105-002
a	Plan name CUSB BANK 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CUSB BANK	c EIN-PN 42-0201590-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a Plan name	D.C. EQUIPMENT, INC. 401(K) PLAN	
b Name of plan sponsor	D.C. EQUIPMENT, INC.	c EIN-PN 63-1210078-001
a Plan name	DALIGATY INC 401(K) PLAN	
b Name of plan sponsor	DALIGATY, INC	c EIN-PN 85-3658882-001
a Plan name	DANIEL ARSHAM, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DANIEL ARSHAM, INC.	c EIN-PN 27-5033199-001
a Plan name	DAVIDSON HOSPITALITY GROUP 401(K) PLAN	
b Name of plan sponsor	DAVIDSON HOSPITALITY GROUP	c EIN-PN 20-3747936-002
a Plan name	DAVIS DEVELOPMENT, INC. 401(K) PLAN	
b Name of plan sponsor	DAVIS DEVELOPMENT, INC.	c EIN-PN 62-1623857-001
a Plan name	DAYTON/MONTGOMERY COUNTY CONVENTION AND VISITORS BUREAU, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DAYTON/MONTGOMERY COUNTY CONVENTION AND VISITORS BUREAU, INC.	c EIN-PN 31-1408432-001
a Plan name	DCCM, LLC 401(K) PLAN	
b Name of plan sponsor	DCCM, LLC 401(K) PLAN	c EIN-PN 86-2523370-001
a Plan name	DCD AUTOMOTIVE HOLDINGS, INC. 401(K) PLAN	
b Name of plan sponsor	DCD AUTOMOTIVE HOLDINGS, INC.	c EIN-PN 47-2847221-001
a Plan name	DECARO, DORAN, SICILIANO, GALLAGHER & DEBLASIS, LLP 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DECARO, DORAN, SICILIANO, GALLAGHER & DEBLASIS, LLP	c EIN-PN 52-1800374-001
a Plan name	DECISIVEDGE, LLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	DECISIVEDGE, LLC	c EIN-PN 26-1440851-001
a Plan name	DEERFIELD AGENCY LLC 401(K) PLAN	
b Name of plan sponsor	DEERFIELD AGENCY LLC	c EIN-PN 47-3931876-001
a Plan name	DELAWARE PERIODONTICS, P.A. 401(K) PLAN	
b Name of plan sponsor	DELAWARE PERIODONTICS, P.A.	c EIN-PN 51-0118943-001

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	DENSO TEN AMERICA LIMITED 401(K) SHARED SAVINGS PLAN	
b	Name of plan sponsor	DENSO TEN AMERICA LIMITED	c EIN-PN 95-3047171-001
a	Plan name	DIAG PARTNERS 401(K) PLAN	
b	Name of plan sponsor	DIAG PARTNERS	c EIN-PN 45-3948617-001
a	Plan name	DIAGNOSTIC IMAGING CENTERS, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIAGNOSTIC IMAGING CENTERS, P.A.	c EIN-PN 43-0913846-002
a	Plan name	DIAL PROPERTIES 401(K) PLAN	
b	Name of plan sponsor	DIAL PROPERTIES	c EIN-PN 47-0526923-001
a	Plan name	DIAMOND CREDIT UNION 401(K) PLAN AND TRUST	
b	Name of plan sponsor	DIAMOND CREDIT UNION	c EIN-PN 23-1320654-002
a	Plan name	DIAMOND DENTAL, DDS, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DIAMOND DENTAL DDS, P.A.	c EIN-PN 46-3597659-001
a	Plan name	DIN TAI FUNG RETIREMENT PLAN	
b	Name of plan sponsor	DTF MANAGEMENT AND CONSULTING, LLC	c EIN-PN 47-4678058-001
a	Plan name	DIPLOMA HOLDINGS, INC 401(K) PLAN	
b	Name of plan sponsor	DIPLOMA HOLDINGS, INC	c EIN-PN 25-1817924-001
a	Plan name	DOCTORS COUNCIL ANNUITY FUND	
b	Name of plan sponsor	DOCTORS COUNCIL ANNUITY FUND	c EIN-PN 13-4087091-001
a	Plan name	DOLCE LUSSO LLC 401(K) PLAN	
b	Name of plan sponsor	DOLCE LUSSO LLC	c EIN-PN 57-1238524-001
a	Plan name	DOW LEWIS INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	DOW LEWIS INC	c EIN-PN 68-0226109-001
a	Plan name	DPI 401K SAVINGS PLAN	
b	Name of plan sponsor	DIVERSIFIED PLASTICS, INC.	c EIN-PN 81-0428980-001

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 DULTMEIER SALES LLC 401(K) PLAN	
b	Name of plan sponsor DULTMEIER SALES LLC	c EIN-PN 47-0430008-001
a	Plan name DYNAMIC RESTAURANT HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor DYNAMIC RESTAURANT HOLDINGS, LLC	c EIN-PN 36-4878000-001
a	Plan name E.J. WEBER ELECTRIC COMPANY, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor E.J. WEBER ELECTRIC COMPANY, INC.	c EIN-PN 94-3287809-001
a	Plan name EAL LEASING 401(K) PLAN	
b	Name of plan sponsor EAL LEASING INCORPORATED	c EIN-PN 94-3380181-001
a	Plan name EAST VIEW INFORMATION SERVICES 401(K) SAVINGS PLAN	
b	Name of plan sponsor EAST VIEW INFORMATION SERVICES, INC.	c EIN-PN 41-1693095-001
a	Plan name EASTERN SHORE CHILDREN'S CLINIC 401(K) TRUST	
b	Name of plan sponsor EASTERN SHORE CHILDRENS CLINIC, PC	c EIN-PN 63-0878625-001
a	Plan name EMCEE ELECTRONICS, INC. 401(K) PROFIT SHARING PLA	
b	Name of plan sponsor EMCEE ELECTRONICS, INC.	c EIN-PN 51-0084017-001
a	Plan name EMERALD TEXTILES, SAN DIEGO, 401K	
b	Name of plan sponsor EMERALD TEXTILES, SAN DIEGO. LLC	c EIN-PN 27-1167089-001
a	Plan name EMIT IMAGING 401(K) PLAN	
b	Name of plan sponsor EMIT IMAGING INC.	c EIN-PN 82-4901044-001
a	Plan name EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor HAWKEYE ELECTRICAL CONTRACTORS OF CR LTD	c EIN-PN 56-2198687-001
a	Plan name EVANS GENERAL CONTRACTORS, LLC 401(K) PLAN	
b	Name of plan sponsor EVANS GENERAL CONTRACTORS, LLC	c EIN-PN 58-2602425-001
a	Plan name FAMILY DRUG CENTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor APOTHECARY ENTERPRISES, LTD.	c EIN-PN 54-1201381-001

