

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; text-align: center;">2024</p> <hr/> <p style="text-align: center;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) C

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>INDEXSELECT MODERATE 2065 FUND</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>775</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>GREAT GRAY TRUST COMPANY, LLC</u></p> <p><u>6725 VIA AUSTI PARKWAY, SUITE 260</u> <u>LAS VEGAS, NV 89119</u></p>	<p>1c Effective date of plan</p> <hr/> <p>2b Employer Identification Number (EIN) <u>38-7275306</u></p> <p>2c Plan Sponsor's telephone number <u>866-427-6885</u></p> <p>2d Business code (see instructions)</p>

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

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

SIGN HERE			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.	09/30/2025	BRIAN MULLER
	Signature of DFE	Date	Enter name of individual signing as DFE

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <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 MODERATE 2065 FUND</u>	B Three-digit plan number (PN) ▶ <u>775</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>38-7275306</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>33692882</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>57913005</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>4296014</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>FTSE NAREIT ALL EQUITY REITS INDEX</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>99-3288435-001</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>978591</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) 978591
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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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)
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Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name	401(K) PEP ADVANTAGE PLAN - HEART AND VASCULAR INSTITUTE OF WISCONSIN, S.C.
b	Name of plan sponsor	HEART AND VASCULAR INSTITUTE OF WISCONSIN, S.C.
c	EIN-PN	83-2640128-001
a	Plan name	A.R. BROUWER COMPANY, LLC SAFE HARBOR 401(K) PLAN
b	Name of plan sponsor	A.R. BROUWER COMPANY
c	EIN-PN	38-3393516-001
a	Plan name	A360 INC. 401(K) PLAN
b	Name of plan sponsor	A360 INC.
c	EIN-PN	81-4491906-001
a	Plan name	AAAA INSURANCE 401(K) PROFIT SHARING PLAN #2
b	Name of plan sponsor	SAGA INTERNATIONAL, INC. DBA AAAA INSURANCE
c	EIN-PN	76-0444449-003
a	Plan name	AAKRON RULE CORP. 401K PROFIT SHARING PLAN
b	Name of plan sponsor	AAKRON RULE CORPORATION
c	EIN-PN	16-0919851-001
a	Plan name	ABCM CORPORATION 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	ABCM CORPORATION
c	EIN-PN	42-1008939-001
a	Plan name	ACS TESTING INC. 401(K) PLAN
b	Name of plan sponsor	ACS TESTING INCORPORATED
c	EIN-PN	93-1321390-001
a	Plan name	ADVANCED FAMILY DENTISTRY PROFIT SHARING PLAN
b	Name of plan sponsor	ADVANCED FAMILY DENTISTRY
c	EIN-PN	27-1396191-001
a	Plan name	ADVANCED RETINA CENTER, L.C. PROFIT SHARING PLAN
b	Name of plan sponsor	ADVANCED RETINA CENTER, L.C.
c	EIN-PN	26-3333268-001
a	Plan name	AEPS CORPORATION 401(K) PLAN
b	Name of plan sponsor	AMERICAN EAGLE PROTECTIVE SERVICES CORPORATION
c	EIN-PN	42-1606508-101
a	Plan name	AFA INDUSTRIES, INC. 401(K) PLAN
b	Name of plan sponsor	AFA INDUSTRIES, INC.
c	EIN-PN	38-2738992-002
a	Plan name	AGREQUIP, INC. 401(K) PLAN
b	Name of plan sponsor	AGREQUIP, IN.
c	EIN-PN	74-2294267-001

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	AHI SUPPLY, LLC 401(K) PLAN	
b	Name of plan sponsor	AHI SUPPLY, LLC	c EIN-PN 81-0620178-001
a	Plan name	AIRPARK MOTOR VEHICLES SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	AIRPARK MOTOR VEHICLE SERVICES, LLC	c EIN-PN 26-0066740-001
a	Plan name	ALC ELECTRICAL CONTRACTOR INC. RETIREMENT PLAN	
b	Name of plan sponsor	ALC ELECTRICAL CONTRACTOR, INC.	c EIN-PN 20-4549072-002
a	Plan name	ALL SAINTS FEDERAL CREDIT UNION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ALL SAINTS FEDERAL CREDIT UNION	c EIN-PN 34-0714219-001
a	Plan name	ALLECIA LINDSEY POTTINGER LAW FIRM RETIREMENT PLAN	
b	Name of plan sponsor	ALLECIA LINDSEY POTTINGER LAW FIRM, PLLC	c EIN-PN 45-2953989-001
a	Plan name	ALLEGRA SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	HIGH STANDARDS CORP.	c EIN-PN 42-1238855-001
a	Plan name	ALLEN CONSULTING, INC. 401(K) PLAN	
b	Name of plan sponsor	ALLEN CONSULTING, INC.	c EIN-PN 73-1077678-001
a	Plan name	ALLEN MEDIA BROADCASTING 401K PLAN	
b	Name of plan sponsor	ALLEN MEDIA BROADCASTING, LLC	c EIN-PN 47-1403290-001
a	Plan name	ALLIED BUILDING INSPECTORS LOCAL UNION NO. 211 IUOE ANNUITY FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES OF THE ALLIED BUILDING INSPECTORS LOCAL UNION NO. 21	c EIN-PN 93-3768453-001
a	Plan name	ALLSTARS CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	ALLSTARS CORPORATION	c EIN-PN 81-2240655-001
a	Plan name	ALOK KRISHNA, M.D. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ALOK KRISHNA, M.D.	c EIN-PN 46-0907936-002
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

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	ALTERNATIVE PATHS 401K P/S PLAN	
b	Name of plan sponsor	ALTERNATIVE PATHS, INC	c EIN-PN 34-1617525-002
a	Plan name	ALWAYS INTEGRITY MACHINING LLC 401(K) PLAN	
b	Name of plan sponsor	ALWAYS INTEGRITY MACHINING LLC	c EIN-PN 74-3165813-001
a	Plan name	AMERICAN CRUISE LINES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THE AMERICAN CRUISE LINES, INC.	c EIN-PN 06-1324808-001
a	Plan name	AMERICAN HYDRO 401(K) PLAN	
b	Name of plan sponsor	AMERICAN HYDRO	c EIN-PN 23-2426636-001
a	Plan name	AMERICAN INTEGRITY 401(K) PLAN	
b	Name of plan sponsor	AMERICAN INTEGRITY INSURANCE COMPANY OF FLORIDA	c EIN-PN 20-5239410-002
a	Plan name	ANESTHESIOLOGISTS ASSOC 401K PLAN	
b	Name of plan sponsor	ANESTHESIOLOGISTS ASSOCIATED,P.C.	c EIN-PN 63-0577011-003
a	Plan name	APPLIED COMMUNICATIONS GROUP	
b	Name of plan sponsor	APPLIED COMMUNICATIONS GROUP	c EIN-PN 36-4158642-001
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	ARGONAUT WINE & LIQUOR STORE, INC. 401(K) PLAN	
b	Name of plan sponsor	ARGONAUT WINE & LIQUOR STORE, INC.	c EIN-PN 84-0534946-001
a	Plan name	ARMSTRONG CRICKET FARM-GA 401(K) PLAN	
b	Name of plan sponsor	ARMSTRONG CRICKET FARM-GA, LLC	c EIN-PN 27-2716995-001
a	Plan name	ARONA CORPORATION 401(K) PLAN	
b	Name of plan sponsor	ARONA CORPORATION	c EIN-PN 42-1455271-001
a	Plan name	ASCENT ELECTRIC 401(K) PLAN	
b	Name of plan sponsor	ASCENT ELECTRIC, LLC	c EIN-PN 81-2615938-001

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	ASHBERRY ACQUISITION CO 401K PLAN	
b	Name of plan sponsor	ASHBERRY ACQUISITION COMPANY	c EIN-PN 58-2631904-001
a	Plan name	ASK LLP PARTNERSHIP PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	ASK LLP	c EIN-PN 41-1916951-001
a	Plan name	ASSOCIATED DENTISTS, S.C. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ASSOCIATED DENTISTS, S.C.	c EIN-PN 39-1606037-001
a	Plan name	ASSOCIATED OCCUPATIONAL THERAPISTS, INC. 401(K) PLAN	
b	Name of plan sponsor	ASSOCIATED OCCUPATIONAL THERAPISTS, INC.	c EIN-PN 25-1390356-001
a	Plan name	ASTERI RETIREMENT PLAN	
b	Name of plan sponsor	ASTERI CONSULTING SERVICES, LLC	c EIN-PN 84-3727740-001
a	Plan name	ASTRANA HEALTH MANAGEMENT INC CASH OR DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	ASTRANA HEALTH MANAGEMENT INC	c EIN-PN 95-4472349-001
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	ATLAS INTERNAL MEDICINE 401(K) PLAN	
b	Name of plan sponsor	STEVENS HEALTH SERVICES, P.C. DBA ATLA	c EIN-PN 26-4839140-002
a	Plan name	ATLSS-ASH 401(K) PLAN	
b	Name of plan sponsor	ATLANTIC SELF STORAGE, LLC	c EIN-PN 46-5543216-001
a	Plan name	ATMED TREATMENT CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor	ATMED TREATMENT CENTER, INC.	c EIN-PN 05-0380394-001
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	AUTISM EDUCATION & THERAPY CENTER 401(K) PLAN	
b	Name of plan sponsor	AUTISM EDUCATION AND THERAPY CENTER, LLC	c EIN-PN 83-2107986-001

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	AVID BIOSERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	AVID BIOSERVICES, INC.	c EIN-PN 95-3698422-001
a	Plan name	AXA ASSISTANCE USA, INC. 401(K) PLAN	
b	Name of plan sponsor	AXA ASSISTANCE USA, INC.	c EIN-PN 36-3235090-001
a	Plan name	AZURE DENTAL 401(K) PLAN	
b	Name of plan sponsor	ROSAMOND T. SONNEN, DDS, PA	c EIN-PN 46-4089459-001
a	Plan name	B & J GROUP RETIREMENT PLAN	
b	Name of plan sponsor	B&J SPECIALTY, INC.	c EIN-PN 35-1794553-001
a	Plan name	BAK HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	BAK HOLDINGS, INC	c EIN-PN 27-4513011-001
a	Plan name	BAKER ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	BAKER ENTERPRISES, INC.	c EIN-PN 42-1507492-001
a	Plan name	BALLANTYNE VISION CARE 401(K) PLAN & TRUST	
b	Name of plan sponsor	BALLANTYNE VISION CARE	c EIN-PN 27-2802092-001
a	Plan name	BARNES, BAILEY & JANOUSH, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BARNES, BAILEY & JANOUSH, P.A.	c EIN-PN 20-2073169-001
a	Plan name	BAUDVILLE BRANDS 401(K) PLAN	
b	Name of plan sponsor	BAUDVILLE, INC.	c EIN-PN 38-2549249-001
a	Plan name	BAUMANN & DE GROOT 401(K) PLAN	
b	Name of plan sponsor	BAUMANN & DE GROOT, INC.	c EIN-PN 38-3205394-001
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	BECKENHAUER CONSTRUCTION, INC. SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor	BECKENHAUER CONSTRUCTION, INC.	c EIN-PN 47-0558199-001

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 BEHR HOLDINGS 401(K) PLAN	
b	Name of plan sponsor BEHR HOLDINGS	c EIN-PN 20-5536893-001
a	Plan name BELCHER AND DENNIS CORP 401(K) PLAN	
b	Name of plan sponsor BELCHER AND DENNIS CORP DBA IDEAL TRANSPORTATION	c EIN-PN 20-2102004-001
a	Plan name BELLWETHER ELECTRIC EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor BELLWETHER ELECTRIC COMPANY	c EIN-PN 03-0406469-001
a	Plan name BERGGRUEN INSTITUTE 401(K) PLAN	
b	Name of plan sponsor BERGGRUEN INSTITUTE	c EIN-PN 46-5602320-001
a	Plan name BEST PLUMBING SPECIALTIES PROFIT SHARING PLAN	
b	Name of plan sponsor BEST PLUMBING SPECIALTIES, INC	c EIN-PN 11-2064672-001
a	Plan name BETON 401(K) PLAN	
b	Name of plan sponsor BETON, LLC	c EIN-PN 82-1552785-001
a	Plan name BFCC RETIREMENT PLAN	
b	Name of plan sponsor BIG FOOT COUNTRY CLUB	c EIN-PN 39-0165735-003
a	Plan name BLAINE BROTHERS MAINTENANCE, INC. RETIREMENT PLAN	
b	Name of plan sponsor BLAINE BROTHERS MAINTENANCE, INC.	c EIN-PN 41-1379303-001
a	Plan name BLOOMS INCORPORATED 401(K) PLAN	
b	Name of plan sponsor BLOOMS INCORPORATED	c EIN-PN 82-5366625-001
a	Plan name BLOUNTSTOWN HEALTH AND REHAB 401(K) PLAN	
b	Name of plan sponsor BLOUNTSTOWN HEALTH AND REHABILITATION CENTER	c EIN-PN 87-3508681-001
a	Plan name BLUE RIDGE NEPHROLOGY 401(K) PLAN	
b	Name of plan sponsor BLUE RIDGE NEPHROLOGY, P.A.	c EIN-PN 54-1977289-001
a	Plan name BLUECREST PROPERTY MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor BLUECREST PROPERTY MANAGEMENT, LLC	c EIN-PN 99-1724959-001

