

<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>HARBOR CAPITAL APPRECIATION CIT</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</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>HARBOR TRUST COMPANY, INC.</u></p> <p><u>111 SOUTH WACKER DRIVE</u> <u>34TH FLOOR</u> <u>CHICAGO, IL 60606</u></p>	<p>1c Effective date of plan</p> <hr/> <p>2b Employer Identification Number (EIN) <u>84-4022934</u></p> <p>2c Plan Sponsor's telephone number <u>312-443-4400</u></p> <p>2d Business code (see instructions)</p>

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

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

SIGN HERE		Date	
	Signature of plan administrator		Enter name of individual signing as plan administrator
SIGN HERE		Date	
	Signature of employer/plan sponsor		Enter name of individual signing as employer or plan sponsor
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/01/2025</u>	<u>DIANE JOHNSON</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor HARBOR TRUST COMPANY, INC. 111 SOUTH WACKER DRIVE 34TH FLOOR CHICAGO, IL 60606	3b Administrator's EIN 84-3259613 3c Administrator's telephone number 312-443-4400																				
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.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:100%;">6a(1)</td><td></td></tr> <tr><td>6a(2)</td><td></td></tr> <tr><td>6b</td><td></td></tr> <tr><td>6c</td><td></td></tr> <tr><td>6d</td><td style="text-align: right;">0</td></tr> <tr><td>6e</td><td></td></tr> <tr><td>6f</td><td></td></tr> <tr><td>6g(1)</td><td></td></tr> <tr><td>6g(2)</td><td></td></tr> <tr><td>6h</td><td></td></tr> </table>	6a(1)		6a(2)		6b		6c		6d	0	6e		6f		6g(1)		6g(2)		6h	
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6a(2)																					
6b																					
6c																					
6d	0																				
6e																					
6f																					
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan <u>HARBOR CAPITAL APPRECIATION CIT</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>HARBOR TRUST COMPANY, INC.</u>	D Employer Identification Number (EIN) <u>84-4022934</u>	

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

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name GYPSUM MANAGEMENT AND SUPPLY, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor 556184-01 GYPSUM MANAGEMENT AND SUPPLY INC	c EIN-PN 48-0788686-002
a	Plan name ACADIANA BOTTLING CO INC HEALTH BENEFITS PLAN	
b	Name of plan sponsor ACADIANA BOTTLING CO., INC.	c EIN-PN 72-0473216-501
a	Plan name ACTEGA NORTH AMERICA 401(K) PLAN	
b	Name of plan sponsor ACTEGA NORTH AMERICA	c EIN-PN 33-1123155-001
a	Plan name ACUREN INSPECTION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ACUREN INSPECTION, INC.	c EIN-PN 75-2332601-001
a	Plan name APG-REWARDS 401(K) PLAN	
b	Name of plan sponsor ADAMS COMMUNICATIONS COMPANY LLC, DBA ADAMS PUBLISHING GROUP	c EIN-PN 46-4951341-001
a	Plan name ADVANCE BEVERAGE CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ADVANCE BEVERAGE CO., INC.	c EIN-PN 95-2701458-001
a	Plan name AETNA BUILDING SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AETNA BUILDING SOLUTIONS, INC	c EIN-PN 36-2076585-003
a	Plan name AGC AUTOMOTIVE AMERICAS CO. 401(K) RETIREMENT PLAN.	
b	Name of plan sponsor AGC FLAT GLASS NORTH AMERICA, INC, DBA AGC AUTOMOTIVE AMERICAS CO.	c EIN-PN 25-1059306-333
a	Plan name AGC FLAT GLASS NORTH AMERICA, INC. EMPLOYEE SAVINGS AND INVESTMENT PLA	
b	Name of plan sponsor AGC FLAT GLASS NORTH AMERICA, INC.	c EIN-PN 25-1059306-010
a	Plan name AGC FLAT GLASS NORTH AMERICA, INC. HOURLY EMPLOYEES SAVINGS AND INVEST	
b	Name of plan sponsor AGC FLAT GLASS NORTH AMERICA, INC.	c EIN-PN 25-1059306-012
a	Plan name AI FIRE, LLC 401(K) PLAN	
b	Name of plan sponsor AI FIRE, LLC	c EIN-PN 27-0306445-001
a	Plan name AI FIRE, LLC WELFARE BENEFIT PLAN	
b	Name of plan sponsor AI FIRE, LLC	c EIN-PN 45-4188172-501

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	AIMSURPLUS RETIREMENT PLAN
b	Name of plan sponsor	AIMSURPLUS, LLC
c	EIN-PN	82-2442061-001
a	Plan name	ALISAL EMPLOYEES RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	ALISAL PROPERTIES, INC.
c	EIN-PN	95-2428546-001
a	Plan name	ALL-CLAD METALCRAFTERS, INC. SAVINGS PROGRAM AND 401(K) PLAN
b	Name of plan sponsor	ALL-CLAD METALCRAFTERS INC
c	EIN-PN	25-1805397-003
a	Plan name	ALLIANCE FOODS INC PROFIT-SHARING PLAN
b	Name of plan sponsor	ALLIANCE FOODS INC
c	EIN-PN	38-0692130-002
a	Plan name	ALLIED PRINTING COMPANY 401(K) PLAN
b	Name of plan sponsor	ALLIED PRINTING COMPANY, INC.
c	EIN-PN	38-1413441-001
a	Plan name	AMCOR AMERICAN CANYON LLC 401(K) RETIREMENT PLAN
b	Name of plan sponsor	AMCOR AMERICAN CANYON LLC
c	EIN-PN	84-3959068-002
a	Plan name	BEMIS RETIREMENT PLAN
b	Name of plan sponsor	AMCOR FLEXIBLES NORTH AMERICA, INC.
c	EIN-PN	43-0178130-001
a	Plan name	AMCOR DEFINED CONTRIBUTION PENSION PLAN FOR HOURLY EMPLOYEES
b	Name of plan sponsor	AMCOR FLEXIBLES NORTH AMERICA, INC.
c	EIN-PN	43-0178130-008
a	Plan name	UNION AMCOR INVESTMENT PROFIT SHARING PLAN
b	Name of plan sponsor	AMCOR FLEXIBLES NORTH AMERICA, INC.
c	EIN-PN	43-0178130-009
a	Plan name	AMCOR RIGID PACKAGING SAVINGS AND INVESTMENT PLAN
b	Name of plan sponsor	AMCOR RIGID PACKAGING USA, LLC
c	EIN-PN	36-4126680-001
a	Plan name	AMCOR SPECIALTY CARTONS AMERICAS 401(K) RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	AMCOR SPECIALTY CARTONS AMERICAS LLC
c	EIN-PN	98-0080783-004
a	Plan name	AMERICAN HEART ASSOCIATION, INC. QUALIFIED RETIREMENT PLAN
b	Name of plan sponsor	AMERICAN HEART ASSOCIATION, INC.
c	EIN-PN	13-5613797-002