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	FAMILY PRACTICE CENTER, P.C. 401(K) PLAN	
b	Name of plan sponsor	FAMILY PRACTICE CENTER, P.C.	c EIN-PN 23-1919008-001
a	Plan name	FASTCO INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	FASTCO INDUSTRIES, INC.	c EIN-PN 38-2253225-001
a	Plan name	FEDERAL REALTY INVESTMENT TRUST SAVINGS AND RETIREMENT 401(K) PLAN	
b	Name of plan sponsor	FEDERAL REALTY OP LP	c EIN-PN 52-0782497-001
a	Plan name	FERRELL FUEL CO INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FERRELL FUEL CO INC	c EIN-PN 52-1311814-001
a	Plan name	FERRIS MARKETING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FERRIS MARKETING	c EIN-PN 56-2381268-001
a	Plan name	FINANCE OF AMERICA COMPANIES 401(K) PLAN	
b	Name of plan sponsor	FINANCE OF AMERICA EQUITY CAPITAL LLC	c EIN-PN 80-0948242-001
a	Plan name	FIRE-DEX, LLC 401K PLAN	
b	Name of plan sponsor	FIRE-DEX, LLC	c EIN-PN 20-8033614-001
a	Plan name	FIRST MAINSTREET INSURANCE, L.C. 401(K) PLAN	
b	Name of plan sponsor	FIRST MAINSTREET INSURANCE, L.C.	c EIN-PN 82-3143872-001
a	Plan name	FIRST NATIONAL BANK IN TRINIDAD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FIRST NATIONAL BANK IN TRINIDAD	c EIN-PN 84-0338755-001
a	Plan name	FIRST VISION BANK 401K PLAN	
b	Name of plan sponsor	FIRST VISION BANK OF TENNESSEE	c EIN-PN 20-3376201-001
a	Plan name	FLORES ARTSCAPE 401(K) PLAN	
b	Name of plan sponsor	FLORES ARTSCAPE, INC.	c EIN-PN 82-3874533-001
a	Plan name	FLORIDA COAST EQUIPMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	FLORIDA COAST EQUIPMENT, INC.	c EIN-PN 59-2490149-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name FOSTER CAVINESS COMPANY 401(K) PLAN	
b	Name of plan sponsor FOSTER CAVINESS COMPANY, INC.	c EIN-PN 56-0507149-001
a	Plan name FOULGER-PRATT COMPANIES 401(K) PLAN	
b	Name of plan sponsor FOULGER-PRATT COMPANIES LLC	c EIN-PN 45-0463021-001
a	Plan name FUTURECARE 401(K) PLAN	
b	Name of plan sponsor FUTURECARE HEALTH AND MANAGEMENT CORPORATION	c EIN-PN 52-1508636-001
a	Plan name G & B LAW, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor G & B LAW, LLP	c EIN-PN 95-4559472-001
a	Plan name GABLES RESIDENTIAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor GABLES RESIDENTIAL SERVICES, INC.	c EIN-PN 75-2517913-001
a	Plan name GABRIEL ORTHODONTICS, LLC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor GABRIEL ORTHODONTICS LLC	c EIN-PN 87-2454317-002
a	Plan name GARRISON STEEL 401(K) PLAN	
b	Name of plan sponsor GARRISON STEEL ERECTORS, INC.	c EIN-PN 63-1133342-001
a	Plan name GENERAL NUCLEAR 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor GENERAL NUCLEAR CORPORATION	c EIN-PN 25-1182038-002
a	Plan name GENERAL OCEANICS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor GENERAL OCEANICS, INC.	c EIN-PN 59-1203631-002
a	Plan name GENESEE VALLEY FEDERAL CREDIT UNION CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor GENESEE VALLEY FEDERAL CREDIT UNION	c EIN-PN 23-7377176-033
a	Plan name GEORGETOWN CONSTRUCTION COMPANY EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor GEORGETOWN CONSTRUCTION COMPANY	c EIN-PN 38-2403950-004
a	Plan name GODES & PREIS, LLP 401(K) PLAN	
b	Name of plan sponsor GODES & PREIS, LLP	c EIN-PN 80-0519480-001

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 GOODWILL INDUSTRIES-MANASOTA, INC. RETIREMENT PLAN	
b	Name of plan sponsor GOODWILL INDUSTRIES-MANASOTA, INC.	c EIN-PN 59-2074391-002
a	Plan name GOOSENECK IMPLEMENT COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GOOSENECK IMPLEMENT COMPANY	c EIN-PN 11-3690698-001
a	Plan name GOURMET CULINARY PARTNERS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GOURMET CULINARY PARTNERS, LLC	c EIN-PN 83-3649071-001
a	Plan name GREAT SWAMP WATERSHED ASSOCIATION 401K	
b	Name of plan sponsor GREAT SWAMP WATERSHED ASSOCIATION	c EIN-PN 22-2403906-001
a	Plan name GREENMARK EQUIPMENT, LLC RETIREMENT PLAN	
b	Name of plan sponsor GREENMARK EQUIPMENT, LLC	c EIN-PN 38-2221695-001
a	Plan name GREG CHANDLER'S FRAME AND BODY LLC 401(K) PLAN	
b	Name of plan sponsor GREG CHANDLERS FRAME AND BODY LLC	c EIN-PN 55-0771198-001
a	Plan name GREINER HEATING-AIR-SOLAR ENERGY INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREINER HEATING-AIR-SOLAR ENERGY INC	c EIN-PN 20-0683265-001
a	Plan name GROUNDSCAPES SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor GROUNDSCAPES	c EIN-PN 20-2698594-001
a	Plan name GULF CITY BODY & TRAILER WORKS, INC. 401(K) PLAN	
b	Name of plan sponsor GULF CITY BODY & TRAILER WORKS, INC.	c EIN-PN 63-0515141-002
a	Plan name HAVANA CHICK-FIL-A 401(K) PLAN	
b	Name of plan sponsor EDWARD VERNON INC.	c EIN-PN 82-5520735-001
a	Plan name HEALTHNET, INC. 401(K) PLAN	
b	Name of plan sponsor HEALTHNET, INC.	c EIN-PN 35-1579827-001
a	Plan name HELIENT SYSTEMS LLC	
b	Name of plan sponsor HELIENT SYSTEMS LLC	c EIN-PN 46-1334455-001

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 HELLMANN WORLDWIDE LOGISTICS, INC. 401(K) PLAN	
b	Name of plan sponsor HELLMANN WORLDWIDE LOGISTICS	c EIN-PN 95-4140705-001
a	Plan name HENDRY MARINE INDUSTRIES 401K PLAN	
b	Name of plan sponsor HENDRY MARINE INDUSTRIES	c EIN-PN 47-2955202-002
a	Plan name HMT ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HMT ASSOCIATES, INC.	c EIN-PN 31-1508707-001
a	Plan name HOTT ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor HOTT ASSOCIATES, INC.	c EIN-PN 34-1821072-001
a	Plan name HR PHARMACEUTICALS, INC. 401(K) PLAN	
b	Name of plan sponsor HR PHARMACEUTICALS, INC.	c EIN-PN 27-1584005-001
a	Plan name HULL SUPPLY COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor HULL SUPPLY COMPANY, INC	c EIN-PN 74-2020646-001
a	Plan name HUNTER MACHINE, INC. 401(K) PLAN	
b	Name of plan sponsor HUNTER MACHINE, INC.	c EIN-PN 16-1412913-001
a	Plan name INDRAVADAN K. SHAH, M. D. 401(K) PLAN	
b	Name of plan sponsor INDRAVADAN K. SHAH, M.D.	c EIN-PN 73-1159235-002
a	Plan name INDUSTRIAL INFO RESOURCES, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor INDUSTRIAL INFO RESOURCES, INC.	c EIN-PN 76-0093411-001
a	Plan name INNOPHOS, INC. 401(K) PLAN	
b	Name of plan sponsor INNOPHOS, INC.	c EIN-PN 20-1380712-001
a	Plan name INNOVATIVE DRIVEN 401(K) PLAN	
b	Name of plan sponsor INNOVATIVE DISCOVERY EMPLOYMENT SERVICES COMPANY, INC.	c EIN-PN 82-1582174-001
a	Plan name INOVEX INFORMATION SYSTEMS 401(K) PLAN	
b	Name of plan sponsor INOVEX INFORMATION SYSTEMS	c EIN-PN 20-0789181-001