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 BNG HOSPITALITY USA 401(K) PLAN	
b	Name of plan sponsor BNG HOSPITALITY USA	c EIN-PN 59-2134787-001
a	Plan name BOLLER & VAUGHAN LAW, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BOLLER & VAUGHAN LAW, LLC	c EIN-PN 27-5490559-001
a	Plan name BOMGAARS SUPPLY, INC. PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor BOMGAARS SUPPLY, INC.	c EIN-PN 42-0795588-001
a	Plan name BRADLEY, GMELICH & WELLERSTEIN 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRADLEY, GMELICH & WELLERSTEIN LLP	c EIN-PN 95-4769511-001
a	Plan name BRADLEY, GMELICH & WELLERSTEIN EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRADLEY, GMELICH & WELLERSTEIN LLP	c EIN-PN 95-4769511-002
a	Plan name BRANCH SERVICES 401(K) PLAN	
b	Name of plan sponsor BRANCH SERVICES, INC.	c EIN-PN 11-2686867-001
a	Plan name BROTEN GARAGE LLC 401(K) PLAN	
b	Name of plan sponsor BROTEN GARAGE DOOR SALES, LLC	c EIN-PN 59-1541527-001
a	Plan name BRUCKNER EDUCATION, LLC DBA PRIMROSE SCHOOL OF COOPER CITY 401(K) PLAN	
b	Name of plan sponsor BRUCKNER EDUCATION, LLC (DBA PRIMROSE SCHOOL OF COOPER CITY)	c EIN-PN 82-2073064-001
a	Plan name BRYAN ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor BRYAN ENTERPRISES	c EIN-PN 76-0479745-002
a	Plan name BTW CONSULTANTS, INC. 401(K) PLAN	
b	Name of plan sponsor BTW CONSULTANTS, INC.	c EIN-PN 94-3297997-001
a	Plan name BUDGET MAINTENANCE PREVAILING WAGE PLAN	
b	Name of plan sponsor BUDGET MAINTENANCE CONCRETE SERVICE, INC	c EIN-PN 23-3089479-001
a	Plan name BUDGET MAINTENANCE, INC. 401(K) PLAN	
b	Name of plan sponsor BUDGET MAINTENANCE, INC	c EIN-PN 23-2912147-001

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 BUTLER DESIGN GROUP, INC. EMPLOYEE STOCK OWNERSHIP 401(K) PLAN	
b	Name of plan sponsor BUTLER DESIGN GROUP, INC.	c EIN-PN 86-0811475-002
a	Plan name C & E CONCRETE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor C & E CONCRETE, INC.	c EIN-PN 85-0231718-001
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 CAAVO INC 401(K) PLAN	
b	Name of plan sponsor CAAVO INC.	c EIN-PN 47-4404736-001
a	Plan name CABINET EXPRESS, LLC 401(K) PLAN	
b	Name of plan sponsor CABINET EXPRESS, LLC	c EIN-PN 62-1869313-001
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
a	Plan name CALIFORNIA DRYWALL CO. PROFIT SHARING PLAN	
b	Name of plan sponsor CALIFORNIA DRYWALL CO.	c EIN-PN 94-1241363-001
a	Plan name CAP MANAGEMENT GROUP LLC 401(K) PLAN	
b	Name of plan sponsor CAP MANAGEMENT GROUP LLC	c EIN-PN 87-4690127-001
a	Plan name CARE DIMENSIONS, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CARE DIMENSIONS, LLC	c EIN-PN 20-3580705-001
a	Plan name CAROLINA CHILDREN'S DENTISTRY OF COLUMBIA RETIREMENT PLAN & TRUST	
b	Name of plan sponsor CAROLINA CHILDRENS DENTISTRY OF COLUMBIA, LLC	c EIN-PN 84-3621510-002
a	Plan name CAROLINA DERMATOLOGY OF GREENVILLE 401(K) PLAN	
b	Name of plan sponsor CAROLINA DERMATOLOGY OF GREENVILLE	c EIN-PN 99-2276464-001
a	Plan name CARRION SANCHEZ RETIREMENT PLAN	
b	Name of plan sponsor CARRION SANCHEZ, LLC	c EIN-PN 66-0752164-001

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	CASTELLINI EMPLOYEE SAVINGS AND PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor	CASTELLINI COMPANY	c EIN-PN 76-0720073-001
a	Plan name	CASTROL PREMIUM LUBE EXPRESS 401(K) PLAN	
b	Name of plan sponsor	FMI HUDSPETH, INC	c EIN-PN 82-3401862-001
a	Plan name	CATOR, RUMA & ASSOCIATES, CO. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	CATOR, RUMA & ASSOCIATES, CO.	c EIN-PN 84-0522935-002
a	Plan name	CCTV WAREHOUSE PR RETIREMENT PLAN	
b	Name of plan sponsor	CCTV WAREHOUSE PR LLC	c EIN-PN 66-0785226-002
a	Plan name	CEDAR SECURITY 401(K) PLAN	
b	Name of plan sponsor	CEDAR SECURITY BANK	c EIN-PN 47-0672448-001
a	Plan name	CEMENTATION USA, INC. 401(K) PLAN	
b	Name of plan sponsor	CEMENTATION USA, INC.	c EIN-PN 20-3542645-001
a	Plan name	CENTRAL VALLEY EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	CENTRAL VALLEY BUILDERS SUPPLY	c EIN-PN 94-1566034-002
a	Plan name	CENTURY BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CENTURY BANK	c EIN-PN 64-0116990-001
a	Plan name	CHARLES FERZLI, D.D.S. P.A. 401(K) PLAN	
b	Name of plan sponsor	CHARLES FERZLI D.D.S., P.A.	c EIN-PN 56-2196587-001
a	Plan name	CHERRYLAKES 401(K) PLAN	
b	Name of plan sponsor	CHERRYLAKES 401(K) PLAN	c EIN-PN 58-1477943-001
a	Plan name	CHILD-PARENT CENTERS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CHILD-PARENT CENTERS INC.	c EIN-PN 86-0204557-001
a	Plan name	CHILDREN'S MUSEUM OF RICHMOND 401(K) PLAN	
b	Name of plan sponsor	CHILDRENS MUSEUM OF RICHMOND	c EIN-PN 51-0220694-001

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 CHOCTAW REGIONAL MEDICAL CENTER 401(A) PLAN	
b	Name of plan sponsor CHOCTAW REGIONAL MEDICAL CENTER	c EIN-PN 47-1298267-003
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 CIMARRON ELECTRIC COOPERATIVE INC. 401(K) PLAN	
b	Name of plan sponsor CIMARRON ELECTRIC COOPERATIVE INC	c EIN-PN 73-0195455-001
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 CITY EVENTIONS USA LLC 401(K) PLAN	
b	Name of plan sponsor NEW YORK OUTDOOR, INC.	c EIN-PN 26-0874053-001
a	Plan name CLARK, SCHAEFER, HACKETT & CO. PROFIT SHARING RETIREMENT PLAN (WITH 401(K) PROVISIONS)	
b	Name of plan sponsor CLARK, SCHAEFER, HACKETT & CO	c EIN-PN 31-0800053-001
a	Plan name CLASSIC AUTO GROUP 401K PLAN	
b	Name of plan sponsor CLASSIC AUTO GROUP	c EIN-PN 73-1211570-001
a	Plan name CLEAR CREEK ENDODONTICS, LLC 401(K) PLAN	
b	Name of plan sponsor CLEAR CREEK ENDODONTICS, LLC	c EIN-PN 06-1834691-001
a	Plan name CLEAVER GROUP 401(K) PLAN	
b	Name of plan sponsor HERMISTON AUTO PARTS INC	c EIN-PN 93-0623262-002
a	Plan name CLEVELAND PUBLIC THEATRE 401(K) PLAN	
b	Name of plan sponsor CLEVELAND PUBLIC THEATRE	c EIN-PN 34-1359225-001
a	Plan name CLEVELAND TRANSFORMATION ALLIANCE 401K PLAN	
b	Name of plan sponsor CLEVELAND MUNICIPAL SCHOOL DISTRICT TRANSFORMATION ALLIANCE	c EIN-PN 46-2115716-001
a	Plan name CMAA CLUB RETIREMENT PLAN	
b	Name of plan sponsor THE CLUB MANAGEMENT ASSOCIATION OF AMERICA	c EIN-PN 53-0235732-003

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	CMC ENGINEERING 401(K) PLAN	
b	Name of plan sponsor	CMC ENGINEERING	c EIN-PN 23-2149767-002
a	Plan name	CMI DIGITAL MEDIA LLC SAVINGS PLAN	
b	Name of plan sponsor	AXESA SERVICIOS DE INFORMACION S. EN C.	c EIN-PN 66-0568619-002
a	Plan name	COLLETTE HEALTH LLC RETIREMENT READINESS 401(K) PLAN	
b	Name of plan sponsor	COLLETTE HEALTH LLC	c EIN-PN 86-3939564-001
a	Plan name	COLLIER COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COLLIER INSURANCE	c EIN-PN 62-0632599-001
a	Plan name	COLLINS ELECTRICAL COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COLLINS ELECTRICAL COMPANY, INC.	c EIN-PN 94-1134154-002
a	Plan name	COLSON BUSINESS SYSTEMS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	COLSON BUSINESS SYSTEMS, INC.	c EIN-PN 58-1576820-001
a	Plan name	COLT RECYCLING 401(K) PLAN	
b	Name of plan sponsor	COLT RECYCLING LLC	c EIN-PN 35-2223918-001
a	Plan name	COMMUNICATION DATA LINK 401(K) PLAN	
b	Name of plan sponsor	COMMUNICATION DATA LINK	c EIN-PN 39-1916526-001
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
a	Plan name	CONGDON, FLAHERTY, O'CALLAGHAN, REID, DONLON, TRAVIS & FISHLINGER 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	CONGDON, FLAHERTY, OCALLAGHAN, REID, DONLON, TRAVIS & FISHLINGER	c EIN-PN 11-2579360-001
a	Plan name	CONIFER HOLDINGS INC. 401K PLAN	
b	Name of plan sponsor	CONIFER HOLDINGS, INC.	c EIN-PN 27-1298795-001

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 COOK CRAIG FRANCUZENKO PLLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor COOK CRAIG, & FRANCUZENKO PLLC	c EIN-PN 20-8171039-001
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 CORPORATE COMMUNICATIONS, INC. 401(K) P/S PLAN	
b	Name of plan sponsor CORPORATE COMMUNICATIONS, INC.	c EIN-PN 04-2896787-001
a	Plan name CORYDON CONVERTING COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor CORYDON CONVERTING COMPANY, INC.	c EIN-PN 36-3215825-001
a	Plan name COWLEY'S PIGGLY WIGGLY SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor COWLEYS PIGGLY WIGGLY	c EIN-PN 39-2021088-001
a	Plan name COX ELECTRIC, INC 401(K) PLAN	
b	Name of plan sponsor COX ELECTRIC, INC.	c EIN-PN 47-2973630-001
a	Plan name CRAIG S. BINDI, M.D., INC. 401(K) PLAN	
b	Name of plan sponsor CRAIG S. BINDI, MD, INC.	c EIN-PN 27-2592581-001
a	Plan name CREDITXPRT 401(K) PLAN	
b	Name of plan sponsor CREDITXPRT INC.	c EIN-PN 52-1826790-001
a	Plan name CRIF SELECT CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor CRIF SELECT CORPORATION	c EIN-PN 83-0524731-001
a	Plan name CSC LEASING COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CSC LEASING CO.	c EIN-PN 54-1384632-001
a	Plan name CUIDADO MEDICO Y GERIATRICO OF QUEENS 401(K) PS	
b	Name of plan sponsor CUIDADO MEDICO Y GERIATRICO OF QUEENS, P.C.	c EIN-PN 27-1162539-001
a	Plan name CULINEX 401(K) PLAN	
b	Name of plan sponsor CULINEX, LLC	c EIN-PN 65-1293824-001

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	CURTIS PACKAGING CORPORATION MASTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CURTIS PACKAGING CORPORATION	c EIN-PN 06-1032297-001
a	Plan name	CUSTOM GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CUSTOM GROUP LLC	c EIN-PN 66-0411164-002
a	Plan name	CWR MANAGEMENT LLC 401(K) PLAN	
b	Name of plan sponsor	CWR MANAGEMENT LLC DBA CLEAR WATER RESOURCES	c EIN-PN 47-1364049-001
a	Plan name	DALIGATY INC 401(K) PLAN	
b	Name of plan sponsor	DALIGATY, INC	c EIN-PN 85-3658882-001
a	Plan name	DAVIDSON HOSPITALITY GROUP 401(K) PLAN	
b	Name of plan sponsor	DAVIDSON HOSPITALITY GROUP	c EIN-PN 20-3747936-002
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	DEEP RUN RETIREMENT PLAN	
b	Name of plan sponsor	DEEP RUN ROADHOUSE LLC	c EIN-PN 46-0686909-001
a	Plan name	DEEPWATCH INC 401(K) PLAN	
b	Name of plan sponsor	DEEPWATCH, INC	c EIN-PN 38-4056947-001
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	DEGEEST CORPORATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	DEGEEST CORPORATION	c EIN-PN 46-0335254-001
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)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name DEMOCRATIC PARTY OF WISCONSIN 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor DEMOCRATIC PARTY OF WISCONSIN	c EIN-PN 39-0793066-001
a	Plan name DESIGN ELECTRIC, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor DESIGN ELECTRIC INC.	c EIN-PN 41-1223438-001
a	Plan name DEXT CAPITAL, LLC 401(K) PLAN	
b	Name of plan sponsor DEXT CAPITAL, LLC	c EIN-PN 83-1054804-001
a	Plan name DI OVERNITE 401(K) PLAN	
b	Name of plan sponsor DI OVERNIGHT, LLC	c EIN-PN 46-3551719-001
a	Plan name DIAMOND HOME HEALTH CARE, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor DIAMOND HOME HEALTH CARE, INC.	c EIN-PN 20-8996957-001
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 DIRTBAG'S 401(K) PLAN	
b	Name of plan sponsor ROCKY VENTURES DBA THE FRONT CLIMBING GYM	c EIN-PN 20-2358860-001
a	Plan name DISCOVER KALAMAZOO 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KALAMAZOO COUNTY CONVENTION & VISITOR BUREAU, INC.	c EIN-PN 20-8202747-001
a	Plan name DISTRIBUTOR STAFFING COMPANY LLC PROFIT SHARING PLAN	
b	Name of plan sponsor DISTRIBUTOR STAFFING COMPANY LLC	c EIN-PN 81-3801438-002
a	Plan name DONJON MARINE CO., INC. RETIREMENT PLAN	
b	Name of plan sponsor DONJON MARINE CO., INC.	c EIN-PN 22-1844615-001
a	Plan name DOUGLAS FLOOR COVERING 401(K) EMPLOYEE PLAN	
b	Name of plan sponsor DOUGLAS FLOOR COVERING, INC.	c EIN-PN 36-3343462-003
a	Plan name DOYLESTOWN COUNTRY CLUB 401K PLAN	
b	Name of plan sponsor DOYLESTOWN COUNTRY CLUB	c EIN-PN 23-0535085-001