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 AMERICAN SHORT LINE AND REGIONAL RAILROAD ASSOCIATION RETIREMENT SAVIN	
b	Name of plan sponsor AMERICAN SHORT LINE AND REGIONAL RA	c EIN-PN 53-6000080-002
a	Plan name SAVS PL FOR EMPS OF AMER WTR WKS CO INC & ITS DESIG SUBS	
b	Name of plan sponsor AMERICAN WATER WORKS COMPANY, INC.	c EIN-PN 51-0063696-003
a	Plan name AMF 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AMF AUTOMATION TECHNOLOGIES, LLC	c EIN-PN 26-2570524-001
a	Plan name AMG INDUSTRIES, LLC 401K RETIREMENT PLAN	
b	Name of plan sponsor AMG INDUSTRIES, LLC	c EIN-PN 47-4578433-004
a	Plan name AMG INDUSTRIES, LLC HOURLY 401(K) PLAN	
b	Name of plan sponsor AMG INDUSTRIES, LLC	c EIN-PN 47-4578433-005
a	Plan name ANCHOR INDUSTRIES HOLDINGS, INCORPORATED RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ANCHOR INDUSTRIES HOLDINGS, INCORPORATED	c EIN-PN 27-1477713-001
a	Plan name ANESTHESIA ASSOCIATES OF ANN ARBOR PLLC PROFIT SHARING PLAN	
b	Name of plan sponsor ANESTHESIA ASSOCIATES OF ANN ARBOR PLLC	c EIN-PN 38-1879370-005
a	Plan name ANESTHESIA ASSOCIATES, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANESTHESIA ASSOCIATES, PA	c EIN-PN 63-0782031-003
a	Plan name APEX TOOL GROUP, LLC PENSION PLAN FOR APEX BARGAINING UNIT EMPLOYEES I	
b	Name of plan sponsor APEX TOOL GROUP LLC	c EIN-PN 27-1996059-046
a	Plan name APEX TOOL GROUP, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor APEX TOOL GROUP, LLC	c EIN-PN 27-1996059-001
a	Plan name APPLIANCE ENAMELING & SERVICE PROFIT SHARING PLAN	
b	Name of plan sponsor APPLIANCE ENAMELING & SERVICE	c EIN-PN 95-2881548-002
a	Plan name ARCHROCK 401(K) PLAN	
b	Name of plan sponsor ARCHROCK SERVICES, L.P.	c EIN-PN 47-3682215-001

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 SCHIFF HARDIN LLP PROFESSIONAL RETIREMENT PLAN I	
b	Name of plan sponsor ARENTOX SCHIFF LLP	c EIN-PN 53-0214923-001
a	Plan name ARENTOX SCHIFF PROFIT SHARING PLAN	
b	Name of plan sponsor ARENTOX SCHIFF LLP	c EIN-PN 53-0214923-009
a	Plan name ARES 401(K) PLAN	
b	Name of plan sponsor ARES LLC	c EIN-PN 45-3706322-001
a	Plan name ART DISPLAY COMPANY EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor ART DISPLAY COMPANY, INC.	c EIN-PN 53-0246756-001
a	Plan name ASENDIA USA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASENDIA USA, INC.	c EIN-PN 23-3060988-001
a	Plan name ASSUREDPARTNERS 401(K) PLAN	
b	Name of plan sponsor ASSUREDPARTNERS, INC.	c EIN-PN 27-5176829-001
a	Plan name ASURION, LLC 401(K) PLAN	
b	Name of plan sponsor ASURION LLC	c EIN-PN 94-3197174-001
a	Plan name ATLANTIC FISH & DISTRIBUTING CO., INC. 401(K) PLAN	
b	Name of plan sponsor ATLANTIC FISH & DISTRIBUTING CO., INC.	c EIN-PN 34-1047743-001
a	Plan name ATTINDAS HYGIENE PARTNERS 401(K) PLAN	
b	Name of plan sponsor ATTENDS HEALTHCARE PRODUCTS INC.	c EIN-PN 06-1640071-001
a	Plan name AUTISM SOCIETY OF NORTH CAROLINA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AUTISM SOCIETY OF NORTH CAROLINA, INC.	c EIN-PN 23-7087887-001
a	Plan name THE AUTO CLUB GROUP 401K PLAN	
b	Name of plan sponsor AUTO CLUB INSURANCE ASSOCIATION	c EIN-PN 38-0477270-335
a	Plan name AVIATION CAPITAL GROUP 401(K) PLAN	
b	Name of plan sponsor AVIATION CAPITAL GROUP LLC	c EIN-PN 06-1395411-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a Plan name	B. BRAUN MEDICAL INC. SAVINGS PLAN	
b Name of plan sponsor	B. BRAUN MEDICAL INC.	c EIN-PN 23-2116774-003
a Plan name	B.L. HARBERT INTERNATIONAL, L.L.C. RETIREMENT PLAN	
b Name of plan sponsor	B.L. HARBERT INTERNATIONAL, L.L.C.	c EIN-PN 63-1232416-001
a Plan name	BAE INDUSTRIES 401K PLAN	
b Name of plan sponsor	BAE INDUSTRIES, INC	c EIN-PN 38-1944452-001
a Plan name	BAILEY, JAVINS & CARTER, LC 401(K) PLAN	
b Name of plan sponsor	BAILEY, JAVINS & CARTER, LC	c EIN-PN 55-0601978-002
a Plan name	BARNES & THORNBURG LLP PROFIT SHARING PLAN	
b Name of plan sponsor	BARNES & THORNBURG LLP	c EIN-PN 35-0900596-002
a Plan name	BBC DISTRIBUTION CORP 401(K) RETIREMENT PLAN	
b Name of plan sponsor	BBC DISTRIBUTION CORP	c EIN-PN 35-2131007-001
a Plan name	BEARING & DRIVE SYSTEMS 401(K) PLAN	
b Name of plan sponsor	BEARING & DRIVE SYSTEMS, INC.	c EIN-PN 34-1402437-001
a Plan name	BELL, DAVIS & PITT , P.A. 401 (K) PROFIT SHARING PLAN	
b Name of plan sponsor	BELL, DAVIS & PITT , P.A.	c EIN-PN 56-1305704-003
a Plan name	BELLIN HEALTH 401(K) RETIREMENT PLAN	
b Name of plan sponsor	BELLIN HEALTH SYSTEMS, INC.	c EIN-PN 39-1512904-002
a Plan name	BRANDED ENTERTAINMENT NETWORK 401(K) SAVINGS PLAN	
b Name of plan sponsor	BEN GROUP, INC	c EIN-PN 91-1462224-001
a Plan name	BENJAMIN OBDYKE, INCORPORATED 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	BENJAMIN OBDYKE, INC	c EIN-PN 23-0926670-002
a Plan name	BERICAP SC, LLC 401(K) PLAN	
b Name of plan sponsor	BERICAP SC, LLC	c EIN-PN 35-2309666-001