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	INTELIDENT SOLUTIONS, INC. 401(K) PLAN
b	Name of plan sponsor	INTELIDENT SOLUTIONS, INC.
c	EIN-PN	57-1220613-001
a	Plan name	INTERNATIONAL SCHOOL OF LOUISIANA 401(K) PLAN
b	Name of plan sponsor	THE INTERNATIONAL SCHOOL OF LOUISIANA
c	EIN-PN	72-1461891-002
a	Plan name	ISPE 401(K) PLAN
b	Name of plan sponsor	ISPE, INC.
c	EIN-PN	59-2009272-001
a	Plan name	ISSCO, INC. 401(K) PLAN
b	Name of plan sponsor	ISSCO, INC.
c	EIN-PN	43-1116486-002
a	Plan name	J R ZUKIN CORPORATION 401K PLAN
b	Name of plan sponsor	JR ZUKIN CORPORATION
c	EIN-PN	95-1478121-002
a	Plan name	J WILCO ENTERPRISES LLC 401(K) PLAN
b	Name of plan sponsor	J WILCO ENTERPRISES LLC DBA SERVPRO
c	EIN-PN	46-1855859-001
a	Plan name	J. B. K. GROUP, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	J.B.K. GROUP, INC.
c	EIN-PN	34-1873488-001
a	Plan name	JENKINS PLUMBING AND HEATING 401(K) PLAN
b	Name of plan sponsor	JENKINS PLUMBING AND HEATING, INC.
c	EIN-PN	21-0622081-001
a	Plan name	JILLAMY 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	JILLAMY, INC.
c	EIN-PN	75-2979513-001
a	Plan name	JOHN A. NASSAR, M.D., P.C. 401(K) PLAN
b	Name of plan sponsor	JOHN A. NASSAR, M.D., P.C.
c	EIN-PN	20-4983051-001
a	Plan name	JOHN J JERUE TRUCK BROKER, INC. 401(K) PROFIT SHARING PLAN & TRUST
b	Name of plan sponsor	JOHN J JERUE TRUCK BROKER
c	EIN-PN	59-1858040-002
a	Plan name	KABAFUSION 401(K) PLAN
b	Name of plan sponsor	KABAFUSION HOLDINGS, L.L.C.
c	EIN-PN	27-3572421-001

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 KADIANT'S LIVING YOUR ABSOLUTE BEST RETIREMENT LIFE 401(K) PLAN	
b	Name of plan sponsor KADIANT, LLC	c EIN-PN 83-3935694-001
a	Plan name KAUFMAN MANAGEMENT CO., LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor KAUFMAN MANAGEMENT CO., LLC	c EIN-PN 84-4031403-001
a	Plan name KAYE/BASSMAN INTERNATIONAL CORP. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KAYE/BASSMAN INTERNATIONAL CORP.	c EIN-PN 75-1773066-001
a	Plan name KBKG, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KBKG, INC.	c EIN-PN 95-4864453-001
a	Plan name KEMRON ENVIRONMENTAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor KEMRON ENVIRONMENTAL SERVICES, INC.	c EIN-PN 11-2393978-001
a	Plan name KENNELWOOD VILLAGE, INC. 401(K) PLAN	
b	Name of plan sponsor KENNELWOOD VILLAGE, INC.	c EIN-PN 43-1008901-003
a	Plan name KESSEL CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KESSEL CONSTRUCTION, INC.	c EIN-PN 25-1327045-001
a	Plan name KEYSTONE INSURERS GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor KEYSTONE INSURERS GROUP, INC	c EIN-PN 23-2263940-001
a	Plan name KIDZ BIZ, INC. 401(K) PLAN	
b	Name of plan sponsor KIDZ BIZ, INC.	c EIN-PN 54-1970004-001
a	Plan name KIMMEL CORPORATION 401(K) PLAN	
b	Name of plan sponsor KIMMEL CORPORATION	c EIN-PN 34-0930171-001
a	Plan name KING'S HAWAIIAN 401(K) PLAN	
b	Name of plan sponsor R&T ONE, INC. (DBA IRRESISTIBLE FOODS GROUP)	c EIN-PN 85-4229454-001
a	Plan name KITCHEN SEED COMPANY INC 401K PLAN	
b	Name of plan sponsor KITCHEN SEED COMPANY, INC.	c EIN-PN 37-1015705-001

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	KNAPP INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KNAPP INC.	c EIN-PN 58-2365257-001
a	Plan name	KNOWLTON TECHNOLOGIES, LLC 401(K) PLAN	
b	Name of plan sponsor	KNOWLTON TECHNOLOGIES, LLC	c EIN-PN 47-1424475-001
a	Plan name	KOSMOS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	KOSMOS, INC.	c EIN-PN 51-0311815-001
a	Plan name	KREY DISTRIBUTING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BUSCH DISTRIBUTING COMPANY, LLC DBA KREY DISTRIBUTING COMPANY	c EIN-PN 43-1144416-001
a	Plan name	LAMOILLE HEALTH PARTNERS 401(K) PLAN	
b	Name of plan sponsor	LAMOILLE HEALTH PARTNERS, INC.	c EIN-PN 04-3358048-001
a	Plan name	LAYDON INDUSTRIES, LLC 401(K) PLAN - 002	
b	Name of plan sponsor	LAYDON INDUSTRIES, LLC	c EIN-PN 20-2193189-002
a	Plan name	LEE WETHERINGTON HOMES, LLC 401(K) PLAN	
b	Name of plan sponsor	LEE WETHERINGTON HOMES, LLC	c EIN-PN 27-4320328-002
a	Plan name	LEESAK ARCHITECTS, INC 401K PLAN	
b	Name of plan sponsor	LEE & SAKAHARA ARCHITECTS, INC.	c EIN-PN 26-1563640-002
a	Plan name	LEPPINK'S LAKEVIEW INC. 401(K) PLAN	
b	Name of plan sponsor	LEPPINKS LAKEVIEW INC	c EIN-PN 38-2650377-001
a	Plan name	LEVINE LEICHTMAN CAPITAL PARTNERS, LLC EMPLOYEES' 401(K) PLAN AND TRUST	
b	Name of plan sponsor	LEVINE LEICHTMAN CAPITAL PARTNERS, LLC	c EIN-PN 95-4475693-001
a	Plan name	LIBERTY MANAGEMENT NON-UNION EMPLOYEE STOCK OWNERSHIP 401(K)PLAN	
b	Name of plan sponsor	LIBERTY BEHAVIORAL MANAGEMENT GROUP, INC.	c EIN-PN 81-5260872-003
a	Plan name	LIFECARE 2.0 401(K) PLAN	
b	Name of plan sponsor	LIFECARE 2.0 MANAGMENT SEVICES, LLC	c EIN-PN 84-2742973-001