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 DREAMBUILDER 401(K) PLAN	
b	Name of plan sponsor DREAMBUILDER CUSTOM HOMES INC.	c EIN-PN 93-1277744-001
a	Plan name DRIFTWOOD RESTAURANT MANAGEMENT INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DRIFTWOOD RESTAURANT MANAGEMENT INC.	c EIN-PN 46-1592074-001
a	Plan name DUBUQUE SURGERY RETIREMENT PLAN	
b	Name of plan sponsor DUBUQUE SURGERY, P.C.	c EIN-PN 42-1414291-002
a	Plan name DULTMEIER SALES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DULTMEIER SALES LLC	c EIN-PN 47-0430008-001
a	Plan name DUTTON LAW GROUP RETIREMENT PLAN	
b	Name of plan sponsor DUTTON LAW GROUP	c EIN-PN 59-3735939-001
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 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 E3, INC. 401(K) SAVINGS & RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor E3, INC.	c EIN-PN 93-1276669-001
a	Plan name EAGLE RIDGE HOSPITALITY, LLC 401(K) PLAN	
b	Name of plan sponsor EAGLE RIDGE HOSPITALITY, LLC D/B/A EAGLE RIDGE RESORT & SPA	c EIN-PN 83-4394814-001
a	Plan name EARTHWORKS EXCAVATING SERVICES 401(K) PLAN	
b	Name of plan sponsor EARTHWORKS EXCAVATING SERVICES, INC.	c EIN-PN 91-1976876-001
a	Plan name ECHO 401K PLAN	
b	Name of plan sponsor EAST COAST HABILITATION OPTIONS	c EIN-PN 46-1677016-003
a	Plan name EDGE ELECTRICAL SYSTEMS, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor EDGE ELECTRICAL SYSTEMS, LLC	c EIN-PN 46-4200887-001

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	EDGE NEW JERSEY, INC. 401(K) PLAN	
b	Name of plan sponsor	EDGE NEW JERSEY, INC.	c EIN-PN 22-3184974-002
a	Plan name	EDGE ONE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	EDGE ONE, LLC	c EIN-PN 39-1813629-001
a	Plan name	EGM, L.L.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EGM, L.L.C.	c EIN-PN 63-1259690-001
a	Plan name	ELECTRICAL SERVICES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ELECTRICAL SERVICES	c EIN-PN 11-2158501-001
a	Plan name	ELEMENTAL ENZYMES 401(K) PLAN	
b	Name of plan sponsor	SPOGEN BIOTECH DBA ELEMENTAL ENZYMES	c EIN-PN 27-5172224-001
a	Plan name	ELITE ELECTRICAL CONTRACTING LLC 401(K) PLAN	
b	Name of plan sponsor	ELITE ELECTRICAL CONTRACTING LLC	c EIN-PN 82-0964593-001
a	Plan name	ELLIOTT ORTHODONTICS, PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELLIOTT ORTHODONTICS, PLLC	c EIN-PN 20-3161686-001
a	Plan name	ELWAY DEALERS 401(K) PLAN	
b	Name of plan sponsor	EP BLAZER, LLC DBA JOHN ELWAY CHEVROLET	c EIN-PN 27-5044375-001
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	ENERGY ENTERPRISE GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ENERGY ENTERPRISE GROUP	c EIN-PN 27-4437186-001
a	Plan name	ENHANCED REVENUE SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	ENHANCED REVENUE SOLUTIONS	c EIN-PN 83-1980426-001
a	Plan name	ENTECH INSTRUMENTS, INC. 401(K) PLAN	
b	Name of plan sponsor	ENTECH INSTRUMENTS INC	c EIN-PN 77-0249862-002

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 ENVIRONMENTAL CONSULTANT AND MANAGEMENT INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ENVIRONMENTAL CONSULTANT AND MANAGEMENT INC	c EIN-PN 47-3187267-001
a	Plan name ESP 401(K) PLAN	
b	Name of plan sponsor EXTERIOR SOLUTIONS PLUS	c EIN-PN 47-4568223-001
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 EVANS MANUFACTURING, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor EVANS MANUFACTURING, LLC	c EIN-PN 33-0427106-001
a	Plan name EVERGREEN SPRINKLING SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor EVERGREEN SPRINKLING, INC.	c EIN-PN 38-3261475-001
a	Plan name EXACTA LAND SURVEYORS 401(K) PLAN	
b	Name of plan sponsor EXACTA LAND SURVEYORS, LLC	c EIN-PN 83-3240294-001
a	Plan name EXCELSIOR DEFENSE RETIREMENT PLAN	
b	Name of plan sponsor EXCELSIOR DEFENSE, INC.	c EIN-PN 59-3541210-002
a	Plan name EXEMPLAR HPO, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor EXEMPLAR HPO, INC.	c EIN-PN 87-4543704-001
a	Plan name EXTEND, INC. 401(K) PLAN	
b	Name of plan sponsor EXTEND, INC.	c EIN-PN 36-4919826-001
a	Plan name EYE CONSULTANTS OF NORTHERN VIRGINIA, P.C. PROFIT-SHARING PLAN	
b	Name of plan sponsor EYE CONSULTANTS OF NORTHERN VIRGINIA, P.C.	c EIN-PN 54-1168250-003
a	Plan name EYE DOCTORS OF LANCASTER, LTD. 401(K) PLAN	
b	Name of plan sponsor EYE DOCTORS OF LANCASTER, LTD.	c EIN-PN 23-2182421-001
a	Plan name F.I.T., INC. 401(K) PLAN	
b	Name of plan sponsor FUSERASHI INTERNATIONAL TECHNOLOGY, INC.	c EIN-PN 34-1826205-001

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 MEDICINE AT GREENHILL 401(K) PLAN	
b	Name of plan sponsor FAMILY MEDICINE AT GREENHILL	c EIN-PN 51-0397662-001
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 FAMILY VISION 401(K) PLAN	
b	Name of plan sponsor FAMILY VISION CENTER OF LA CROSSE, LLC	c EIN-PN 81-4895832-001
a	Plan name FARMERS & MECHANICS FEDERAL 401(K) PLAN	
b	Name of plan sponsor FARMERS & MECHANICS FEDERAL	c EIN-PN 35-0303170-001
a	Plan name FASTSIGNS EVERETT 401(K) PLAN	
b	Name of plan sponsor JOLLY FAMILY CORP DBA FASTSIGNS EVERETT	c EIN-PN 81-3707436-001
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 FIDUCIARY FREEDOM RETIREMENT PLAN BY DURANT DISTRIBUTING	
b	Name of plan sponsor DURANT DISTRIBUTING, INC.	c EIN-PN 77-0330151-001
a	Plan name FIDUCIARY FREEDOM RETIREMENT PLAN PEP BY OCEANSIDE CHAMBER OF COMMERCE	
b	Name of plan sponsor OCEANSIDE CHAMBER OF COMMERCE	c EIN-PN 95-1061083-001
a	Plan name FIRST IMPRESSION IRON WORKS, INC.	
b	Name of plan sponsor FIRST IMPRESSION IRON WORKS, INC.	c EIN-PN 82-1958555-001
a	Plan name FIVE STAR AWNINGS INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor FIVE STAR AWNINGS INC	c EIN-PN 20-3946271-001
a	Plan name FLORES & ASOCIADOS CSP 1081.01(D) PLAN	
b	Name of plan sponsor FLORES & ASOCIADOS CSP	c EIN-PN 66-0888272-002
a	Plan name FLOW-RITE EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor FLOW-RITE CONTROLS, LTD.	c EIN-PN 36-3107221-001

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	FOLEY'S TREE SERVICE, LLC 401(K) PLAN	
b	Name of plan sponsor	FOLEYS TREE SERVICE, LLC	c EIN-PN 81-0565515-001
a	Plan name	FOOD MICROBIOLOGICAL LABORATORIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FOOD MICROBIOLOGICAL LABORATORIES, INC.	c EIN-PN 20-2141300-002
a	Plan name	FOOD SAFETY SOLUTIONS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FOOD SAFETY SOLUTIONS, INC.	c EIN-PN 95-4817922-001
a	Plan name	FORESIGHT SECURITY CONSULTING LLC 401(K) PSP	
b	Name of plan sponsor	FORESIGHT SECURITY CONSULTING, LLC	c EIN-PN 82-5495303-001
a	Plan name	FORMATION NATION, INC. 401(K) PLAN	
b	Name of plan sponsor	FORMATION NATION, INC.	c EIN-PN 88-0515062-002
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	FOX RIVER MILLS 401(K) PLAN	
b	Name of plan sponsor	FRM SOCKS LLC	c EIN-PN 61-1804624-001
a	Plan name	FOXEN ADMINISTRATION, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FOXEN ADMINISTRATION LLC	c EIN-PN 86-2313862-001
a	Plan name	FRONTIER NURSING UNIVERSITY 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	FRONTIER NURSING UNIVERSITY	c EIN-PN 61-1124267-002
a	Plan name	FUEL YOUR 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	VIRGINIA TRANSPORTATION CORPORATION	c EIN-PN 05-0481917-001
a	Plan name	FULLER REALTY ADVISERS LTD 401(K) PLAN	
b	Name of plan sponsor	FULLER REALTY ADVISERS LTD	c EIN-PN 20-3158533-001
a	Plan name	G & D FONTANA, INC. 401(K) PLAN	
b	Name of plan sponsor	G & D FONTANA, INC.	c EIN-PN 36-3852676-001

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	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	GABRIELSON CLINIC FOR WOMEN PLC 401(K) PLAN	
b Name of plan sponsor	GABRIELSON CLINIC FOR WOMEN PLC	c EIN-PN 27-0544282-001
a Plan name	GASCO INDUSTRIAL RETIREMENT PLAN	
b Name of plan sponsor	GASCO INDUSTRIAL CORP	c EIN-PN 37-1477418-001
a Plan name	GENOVA TECHNOLOGIES 401(K) PLAN	
b Name of plan sponsor	GENOVA TECHNOLOGIES	c EIN-PN 42-1466298-001
a Plan name	GENTRY COMPANY 401(K) PLAN	
b Name of plan sponsor	GENTRY COMPANY, INC.	c EIN-PN 74-1535782-001
a Plan name	GEORGE HILDEBRANDT 401(K) PLAN	
b Name of plan sponsor	GEORGE HILDEBRANDT, INC.	c EIN-PN 14-1422092-001
a Plan name	GINART LAW FIRM 401(K) PLAN	
b Name of plan sponsor	THE LAW OFFICES OF MICHAEL C GINART, JR & ASSOCIATES, LLC	c EIN-PN 47-2599991-001
a Plan name	GIOVANNI BOIANO, D.D.S. PC 401K PROFIT SHARING PLAN	
b Name of plan sponsor	GIOVANNI BOIANO, D.D.S. PC	c EIN-PN 13-3963495-002
a Plan name	GIRL SCOUTS OF SILVER SAGE COUNCIL, INC. 401(K) PLAN	
b Name of plan sponsor	GIRL SCOUTS OF SILVER SAGE COUNCIL, INC.	c EIN-PN 82-0259644-001
a Plan name	GIVENHANSCO 401(K) PLAN	
b Name of plan sponsor	GIVENHANSCO, INC.	c EIN-PN 31-1750596-010
a Plan name	GLENDALE ENTERPRISES 401(K) PLAN	
b Name of plan sponsor	GLENDALE ENTERPRISES, INC.	c EIN-PN 72-1367234-001
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 GODSPEED MOTORS INC 401(K) PLAN	
b	Name of plan sponsor GODSPEED MOTORS INC	c EIN-PN 33-1208058-001
a	Plan name GOLD 401(K) SAVINGS PLAN	
b	Name of plan sponsor MATTHEW GOLD DDS LLC	c EIN-PN 93-3453844-001
a	Plan name GOODWIN MANAGEMENT, INC. 401(K) PLAN	
b	Name of plan sponsor GOODWIN MANAGEMENT, INC.	c EIN-PN 74-2474197-001
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 GRAND RAPIDS FOAM TECHNOLOGIES, INC. RETIREMENT PLAN	
b	Name of plan sponsor GRAND RAPIDS FOAM TECHNOLOGIES, INC.	c EIN-PN 38-1812836-001
a	Plan name GRANGETTO'S FARM & GARDEN SUPPLY 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor GRANGETTOS FARM AND GARDEN SUPPLY	c EIN-PN 95-2561657-001
a	Plan name GRANTWORKS, INC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GRANTWORKS, INC.	c EIN-PN 76-0446220-001
a	Plan name GRAY CONSTRUCTION CO., INC. RETIREMENT PLAN	
b	Name of plan sponsor GRAY CONSTRUCTION CO., INC.	c EIN-PN 46-0141050-001
a	Plan name GREAT LAKES DENTAL CARE, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor GREAT LAKES DENTAL CARE, P.C.	c EIN-PN 26-1443829-001
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 GREEN AND SPIEGEL U.S., LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GREEN AND SPIEGEL, US, LLC	c EIN-PN 99-0378634-001
a	Plan name GREENBRIER CHEVROLET BUICK PLAN	
b	Name of plan sponsor GREENBRIER CHEVROLET BUICK, INC.	c EIN-PN 27-0710400-001