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 BEST COMMERCIAL MANAGEMENT, INC. 401(K)/PSP	
b	Name of plan sponsor BEST COMMERCIAL MANAGEMENT, INC.	c EIN-PN 45-1828408-001
a	Plan name BETH ISRAEL DEACONESS MEDICAL CENTER, INC 401(K) SAVINGS AND INVESTMEN	
b	Name of plan sponsor BETH ISRAEL DEACONESS MEDICAL CENTER	c EIN-PN 04-2103881-004
a	Plan name BIERY CHEESE COMPANY EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor BIERY CHEESE COMPANY	c EIN-PN 34-0750763-002
a	Plan name BIG 5 SPORTING GOODS SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor BIG 5 CORP	c EIN-PN 95-1854273-111
a	Plan name BLOOMBERG L.P. 401(K) PLAN	
b	Name of plan sponsor BLOOMBERG L.P.	c EIN-PN 13-3417984-001
a	Plan name BLUESTEM 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BLST OPERATING COMPANY, LLC	c EIN-PN 85-1387944-001
a	Plan name BOJANGLES' RESTAURANTS, INC. 401(K) PLAN	
b	Name of plan sponsor BOJANGLES RESTAURANTS, INC.	c EIN-PN 95-4283932-001
a	Plan name BON SECOURS MERCY HEALTH RETIREMENT SAVINGS PLAN 401	
b	Name of plan sponsor BON SECOURS MERCY HEALTH, INC.	c EIN-PN 52-1301088-024
a	Plan name MERCY HEALTH RETIREMENT SAVINGS PLAN 403B	
b	Name of plan sponsor BON SECOURS MERCY HEALTH, INC.	c EIN-PN 52-1301088-025
a	Plan name BONDHUS CORPORATION 401(K) PLAN AND TRUST	
b	Name of plan sponsor BONDHUS CORPORATION	c EIN-PN 41-0943206-002
a	Plan name BRADY MATCHED 401(K) PLAN	
b	Name of plan sponsor BRADY CORPORATION	c EIN-PN 39-0178960-003
a	Plan name BRADY FUNDED RETIREMENT PLAN	
b	Name of plan sponsor BRADY CORPORATION	c EIN-PN 39-0178960-004

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 BROWN BOTTLING GROUP, INC. EMPLOYEE BENEFIT PLAN	
b	Name of plan sponsor BROWN BOTTLING GROUP, INC.	c EIN-PN 64-0507643-502
a	Plan name BRUNO & RIDGWAY RESEARCH ASSOCIATES, INC. 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor BRUNO & RIDGWAY RESEARCH ASSOCIATES	c EIN-PN 22-1909464-003
a	Plan name BUCKEYE DENTAL GROUP LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BUCKEYE DENTAL GROUP LLC	c EIN-PN 03-0446553-001
a	Plan name BURR & FORMAN LLP PROFIT SHARING PLAN	
b	Name of plan sponsor BURR & FORMAN LLP	c EIN-PN 63-0322727-001
a	Plan name BURR & FORMAN LLP EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor BURR & FORMAN LLP	c EIN-PN 63-0322727-003
a	Plan name BUTECH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BUTECH, INC.	c EIN-PN 34-1472584-001
a	Plan name SAVINGS PLAN OF BYK USA	
b	Name of plan sponsor BYK USA INC.	c EIN-PN 13-1978006-001
a	Plan name BYK-GARDNER USA 401(K) PLAN	
b	Name of plan sponsor BYK-GARDNER USA	c EIN-PN 13-1978006-005
a	Plan name CALIFORNIA WATER SERVICE COMPANY SAVINGS PLAN	
b	Name of plan sponsor CALIFORNIA WATER SERVICE COMPANY	c EIN-PN 94-0362795-004
a	Plan name CAPELL & HOWARD PC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CAPELL & HOWARD PC	c EIN-PN 63-0593542-001
a	Plan name CAPITAL ASSOCIATES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAPITAL ASSOCIATES MANAGEMENT, LLC	c EIN-PN 46-1381585-001
a	Plan name CAPITOL SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAPITOL SERVICES, INC.	c EIN-PN 74-1974280-001

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 CARLISLE, MCNELLIE & RINI CO., LPA 401(K) SAVINGS PLAN	
b	Name of plan sponsor CARLISLE, MCNELLIE, RINI, KRAMER & ULRICH CO., LPA	c EIN-PN 34-1279923-001
a	Plan name PROFIT SHARING AND 401(K) PLAN FOR EMPLOYEES OF CARLTON FIELDS	
b	Name of plan sponsor CARLTON FIELDS, P.A.	c EIN-PN 59-1233896-002
a	Plan name CAROLINA CANNERS, INC. EMPLOYEE BENEFIT PLAN	
b	Name of plan sponsor CAROLINA CANNERS, INC	c EIN-PN 57-0509114-503
a	Plan name CAROLINA FAMILY CARE 401K PLAN	
b	Name of plan sponsor CAROLINA HEALTH MANAGEMENT SERVICES, INC.	c EIN-PN 57-1088062-001
a	Plan name CARRINGTON 401(K) PLAN	
b	Name of plan sponsor CARRINGTON HOLDING COMPANY, LLC	c EIN-PN 75-2703422-002
a	Plan name CASSEM, TIERNEY, ADAMS, GOTCH & DOUGLAS PROFIT SHARING PLAN	
b	Name of plan sponsor CASSEM, TIERNEY, ADAMS, GOTCH & DOUGLAS	c EIN-PN 47-0419903-001
a	Plan name CAT CANYON RESOURCES, LLC 401(K) PLAN	
b	Name of plan sponsor CAT CANYON RESOURCES, LLC	c EIN-PN 83-4497746-001
a	Plan name THE CENGAGE LEARNING, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor CENGAGE LEARNING, INC.	c EIN-PN 59-2124491-001
a	Plan name CENTRAL HUDSON GAS & ELECTRIC CORPORATION SAVINGS INCENTIVE PLAN	
b	Name of plan sponsor CENTRAL HUDSON GAS & ELECTRIC CORPORATION	c EIN-PN 14-0555980-004
a	Plan name CENTRAL HUDSON GAS & ELECTRIC CORPORATION SUPPLEMENTAL RETIREMENT PLAN	
b	Name of plan sponsor CENTRAL HUDSON GAS & ELECTRIC CORPORATION	c EIN-PN 14-0555980-005
a	Plan name CENTRAL OHIO PRIMARY CARE PHYSICIANS, INC. SAVINGS PLAN	
b	Name of plan sponsor CENTRAL OHIO PRIMARY CARE PHYSICIANS, INC.	c EIN-PN 31-1398575-001
a	Plan name CERTON TECHNOLOGIES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CERTON TECHNOLOGIES INC	c EIN-PN 34-1836564-001