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	LIFETECH RESEARCH, INC. 401(K) PLAN	
b	Name of plan sponsor	LIFETECH RESEARCH, INC.	c EIN-PN 02-0699077-001
a	Plan name	LIGHTHOUSE ELECTRIC, LLC 401(K) PLAN	
b	Name of plan sponsor	LIGHTHOUSE ELECTRIC, LLC	c EIN-PN 73-1340815-001
a	Plan name	LOCOMOTE EXPRESS 401(K) PLAN	
b	Name of plan sponsor	LOCOMOTE EXPRESS, LLC	c EIN-PN 26-1315298-001
a	Plan name	LONG BEVERAGE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LONG BEVERAGE, INC.	c EIN-PN 56-0568728-001
a	Plan name	LONG ELECTRIC COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LONG ELECTRIC COMPANY, INC.	c EIN-PN 35-1959429-001
a	Plan name	LORD ELECTRIC COMPANY OF PUERTO RICO, EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	LORD ELECTRIC COMPANY OF PUERTO RIC , INC.	c EIN-PN 66-0663585-001
a	Plan name	LOTSPEICH CO. OF FLORIDA. INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LOTSPEICH CO. OF FL, INC.	c EIN-PN 59-1171393-001
a	Plan name	LOYAL SOURCE GOV'T SERV 401K PLAN	
b	Name of plan sponsor	LOYAL SOURCE GOVT SERVICES	c EIN-PN 30-0564703-001
a	Plan name	LOYAL SOURCE GOV'T SERVICES 401A PL	
b	Name of plan sponsor	LOYAL SOURCE GOVT SERVICES	c EIN-PN 30-0564703-002
a	Plan name	LUNAR TOOL & MOLD, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LUNAR TOOL & MOLD, INC.	c EIN-PN 34-0968838-003
a	Plan name	LUZERN LABORATORIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LUZERN LABORATORIES INC.	c EIN-PN 73-1729238-001
a	Plan name	MACK MANUFACTURING, INC. 401(K) PLAN	
b	Name of plan sponsor	MACK MANUFACTURING, INC.	c EIN-PN 63-0640153-001

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 MAHSHIE DECOSTA, P.A. 401(K) PLAN	
b	Name of plan sponsor MAHSHIE DECOSTA P.A.	c EIN-PN 45-4386492-001
a	Plan name MARION POLK FOOD SHARE 401(K) PLAN	
b	Name of plan sponsor MARION POLK FOOD SHARE	c EIN-PN 94-3034161-002
a	Plan name MARKON COOPERATIVE, INC. 401(K) PLAN	
b	Name of plan sponsor MARKON COOPERATIVE, INC.	c EIN-PN 38-2623240-001
a	Plan name MARSHALLTOWN COMPANY 401(K) SAVINGS PLAN	
b	Name of plan sponsor MARSHALLTOWN COMPANY	c EIN-PN 42-0397040-002
a	Plan name MARTIN DENTISTRY, P. C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MARTIN DENTISTRY, P.C.	c EIN-PN 26-3738131-001
a	Plan name MCALISTER-SMITH FUNERAL HOME 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MCALISTER-SMITH FUNERAL HOME	c EIN-PN 57-0205950-001
a	Plan name MCKENZIE HEALTH SYSTEM 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MCKENZIE MEMORIAL HOSPITAL	c EIN-PN 38-1738615-001
a	Plan name MEDZED, LLC 401(K) PS PLAN	
b	Name of plan sponsor MEDZED, LLC.	c EIN-PN 47-5386891-001
a	Plan name MERLIN LAW GROUP, PLLC 401(K) PLAN	
b	Name of plan sponsor MERLIN LAW GROUP, PLLC	c EIN-PN 47-0948426-001
a	Plan name MEYER NAJEM 401K PROFIT SHARING PLAN	
b	Name of plan sponsor MEYER & NAJEM INC.	c EIN-PN 35-1712644-001
a	Plan name MEYERPRO RETIREMENT PLAN	
b	Name of plan sponsor MEYERPRO RETIREMENT PLAN	c EIN-PN 47-4920962-001
a	Plan name MG LAW 401(K) PLAN	
b	Name of plan sponsor MEYER GOERGEN PC	c EIN-PN 54-1597612-001

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	MISSOURI ASSOCIATION MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor	MISSOURI ASSOCIATION MANAGEMENT, LLC	c EIN-PN 26-1599655-001
a	Plan name	MLJ ENVIRONMENTAL, LLC 401(K) PLAN AND TRUST	
b	Name of plan sponsor	MLJ ENVIRONMENTAL, LLC	c EIN-PN 20-5147757-002
a	Plan name	MOHS MICROGRAPHIC & SKIN SURGERY, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOHS MICROGRAPHIC & SKIN SURGERY, PLLC	c EIN-PN 27-5099347-001
a	Plan name	MONARCH INTERNATIONAL, INC. 401(K) PLAN	
b	Name of plan sponsor	MONARCH INTERNATIONAL, INC.	c EIN-PN 02-0333450-001
a	Plan name	MOODY GARDENS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MOODY GARDENS, INC.	c EIN-PN 76-0288131-002
a	Plan name	MOREMAN, MOORE & COMPANY, INC. 401(K) / PROFIT SHARING PLAN	
b	Name of plan sponsor	MOREMAN, MOORE & COMPANY, INC.	c EIN-PN 72-1012388-001
a	Plan name	MOTION PICTURE ASSOCIATION, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	MOTION PICTURE ASSOCIATION, INC.	c EIN-PN 13-1068220-002
a	Plan name	MOTUS RECRUITING 401(K) PLAN	
b	Name of plan sponsor	MOTUS RECRUITING AND STAFFING, INC.	c EIN-PN 20-4047255-002
a	Plan name	MP GLOBAL PRODUCTS, LLC 401(K) PLAN	
b	Name of plan sponsor	MP GLOBAL PRODUCTS LLC	c EIN-PN 91-1838266-001
a	Plan name	MURPHY AND ROVERUD, PLLP 401(K) PLAN	
b	Name of plan sponsor	MURPHY LAW OFFICE PLLP	c EIN-PN 41-2082487-001
a	Plan name	NAM DAE MUN FARMERS MARKET 401(K) PLAN	
b	Name of plan sponsor	CFC OF GEORGIA, INC.	c EIN-PN 27-0937145-001
a	Plan name	NATIONAL DATACARE CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	NATIONAL DATACARE CORPORATION	c EIN-PN 54-1194122-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	NATIONAL SMALL BUSINESS 401(K) PLAN	
b	Name of plan sponsor	NATIONAL SMALL BUSINESS UNITED,	c EIN-PN 52-2229940-002
a	Plan name	NATIONWIDE MOTOR SALES 401(K) PLAN	
b	Name of plan sponsor	NATIONWIDE MOTOR SALES CORP.	c EIN-PN 52-0800290-004
a	Plan name	NEISD DEFERRED COMPENSATION RETIREMENT PLAN	
b	Name of plan sponsor	NORTH EAST INDEPENDENT SCHOOL DISTRICT	c EIN-PN 74-6015301-001
a	Plan name	NEW HIGH GLASS, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW HIGH GLASS, INC.	c EIN-PN 59-1933707-001
a	Plan name	NEXTEP 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NEXTEP INC	c EIN-PN 73-1543198-003
a	Plan name	NHE PENSION PLAN	
b	Name of plan sponsor	NATIONWIDE HEALTHCARE SERVICES, LLC	c EIN-PN 26-3999886-001
a	Plan name	NORTH RIVERS DENTAL ASSOCIATES, LLC 401(K) PLAN	
b	Name of plan sponsor	NORTH RIVERS DENTAL PRACTICE, LLC	c EIN-PN 46-1650418-001
a	Plan name	NORTHERN TOOL & EQUIPMENT COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	NORTHERN TOOL & EQUIPMENT COMPANY, INC.	c EIN-PN 41-1405311-003
a	Plan name	NORTHLAND-WILLETTE, INC. SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	NORTHLAND-WILLETTE, INC.	c EIN-PN 04-2844083-001
a	Plan name	NOVA 401(K) PLAN	
b	Name of plan sponsor	NOVA 401K ASSOCIATES	c EIN-PN 20-1181458-001
a	Plan name	OASE NORTH AMERICA, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	OASE NORTH AMERICA, INC.	c EIN-PN 33-0609870-001
a	Plan name	OKAMOTO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	THOMAS H. OKAMOTO, M.D., INC.	c EIN-PN 95-4257393-001