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 GREENBRIER MOTOR COMPANY, INC. SALARY DEFERRAL 401(K) PSP	
b	Name of plan sponsor GREENBRIER MOTOR COMPANY, INC.	c EIN-PN 55-0323196-001
a	Plan name GREENES FENCE CO., INC. PROFIT SHARING PLAN	
b	Name of plan sponsor GREENES FENCE CO., INC	c EIN-PN 34-1199034-001
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 GREENWOOD TREE EXPERTS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GREENWOOD TREE EXPERTS	c EIN-PN 22-1904727-002
a	Plan name GRIZZLY FENCE & EXCAVATION 401(K) PLAN	
b	Name of plan sponsor GRIZZLY FENCE & EXCAVATION LLC	c EIN-PN 88-3804256-001
a	Plan name GTT LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GTT, LLC	c EIN-PN 02-0514874-001
a	Plan name GUETTLER & GUETTLER, INC. 401(K) PLAN	
b	Name of plan sponsor GUETTLER & GUETTLER, INC.	c EIN-PN 59-2000711-001
a	Plan name H & S PLUMBING 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HANDS INC. DBA H & S PLUMBING	c EIN-PN 47-0660412-001
a	Plan name H B CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HB CONSTRUCTION, INC.	c EIN-PN 85-0393716-001
a	Plan name H.W. HOUSTON CONSTRUCTION LLC 401(K) PLAN	
b	Name of plan sponsor H.W. HOUSTON CONSTRUCTION LLC	c EIN-PN 47-3480289-001
a	Plan name HANDI QUILTER, INC. 401(K) PLAN	
b	Name of plan sponsor HANDI QUILTER, INC.	c EIN-PN 26-3861600-001
a	Plan name HASTINGS ARCHITECTURE 401(K) PLAN	
b	Name of plan sponsor HASTINGS ARCHITECTURE, LLC	c EIN-PN 56-2313715-001

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	HATTIESBURG CYCLES 401(K) PLAN	
b	Name of plan sponsor	HATTIESBURG CYCLES	c EIN-PN 64-0732553-001
a	Plan name	HCF MANAGEMENT, INC. RETIREMENT INCENTIVE SAVINGS PLAN (HCF FAMILY OF COMPANIES)	
b	Name of plan sponsor	HCF MANAGEMENT, INC.	c EIN-PN 20-0085606-001
a	Plan name	HEALTHMARK 401(K) PLAN	
b	Name of plan sponsor	HEALTHMARK INDUSTRIES COMPANY	c EIN-PN 38-2073977-001
a	Plan name	HEART CENTER OF NEVADA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOHAIL ANJUM-DOST WATTOO, M.D.S, LTD.	c EIN-PN 88-0161856-002
a	Plan name	HEART CITY GROUP, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	HEART CITY AUTOMOTIVE INC	c EIN-PN 35-1537836-002
a	Plan name	HEN-WAY MFG, INC. SAFE HARBOR PLAN	
b	Name of plan sponsor	HEN-WAY MFG, INC.	c EIN-PN 41-1474734-002
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	HENNEN LUMBER COMPANY, INC. PROFIT SHARING & 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor	HENNEN LUMBER COMPANY, INC	c EIN-PN 41-0681810-001
a	Plan name	HERMAN MANUFACTURING CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HERMAN MANUFACTURING CO., INC.	c EIN-PN 41-1286729-001
a	Plan name	HERSHCOVITCH MD 401(K) PLAN	
b	Name of plan sponsor	HERSHCOVITCH MD PC	c EIN-PN 81-2986051-001
a	Plan name	HFH GBR 401(K) PLAN	
b	Name of plan sponsor	HABITAT FOR HUMANITY OF GREATER BATON ROUGE, INC.	c EIN-PN 72-1141747-001
a	Plan name	HHS GOVERNMENT SERVICES, LLC RETIREMENT PLAN	
b	Name of plan sponsor	HHS GOVERNMENT SERVICES, LLC	c EIN-PN 82-5298220-001

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 HIGHLAND AG SOLUTIONS, LLC 401K PSP	
b	Name of plan sponsor HIGHLAND AG SOLUTIONS, LLC 401K PSP	c EIN-PN 47-4330680-002
a	Plan name HOME SECURITY & MANAGEMENT CO. 401(K) PLAN	
b	Name of plan sponsor HOME SECURITY & MANAGEMENT CO.	c EIN-PN 03-0263959-001
a	Plan name HOON, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HOON, INC.	c EIN-PN 31-0178325-002
a	Plan name HORIZON MANAGEMENT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HORIZON MANAGEMENT, INC.	c EIN-PN 34-1908108-001
a	Plan name HOUSTON EAR, NOSE & THROAT CLINIC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HOUSTON EAR, NOSE & THROAT CLINIC, LLP	c EIN-PN 74-1195579-002
a	Plan name HOWELL MOUNTAIN ENTERPRISES RETIREMENT PLAN	
b	Name of plan sponsor HOWELL MOUNTAIN ENTERPRISES, INC.	c EIN-PN 68-0168059-002
a	Plan name HTL HOLDINGS INC. RETIREMENT PLAN	
b	Name of plan sponsor HTL HOLDINGS INC.	c EIN-PN 35-2565768-001
a	Plan name HUE & CRY, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HUE & CRY, INC	c EIN-PN 94-2566804-001
a	Plan name HULST JEPSEN PHYSICAL THERAPY 401(K) PLAN	
b	Name of plan sponsor HULST JEPSEN PHYSICAL THERAPY, INC.	c EIN-PN 30-0002044-001
a	Plan name I.C. SYSTEM, INC. SAVINGS PLUS PLAN	
b	Name of plan sponsor I.C. SYSTEM, INC.	c EIN-PN 41-0739183-001
a	Plan name IDAHO EYE CENTER, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor IDAHO EYE CENTER, P.A.	c EIN-PN 82-0379995-002
a	Plan name IDM COMPANIES, LLC 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor IDM COMPANIES LLC	c EIN-PN 88-3973496-001

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	INDEPENDENT TRUCK UPFITTERS 401(K) PLAN	
b	Name of plan sponsor	INDEPENDENT TRUCK UPFITTERS	c EIN-PN 88-1829384-001
a	Plan name	INDUSTRIAL RIGGING SERVICE OF CENTRAL TEXAS, INC. 401(K) PLAN	
b	Name of plan sponsor	INDUSTRIAL RIGGING SERVICE OF CENTRAL TEXAS INC.	c EIN-PN 56-2405551-001
a	Plan name	INFLUENCELOGIC, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INFLUENCELOGIC, LLC	c EIN-PN 84-3881021-001
a	Plan name	INFOTRAX 401(K) PLAN	
b	Name of plan sponsor	INFOTRAX SYSTEMS	c EIN-PN 87-0584415-001
a	Plan name	INFRASTRUCTURE REPAIR EMPLOYEES' PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	INFRASTRUCTURE REPAIR SERVICE, LLC	c EIN-PN 22-3434925-001
a	Plan name	INNOVATIVE TOOL, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	INNOVATIVE TOOL, INC.	c EIN-PN 32-0096618-001
a	Plan name	INOVEX INFORMATION SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	INOVEX INFORMATION SYSTEMS	c EIN-PN 20-0789181-001
a	Plan name	INTEGRITY TAX GROUP 401(K) PLAN	
b	Name of plan sponsor	INTEGRITY TAX GROUP OF JENISON	c EIN-PN 27-1391149-001
a	Plan name	INTELIDENT SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor	INTELIDENT SOLUTIONS, LLC	c EIN-PN 57-1220613-001
a	Plan name	INTERIM HEALTHCARE 401(K)	
b	Name of plan sponsor	LOWCOUNTRY NURSING GROUP, LLC DBA INTERIM HEALTHCARE	c EIN-PN 76-0815039-003
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	INTERNATIONAL SOS GROUP OF COMPANIES 401(K) PLAN	
b	Name of plan sponsor	INTERNATIONAL SOS ASSISTANCE, INC	c EIN-PN 91-1501877-001

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	INTERNATIONAL SOS NORTH AMERICA MEDICAL SERVICES 401(K) PLAN	
b	Name of plan sponsor	INTERNATIONAL SOS NORTH AMERICA MEDICAL SERVICES HOLDINGS, INC.	c EIN-PN 83-1072236-001
a	Plan name	INTRADIEM, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	INTRADIEM, INC.	c EIN-PN 58-2190364-002
a	Plan name	INTRINSIK ARCHITECTURE, INC., 401(K) PLAN	
b	Name of plan sponsor	INTRINSIK ARCHITECTURE, INC.	c EIN-PN 20-2706705-001
a	Plan name	INVENTIVE, LLC 401(K) PLAN	
b	Name of plan sponsor	INVENTIVE, LLC	c EIN-PN 20-4903902-001
a	Plan name	ISPE 401(K) PLAN	
b	Name of plan sponsor	ISPE, INC.	c EIN-PN 59-2009272-001
a	Plan name	ISU VETERINARY SERVICES CORPORATION 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	ISU VETERINARY SERVICES CORPORATION	c EIN-PN 42-6409168-001
a	Plan name	IVONNE WELCH INSURANCE AGENCY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	IVONNE WELCH INSURANCE AGENCY, LLC	c EIN-PN 46-0932157-001
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	JAMES W. MATTERN, O.D., PLLC PROFIT SHARING PLAN	
b	Name of plan sponsor	JAMES W. MATTERN, O.D., PLLC	c EIN-PN 87-3456769-001
a	Plan name	JASON D. TORANTO, MD INC.	
b	Name of plan sponsor	JASON D. TORANTO, MD INC.	c EIN-PN 47-4846524-001
a	Plan name	JEFF WILSON, DDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JEFF WILSON, DDS, INC.	c EIN-PN 99-0395073-001
a	Plan name	JEFFREY A. GOLDBERG, DMD, PLLC 401(K) PSP & TR	
b	Name of plan sponsor	JEFFREY A. GOLDBERG D.M.D., PLLC	c EIN-PN 47-5631335-001

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 JOHN G. LANE, M.D., INC. 401(K) PLAN	
b	Name of plan sponsor JOHN G. LANE M.D., INC.	c EIN-PN 33-0799193-004
a	Plan name JOHNSTONE MCAULIFFE CONSTRUCTION INC. 401(K) PLAN	
b	Name of plan sponsor JOHNSTONE MCAULIFFE CONSTRUCTION INC.	c EIN-PN 94-3316127-001
a	Plan name JOSEPH J. ALBANESE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOSEPH J. ALBANESE, INC.	c EIN-PN 94-2247579-002
a	Plan name JOURNEY TECHNOLOGY SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor JOURNEY TECHNOLOGY SOLUTIONS	c EIN-PN 46-0634412-001
a	Plan name K & K HARDWARE LLC 401(K) PLAN	
b	Name of plan sponsor K & K HARDWARE LLC	c EIN-PN 42-0672620-001
a	Plan name K OFFICES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor K OFFICES LLC	c EIN-PN 81-1237615-001
a	Plan name K-SPACE ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor K-SPACE ASSOCIATES, INC.	c EIN-PN 38-3059777-001
a	Plan name KCG ENERGY MANAGEMENT LLC 401(K) PLAN	
b	Name of plan sponsor CHRIS HEIDGER	c EIN-PN 93-3425697-001
a	Plan name KEBCO INC. 401(K) PLAN	
b	Name of plan sponsor KEBCO INC.	c EIN-PN 61-1117760-001
a	Plan name KEMP SMITH LLP 401(K) PLAN	
b	Name of plan sponsor KEMP SMITH LLP	c EIN-PN 04-3657264-001
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 KESSINGTON, LLC 401(K) PLAN	
b	Name of plan sponsor KESSINGTON, LLC	c EIN-PN 27-4361478-001

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	KEYHOLE SOFTWARE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KEYHOLE SOFTWARE, LLC	c EIN-PN 26-2842185-001
a	Plan name	KICKIN' KAJUN 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	JB KAJUN INC	c EIN-PN 47-2879221-001
a	Plan name	KINDERKARE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KINDERKARE	c EIN-PN 04-3644760-001
a	Plan name	KISER CONSTRUCTION INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KISER CONSTRUCTION INC.	c EIN-PN 36-4539376-001
a	Plan name	KITCHEN DESIGN SOLUTIONS LLC 401(K) PLAN	
b	Name of plan sponsor	KITCHEN DESIGN SOLUTIONS	c EIN-PN 83-2824924-001
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	KNOWLTON TECHNOLOGIES, LLC UNION PLAN	
b	Name of plan sponsor	KNOWLTON TECHNOLOGIES, LLC	c EIN-PN 47-1424475-002
a	Plan name	KOCHEVAR ENDODONTICS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KOCHEVAR ENDODONTICS, PLLC	c EIN-PN 26-3752029-001
a	Plan name	KOLENE CORPORATION RETIREMENT SAVINGS PLAN 401(K)	
b	Name of plan sponsor	KOLENE CORPORATION	c EIN-PN 38-0725723-004
a	Plan name	KOPPERT BIOLOGICAL SYSTEMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KOPPERT BIOLOGICAL SYSTEMS, INC	c EIN-PN 38-3195931-002
a	Plan name	KROST 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KROST	c EIN-PN 95-3653314-002