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 CHAMBERLAIN, HRDLICKA, WHITE, WILLIAMS & AUGHTRY PROFIT SHARING AND 40	
b	Name of plan sponsor CHAMBERLAIN, HRDLICKA, WHITE, WILLIAMS & AUGHTRY, P.C.	c EIN-PN 82-3774540-002
a	Plan name CHAMPIONX 401(K) PLAN	
b	Name of plan sponsor CHAMPIONX LLC	c EIN-PN 36-1520480-001
a	Plan name CHARLOTTE PAINT CO., LLC 401(K) PLAN	
b	Name of plan sponsor CHARLOTTE PAINT CO., LLC	c EIN-PN 56-1183848-001
a	Plan name CHERRY CENTRAL COOPERATIVE, INC. EMPLOYEES PROFIT SHARING AND INVESTME	
b	Name of plan sponsor CHERRY CENTRAL COOPERATIVE, INC.	c EIN-PN 38-2010272-001
a	Plan name CHESAPEAKE UTILITIES CORPORATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CHESAPEAKE UTILITIES CORPORATION	c EIN-PN 51-0064146-002
a	Plan name CHROME DEPOSIT CORPORATION 401(K) PLAN	
b	Name of plan sponsor CHROME DEPOSIT CORPORATION	c EIN-PN 35-1526495-001
a	Plan name CLEAN HARBORS CARIBE INC 401K PLAN	
b	Name of plan sponsor CLEAN HARBORS CARIBE INC	c EIN-PN 66-0595892-001
a	Plan name CLEAN HARBORS SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor CLEAN HARBORS ENVIROMENTAL SERVICES, INC.	c EIN-PN 04-2698999-001
a	Plan name CLEARCHOICE DENTAL IMPLANT CENTERS 401(K) PROFIT SHARING PLAN AND TRUS	
b	Name of plan sponsor CLEARCHOICE MANAGEMENT SERVICES, LLC	c EIN-PN 20-3648245-001
a	Plan name CLIFF WEIL, INC. PROFIT-SHARING SAVINGS PLAN	
b	Name of plan sponsor CLIFF WEIL, INC.	c EIN-PN 54-0428620-001
a	Plan name CML MICROCIRCUITS (USA) INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CML MICROCIRCUITS (USA) INC.	c EIN-PN 20-0517783-001
a	Plan name CO ARCHITECTS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CO ARCHITECTS	c EIN-PN 95-4598928-001

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	COCA-COLA BOTTLING COMPANY UNITED, INC. 401(K) PLAN	
b	Name of plan sponsor	COCA-COLA BOTTLING COMPANY UNITED, INC.	c EIN-PN 58-0148710-003
a	Plan name	COLLINS EINHORN FARRELL PC 401(K) PLAN	
b	Name of plan sponsor	COLLINS EINHORN FARRELL PC	c EIN-PN 38-2040178-002
a	Plan name	COMMUNITY HEALTH NETWORK 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	COMMUNITY HEALTH NETWORK, INC.	c EIN-PN 35-0983617-004
a	Plan name	CONNER & WINTERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CONNER & WINTERS, LLP	c EIN-PN 73-1388566-001
a	Plan name	CONNER & WINTERS ABRA 401(K) SAVINGS PLAN	
b	Name of plan sponsor	CONNER & WINTERS, LLP	c EIN-PN 73-1388566-002
a	Plan name	COOPER MACHINERY SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	COOPER MACHINERY SERVICES, LLC	c EIN-PN 46-5397496-001
a	Plan name	CMO SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	CREATIVE MILLWORK OF OHIO, INC.	c EIN-PN 34-1557359-001
a	Plan name	OLDCASTLE BUILDING ENVELOPE 401(K) PLAN	
b	Name of plan sponsor	OLDCASTLE BUILDING ENVELOPE, INC.	c EIN-PN 75-2196684-002
a	Plan name	CRITCHFIELD, CRITCHFIELD & JOHNSTON, LTD. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CRITCHFIELD, CRITCHFIELD & JOHNSTON, LTD.	c EIN-PN 34-0683725-001
a	Plan name	CRITEO CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	CRITEO CORPORATION	c EIN-PN 27-0460745-001
a	Plan name	CROWN GROUP INC., 401(K) PLAN	
b	Name of plan sponsor	CROWN GROUP OF OHIO, INC.	c EIN-PN 34-1204152-001
a	Plan name	CYCLERION THERAPEUTICS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	CYCLERION THERAPEUTICS, INC.	c EIN-PN 83-1895370-001