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 ONIX NETWORKING 401(K) PLAN	
b	Name of plan sponsor ONIX NETWORKING CORP.	c EIN-PN 34-1729033-001
a	Plan name OPPORTUNITY FOUNDATION OF CENTRAL OREGON RETIREMENT PLAN	
b	Name of plan sponsor OPPORTUNITY FOUNDATION OF CENTRAL OREGON	c EIN-PN 93-0576732-001
a	Plan name OPTICSPLANET, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OPTICSPLANET, INC.	c EIN-PN 36-4397726-001
a	Plan name OPTIMUS STEEL 401(K) PLAN	
b	Name of plan sponsor OPTIMUS STEEL LLC	c EIN-PN 82-4229324-002
a	Plan name ORANGE COAST TITLE FAMILY OF COMPANIES EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor ORANGE COAST TITLE COMPANY	c EIN-PN 95-2871609-001
a	Plan name OREPAC SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor OREPAC HOLDING COMPANY	c EIN-PN 93-0670556-001
a	Plan name OSCAR S. FIELDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OSCAR S. FIELDS, INC.	c EIN-PN 54-1197923-001
a	Plan name OVEN INDUSTRIES INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OVEN INDUSTRIES INC.	c EIN-PN 20-2681227-001
a	Plan name PALMER & CAY, LLC EMPLOYEES 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor PALMER & CAY LLC	c EIN-PN 27-2182440-001
a	Plan name PARK WEST 401(K) EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor PARK WEST LANDSCAPE, INC.	c EIN-PN 95-3814677-002
a	Plan name PARKER REMICK LLC PROFIT SHARING PLAN	
b	Name of plan sponsor PARKER REMICK LLC	c EIN-PN 30-1218925-001
a	Plan name PEACHTREE HOTEL GROUP 401(K) PLAN	
b	Name of plan sponsor PEACHTREE HOTEL GROUP, LLC	c EIN-PN 26-1186759-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<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	PEOPLEASE LLC PLC SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	PEOPLEASE LLC	c EIN-PN 57-0993401-001
a	Plan name	PEOPLES SERVICES INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PEOPLES SERVICES INC	c EIN-PN 34-1692443-002
a	Plan name	PERSPECTUS ACHITECTURE, LLC 401(K) PLAN	
b	Name of plan sponsor	PERSPECTUS ARCHITECTURE, LLC	c EIN-PN 03-0484121-001
a	Plan name	PETRICCA INDUSTRIES, INC 401(K) PLAN	
b	Name of plan sponsor	PETRICCA INDUSTRIES, INC	c EIN-PN 04-2543665-002
a	Plan name	PGH WONG ENGINEERING, INC. 401(K) PLAN	
b	Name of plan sponsor	PGH WONG ENGINEERING, INC.	c EIN-PN 94-2987905-001
a	Plan name	PHALCON, LTD. 401(K) PLAN	
b	Name of plan sponsor	PHALCON LTD.	c EIN-PN 20-8104883-001
a	Plan name	PINNACLE HOME CARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PINNACLE HOME CARE, INC.	c EIN-PN 45-0502569-001
a	Plan name	PLEASANT VALLEY CORPORATION 401(K) PLAN	
b	Name of plan sponsor	PLEASANT VALLEY CORPORATION	c EIN-PN 27-0901655-001
a	Plan name	PLUMBERS & STEAMFITTERS LOCAL 184 SUPPLEMENTAL PENSION PLAN	
b	Name of plan sponsor	BD OF TRUSTEES - PLUMBERS & STEAM- FITTERS LOCAL 184 SUPPLEMENTAL	c EIN-PN 62-1623030-001
a	Plan name	PM SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	PROJECT MANAGEMENT SOLUTIONS, INC.	c EIN-PN 31-1455824-001
a	Plan name	PMOLINK, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	PMOLINK, LLC	c EIN-PN 52-2275604-001
a	Plan name	POLINGER COMPANY 401(K) PLAN	
b	Name of plan sponsor	POLINGER COMPANY	c EIN-PN 52-0624763-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name POLYMER INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor POLYMER INDUSTRIES	c EIN-PN 63-0944591-002
a	Plan name PREMIER HEALTH CARE SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor PREMIER HEALTH CARE SERVICES, LLC DBA HILLTOP HEALTH CARE CENTER, INC.	c EIN-PN 45-4531609-001
a	Plan name PREMIER MORTGAGE RESOURCES 401(K) PLAN	
b	Name of plan sponsor PREMIER MORTGAGE RESOURCES	c EIN-PN 20-2718340-001
a	Plan name PRESTIGE BEVERAGE GROUP OF 401(K) PLAN	
b	Name of plan sponsor PRESTIGE BEVERAGE GROUP OF MARYLAND	c EIN-PN 80-0472338-001
a	Plan name PRIDE CAPITAL PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor PRIDE CAPITAL PARTNERS, LLC	c EIN-PN 54-2131570-001
a	Plan name PRO FOUND 401(K) PLAN	
b	Name of plan sponsor PRO FOUND RECOVERY SOLUTIONS, INC.	c EIN-PN 26-4575383-001
a	Plan name PROFESSIONAL ANESTHESIA SERVICES, INC., 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PROFESSIONAL ANESTHESIA SERVICES, INC.	c EIN-PN 55-0665912-001
a	Plan name PSIQANTUM 401(K) PLAN	
b	Name of plan sponsor PSIQANTUM CORP	c EIN-PN 81-1715139-001
a	Plan name PURVIS FORD 401(K) PLAN	
b	Name of plan sponsor PURVIS FORD, INC.	c EIN-PN 54-0884429-001
a	Plan name QCC, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor QCC, LLC	c EIN-PN 45-4672125-001
a	Plan name QUALAWASH HOLDINGS, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor QUALAWASH HOLDINGS, LLC	c EIN-PN 27-0683851-001
a	Plan name QUANTUM INTEGRATORS 401(K) PLAN	
b	Name of plan sponsor QUANTUM INTEGRATORS GROUP, LLC	c EIN-PN 20-2695962-001