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	KRP 401(K) PLAN	
b	Name of plan sponsor	KING, REINSCH, PROSSER & CO., L.L.P.	c EIN-PN 42-0941961-002
a	Plan name	KVLISM, LLP 401(K) PLAN	
b	Name of plan sponsor	KVLISM, LLP	c EIN-PN 27-1329764-001
a	Plan name	L.A.S. CORPORATION 401(K) PLAN	
b	Name of plan sponsor	LABOR AIDING SYSTEMS CORPORATION	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.	c EIN-PN 11-2366457-002
a	Plan name	LAKE HARTWELL DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	LAKE HARTWELL DENTISTRY, LLC	c EIN-PN 99-3449656-001
a	Plan name	LAKESIDE RANCHES 401(K)/PSP	
b	Name of plan sponsor	LAKESIDE RANCHES	c EIN-PN 82-1536513-001
a	Plan name	LAUREL FORD MISSISSIPPI, INC. 401(K) PLAN	
b	Name of plan sponsor	LAUREL FORD MISSISSIPPI, INC.	c EIN-PN 64-0818777-001
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	LAYDON INDUSTRIES, LLC 401(K) PLAN - 003	
b	Name of plan sponsor	LAYDON INDUSTRIES, LLC	c EIN-PN 20-2193189-003
a	Plan name	LEAPLEY CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	LEAPLEY CONSTRUCTION GROUP OF ATL	c EIN-PN 58-2490549-001
a	Plan name	LEGACY FORD LINCOLN MERCURY 401(K) P/S PLAN	
b	Name of plan sponsor	LEGACY FORD	c EIN-PN 93-1205888-001
a	Plan name	LEGACY SCHOOLS 401K PLAN	
b	Name of plan sponsor	LEGACY SCHOOLS	c EIN-PN 81-2601194-001

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	LEXINGTON PLASTIC SURGERY, PLLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	LEXINGTON PLASTIC SURGERY, PLLC
c	EIN-PN	46-5715349-001
a	Plan name	LG-OSS 401(K) PLAN
b	Name of plan sponsor	LG-OSS, LLC
c	EIN-PN	82-1438617-001
a	Plan name	LIGHT FORCE RENTALS, LLC 401(K) P/S PLAN
b	Name of plan sponsor	LIGHT FORCE RENTALS, LLC
c	EIN-PN	81-5356700-001
a	Plan name	LIGHTVIEW CAPITAL LLC 401(K) PLAN
b	Name of plan sponsor	LIGHTVIEW CAPITAL LLC
c	EIN-PN	46-0995263-001
a	Plan name	LIMITED CONTRACTING COMPANY 401 (K) PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	LIMITED CONTRACTING COMPANY
c	EIN-PN	31-1292506-001
a	Plan name	LINKS UNLIMITED 401(K) PLAN
b	Name of plan sponsor	LINKS UNLIMITED, INC.
c	EIN-PN	31-1471291-001
a	Plan name	LOCAL UNION 373 U.A. ANNUITY FUND
b	Name of plan sponsor	BOARD OF TRUSTEES OF PLUMBERS & STEAMFITTERS LOCAL 373 U.A. ANNUITY FU
c	EIN-PN	13-3323430-001
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	M&R STRATEGIC SERVICES, INC. 401(K) PLAN
b	Name of plan sponsor	M&R STRATEGIC SERVICES, INC.
c	EIN-PN	13-3588025-002

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 M.O. BUCKS '4 US 401(K) PLAN	
b	Name of plan sponsor MORRIS O NELSON & SONS INC	c EIN-PN 93-0702289-001
a	Plan name M.O. BUCKS '4 US TOO 401(K) PLAN	
b	Name of plan sponsor MORRIS O. NELSON & SONS, INC.	c EIN-PN 93-0702289-002
a	Plan name M.S. CLARK ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor M.S. CLARK ENTERPRISES, INC.	c EIN-PN 84-1214952-001
a	Plan name MAIL SERVICES, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MAIL SERVICES, LLC	c EIN-PN 20-8732530-001
a	Plan name MANNING CURTIS BRADSHAW & BEDNAR PLLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MANNING CURTIS BRADSHAW & BEDNAR PLLC	c EIN-PN 84-1395129-001
a	Plan name MARATHON HR RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MARATHON HR SERVICES, LLC	c EIN-PN 20-1709761-333
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 MARTINEZ STEEL CORPORATION 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor MARTINEZ STEEL CORPORATION	c EIN-PN 33-0615378-001
a	Plan name MB APPRAISALS 401(K) PLAN	
b	Name of plan sponsor MB APPRAISALS DBA MICHAEL BURGER	c EIN-PN 77-0513192-001
a	Plan name MCCLELLAN CHIROPRACTIC CLINIC, PC 401(K) PLAN	
b	Name of plan sponsor MCCLELLAN CHIROPRACTIC CLINIC, PC	c EIN-PN 63-0961557-001
a	Plan name MCENANY ROOFING, INC. 401(K) PLAN	
b	Name of plan sponsor MCENANY ROOFING, INC.	c EIN-PN 59-2583665-001
a	Plan name MCGRAW BAGNOLI ARCHITECTS PLLC PROFIT SHARING PLAN	
b	Name of plan sponsor MCGRAW BAGNOLI ARCHITECTS PLLC	c EIN-PN 45-2804987-001

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	MEDAIRE 401(K) PLAN	
b	Name of plan sponsor	MEDAIRE, INC.	c EIN-PN 98-0598955-001
a	Plan name	MEDICAL SALES STAFFING LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	MEDICAL SALES STAFFING LLC	c EIN-PN 83-0794413-001
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	MEN AT WORK CONSTRUCTION CORP. RETIREMENT PLAN	
b	Name of plan sponsor	MEN AT WORK CONSTRUCTION CORP	c EIN-PN 11-2760261-001
a	Plan name	METALFX RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ADVANCED MANUFACTURING AND DEVELOPMENT, INC.	c EIN-PN 94-2378705-001
a	Plan name	METRO PSYCHIATRY INC. 401(K) PLAN	
b	Name of plan sponsor	METRO PSYCHIATRY INC.	c EIN-PN 27-0811341-001
a	Plan name	METSON MARINE SERVICES, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	METSON MARINE SERVICES, INC.	c EIN-PN 88-0308650-001
a	Plan name	MFOC HOLDCO, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MFOC HOLDCO, INC.	c EIN-PN 45-4078144-001
a	Plan name	MG LAW 401(K) PLAN	
b	Name of plan sponsor	MEYER GOERGEN PC	c EIN-PN 54-1597612-001
a	Plan name	MIAMI POSTAL SERVICE CREDIT UNION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MIAMI POSTAL SERVICE CREDIT UNION	c EIN-PN 59-0359710-002
a	Plan name	MICHAEL R. WINDAUER 401(K) PLAN	
b	Name of plan sponsor	DR. MICHAEL R. WINDAUER, DMD, PC	c EIN-PN 81-0503544-001
a	Plan name	MID COLUMBIA PRODUCERS, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	MID COLUMBIA PRODUCERS, INC.	c EIN-PN 93-0975750-001

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	MIDAMERICAN AEROSPACE, LTD. 401(K) PLAN	
b	Name of plan sponsor	MIDAMERICAN AEROSPACE, LTD.	c EIN-PN 20-0207550-001
a	Plan name	MIDWEST MATTRESS, LLC 401(K) PLAN	
b	Name of plan sponsor	MIDWEST MATTRESS, LLC	c EIN-PN 30-0287403-001
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	MMM 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	METALMASTERS MANUFACTURING LLC	c EIN-PN 93-1436998-001
a	Plan name	MOBILEONE, LLC 401(K) PLAN	
b	Name of plan sponsor	MOBILEONE, LLC	c EIN-PN 26-3504256-001
a	Plan name	MOLLY AND ME COUNSELING 401(K)	
b	Name of plan sponsor	MOLLY AND ME COUNSELING	c EIN-PN 47-3420376-001
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	MONROE ORTHODONTICS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MONROE ORTHODONTICS LLC	c EIN-PN 26-0369632-001
a	Plan name	MOORE COMMUNICATIONS GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MOORE COMMUNICATIONS GROUP, INC.	c EIN-PN 59-3218275-001
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	MOUNTAIN AREA REGIONAL TRANSIT AUTHORITY 401(A) PLAN	
b	Name of plan sponsor	MOUNTAIN AREA REGIONAL TRANSIT AUTHORITY	c EIN-PN 33-0695718-002

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 MOUNTAINEER FORD, LINCOLN, MITSUBISHI 401(K) PLAN	
b	Name of plan sponsor MOUNTAINEER FORD, LINCOLN, MITSUBISHI	c EIN-PN 84-3217988-001
a	Plan name MOVINGLIFE 401(K) PLAN	
b	Name of plan sponsor MOVING LIFE, LLC	c EIN-PN 93-2661486-001
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 CPAS & ADVISORS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NORTH VALLEY FINANCIAL SERVICES, LLC DBA FURRER & ASSOCIATES	c EIN-PN 87-2736693-001
a	Plan name MVAC 401(K) PLAN	
b	Name of plan sponsor MENIFEE VALLEY AIR CONDITIONING, INC.	c EIN-PN 33-0785961-001
a	Plan name NAI WISINSKI OF WEST MICHIGAN 401(K) PLAN	
b	Name of plan sponsor NAI WISINSKI OF WEST MICHIGAN	c EIN-PN 20-4744321-001
a	Plan name NAPCA 401(K) PLAN	
b	Name of plan sponsor NATIONAL ASIAN PACIFIC CENTER ON AGING	c EIN-PN 52-1266741-002
a	Plan name NASOYA FOODS, USA, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor NASOYA FOODS, USA, LLC	c EIN-PN 81-1933432-001
a	Plan name NAUTILUS BIOTECHNOLOGY 401(K) PLAN	
b	Name of plan sponsor NAUTILUS SUBSIDIARY INC.	c EIN-PN 81-4928437-001
a	Plan name NELSON CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor MORENO & NELSON CONSTRUCTION CORP DBA NELSON CONSTRUCTION CORP	c EIN-PN 20-8147709-001
a	Plan name NEST BEDDING 401(K) PLAN	
b	Name of plan sponsor NEST BEDDING	c EIN-PN 46-0760624-001
a	Plan name NEUROSCIENCE & SPINE CENTER OF THE	
b	Name of plan sponsor NEUROSCIENCE AND SPINE CENTER OF THE CAR	c EIN-PN 27-1647668-001

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	NEW APM, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	AMERICAN PHOTO MARKETING, INC.	c EIN-PN 86-1249671-001
a	Plan name	NEW DAY, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW DAY, INC.	c EIN-PN 81-0488326-001
a	Plan name	NEW MEXICO CENTER ON LAW AND POVERTY 401(K) PLAN	
b	Name of plan sponsor	THE NEW MEXICO CENTER ON LAW & POVERTY	c EIN-PN 85-0437960-001
a	Plan name	NEW WATERLOO 401(K) PLAN	
b	Name of plan sponsor	6H MANAGEMENT LLC	c EIN-PN 30-0913137-001
a	Plan name	NEXTFED 401(K) PLAN	
b	Name of plan sponsor	NEXTFED, INC.	c EIN-PN 27-1700277-001
a	Plan name	NI2 HEALTH 401(K) PLAN	
b	Name of plan sponsor	NI2 HEALTH, LLC	c EIN-PN 81-1407350-001
a	Plan name	NIC INDUSTRIES, INC. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	NIC INDUSTRIES, INC.	c EIN-PN 91-1767717-001
a	Plan name	NIELSEN EYE CENTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NIELSEN EYE CENTER, INC.	c EIN-PN 04-3126050-001
a	Plan name	NO SLEEP TOMORROW 401(K) PLAN	
b	Name of plan sponsor	INSOMNIAC DESIGN, INC.	c EIN-PN 52-2359487-001
a	Plan name	NOMAD SOUND SYSTEMS INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	NOMAD SOUND SYSTEMS INC.	c EIN-PN 54-1977889-001
a	Plan name	NORMAN EQUIPMENT COMPANY TAX-DEFERRED SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	NORMAN EQUIPMENT COMPANY	c EIN-PN 36-2089220-001
a	Plan name	NORTH AMERICAN ARMS 401K PS PLAN	
b	Name of plan sponsor	NORTH AMERICAN ARMS, INC.	c EIN-PN 87-0500601-001