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 DAWDA MANN, PLC 401(K) PLAN	
b	Name of plan sponsor DAWDA, MANN, MULCAHY & SADLER, PLC	c EIN-PN 38-3235321-001
a	Plan name DAXKO, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor DAXKO, LLC	c EIN-PN 63-1262193-001
a	Plan name DAYTON CHILDREN'S HOSPITAL 401(K) PLAN	
b	Name of plan sponsor DAYTON CHILDRENS HOSPITAL	c EIN-PN 31-0672132-002
a	Plan name DEBORAH HEART AND LUNG CENTER 401(K) PLAN	
b	Name of plan sponsor DEBORAH HEART & LUNG CENTER	c EIN-PN 23-1550955-002
a	Plan name DECHERT LLP PENSION PLAN NO. 1 FOR PARTNERS	
b	Name of plan sponsor DECHERT LLP	c EIN-PN 23-1425587-002
a	Plan name DECHERT LLP SALARY SAVINGS PLAN	
b	Name of plan sponsor DECHERT LLP	c EIN-PN 23-1425587-003
a	Plan name DECHERT LLP PENSION PLAN NO. 2 FOR PARTNERS	
b	Name of plan sponsor DECHERT LLP	c EIN-PN 23-1425587-007
a	Plan name DECHERT LLP PARTICIPANT-DIRECTED RETIREMENT PLAN NO. 1	
b	Name of plan sponsor DECHERT LLP	c EIN-PN 23-1425587-008
a	Plan name DECHERT LLP PARTICIPANT-DIRECTED RETIREMENT PLAN NO. 2	
b	Name of plan sponsor DECHERT LLP	c EIN-PN 23-1425587-009
a	Plan name DESIGNARC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DESIGNARC, INC.	c EIN-PN 77-0195650-001
a	Plan name DETROIT QUALITY BRUSH MFG. CO., INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor DETROIT QUALITY BRUSH MFG. CO., INC.	c EIN-PN 38-1623297-002
a	Plan name DILLARD'S, INC. INVESTMENT & EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor DILLARDS, INC.	c EIN-PN 71-0388071-111

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	DIX 1898, INC. 401(K) PLAN	
b	Name of plan sponsor	DIX 1898, INC.	c EIN-PN 34-0628530-002
a	Plan name	DOLLAR FINANCIAL GROUP RETIREMENT PLAN	
b	Name of plan sponsor	DOLLAR FINANCIAL GROUP, INC.	c EIN-PN 13-2997911-001
a	Plan name	DOMTAR US HOURLY 401(K) PLAN	
b	Name of plan sponsor	DOMTAR INDUSTRIES LLC	c EIN-PN 25-1157103-008
a	Plan name	DOMTAR US SALARIED 401(K) PLAN	
b	Name of plan sponsor	DOMTAR INDUSTRIES LLC	c EIN-PN 25-1157103-009
a	Plan name	DRS. HENZEL AND SMITH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DRS. HENZEL AND SMITH, INC.	c EIN-PN 34-1088449-003
a	Plan name	DYNA-EMPIRE, INC. TAX DEFERRED SAVINGS PLAN	
b	Name of plan sponsor	DYNA-EMPIRE INC.	c EIN-PN 11-1770989-002
a	Plan name	DYNEX 401(K) PLAN	
b	Name of plan sponsor	DYNEX TECHNOLOGIES, INC.	c EIN-PN 20-1729978-001
a	Plan name	EA ENGINEERING, SCIENCE, AND TECHNOLOGY, INC., PBC SAVINGS AND RETIREM	
b	Name of plan sponsor	EA ENGINEERING, SCIENCE, AND TECHNOLOGY, INC., PBC	c EIN-PN 52-0991911-001
a	Plan name	EAGLE MATERIALS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	EAGLE MATERIALS, INC.	c EIN-PN 75-2520779-001
a	Plan name	EAST END WELDING, LLC 401(K) PLAN	
b	Name of plan sponsor	EAST END WELDING, LLC	c EIN-PN 46-3790638-001
a	Plan name	PENSION PLAN FOR EMPLOYEES OF EASTER SEALS, INC.	
b	Name of plan sponsor	EASTER SEALS SOUTHERN CALIFORNIA	c EIN-PN 94-3068149-001
a	Plan name	EBAY INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	EBAY INC.	c EIN-PN 77-0430924-001

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	ECKART AMERICA 401(K) PLAN	
b	Name of plan sponsor	ECKART AMERICA CORPORATION	c EIN-PN 31-1563138-001
a	Plan name	ECOLAB SAVINGS PLAN AND ESOP	
b	Name of plan sponsor	ECOLAB INC.	c EIN-PN 41-0231510-003
a	Plan name	ECOLAB PUERTO RICO SAVINGS PLAN	
b	Name of plan sponsor	ECOLAB INC.	c EIN-PN 41-0231510-005
a	Plan name	ELANTAS PDG, INC. 401(K) PLAN	
b	Name of plan sponsor	ELANTAS PDG, INC	c EIN-PN 43-0287315-001
a	Plan name	EMPLOYEE OWNED BRANDS, INC. 401(K) PLAN	
b	Name of plan sponsor	EMPLOYEE OWNED BRANDS, INC.	c EIN-PN 42-0990485-004
a	Plan name	EMPLOYERS HEALTH COALITION, INC. AND EMPLOYERS HEALTH PURCHASING CORPO	
b	Name of plan sponsor	EMPLOYERS HEALTH COALITION, INC.	c EIN-PN 34-1403820-001
a	Plan name	ENDEAVOR HEALTH 401(K) PLAN	
b	Name of plan sponsor	ENDEAVOR HEALTH	c EIN-PN 87-4520691-001
a	Plan name	ENDRIES INTERNATIONAL INC. 401(K) PLAN	
b	Name of plan sponsor	ENDRIES INTERNATIONAL INC.	c EIN-PN 36-4001332-001
a	Plan name	EVERSHEDS SUTHERLAND (US) LLP MASTER RETIREMENT TRUST	
b	Name of plan sponsor	EVERSHEDS SUTHERLAND (US) LLP	c EIN-PN 58-0619407-006
a	Plan name	FAIRBANKS MORSE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FAIRBANKS MORSE, LLC	c EIN-PN 81-2933620-001
a	Plan name	FAYETTEVILLE BASEBALL CLUB 401(K) PLAN	
b	Name of plan sponsor	FAYETTEVILLE BASEBALL CLUB LLC	c EIN-PN 81-4141435-001
a	Plan name	FREMC 401(K) PLAN	
b	Name of plan sponsor	FEDERATED RURAL ELECTRIC MANAGEMENT CORP.	c EIN-PN 48-1219966-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	FERRY INDUSTRIES, INC. BARGAINING UNIT 401(K)	
b	Name of plan sponsor	FERRY INDUSTRIES	c EIN-PN 34-0699098-001
a	Plan name	THE FIDELITY NATIONAL FINANCIAL GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FIDELITY NATIONAL FINANCIAL, INC.	c EIN-PN 16-1725106-001
a	Plan name	FINASTRA USA SALARY SAVINGS 401(K) PLAN	
b	Name of plan sponsor	FINASTRA USA CORPORATION	c EIN-PN 59-3760087-001
a	Plan name	FIRST QUALITY SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	FIRST QUALITY ENTERPRISES INC.	c EIN-PN 23-2744573-001
a	Plan name	FISHER & COMPANY, INCORPORATED 401(K) PLAN	
b	Name of plan sponsor	FISHER & COMPANY, INC	c EIN-PN 38-1783305-003
a	Plan name	FISHER & PAYKEL HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	FISHER & PAYKEL HOLDINGS, INC.	c EIN-PN 33-0721612-001
a	Plan name	FISHER AUTO PARTS 401(K) PLAN	
b	Name of plan sponsor	FISHER AUTO PARTS, INC.	c EIN-PN 54-0649966-001
a	Plan name	FLOWERS FOODS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FLOWERS FOODS, INC.	c EIN-PN 58-2582379-004
a	Plan name	FOLEY & LARDNER LLP DEFINED CONTRIBUTION RETIREMENT PLAN	
b	Name of plan sponsor	FOLEY & LARDNER LLP	c EIN-PN 39-0473800-007
a	Plan name	FORGED PRODUCTS, INC. 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	FORGED PRODUCTS, INC.	c EIN-PN 76-0088720-001
a	Plan name	FOTH & VAN DYKE, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	FOTH & VAN DYKE, LLC	c EIN-PN 20-5814203-001
a	Plan name	FRAMATOME INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	FRAMATOME INC.	c EIN-PN 54-1536465-001