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	RANDALL S. FUDGE, P. C. 401(K) PLAN	
b	Name of plan sponsor	RANDALL S. FUDGE, P.C.	c EIN-PN 73-1570297-001
a	Plan name	RBB SYSTEMS, INC. RET SAVINGS PLAN	
b	Name of plan sponsor	RBB SYSTEMS, INC.	c EIN-PN 34-1353186-001
a	Plan name	REBACK'S PLUMBING N' THINGS 401(K) PLAN	
b	Name of plan sponsor	REBACKS PLUMBING N THINGS, INC.	c EIN-PN 95-3041478-001
a	Plan name	RECREATION WORLD, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	RECREATION WORLD, INC.	c EIN-PN 59-1695648-002
a	Plan name	REGION 3B AREA AGENCY ON AGING RETIREMENT PLAN	
b	Name of plan sponsor	REGION 3B AREA AGENCY ON AGING	c EIN-PN 38-3013931-001
a	Plan name	REGIONAL INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor	REGIONAL INDUSTRIES, LLC	c EIN-PN 22-3558711-001
a	Plan name	REINHOLD ELECTRIC, INC. EMPLOYEE PROFIT SHARING & 401K PLAN	
b	Name of plan sponsor	REINHOLD ELECTRIC, INC.	c EIN-PN 43-1409687-001
a	Plan name	RESCO PRODUCTS, INC. RETIREMENT PLAN FOR UNITED STEELWORKERS OF AMERICA	
b	Name of plan sponsor	RESCO PRODUCTS, INC.	c EIN-PN 23-1279448-025
a	Plan name	RESOURCE BANK RETIREMENT PLAN	
b	Name of plan sponsor	RESOURCE BANK	c EIN-PN 72-1410047-001
a	Plan name	REYTEC CONSTRUCTION RESOURCES, INC. 401(K) PLAN	
b	Name of plan sponsor	REYTEC CONSTRUCTION RESOURCES, INC.	c EIN-PN 76-0516513-001
a	Plan name	RF SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	RF SERVICES, INC.	c EIN-PN 20-3145231-001
a	Plan name	ROBERTSON-RYAN & ASSOCIATES, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	ROBERTSON RYAN & ASSOCIATES, INC.	c EIN-PN 39-0605130-002

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 <u>ROCK TOWNSHIP AMBULANCE DISTRICT 457 GOVERNMENTAL PLAN AND TRUST</u>	
b	Name of plan sponsor <u>ROCK TOWNSHIP AMBULANCE DISTRICT</u>	c EIN-PN <u>43-1183666-457</u>
a	Plan name <u>ROCKY MOUNTAIN UNIVERSITY OF HEALTH PROFESSIONS, INC.</u>	
b	Name of plan sponsor <u>ROCKY MOUNTAIN UNIVERSITY OF HEALTH PROFESSIONS, INC.</u>	c EIN-PN <u>87-0594592-002</u>
a	Plan name <u>ROCKY PATEL PREMIUM CIGARS, INC 401(K) PLAN</u>	
b	Name of plan sponsor <u>ROCKY PATEL PREMIUM CIGARS, INC.</u>	c EIN-PN <u>56-1948219-001</u>
a	Plan name <u>RPC, INC. RETIREMENT SAVINGS PLAN</u>	
b	Name of plan sponsor <u>RPC, INC.</u>	c EIN-PN <u>59-2707333-003</u>
a	Plan name <u>RUSKEN PACKAGING, INC. 401(K) PLAN</u>	
b	Name of plan sponsor <u>RUSKEN PACKAGING, INC.</u>	c EIN-PN <u>63-0776136-001</u>
a	Plan name <u>S.J. LOUIS CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN</u>	
b	Name of plan sponsor <u>S. J. LOUIS CONSTRUCTION, INC</u>	c EIN-PN <u>41-1440589-001</u>
a	Plan name <u>S.L. FUSCO, INC. 401(K) PLAN</u>	
b	Name of plan sponsor <u>S.L. FUSCO, INC.</u>	c EIN-PN <u>95-1998584-001</u>
a	Plan name <u>SAMUELS LIBRARY RETIREMENT PLAN</u>	
b	Name of plan sponsor <u>SAMUELS LIBRARY, INC.</u>	c EIN-PN <u>54-0610300-001</u>
a	Plan name <u>SAPPHIRE SOFTWARE 401(K) PLAN</u>	
b	Name of plan sponsor <u>SAPPHIREK12 INC. DBA SAPPHIRE SOFTWARE</u>	c EIN-PN <u>41-2033749-001</u>
a	Plan name <u>SARASOTA 500, LLC DBA SARASOTA FORD 401K PLAN</u>	
b	Name of plan sponsor <u>SARASOTA 500, LLC</u>	c EIN-PN <u>20-0194997-001</u>
a	Plan name <u>SARRIS CANDIES, INC. PROFIT SHARING 401(K) PLAN</u>	
b	Name of plan sponsor <u>SARRIS CANDIES, INC.</u>	c EIN-PN <u>25-1401248-001</u>
a	Plan name <u>SAVANT, INC. RETIREMENT SAVINGS PLAN</u>	
b	Name of plan sponsor <u>SAVANT, INC.</u>	c EIN-PN <u>38-1909696-001</u>

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	SB ARCHITECTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SB ARCHITECTS	c EIN-PN 94-1723964-003
a	Plan name	SBA 401(K) PLAN	
b	Name of plan sponsor	SCHOELLER BLECKMANN AMERICA, INC.	c EIN-PN 51-0332482-001
a	Plan name	SBC SOLUTIONS GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SHREDDERED BEDDING CORP. DBA SBC SOLUTIONS GROUP	c EIN-PN 31-1382376-002
a	Plan name	SCAN PRO OF BOSTON, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCAN PRO OF BOSTON, INC.	c EIN-PN 20-5782845-001
a	Plan name	SCHOONOVER BODYWORKS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHOONOVER BODYWORKS, INC.	c EIN-PN 41-0836247-001
a	Plan name	SCIOTEQ, LLC 401(K) PLAN	
b	Name of plan sponsor	SCIOTEQ, LLC	c EIN-PN 20-4660150-001
a	Plan name	SCOTT COUNTY 401(A) PLAN	
b	Name of plan sponsor	SCOTT COUNTY GOVERNMENT	c EIN-PN 35-6000195-401
a	Plan name	SCOTT COUNTY GOVERNMENT EMPLOYEE 457(B) PLAN	
b	Name of plan sponsor	SCOTT COUNTY GOVERNMENT	c EIN-PN 35-6000195-457
a	Plan name	SDI TECHNOLOGIES INC. PENSION PLAN	
b	Name of plan sponsor	SDI TECHNOLOGIES INC.	c EIN-PN 13-5676428-001
a	Plan name	SEALIFT, INC. 401(K) PLAN	
b	Name of plan sponsor	SEALIFT, INC.	c EIN-PN 11-2378853-001
a	Plan name	SEASONS EVOO HOLDINGS LLC RETIREMENT SAVINGS PLAN 401(K)	
b	Name of plan sponsor	SEASONS EVOO HOLDINGS, LLC	c EIN-PN 47-1946111-001
a	Plan name	SEASONS RETIREMENT GROUP - INDUSTRIAL INJECTION SERVICE 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	INDUSTRIAL INJECTION SERVICE	c EIN-PN 87-0419542-001