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	NORTH CAROLINA TRAILER SALES 401(K) PLAN	
b	Name of plan sponsor	NORTH CAROLINA TRAILER SALES	c EIN-PN 47-2787274-001
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	NORTHWEST FARM SUPPLY 401(K) PLAN	
b	Name of plan sponsor	NORTHWEST FARM SUPPLY, INC.	c EIN-PN 93-1160454-001
a	Plan name	NORTHWEST TECHNICAL RESOURCES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NORTHWEST TECHNICAL RESOURCES, INC.	c EIN-PN 59-2703995-001
a	Plan name	NOTRE DAME TRAINING SCHOOL, INC. 401(K) PLAN	
b	Name of plan sponsor	SISTERS OF NOTRE DAME DE NAMUR	c EIN-PN 04-3210469-001
a	Plan name	NOTTURNO PLUMBING & HEATING INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	NOTTURNO PLUMBING & HEATING	c EIN-PN 45-4388498-001
a	Plan name	NOVELLUS 401(K) PLAN & TRUST	
b	Name of plan sponsor	NOVELLUS LIVING, LLC	c EIN-PN 87-2380272-001
a	Plan name	NTG 401(K) PLAN	
b	Name of plan sponsor	NORTHERN TECHNOLOGIES GROUP, INC.	c EIN-PN 01-0678620-001
a	Plan name	OBSIDIAN SOLUTIONS GROUP 401(K) PLAN	
b	Name of plan sponsor	OBSIDIAN SOLUTIONS GROUP LLC	c EIN-PN 27-3709520-001
a	Plan name	OILFIELD INDUSTRIAL SUPPLY OF LOUISIANA 401(K) PLAN	
b	Name of plan sponsor	OILFIELD INDUSTRIAL SUPPLY OF LOUISIANA PLAN	c EIN-PN 20-2140560-001
a	Plan name	OKTIBBEHA CO-OP 401(K) PLAN	
b	Name of plan sponsor	OKTIBBEHA COUNTY CO-OP	c EIN-PN 64-0215858-002
a	Plan name	OLYMPIC DERMATOLOGY & LASER CLINIC, P.S. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	OLYMPIC DERMATOLOGY & LASER CLINIC, P.S.	c EIN-PN 91-2022574-001

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 OMEGA ENGINEERING CONSULTANTS 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OMEGA ENGINEERING CONSULTANTS	c EIN-PN 90-0599765-001
a	Plan name ONEWORLD 401(K) PLAN	
b	Name of plan sponsor ONEWORLD COMMUNITY HEALTH CENTERS, INC.	c EIN-PN 47-0548990-001
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 ONYX CONCRETE COATINGS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ONYX CONCRETE COATINGS INC.	c EIN-PN 93-2650579-001
a	Plan name ORCHARD MEDICAL 401(K) PLAN	
b	Name of plan sponsor ORCHARD MEDICAL ASSOCIATES, LLC	c EIN-PN 20-8814258-001
a	Plan name OREGON'S WILD HARVEST 401(K) RETIREMENT PLAN	
b	Name of plan sponsor OREGONS WILD HARVEST	c EIN-PN 93-1161171-001
a	Plan name PACIFIC COAST JET LLC 401(K) P/S PLAN	
b	Name of plan sponsor PACIFIC COAST JET LLC	c EIN-PN 34-2066648-001
a	Plan name PACIFIC REBAR, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PACIFIC REBAR, INC.	c EIN-PN 33-0163700-001
a	Plan name PACIFIC UTILITY INSTALLATION, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor PACIFIC UTILITY INSTALLATION, INC.	c EIN-PN 33-0741430-001
a	Plan name PAPER TRAILS 401(K) PLAN	
b	Name of plan sponsor PAPER TRAILS, INC	c EIN-PN 56-2519925-001
a	Plan name PARTNERMD EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor PARTNERMD, LLC	c EIN-PN 35-2187337-001
a	Plan name PATHWAYS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PATHWAYS, INC.	c EIN-PN 61-0661987-001

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 PAUL DAVIS RESTORATION 401K PLAN	
b	Name of plan sponsor C & M SERVICES OF KY, INC.	c EIN-PN 61-0946630-001
a	Plan name PDW LLP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor PICKETT DUMMIGAN WEINGART LLP	c EIN-PN 43-1995852-001
a	Plan name PEDIATRIC ASSOCIATES OF JOHN'S CREEK, PC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor PEDIATRIC ASSOCIATES OF JOHNS CREEK, PC	c EIN-PN 58-2481095-001
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 PHALCON, LTD. 401(K) PLAN	
b	Name of plan sponsor PHALCON LTD.	c EIN-PN 20-8104883-001
a	Plan name PHARMACY TECHNICIAN STAFFING LLC PROFIT SHARING PLAN	
b	Name of plan sponsor PHARMACY TECHNICIAN STAFFING LLC	c EIN-PN 47-2825027-001
a	Plan name PINELAKE CHURCH 401(K) PLAN	
b	Name of plan sponsor PINELAKE CHURCH, INC.	c EIN-PN 64-0538192-002
a	Plan name PINNACLE PLUMBING & HEATING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PINNACLE PLUMBING & HEATING, INC.	c EIN-PN 26-3718019-001
a	Plan name PIT VIPER 401(K) PLAN	
b	Name of plan sponsor PIT VIPER 401(K) PLAN	c EIN-PN 46-1233295-001
a	Plan name PLATINUM DINING GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor PLATINUM DINING GROUP, LLC	c EIN-PN 26-2332396-001
a	Plan name PLOTLY US, INC. 401(K) PLAN	
b	Name of plan sponsor PLOTLY US INC	c EIN-PN 46-3544051-001
a	Plan name PLUMB TECH, INC. 401(K) PLAN	
b	Name of plan sponsor PLUMB TECH, INC.	c EIN-PN 42-1420820-001

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 PMC GAGE 401(K) PLAN AND TRUST	
b	Name of plan sponsor PMC GAGE, INC.	c EIN-PN 34-1889157-001
a	Plan name POST TRAUMA INSTITUTE OF LOUISIANA, LLC 401(K) PLAN	
b	Name of plan sponsor POST TRAUMA INSTITUTE OF LOUISIANA, LLC	c EIN-PN 46-0671529-002
a	Plan name POTTER LAWSON, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor POTTER LAWSON, INC.	c EIN-PN 39-1091893-001
a	Plan name POWDER MOUNTAIN 401(K) PLAN	
b	Name of plan sponsor SMHG MANAGEMENT, LLC DBA POWDER MOUNTAIN	c EIN-PN 46-1535641-001
a	Plan name PRACTICE FIRM MANAGEMENT GROUP RETIREMENT PLAN	
b	Name of plan sponsor PRACTICE FIRM MNGMT GROUP PC	c EIN-PN 82-4264391-001
a	Plan name PRECISION CIVIL ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRECISION CIVIL ENGINEERING, INC.	c EIN-PN 74-3054917-001
a	Plan name PREFERRED OFFICE PRODUCTS 401(K) PLAN	
b	Name of plan sponsor PREFERRED OFFICE PRODUCTS, INC.	c EIN-PN 71-0533681-001
a	Plan name PREMIER PAIN SOLUTIONS, PLLC RETIREMENT TRUST 401(K) PLAN	
b	Name of plan sponsor PREMIER PAIN SOLUTIONS, PLLC	c EIN-PN 81-2775629-002
a	Plan name PREMIUM GUARD, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor PREMIUM GUARD HOLDINGS INC.	c EIN-PN 11-3139622-002
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 PRIORITY ONE MEDICAL TRANSPORT 401(K) PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor PRIORITY ONE MEDICAL TRANSPORT	c EIN-PN 25-1824427-001
a	Plan name PRO PULLING LEAGUE 401(K) PLAN	
b	Name of plan sponsor PRO PULLING LEAGUE LLC	c EIN-PN 92-1343649-001

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	PROCESSFLO INC. 401(K) PROFIT SHARING PLAN & TRUST
b	Name of plan sponsor	PROCESSFLO INC.
c	EIN-PN	22-2907835-001
a	Plan name	PROCINO - WELLS & WOODLAND, LLC 401(K) PLAN
b	Name of plan sponsor	PROCINO - WELLS & WOODLAND, LLC
c	EIN-PN	20-5016006-001
a	Plan name	PROFESSIONAL DRYWALL, LLC 401(K) PROFIT SHARING PLAN & TRUST
b	Name of plan sponsor	PROFESSIONAL DRYWALL LLC.
c	EIN-PN	27-3907592-001
a	Plan name	PROXIMA 401K PLAN
b	Name of plan sponsor	PROXIMA 401(K) PLAN
c	EIN-PN	45-2785636-001
a	Plan name	PSIQUANTUM 401(K) PLAN
b	Name of plan sponsor	PSIQUANTUM CORP
c	EIN-PN	81-1715139-001
a	Plan name	PTAC 401(K) PLAN
b	Name of plan sponsor	PTAC ENGINEERING, LLC
c	EIN-PN	87-1354670-001
a	Plan name	PULMUONE FOODS USA, INC. RETIREMENT BENEFIT PLAN
b	Name of plan sponsor	PULMUONE FOODS USA, INC.
c	EIN-PN	42-1470703-001
a	Plan name	PURA SCENTS, INC. 401(K) PLAN
b	Name of plan sponsor	PURA SCENTS, INC.
c	EIN-PN	47-4157710-001
a	Plan name	PURITAN CLEANING 401(K) PLAN
b	Name of plan sponsor	THE PURITANS INC
c	EIN-PN	81-0465607-001
a	Plan name	QUALITY CONTROL INSPECTION, INC. 401(K) PLAN
b	Name of plan sponsor	QUALITY CONTROL INSPECTION, INC.
c	EIN-PN	34-1545509-001
a	Plan name	RADIO, TELEVISION AND RECORDING ARTS ANNUITY FUND
b	Name of plan sponsor	BOARD OF TRUSTEES OF THE RADIO, TELEVISION AND RECORDING ARTS ANNUITY
c	EIN-PN	13-3017094-002
a	Plan name	RAGLAND BROS. RETAIL 401(K) PLAN
b	Name of plan sponsor	RAGLAND BROS. RETAIL COS., INC.
c	EIN-PN	63-0879720-001

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	RED CRANE MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	RED CRANE MANAGEMENT, LLC	c EIN-PN 87-3626565-001
a	Plan name	RED OAK BEHAVIORAL HEALTH 401(K) PLAN	
b	Name of plan sponsor	RED OAK BEHAVIORAL HEALTH	c EIN-PN 34-1282145-003
a	Plan name	REGEN PROJECTS 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	STUART REGEN GALLERY, INC. DBA REGEN PROJECTS	c EIN-PN 95-4239553-001
a	Plan name	REICH DENTAL CENTER PC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	REICH DENTAL CENTER PC	c EIN-PN 58-2026485-001
a	Plan name	RELISHIQ INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	RELISH IQ	c EIN-PN 85-4099959-001
a	Plan name	RESIGNATION HOLDINGS, LLC 401(K) PLAN	
b	Name of plan sponsor	RESIGNATION HOLDINGS LLC	c EIN-PN 46-2945122-001
a	Plan name	REVIREO 401(K) PLAN	
b	Name of plan sponsor	REVIREO, INC.	c EIN-PN 27-2919965-001
a	Plan name	REVIV MANAGEMENT, LLC	
b	Name of plan sponsor	REVIV	c EIN-PN 47-5524713-002
a	Plan name	REYNOLDS ASH & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	REYNOLDS ASH & ASSOCIATES	c EIN-PN 20-3165991-001
a	Plan name	RICHARD NIXON FOUNDATION 401(K) PLAN	
b	Name of plan sponsor	RICHARD NIXON FOUNDATION	c EIN-PN 52-1278303-002
a	Plan name	RIVER VALLEY 401(K) PLAN	
b	Name of plan sponsor	RIVER VALLEY REALTY, LLC	c EIN-PN 26-0314831-001
a	Plan name	ROCKY MOUNTAIN UNIVERSITY OF HEALTH PROFESSIONS, INC.	
b	Name of plan sponsor	ROCKY MOUNTAIN UNIVERSITY OF HEALTH PROFESSIONS, INC.	c EIN-PN 87-0594592-002

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	ROGUE CREDIT UNION CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor	ROGUE CREDIT UNION	c EIN-PN 93-0491115-033
a	Plan name	ROLLICK, INC. 401(K) PLAN	
b	Name of plan sponsor	ROLLICK, INC	c EIN-PN 82-1591354-001
a	Plan name	ROSE'S SOUTHWEST PAPERS, INC. 401(K) PLAN	
b	Name of plan sponsor	ROSES SOUTHWEST PAPERS, INC.	c EIN-PN 85-0323158-001
a	Plan name	RPA251, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	RPA251, INC.	c EIN-PN 26-2993360-001
a	Plan name	RPC, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RPC, INC.	c EIN-PN 59-2707333-003
a	Plan name	RUDE TRANSPORTATION COMPANY, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	RUDE TRANSPORTATION CO	c EIN-PN 46-0424087-001
a	Plan name	S.J. LOUIS CONSTRUCTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	S. J. LOUIS CONSTRUCTION, INC	c EIN-PN 41-1440589-001
a	Plan name	SANTA BARBARA DOCTORS, PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SANTA BARBARA DOCTORS, PC	c EIN-PN 82-5487717-002
a	Plan name	SAVANT, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SAVANT, INC.	c EIN-PN 38-1909696-001
a	Plan name	SAXCO INTERNATIONAL, LLC SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	SAXCO INTERNATIONAL, LLC	c EIN-PN 27-3989735-002
a	Plan name	SCHODER RIVER ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	SCHODER RIVERS ASSOCIATES CONSULTING ENGINEERS	c EIN-PN 14-1803097-001
a	Plan name	SCHWIEGER HOGS LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHWIEGER HOGS LLP	c EIN-PN 46-3125449-001