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	G&D INTEGRATED RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	G&D INTEGRATED HOLDINGS, LLC	c EIN-PN 26-3935895-001
a	Plan name	GALLAGHER-KAISER CORPORATION TAX DEFERRED SAVINGS PLAN	
b	Name of plan sponsor	GALLAGHER-KAISER CORPORATION	c EIN-PN 38-1396724-005
a	Plan name	GANNETT MEDIA CORP. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	GANNETT MEDIA CORP.	c EIN-PN 47-2390983-100
a	Plan name	GAPSHARE 401(K) PLAN	
b	Name of plan sponsor	GAP INC.	c EIN-PN 94-1697231-001
a	Plan name	GAPSHARE PUERTO RICO PLAN	
b	Name of plan sponsor	GAP INC.	c EIN-PN 94-1697231-002
a	Plan name	GARDNER MARSH GAS EQUIPMENT COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	GARDNER MARSH GAS EQUIPMENT COMPANY, INC.	c EIN-PN 56-0746277-001
a	Plan name	401(K) PLAN FOR BARGAINING UNIT EMPLOYEES OF GAUTIER STEEL LTD.	
b	Name of plan sponsor	GAUTIER STEEL BAR MILL LLC	c EIN-PN 88-3198388-002
a	Plan name	GAUTIER STEEL LTD. 401(K) PLAN FOR SALARIED EMPLOYEES	
b	Name of plan sponsor	GAUTIER STEEL HOLDINGS, INC.	c EIN-PN 88-2951951-003
a	Plan name	GENERAL ATLANTIC SERVICE COMPANY, L.P. RETIREMENT PLAN	
b	Name of plan sponsor	GENERAL ATLANTIC SERVICE COMPANY, L.P.	c EIN-PN 13-3491941-001
a	Plan name	GENERAL EXTRUSIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	GENERAL EXTRUSIONS, INC.	c EIN-PN 34-0706173-005
a	Plan name	THE GENERAL SHALE 401(K) PLAN	
b	Name of plan sponsor	GENERAL SHALE BRICK, INC.	c EIN-PN 20-0454569-005
a	Plan name	GENERAL SHALE SMART SAVINGS 401(K) PLAN	
b	Name of plan sponsor	GENERAL SHALE BRICK, INC.	c EIN-PN 20-0454569-006

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	GENESIS EMPLOYER CONTRIBUTION PLAN	
b	Name of plan sponsor	GENESIS HEALTH SYSTEM	c EIN-PN 42-1418847-011
a	Plan name	GEORGIA SYSTEM OPERATIONS CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	GEORGIA SYSTEM OPERATIONS CORPORATION	c EIN-PN 58-2231207-003
a	Plan name	GEORGIA TRANSMISSION CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	GEORGIA TRANSMISSION CORPORATION (AN ELECTRIC MEMBERSHIP CORPORATION)	c EIN-PN 58-2231201-003
a	Plan name	SAVINGS PLAN FOR EMPLOYEES OF THE GERRESHEIMER COMPANIES	
b	Name of plan sponsor	GERRESHEIMER GLASS INC.	c EIN-PN 22-2784102-003
a	Plan name	GLEANER LIFE INSURANCE SOCIETY RETIREMENT PLAN	
b	Name of plan sponsor	GLEANER LIFE INSURANCE SOCIETY	c EIN-PN 38-0580730-001
a	Plan name	GLEANER LIFE INSURANCE SOCIETY 401(K) PLAN	
b	Name of plan sponsor	GLEANER LIFE INSURANCE SOCIETY	c EIN-PN 38-0580730-002
a	Plan name	GLOBAL BODY & EQUIPMENT CO EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	GLOBAL BODY EQUIPMENT CO.	c EIN-PN 41-2066094-001
a	Plan name	GOGO INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	GOGO INC.	c EIN-PN 27-1650905-001
a	Plan name	DIVERSIFIED US LARGE CAP STOCK CIT	
b	Name of plan sponsor	GREAT GRAY TRUST COMPANY, LLC	c EIN-PN 38-7271389-770
a	Plan name	GREAT LAKES CASTINGS, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	GREAT LAKES CASTINGS, LLC	c EIN-PN 30-0784324-001
a	Plan name	GREAT LAKES TOWER & ANTENNA 401(K) PLAN AND TRUST	
b	Name of plan sponsor	GREAT LAKES TOWER & ANTENNA COMPANY, INC.	c EIN-PN 38-2776792-001
a	Plan name	GREEN & GREEN SAFE HARBOR AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	GREEN & GREEN, LAWYERS, A LEGAL PRO	c EIN-PN 31-1467935-001