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 SEASONS RETIREMENT GROUP SORENSONS RANCH SCHOOL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SORENSONS RANCH SCHOOL, INC.	c EIN-PN 87-0419727-001
a	Plan name SELECTEK INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SELECTEK INC	c EIN-PN 58-2158130-001
a	Plan name SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor SID PETERSON MEMORIAL HOSPITAL	c EIN-PN 74-2557820-003
a	Plan name SIERRA CANYON FOUNDATION 401(K) PLAN	
b	Name of plan sponsor SIERRA CANYON HIGH SCHOOL FOUNDATION	c EIN-PN 95-4823704-001
a	Plan name SKYWAY ROOFING INC. PROFIT SHARING AND RETIREMENT PLAN	
b	Name of plan sponsor SKYWAY ROOFING, INC.	c EIN-PN 14-1763964-001
a	Plan name SMITH MECHANICAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SMITH MECHANICAL	c EIN-PN 33-1007374-001
a	Plan name SOILS ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOILS ENGINEERING, INC.	c EIN-PN 95-2429539-001
a	Plan name SONAS HOME HEALTH CARE GROUP 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor FPC ACQUISTION INC, DBA SONAS HOME HEALTH CARE GROUP	c EIN-PN 26-0327203-001
a	Plan name SONDERMIND, INC. 401(K) PLAN	
b	Name of plan sponsor SONDERMIND, INC.	c EIN-PN 82-3006071-001
a	Plan name SOUND LIVING 401(K) PLAN	
b	Name of plan sponsor SOUND LIVING INC.	c EIN-PN 75-3047782-001
a	Plan name SOUTH CENTRAL OIL CO., INC. 401(K) PLAN	
b	Name of plan sponsor SOUTH CENTRAL OIL CO., INC.	c EIN-PN 56-0603942-001
a	Plan name SOUTHERN CONNECTICUT DERMATOLOGY, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTHERN CONNECTICUT DERMATOLOGY, P.C.	c EIN-PN 06-1434391-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	SOUTHERN NEW JERSEY STEEL CO., INC. 401(K) PLAN	
b	Name of plan sponsor	SOUTHERN NEW JERSEY STEEL CO., INC.	c EIN-PN 22-2371536-001
a	Plan name	SPECTRUM CONTROL, INC. 401(K) PLAN	
b	Name of plan sponsor	SPECTRUM CONTROL, INC.	c EIN-PN 25-1196447-001
a	Plan name	SPRIGGS DISTRIBUTING CO., INC. 401(K) PLAN	
b	Name of plan sponsor	SPRIGGS DISTRIBUTING CO., INC.	c EIN-PN 55-0647587-001
a	Plan name	STABLE ROCK SERVICES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STABLE ROCK SERVICES, LLC	c EIN-PN 93-2448872-001
a	Plan name	STAFURSKY PAVING CO., INC. 401(K) PLAN	
b	Name of plan sponsor	STAFURSKY PAVING CO., INC.	c EIN-PN 23-2206058-001
a	Plan name	STALEY STEEL LLC PLAN	
b	Name of plan sponsor	STALEY STEEL LLC	c EIN-PN 75-1461141-001
a	Plan name	STATESBORO CARDIOLOGY PC 401K PLAN	
b	Name of plan sponsor	STATESBORO CARDIOLOGY PC	c EIN-PN 58-2321454-002
a	Plan name	STERLING PAPER, INC 401 (K) BENEFIT PLAN	
b	Name of plan sponsor	STERLING PAPER COMPANY	c EIN-PN 31-4317038-001
a	Plan name	STEVENS COMPANIES 401(K) PLAN & TRUST	
b	Name of plan sponsor	STEVENS COMPANIES 401(K) PLAN & TRU	c EIN-PN 75-1302273-001
a	Plan name	SUMMIT PACKAGING SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	SUMMIT PACKAGING SYSTEMS, LLC	c EIN-PN 02-0325133-002
a	Plan name	SUMMUS HEALTH CARE 401(K) PLAN	
b	Name of plan sponsor	SUMMUS HEALTH CARE, LLC	c EIN-PN 82-2957179-001
a	Plan name	SUNNYHILL, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SUNNYHILL, INC.	c EIN-PN 43-1150250-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SUPER T TRANSPORT 401(K) PLAN	
b	Name of plan sponsor	SUPER T TRANSPORT, INC.	c EIN-PN 26-4153139-001
a	Plan name	T-M VACUUM PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor	T M VACUUM PRODUCTS, INC.	c EIN-PN 22-1772520-002
a	Plan name	TC LYONS ELECTRIC, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TC LYONS ELECTRIC, LLC	c EIN-PN 47-3321896-001
a	Plan name	TEACHER CREATED MATERIALS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TEACHER CREATED MATERIALS, INC	c EIN-PN 33-0004235-001
a	Plan name	TECHNICAL AIR PRODUCTS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TECHNICAL AIR PRODUCTS, LLC	c EIN-PN 38-4023649-001
a	Plan name	TERAZO, INC. 401(K) PLAN	
b	Name of plan sponsor	TERAZO, INC.	c EIN-PN 86-2530775-001
a	Plan name	THE 401K MANEUVER POOLED EMPLOYER PLAN	
b	Name of plan sponsor	THE FINWAY GROUP, LLC	c EIN-PN 42-1468222-017
a	Plan name	THE 401K PLAN PEP	
b	Name of plan sponsor	PENTEGRA SERVICES INC	c EIN-PN 13-5645888-003
a	Plan name	THE ARCHITECT 401(K) PLAN - THE FINWAY GROUP, LLC	
b	Name of plan sponsor	THE FINWAY GROUP, LLC	c EIN-PN 42-1468222-001
a	Plan name	THE ASHGROVE HOLDINGS 401K PLAN	
b	Name of plan sponsor	ASHGROVE HOLDINGS, LLC	c EIN-PN 13-4122483-001
a	Plan name	THE BEACON GROUP, LLC 401K PLAN	
b	Name of plan sponsor	THE BEACON GROUP, LLC	c EIN-PN 35-2342753-001
a	Plan name	THE CAM COLLECTIVE 401(K) PLAN	
b	Name of plan sponsor	TROWBRIDGE CAM HOLDINGS, INC	c EIN-PN 88-1147453-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	THE CENTURY COMPANIES, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	THE CENTURY COMPANIES, INC.
c	EIN-PN	58-2125139-001
a	Plan name	THE CHILDRENS SHELTER 401(K) PLAN
b	Name of plan sponsor	THE CHILDRENS SHELTER
c	EIN-PN	74-1109660-001
a	Plan name	THE COMMERCIAL GROUP, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	THE COMMERCIAL GROUP, INC.
c	EIN-PN	65-0627992-002
a	Plan name	THE LAWRENCE COMMUNITY MANAGEMENT GROUP, INC. 401(K) RETIREMENT PLAN
b	Name of plan sponsor	THE LAWRENCE COMMUNITY MANAGEMENT GROUP, INC.
c	EIN-PN	31-1504597-001
a	Plan name	THE LAWRENCE GROUP COMPANIES 401(K) PLAN
b	Name of plan sponsor	G. M. LAWRENCE & CO.
c	EIN-PN	46-4308986-001
a	Plan name	THE LINEUP, A RETIREMENT SAVINGS PLAN BY ONDEFEND 401(K) PLAN
b	Name of plan sponsor	ONDEFEND, LLC
c	EIN-PN	81-1895971-001
a	Plan name	THE LITTLE CLUB, INC. 401(K) PLAN
b	Name of plan sponsor	THE LITTLE CLUB, INC.
c	EIN-PN	59-1209498-001
a	Plan name	THE MUNZING 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MUNZING
c	EIN-PN	20-2650402-002
a	Plan name	THE PRICE ORGANIZATION 401(K) RETIREMENT PLAN
b	Name of plan sponsor	THE PRICE ORGANIZATION
c	EIN-PN	51-0294525-003
a	Plan name	THE TSG PEP
b	Name of plan sponsor	PENTEGRA SERVICES, INC.
c	EIN-PN	13-3745616-014
a	Plan name	THE WINDOW NATION 401(K) AND PROFIT SHARING PLAN
b	Name of plan sponsor	WINDOW NATION LLC
c	EIN-PN	20-5084724-001
a	Plan name	THERMAL PLASTIC DESIGN, INC. SAFE HARBOR 401K PLAN
b	Name of plan sponsor	THERMAL PLASTIC DESIGN, INC.
c	EIN-PN	39-1781069-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name THIELEN MOTORS, INC. PENSION & PROFIT SHARING PLAN	
b	Name of plan sponsor THIELEN MOTORS, INC.	c EIN-PN 41-1266277-001
a	Plan name THOMASON MACHINE WORKS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THOMASON MACHINE WORKS, INC.	c EIN-PN 36-3929948-001
a	Plan name TIMOTHY N. BYRD, D.M.D. & ASSOCIATES, P.C. RETIREMENT PLAN & TRUST	
b	Name of plan sponsor TIMOTHY N. BYRD, D.M.D. & ASSOCIATES, P.C.	c EIN-PN 06-1642865-001
a	Plan name TIS INTERNATIONAL INC 401(K) P/S PLAN	
b	Name of plan sponsor TIS INTERNATIONAL INC	c EIN-PN 20-4960172-002
a	Plan name TITAN HOME IMPROVEMENT 401(K) PLAN	
b	Name of plan sponsor TITAN HOLDINGS, LLC	c EIN-PN 84-2483167-002
a	Plan name TOMAHAWK ENERGY INC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor TOMAHAWK ENERGY INC	c EIN-PN 58-2198682-001
a	Plan name TPC ENGINEERING HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor TPC ENGINEERING HOLDINGS, INC.	c EIN-PN 87-4037719-001
a	Plan name TRACKABLE LEAD GENERATION 401(K) PLAN	
b	Name of plan sponsor TRACKABLE LEAD GENERATION, LLC	c EIN-PN 45-2968288-001
a	Plan name TRANS-TECH ENERGY, LLC 401K PLAN	
b	Name of plan sponsor TRANS-TECH ENERGY, LLC	c EIN-PN 46-1316128-001
a	Plan name TRI-STATE METALS, INC. 401(K) PLAN	
b	Name of plan sponsor TRI STATE METALS, INC.	c EIN-PN 63-1162106-001
a	Plan name TRIANGLE ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor TRIANGLE ENTERPRISES, INC.	c EIN-PN 61-0505334-001
a	Plan name TRYON MEDICAL PARTNERS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TRYON MEDICAL PARTNERS, PLLC	c EIN-PN 82-3553452-001