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	SCI 401(K) PLAN	
b	Name of plan sponsor	SCIENCE CENTER OF IOWA	c EIN-PN 42-6097912-002
a	Plan name	SEARCH MASTERS, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	SEARCH MASTERS, INC.	c EIN-PN 34-1119739-001
a	Plan name	SEASIDE HEALTHCARE, INC. 401(K) PLAN	
b	Name of plan sponsor	SEASIDE HEALTHCARE, INC.	c EIN-PN 46-4327879-001
a	Plan name	SEASON'S RETIREMENT GROUP - SILVER SPUR CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	SILVER SPUR CONSTRUCTION, LLC	c EIN-PN 34-2036250-001
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 - AES SYSTEMS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AES SYSTEMS, INC	c EIN-PN 87-0403261-001
a	Plan name	SEASONS RETIREMENT GROUP - ALLIED AWNING & RENTAL, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	ALLIED AWNING & RENTAL, INC.	c EIN-PN 87-0559498-001
a	Plan name	SEASONS RETIREMENT GROUP - ALPHA TRANSPORT, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	ALPHA TRANSPORT, INC.	c EIN-PN 87-0255494-002
a	Plan name	SEASONS RETIREMENT GROUP - BOXWORKS TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor	BOXWORKS TECHNOLOGIES, INC.	c EIN-PN 87-0683020-001
a	Plan name	SEASONS RETIREMENT GROUP - CRAFTSMAN KITCHENS 401(K) PLAN	
b	Name of plan sponsor	CRAFTSMAN KITCHENS, LLC	c EIN-PN 27-1342544-001
a	Plan name	SEASONS RETIREMENT GROUP - EDMONDS & LOGUE PC 401(K) PLAN	
b	Name of plan sponsor	EDMONDS & LOGUE PC	c EIN-PN 83-0322590-001
a	Plan name	SEASONS RETIREMENT GROUP - HILLTOP FAMILY DENTAL RETIREMENT PLAN	
b	Name of plan sponsor	HILLTOP FAMILY DENTAL, LLC	c EIN-PN 27-3572702-001

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 - HUGHES GENERAL CONTRACTORS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HUGHES GENERAL CONTRACTORS, INC.	c EIN-PN 03-0403856-001
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
a	Plan name SEASONS RETIREMENT GROUP - KENT-ROY, LLC 401(K) PLAN	
b	Name of plan sponsor KENT-ROY, LLC	c EIN-PN 87-0684311-001
a	Plan name SEASONS RETIREMENT GROUP - KENTCO, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor KENTCO, INC.	c EIN-PN 87-0374335-001
a	Plan name SEASONS RETIREMENT GROUP - LUCKY'S AUTO CREDIT 401(K)	
b	Name of plan sponsor LUCKYS AUTO CREDIT LLC	c EIN-PN 26-3195961-001
a	Plan name SEASONS RETIREMENT GROUP - MIKE ZIMMERMAN WELL SERVICE 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor MIKE ZIMMERMAN WELL SERVICE, LLC	c EIN-PN 87-0642958-001
a	Plan name SEASONS RETIREMENT GROUP - PAULSEN CONSTRUCTION, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PAULSEN CONSTRUCTION, LLC	c EIN-PN 20-8067235-001
a	Plan name SEASONS RETIREMENT GROUP - PCO-KTA, LLC 401(K) PLAN	
b	Name of plan sponsor PCO-KTA, LLC	c EIN-PN 81-5219463-001
a	Plan name SEASONS RETIREMENT GROUP - PUBLIC MARKET, INC. 401(K) PLAN	
b	Name of plan sponsor PUBLIC MARKET, INC.	c EIN-PN 81-5220054-001
a	Plan name SEASONS RETIREMENT GROUP - RISE MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor RISE MANAGEMENT	c EIN-PN 35-2541170-001
a	Plan name SEASONS RETIREMENT GROUP - ROYALS FOOD TOWN 401(K) PLAN	
b	Name of plan sponsor WC ADMINISTRATORS	c EIN-PN 26-2548607-001
a	Plan name SEASONS RETIREMENT GROUP - TRI-CITY CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor TRI-CITY CONSTRUCTION, INC.	c EIN-PN 87-0633422-001

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 - TRITON INVESTMENTS, INC. 401(K) PLAN	
b	Name of plan sponsor TRITON INVESTMENTS, INC.	c EIN-PN 87-0518867-001
a	Plan name SEASONS RETIREMENT GROUP - WAYNE COMMUNITY HEALTH CENTER 401(K) PLAN	
b	Name of plan sponsor WAYNE COMMUNITY HEALTH CENTER	c EIN-PN 87-0342259-001
a	Plan name SEASONS RETIREMENT GROUP - XYNGULAR/PURE HAVEN 401K PLAN	
b	Name of plan sponsor XYNGULAR CORPORATION	c EIN-PN 45-2702985-001
a	Plan name SEASONS RETIREMENT GROUP COGNITIVE FX 401(K) PLAN	
b	Name of plan sponsor COGNITIVE FX	c EIN-PN 47-1881429-001
a	Plan name SEASONS RETIREMENT GROUP HAVENPARK 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HEARTLAND COMMUNITIES, LLC	c EIN-PN 81-3245597-001
a	Plan name SEASONS RETIREMENT GROUP MD PROPERTY SERVICES, INC 401(K)	
b	Name of plan sponsor MD PROPERTY SERVICES, INC. 401(K)	c EIN-PN 87-0686024-001
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 SEASONS RETIREMENT GROUP- JER-KEN, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor JER-KEN, INC.	c EIN-PN 87-0326452-001
a	Plan name SEATTLE BUSINESS SOFTWARE INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SEATTLE BUSINESS SOFTWARE INC	c EIN-PN 20-3320456-001
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 SHEAR BLITZ, INC. 401(K) PLAN	
b	Name of plan sponsor SHEAR BLITZ, INC. DBS SPORTSCLIPS	c EIN-PN 27-1709901-001
a	Plan name SHIFLET RICHARDSON 401K PLAN	
b	Name of plan sponsor SHIFLET RICHARDSON ARCHITECTS	c EIN-PN 85-3072150-001

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	SID PETERSON MEMORIAL HOSPITAL 401(K) SAVINGS AND PROFIT SHARING PLAN SID PETERS	
b	Name of plan sponsor	SID PETERSON MEMORIAL HOSPITAL	c EIN-PN 74-2557820-003
a	Plan name	SIEGEL BRILL P.A. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SIEGEL BRILL PA	c EIN-PN 41-1626742-001
a	Plan name	SIETE FAMILY FOODS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SIETE FAMILY FOODS	c EIN-PN 46-5012862-001
a	Plan name	SILVER STAR TELEPHONE COMPANY, INC. EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	SILVER STAR TELEPHONE COMPANY	c EIN-PN 83-0175366-002
a	Plan name	SIXTEENFIFTY HOLDING, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	SIXTEENFIFTY HOLDING INC.	c EIN-PN 20-0912120-001
a	Plan name	SMART OILFIELD SERVICES 401(K) PLAN	
b	Name of plan sponsor	SMART OILFIELD SERVICES	c EIN-PN 76-0695652-001
a	Plan name	SMI CONSTRUCTION MANAGEMENT, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	SMI CONSTRUCTION MANAGEMENT, INC.	c EIN-PN 55-0855374-002
a	Plan name	SODERHOLM & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SODERHOLM & ASSOCIATES, INC	c EIN-PN 41-0836048-002
a	Plan name	SOHACKI INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	SOHACKI INDUSTRIES, INC.	c EIN-PN 59-3090535-001
a	Plan name	SOMERSET BASEBALL PARTNERS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	SOMERSET BASEBALL PARTNERS	c EIN-PN 22-3516469-001
a	Plan name	SONDERMIND, INC. 401(K) PLAN	
b	Name of plan sponsor	SONDERMIND, INC.	c EIN-PN 82-3006071-001
a	Plan name	SOUTH BAY PLASTIC SURGEONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTH BAY PLASTIC SURGEONS, INC.	c EIN-PN 33-0861642-001

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	SOUTHGATE SANITATION DISTRICT EMPLOYEES' PENSION PLAN	
b	Name of plan sponsor	SOUTHGATE SANITATION DISTRICT	c EIN-PN 84-6079965-001
a	Plan name	SPARKPEOPLE MANAGEMENT, INC. RETIREMENT SAVINGS	
b	Name of plan sponsor	SPARK PEOPLE, INC	c EIN-PN 83-2770095-001
a	Plan name	SPEAKOLOGY 401(K) PLAN	
b	Name of plan sponsor	SPEAKOLOGY, LLC	c EIN-PN 47-0999806-001
a	Plan name	SPECIALIZED TRANSPORT SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	SPECIALIZED TRANSPORT SOLUTIONS	c EIN-PN 47-1112426-001
a	Plan name	SPECIALIZED TRUCK REPAIR 401(K) PLAN	
b	Name of plan sponsor	SPECIALIZED TRUCK REPAIR	c EIN-PN 47-3716158-001
a	Plan name	SPECTRUM LIGHTING 401(K) PLAN	
b	Name of plan sponsor	KLS LLC, DBA AS SPECTRUM LIGHTING	c EIN-PN 83-0369356-001
a	Plan name	SPEIDELL MONUMENTS 401(K) PLAN	
b	Name of plan sponsor	SPEIDELL MONUMENTS	c EIN-PN 26-3525541-001
a	Plan name	SPENCER CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	SPENCER CONSTRUCTION, LLC	c EIN-PN 82-4089972-001
a	Plan name	ST. ROSE PEDIATRICS 401(K) PLAN	
b	Name of plan sponsor	MISCH HYUN HODAPP HEALTHCARE LLP	c EIN-PN 20-3416144-001
a	Plan name	ST. VINCENT DE PAUL VILLAGE 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	ST. VINCENT DE PAUL VILLAGE	c EIN-PN 33-0492302-001
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	STARTING POINT 401(K) PLAN	
b	Name of plan sponsor	STARTING POINT	c EIN-PN 59-3029469-001

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	STEIN SPERLING BENNETT DE JONG DRISCOLL PC 401(K) PLAN	
b	Name of plan sponsor	STEIN SPERLING BENNETT DE JONG DRISCOLL PC	c EIN-PN 52-1129904-001
a	Plan name	STELLAR TECHNOLOGIES 401(K) PLAN	
b	Name of plan sponsor	STELLAR TECHNOLOGIES INC.	c EIN-PN 46-4406551-001
a	Plan name	STERLING ASSOCIATES GROUP LLC RETIREMENT TRUST	
b	Name of plan sponsor	STERLING ASSOCIATES GROUP LLC	c EIN-PN 47-1728063-001
a	Plan name	STONE HILL CONTRACTING CO., INC. RETIREMENT PLAN MPP	
b	Name of plan sponsor	STONE HILL CONTRACTING CO., INC.	c EIN-PN 22-2141232-001
a	Plan name	STONE HILL CONTRACTING CO., INC. SAVINGS PLAN	
b	Name of plan sponsor	STONE HILL CONTRACTING CO., INC.	c EIN-PN 22-2141232-002
a	Plan name	STRAIGHTERLINE, INC. 401(K) PLAN	
b	Name of plan sponsor	STRAIGHTERLINE, INC.	c EIN-PN 27-0986391-001
a	Plan name	STRUCTURAL DESIGN GROUP 401(K) PLAN	
b	Name of plan sponsor	STRUCTURAL DESIGN GROUP	c EIN-PN 63-1178050-001
a	Plan name	STUART BENJAMIN & CO. JEWELRY DESIGNS 401(K) PLAN	
b	Name of plan sponsor	STUART BENJAMIN & CO. JEWELRY DESIGNS	c EIN-PN 33-0881938-001
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	SUNNYHILL, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SUNNYHILL, INC.	c EIN-PN 43-1150250-002
a	Plan name	SUPER KIDS TEETH 401(K) PLAN	
b	Name of plan sponsor	SUPER KIDS TEETH, LLC	c EIN-PN 81-4062814-001
a	Plan name	SUPPORT MEDICAL SYSTEMS INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SUPPORT MEDICAL SYSTEMS INC	c EIN-PN 01-0754214-001

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	SYNERGY FABRICATIONS, LLC 401(K) P/S PLAN	
b	Name of plan sponsor	SYNERGY FABRICATIONS, LLC	c EIN-PN 59-3700409-001
a	Plan name	SYNERGY SETTLEMENT SERVICES, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	SYNERGY SETTLEMENT SERVICES, INC.	c EIN-PN 26-2241253-001
a	Plan name	T.A. PELSUE COMPANY 401(K) SAVINGS PLAN	
b	Name of plan sponsor	T.A. PELSUE COMPANY	c EIN-PN 84-0575187-001
a	Plan name	TALLAHASSEE NEUROLOGICAL CLINIC, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TALLAHASSEE NEUROLOGICAL CLINIC, P.A.	c EIN-PN 59-1286000-006
a	Plan name	TANIMURA & ANTLE, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	TANIMURA & ANTLE	c EIN-PN 94-2906792-002
a	Plan name	TEAM WIRELESS 401(K) PLAN	
b	Name of plan sponsor	TEAM WIRELESS-ESCANABA, INC.	c EIN-PN 38-3621046-001
a	Plan name	TEAMWORK LABOR SERVICES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TEAMWORK LABOR SERVICE INC.	c EIN-PN 10-0003447-001
a	Plan name	TEK PAK, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TEK PAK, INC.	c EIN-PN 36-3868071-001
a	Plan name	TEMPLE BETH AM 401(K) PLAN	
b	Name of plan sponsor	TEMPLE BETH AM	c EIN-PN 59-0855408-002
a	Plan name	TEPA PRODUCE INC. 401(K) PLAN	
b	Name of plan sponsor	TEPA PRODUCE INC.	c EIN-PN 81-1317241-001
a	Plan name	TESDELL ELECTRIC, LTD 401K PLAN	
b	Name of plan sponsor	TESDELL ELECTRIC, LTD	c EIN-PN 42-1376769-001
a	Plan name	TEXAS INSTITUTE OF DIGESTIVE HEALTH 401(K) PLAN	
b	Name of plan sponsor	TEXAS INSTITUTE OF DIGESTIVE HEALTH, PLLC	c EIN-PN 81-5302826-001