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 GREENE GROUP, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor GREENE GROUP, INC.	c EIN-PN 63-0803591-333
a	Plan name GREENHECK FAN CORPORATION 401(K) & SAVINGS PLAN	
b	Name of plan sponsor GREENHECK FAN CORPORATION	c EIN-PN 39-0920319-005
a	Plan name GREGORY E. KINSINGER, DDS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GREGORY E. KINSINGER, DDS, INC.	c EIN-PN 45-5275358-001
a	Plan name GROUPE SEB EMPLOYEES' RETIREMENT INCOME PLAN	
b	Name of plan sponsor GROUPE SEB	c EIN-PN 22-3062987-002
a	Plan name GUNSTER 401(K) PLAN FOR ASSOCIATE ATTORNEYS	
b	Name of plan sponsor GUNSTER, YOAKLEY & STEWART, P.A.	c EIN-PN 59-1450702-005
a	Plan name GUNSTER RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GUNSTER, YOAKLEY & STEWART, P.A.	c EIN-PN 59-1450702-006
a	Plan name HABUSH HABUSH & ROTTIER, S.C. 401(K) SAVINGS PLAN	
b	Name of plan sponsor HABUSH HABUSH & ROTTIER, S.C.	c EIN-PN 39-1272599-003
a	Plan name HAECO AMERICAS 401(K) PLAN	
b	Name of plan sponsor HAECO AMERICAS	c EIN-PN 65-0665658-001
a	Plan name HARBOR CAPITAL ADVISORS, INC. 401(K) PLAN	
b	Name of plan sponsor HARBOR CAPITAL ADVISORS, INC.	c EIN-PN 34-1953397-001
a	Plan name HARNESS, DICKEY & PIERCE 401K PROFIT SHARING PLAN	
b	Name of plan sponsor HARNESS, DICKEY & PIERCE, PLC	c EIN-PN 38-1429059-001
a	Plan name HAYNES AND BOONE RETIREMENT SAVINGS PLAN & INVESTMENT DIRECTED PS PLAN	
b	Name of plan sponsor HAYNES AND BOONE, LLP	c EIN-PN 75-1312888-004
a	Plan name HERR FOODS INC. RETIREMENT PLAN	
b	Name of plan sponsor HERR FOODS INC	c EIN-PN 23-1598830-001

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 HEALTHFIRST PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor HF MANAGEMENT SERVICES, LLC	c EIN-PN 13-4069806-002
a	Plan name HARBOR FREIGHT TOOLS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HFT HOLDINGS, INC.	c EIN-PN 27-2501498-002
a	Plan name HILLCREST CONVALESCENT CENTER 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HILLCREST CONVALESCENT CENTER, INC.	c EIN-PN 56-0569851-001
a	Plan name HOAR 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HOAR CONSTRUCTION, LLC	c EIN-PN 62-1367828-001
a	Plan name HOLLAND AND KNIGHT PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HOLLAND & KNIGHT LLP	c EIN-PN 59-0663819-001
a	Plan name HOLLISTER 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HOLLISTER INCORPORATED	c EIN-PN 36-2404865-003
a	Plan name HOLLISTER 401(K) RETIREMENT SAVINGS PLAN FOR THE KIRKSVILLE MISSOURI B	
b	Name of plan sponsor HOLLISTER INCORPORATED	c EIN-PN 36-2404865-005
a	Plan name HOMETRUST BANK KSOP PLAN	
b	Name of plan sponsor HOMETRUST BANCSHARES, INC.	c EIN-PN 56-0181785-002
a	Plan name HOUSTON ENDOWMENT INC. EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor HOUSTON ENDOWMENT INC.	c EIN-PN 74-6013920-002
a	Plan name HURON VALLEY RADIOLOGY, P.C. EMPLOYEES' RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HURON VALLEY RADIOLOGY, P.C.	c EIN-PN 38-1693395-001
a	Plan name HYDRAULICS INTERNATIONAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HYDRAULICS INTERNATIONAL, INC.	c EIN-PN 95-2985753-001
a	Plan name HYNES INDUSTRIES, INC. SALARIED EMPLOYEES' 401(K) PROFIT SHARING TRUST	
b	Name of plan sponsor HYNES INDUSTRIES, INC.	c EIN-PN 34-0971763-003

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	HYNES INDUSTRIES, INC. HOURLY EMPLOYEES 401K PROFIT SHARING TRUST	
b	Name of plan sponsor	HYNES INDUSTRIES, INC.	c EIN-PN 34-0971763-004
a	Plan name	IAI NORTH AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor	IAI NORTH AMERICA, INC.	c EIN-PN 54-0846186-002
a	Plan name	INALFA ROOF SYSTEMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INALFA ROOF SYSTEMS, INC.	c EIN-PN 38-2558870-001
a	Plan name	INALFA ROOF SYSTEMS, INC. UNION 401(K) PLAN	
b	Name of plan sponsor	INALFA ROOF SYSTEMS, INC.	c EIN-PN 38-2558870-002
a	Plan name	INDUSTRIAL PARTS & SERVICE CO., INC. 401(K) PROFIT SHARING PLAN & TRUS	
b	Name of plan sponsor	INDUSTRIAL PARTS & SERVICE CO., INC.	c EIN-PN 34-1599128-001
a	Plan name	INFINEON TECHNOLOGIES SAVINGS PLAN	
b	Name of plan sponsor	INFINEON TECHNOLOGIES AMERICAS CORP.	c EIN-PN 95-1528961-005
a	Plan name	INFOCISION, INC. 401(K) PLAN	
b	Name of plan sponsor	INFOCISION, INC.	c EIN-PN 34-1367630-001
a	Plan name	ING FINANCIAL SERVICES LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	ING FINANCIAL SERVICES LLC	c EIN-PN 13-3713590-002
a	Plan name	INTEGRATED BIOMETRICS 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	INTEGRATED BIOMETRICS,LLC	c EIN-PN 26-3005650-001
a	Plan name	INTERCONTINENTAL EXCHANGE, INC. 401(K) PLAN	
b	Name of plan sponsor	INTERCONTINENTAL EXCHANGE, INC.	c EIN-PN 46-2286804-001
a	Plan name	INTERSTATE-MCBEE RETIREMENT PLAN	
b	Name of plan sponsor	INTERSTATE-MCBEE, LLC	c EIN-PN 34-1922271-001
a	Plan name	IQVIA 401(K) PLAN	
b	Name of plan sponsor	IQVIA INC.	c EIN-PN 06-1506026-004