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	TWD TRADEWINDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TWD TRADEWINDS INC.	c EIN-PN 20-4980975-001
a	Plan name	UA LOCAL 159 DCP	
b	Name of plan sponsor	BOARD OF TRUSTEES OF THE UA LOCAL NO1	c EIN-PN 94-2859426-001
a	Plan name	ULTRAMET 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	ULTRAMET	c EIN-PN 95-2662293-001
a	Plan name	UNICORP NATIONAL DEVELOPMENTS INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	UNICORP NATIONAL DEVELOPMENTS INC.	c EIN-PN 59-3494092-002
a	Plan name	UNIFIED WINDOW SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	UNIFIED WINDOW SYSTEMS, INC.	c EIN-PN 11-2951669-001
a	Plan name	UNIPRES ALABAMA 401(K) PLAN	
b	Name of plan sponsor	UNIPRES ALABAMA, INC.	c EIN-PN 47-1278115-001
a	Plan name	UNITED TRANSPORT 401(K) PLAN	
b	Name of plan sponsor	UNITED TRANSPORT, LLC	c EIN-PN 81-5246030-001
a	Plan name	UROLOGICAL ASSOCIATES, P.C., P.C. 401(K) PROFIT SHARING	
b	Name of plan sponsor	UROLOGICAL ASSOCIATES, P.C.	c EIN-PN 42-0987062-002
a	Plan name	VALLENCOURT CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VALLENCOURT CONSTRUCTION COMPANY, INC.	c EIN-PN 59-2469052-001
a	Plan name	VANGUARD PACKAGING 401(K) PLAN	
b	Name of plan sponsor	VANGUARD PACKAGING, LLC	c EIN-PN 43-1055764-001
a	Plan name	VARIOSYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	VARIOSYSTEMS, INC.	c EIN-PN 75-2793709-001
a	Plan name	VIEJAS RETIREMENT PROGRAM	
b	Name of plan sponsor	THE VIEJAS BAND OF KUMEYAAY INDIANS	c EIN-PN 33-0409825-001

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 VISPERO 401K PLAN	
b	Name of plan sponsor VISPERO	c EIN-PN 33-0871664-001
a	Plan name VISUAL HEALTH SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor VISUAL HEALTH SOLUTIONS, LLC	c EIN-PN 38-4090608-001
a	Plan name VTRIPS 401(K) PLAN	
b	Name of plan sponsor VACATION RENTAL PROS PROPERTY MA	c EIN-PN 20-5070889-004
a	Plan name WALKERHUGHES GROUP LLC RETIREMENT PLAN	
b	Name of plan sponsor WALKERHUGHES GROUP LLC	c EIN-PN 82-3375914-001
a	Plan name WANHUA CHEMICAL 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor WANHUA CHEMICAL (AMERICA) CO., LTD.	c EIN-PN 37-1766067-001
a	Plan name WATSONRICE LLP 401(K) PLAN	
b	Name of plan sponsor WATSONRICE LLP	c EIN-PN 26-1726741-001
a	Plan name WEIS BUILDERS, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor WEIS BUILDERS, INC.	c EIN-PN 41-0834779-001
a	Plan name WENTWOOD COMPANIES 401(K) PLAN	
b	Name of plan sponsor WENTWOOD COMPANIES, INC.	c EIN-PN 83-2138839-001
a	Plan name WEST SHORE HOME, LLC 401(K) PLAN	
b	Name of plan sponsor WEST SHORE HOME, LLC	c EIN-PN 30-0371596-001
a	Plan name WESTERN HEAVY HAUL, INC. RETIREMENT PLAN	
b	Name of plan sponsor WESTERN HEAVY HAUL, INC.	c EIN-PN 48-1302875-001
a	Plan name WESTERN HOME EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor WESTERN HOME SERVICES	c EIN-PN 27-2825987-001
a	Plan name WESTERWOOD GLOBAL USA CORPORATION 401(K) PLAN	
b	Name of plan sponsor WESTERWOOD GLOBAL USA CORPORATION	c EIN-PN 80-0905560-001

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 INDEXSELECT CONSERVATIVE 2035 FUND	B Three-digit plan number (PN) ▶ 312
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 81-4515825

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)	16168995
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	107253973
(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	90873907	123422968
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	37229
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	2602225	16169002
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2602225	16206231
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	88271682	107216737

Part II Income and Expense Statement

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

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

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		8166206
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		8166206

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	5238	
(5) Investment advisory and investment management fees	2i(5)	98478	
(6) Bank or trust company trustee/custodial fees	2i(6)	36703	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		140419
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		140419

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		8025787
l Transfers of assets:			
(1) To this plan.....	2l(1)		57401886
(2) From this plan	2l(2)		46482618

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 _____.