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 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 - FARMBOY, INC.	
b	Name of plan sponsor FARMBOY, INC.	c EIN-PN 71-0951677-001
a	Plan name THE ARCHITECT 401(K) PLAN - SKUNK RIVER BLOCK & PALLET, INC.	
b	Name of plan sponsor SKUNK RIVER BLOCK & PALLET, INC.	c EIN-PN 42-1211144-001
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 CHILDREN'S HOME OF LUBBOCK AND FAMILY SERVICE AGENCY, INC. EMPLOYEES' PENSION PLAN AND TRUST	
b	Name of plan sponsor THE CHILDRENS HOME OF LUBBOCK AND FAMILY SERVICE AGENCY, INC.	c EIN-PN 75-1037480-001
a	Plan name THE ELEVATION GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor THE ELEVATION GROUP, INC.	c EIN-PN 37-2004790-001
a	Plan name THE FAMILY 401(K) PLAN	
b	Name of plan sponsor DENCO FAMILY, INC.	c EIN-PN 46-1731629-002
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 MILLS GROUP EMPLOYEE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor THE MILLS GROUP	c EIN-PN 42-1574355-001
a	Plan name THE NOVAK 401(K) PLAN	
b	Name of plan sponsor MARV SMITH ELECTRIC, PLUMBING & HEATING, LLC	c EIN-PN 82-3770166-001
a	Plan name THE OGEECHEE GROUP, INC.	
b	Name of plan sponsor THE OGEECHEE GROUP, INC.	c EIN-PN 58-2498918-001
a	Plan name THE PEOPLES BANK OF BROWNSTOWN EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE PEOPLES BANK	c EIN-PN 35-0201080-002

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 THE ROMERO GROUP 401(K) PLAN	
b	Name of plan sponsor THE ROMERO GROUP, LLC	c EIN-PN 81-0696788-001
a	Plan name THE RUSKIN MOSCOU FALTISCHEK, P.C. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RUSKIN MOSCOU FALTISCHEK, P.C.	c EIN-PN 11-2301137-002
a	Plan name THE THOMPSON CENTER FOR PLASTIC SURGERY 401(K) PLAN	
b	Name of plan sponsor THE THOMPSON CENTER FOR PLASTIC SURGERY	c EIN-PN 20-2827755-001
a	Plan name THE TSG PEP	
b	Name of plan sponsor PENTEGRA SERVICES, INC.	c EIN-PN 13-3745616-014
a	Plan name THOMAS, BENNETT & HUNTER, INC. EMPLOYEE PROFIT SHARING PLAN	
b	Name of plan sponsor THOMAS, BENNETT & HUNTER, INC.	c EIN-PN 52-0507300-001
a	Plan name THOMPSON ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor BJT HOLDING, LLC	c EIN-PN 02-0498062-001
a	Plan name THOMPSON BROS. EXCAVATING, INC. 401(K) PLAN	
b	Name of plan sponsor THOMPSON BROS. EXCAVATING, INC.	c EIN-PN 91-1584268-001
a	Plan name TIMBERLINE ACE HARDWARE 401(K) PLAN	
b	Name of plan sponsor TIMBERLINE ACE HARDWARE	c EIN-PN 20-4579659-001
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 TOBIN HEATING AND AIR 401(K) PLAN	
b	Name of plan sponsor TOBIN-DML GROUP, LLC DBA TOBIN HEATING & AIR	c EIN-PN 04-3686892-001
a	Plan name TOHME MANAGEMENT LLC SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor TOHME MANAGEMENT LLC	c EIN-PN 82-3322890-001
a	Plan name TOM WATSON, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TOM WATSON INC.	c EIN-PN 33-0477486-001

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 TOP N CATERING LLC 401(K) PLAN	
b	Name of plan sponsor TOP N CATERING, LLC	c EIN-PN 45-4609828-001
a	Plan name TOTAL WAREHOUSE, INC. 401(K) PLAN	
b	Name of plan sponsor TOTAL WAREHOUSE, INC.	c EIN-PN 82-2468672-001
a	Plan name TOUCHMATH ACQUISITION LLC 401(K) AND PROFIT-SHARING PLAN	
b	Name of plan sponsor TOUCHMATH ACQUISITION LLC	c EIN-PN 83-1927094-001
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 TPC WIRE & CABLE CORP. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TPC WIRE & CABLE CORP.	c EIN-PN 27-0235381-002
a	Plan name TRACTOR BEVERAGES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TRACTOR BEVERAGES, INC.	c EIN-PN 61-1635112-001
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 TRANTOLO & TRANTOLO 401(K) PLAN	
b	Name of plan sponsor TRANTOLO & TRANTOLO, LLC	c EIN-PN 06-1637802-001
a	Plan name TRIO SUPPLY CHAIN SOLUTIONS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor TRIO SUPPLY CHAIN SOLUTIONS, LLC	c EIN-PN 46-1741870-001
a	Plan name TRIUMPH ORTHOPEDIC PARTNERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCP ORTHOPEDIC SERVICES, LLC DBA TRIUMPH ORTHOPEDIC PARTNERS	c EIN-PN 87-1113353-001
a	Plan name TROPICAL SMILES DENTAL RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor MELISSA M. NITTA, D.D.S., LLC	c EIN-PN 20-5205682-001
a	Plan name TRUST FOR THE NATIONAL MALL 401(K) PLAN	
b	Name of plan sponsor TRUST FOR THE NATIONAL MALL	c EIN-PN 30-0080738-001

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	TRUSTED RESOURCE UNDERWRITERS, LLC 401(K) PLAN	
b	Name of plan sponsor	TRUSTED RESOURCE UNDERWRITERS, LLC	c EIN-PN 85-1266246-001
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
a	Plan name	TVS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THOMPSON VENTULETT STAINBACK & ASSOCIATES INC.	c EIN-PN 58-1274188-002
a	Plan name	UNCOMMON ARCHITECTS 401(K) PLAN	
b	Name of plan sponsor	UNCOMMON ARCHITECTS, LLC	c EIN-PN 92-1295233-001
a	Plan name	UNDER 48 INCHES 401(K) PLAN	
b	Name of plan sponsor	SMALL HANDS BIG DREAMS MANAGEMENT CORP	c EIN-PN 81-1043996-001
a	Plan name	UNIWEST EMPLOYEE 401(K) & PROFIT SHARING PLAN UNIWEST CONSTRUCTION, INC.	
b	Name of plan sponsor	UNIWEST CONSTRUCTION, INC.	c EIN-PN 54-1359254-001
a	Plan name	UPPER MERION TOWNSHIP EMS AND FIRE RETIREMENT 401(A) PLAN	
b	Name of plan sponsor	UPPER MERION TOWNSHIP	c EIN-PN 23-6000054-410
a	Plan name	US MEDICAL STAFFING LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	US MEDICAL STAFFING LLC	c EIN-PN 87-1993199-001
a	Plan name	USI CONSULTANTS, INC. 401K PLAN	
b	Name of plan sponsor	USI CONSULTANTS INC.	c EIN-PN 35-1372928-001
a	Plan name	VANDERBILT COUNTRY CLUB 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	VANDERBILT COUNTRY CLUB	c EIN-PN 59-3520481-001
a	Plan name	VANDERKODDE CONSTRUCTION, INC. EMPLOYEE BENEFIT PLAN	
b	Name of plan sponsor	VANDERKODDE CONSTRUCTION, INC.	c EIN-PN 38-1912021-001
a	Plan name	VARDA SPACE INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	VARDA SPACE INDUSTRIES INC	c EIN-PN 85-3976446-001

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	VARIO PRODUCTIONS 401K PLAN
b	Name of plan sponsor	TEAM HOLDINGS, INC. DBA VARIO PRODUCTIONS
c	EIN-PN	47-2666727-001
a	Plan name	VENTURA PEST CONTROL, INC. 401(K) PLAN AND TRUST
b	Name of plan sponsor	VENTURA PEST CONTROL, INC.
c	EIN-PN	95-3869932-001
a	Plan name	VICTORIA U.S. HOLDINGS 401(K) PLAN
b	Name of plan sponsor	VICTORIA U.S. HOLDINGS
c	EIN-PN	20-3050842-001
a	Plan name	VIEJAS RETIREMENT PROGRAM
b	Name of plan sponsor	THE VIEJAS BAND OF KUMEYAAY INDIANS
c	EIN-PN	33-0409825-001
a	Plan name	VINEBURG MACHINING, INC. 401(K) PLAN
b	Name of plan sponsor	VINEBURG MACHINING, INC.
c	EIN-PN	86-1092507-001
a	Plan name	VIOBIN PRODUCTS LLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	VIOBIN PRODUCTS
c	EIN-PN	99-1477446-001
a	Plan name	VIQI, INC. 401(K) PLAN
b	Name of plan sponsor	VIQI, INC
c	EIN-PN	81-4852983-001
a	Plan name	VISPERO 401K PLAN
b	Name of plan sponsor	VISPERO
c	EIN-PN	33-0871664-001
a	Plan name	VPA NV LA 401(K) RETIREMENT PLAN
b	Name of plan sponsor	LUBAWY & ASSOCIATES, INC
c	EIN-PN	86-0877370-001
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	W.A. O'LEARY & SONS, INC. 401(K) PLAN
b	Name of plan sponsor	W. A. OLEARY & SONS, INC.
c	EIN-PN	26-1761759-001
a	Plan name	WAFELBAKKER ANDERSON ORTHODONTICS 401(K) PLAN
b	Name of plan sponsor	WAFELBAKKER ANDERSON ORTHODONTICS
c	EIN-PN	81-0824370-001

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	WEALTHWISE RETIREMENT PLAN PEP	
b	Name of plan sponsor	THE FINWAY GROUP	c EIN-PN 42-1468222-022
a	Plan name	WEBBER RESTAURANT DEVELOPMENT LLC 401(K) PLAN	
b	Name of plan sponsor	WEBBER RESTAURANT DEVELOPMENT LLC	c EIN-PN 20-5479233-001
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	WELLBOX INC. 401(K) PLAN	
b	Name of plan sponsor	WELLBOX INC.	c EIN-PN 37-1801961-001
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	WESTCHESTER ORAL & MAXILLOFACIAL SURGERY & IMPLANTOLOGY PLLC 401(K) PLAN	
b	Name of plan sponsor	WESTCHESTER ORAL & MAXILLOFACIAL SURGERY & IMPLANTOLOGY PLLC	c EIN-PN 45-2881387-001
a	Plan name	WESTPAC HOLDING COMPANY, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	WESTPAC HOLDING COMPANY, INC.	c EIN-PN 20-5722172-003
a	Plan name	WEXFORD HEALTH SOURCES, INC. EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	WEXFORD HEALTH SOURCES, INC.	c EIN-PN 59-2363973-001
a	Plan name	WEXFORD HEALTH SOURCES, INC. UNION EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	WEXFORD HEALTH SOURCES, INC.	c EIN-PN 59-2363973-002
a	Plan name	WGS 401(K) PLAN	
b	Name of plan sponsor	WEST GAINES SEED, INC.	c EIN-PN 75-2567012-001
a	Plan name	WHITBY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KALECA, INC.	c EIN-PN 91-1802128-001

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	WHITE ROCK, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WHITE ROCK, INC.	c EIN-PN 25-1183641-001
a	Plan name	WILLIAM C. EVES, M.D., INC. 401(K) PLAN	
b	Name of plan sponsor	WILLIAM C. EVES, M.D.	c EIN-PN 48-1266998-003
a	Plan name	WILLIAM C. EVES, M.D., INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	WILLIAM C. EVES, M.D.	c EIN-PN 48-1266998-002
a	Plan name	WILLWORK, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	WILLWORK INC.	c EIN-PN 04-3057333-001
a	Plan name	WILSONHCG, INC. 401(K) PLAN	
b	Name of plan sponsor	WILSON HUMAN CAPITAL GROUP, INC.	c EIN-PN 05-0537889-001
a	Plan name	WILSONTECH 401(K)	
b	Name of plan sponsor	WILSONTECH SERVICES, INC.	c EIN-PN 93-4231510-001
a	Plan name	WINCHESTER PEDIATRIC CLINIC 401K PSP	
b	Name of plan sponsor	WINCHESTER PEDIATRIC CLINIC PC	c EIN-PN 54-1511229-001
a	Plan name	WORLDCOM EXCHANGE, INC. 401(K) PLAN	
b	Name of plan sponsor	WORLDCOM EXCHANGE, INC.	c EIN-PN 04-3061090-001
a	Plan name	WRIGHT TRANSPORTATION, INC. 401(K) PLAN	
b	Name of plan sponsor	WRIGHT TRANSPORTATION, INC.	c EIN-PN 63-1218334-001
a	Plan name	YANKEE HOME IMPROVEMENT 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	YANKEE HOME IMPROVEMENT	c EIN-PN 26-3006991-001
a	Plan name	YARDZEN, INC 401(K)	
b	Name of plan sponsor	YARDZEN INC	c EIN-PN 82-5056825-001
a	Plan name	YIZUMI-HPM CORPORATION 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	YIZUMI-HPM CORPORATION	c EIN-PN 45-2710863-001

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	ZIPP & TANNENBAUM PROFIT SHARING PLAN	
b Name of plan sponsor	ZIPP & TANNENBAUM, LLC	c EIN-PN 22-3771630-001

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

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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 INDEXSELECT MODERATE 2065 FUND	B Three-digit plan number (PN) ▶ 775
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 38-7275306

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)	348996	4273375
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)	40752290	97859083
(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	41101286	102132458
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	29524
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	358573	4273379
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	358573	4302903
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	40742713	97829555

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)	9043833
(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	9043833

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)	3342
(5) Investment advisory and investment management fees	2i(5)	60555
(6) Bank or trust company trustee/custodial fees	2i(6)	24108
(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)	88005
j Total expenses. Add all expense amounts in column (b) and enter total	2j	88005

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	8955828
l Transfers of assets:		
(1) To this plan	2l(1)	73127952
(2) From this plan	2l(2)	24996938

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 _____.