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	IRONWOOD PHARMACEUTICALS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	IRONWOOD PHARMACEUTICALS, INC.	c EIN-PN 04-3404176-001
a	Plan name	IXL LEARNING, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	IXL LEARNING, INC.	c EIN-PN 94-3321802-001
a	Plan name	JAVITCH BLOCK LLC 401(K) PLAN	
b	Name of plan sponsor	JAVITCH BLOCK LLC	c EIN-PN 34-1606296-002
a	Plan name	JENNISON ASSOCIATES SAVINGS PLAN	
b	Name of plan sponsor	JENNISON ASSOCIATES LLC	c EIN-PN 52-2069785-006
a	Plan name	BOWMAN 401(K)	
b	Name of plan sponsor	JOHN BOWMAN CHEVROLET, INC.	c EIN-PN 38-2554837-002
a	Plan name	JOHN E. GREEN COMPANY 401(K) PLAN	
b	Name of plan sponsor	JOHN E. GREEN COMPANY	c EIN-PN 38-0607500-002
a	Plan name	JOHNSONVILLE PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	JOHNSONVILLE, LLC	c EIN-PN 39-1982994-001
a	Plan name	KAUFMAN LYNN CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KAUFMAN LYNN CONSTRUCTION, INC.	c EIN-PN 65-0098115-001
a	Plan name	KAWASAKI MOTORS CORP., U.S.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KAWASAKI MOTORS CORP., U.S.A.	c EIN-PN 22-1824424-002
a	Plan name	KAWASAKI MOTORS MANUFACTURING CORP., U.S.A. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	KAWASAKI MOTORS MANUFACTURING CORP., U.S.A.	c EIN-PN 47-0640533-002
a	Plan name	KELLER, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	KELLER, INC.	c EIN-PN 39-0971348-001
a	Plan name	KEMMERER OPERATIONS 401(K) PLAN	
b	Name of plan sponsor	KEMMERER OPERATIONS, LLC	c EIN-PN 83-4720470-001

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 KENAN ADVANTAGE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	KENAN ADVANTAGE GROUP, INC.	c EIN-PN 34-1950439-002
a	Plan name	CAMP FAMILY VENTURES 401(K) PLAN	
b	Name of plan sponsor	KERN MACHINERY, INC.	c EIN-PN 26-0497941-001
a	Plan name	KERR, RUSSELL AND WEBER, PLC RETIREMENT PLAN	
b	Name of plan sponsor	KERR, RUSSELL AND WEBER, PLC	c EIN-PN 38-1348691-001
a	Plan name	KINECTA FEDERAL CREDIT UNION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	KINECTA FEDERAL CREDIT UNION	c EIN-PN 95-6038909-001
a	Plan name	KIP CRAFT, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	KIP CRAFT, INC.	c EIN-PN 34-0860751-002
a	Plan name	KIRILA FIRE TRAINING FACILITIES, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	KIRILA FIRE TRAINING FACILITIES, INC.	c EIN-PN 20-8878767-001
a	Plan name	KNOLL RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	KNOLL, INC.	c EIN-PN 13-3873847-002
a	Plan name	SECOND NATURE BRANDS EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	KNPC HOLDCO LLC DBA SECOND NATURE BRANDS	c EIN-PN 38-1855210-004
a	Plan name	KOHL'S INC. SAVINGS PLAN	
b	Name of plan sponsor	KOHL'S INC.	c EIN-PN 13-3357362-002
a	Plan name	KRUGLIAK, WILKINS, GRIFFITHS & DOUGHERTY CO., LPA. PROFIT SHARING AND	
b	Name of plan sponsor	KRUGLIAK, WILKINS, GRIFFITHS & DOUGHERTY CO., L.P.A.	c EIN-PN 34-1295659-001
a	Plan name	KCM RETIREMENT PLAN	
b	Name of plan sponsor	KRUPNICK CAMPBELL MALONE BUSER SLAMA HANCOCK P.A	c EIN-PN 59-1512204-001
a	Plan name	KRUSE WESTERN HOLDINGS, LLC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	KRUSE WESTERN HOLDINGS, LLC	c EIN-PN 88-2929149-001

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	KS INDUSTRIES, LP 401(K) PLAN	
b	Name of plan sponsor	KS INDUSTRIES, LP	c EIN-PN 76-0712868-001
a	Plan name	L. F. JENNINGS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	L F JENNINGS INC.	c EIN-PN 54-0545845-001
a	Plan name	LAKE OBSTETRICS & GYNECOLOGY, INC. RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	LAKE OBSTETRICS & GYNECOLOGY, INC.	c EIN-PN 34-1121210-002
a	Plan name	LANE TRANSIT DISTRICT AND AMALGAMATED TRANSIT UNION, LOCAL NO. 757 PEN	
b	Name of plan sponsor	LANE TRANSIT DISTRICT	c EIN-PN 93-6157736-001
a	Plan name	LANE TRANSIT DISTRICT SALARIED EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	LANE TRANSIT DISTRICT	c EIN-PN 93-0776888-002
a	Plan name	LATHAM & WATKINS 401(K) SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	LATHAM & WATKINS LLP	c EIN-PN 95-2018373-001
a	Plan name	LAZARD FRERES & CO. LLC EMPLOYEES' SAVINGS PLAN	
b	Name of plan sponsor	LAZARD FRERES & CO. LLC	c EIN-PN 13-5545100-003
a	Plan name	LCG ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	LCG ASSOCIATES, INC.	c EIN-PN 75-1680350-002
a	Plan name	LEADER DISTRIBUTION SYSTEMS 401K PLAN	
b	Name of plan sponsor	LEADER DISTRIBUTION SYSTEMS	c EIN-PN 03-0360175-002
a	Plan name	LEICA CAMERA INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	LEICA CAMERA INC.	c EIN-PN 22-3049921-001
a	Plan name	LEO PHARMA INC. 401(K) PLAN	
b	Name of plan sponsor	LEO PHARMA INC.	c EIN-PN 80-0485929-002
a	Plan name	LINDAMOOD-BELL LEARNING PROCESSES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LINDAMOOD-BELL LEARNING PROCESSES	c EIN-PN 77-0140920-001

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 LITTLE RAPIDS CORPORATION 401(K) AND RETIREMENT PLAN	
b	Name of plan sponsor LITTLE RAPIDS CORPORATION	c EIN-PN 39-0433835-006
a	Plan name THE LMH 401(K) RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor LMH SERVICE, INC.	c EIN-PN 38-4087114-001
a	Plan name LPR CONSTRUCTION CO. PROFIT SHARING PLAN WITH 401(K) ARRANGEMENT	
b	Name of plan sponsor Longbow Industries	c EIN-PN 81-3931813-001
a	Plan name LOWENSTEIN SANDLER 401(K) PLAN	
b	Name of plan sponsor LOWENSTEIN SANDLER LLP	c EIN-PN 46-0920520-005
a	Plan name LOWENSTEIN SANDLER 1992 401(K) PLAN	
b	Name of plan sponsor LOWENSTEIN SANDLER LLP	c EIN-PN 46-0920520-006
a	Plan name LOWENSTEIN SANDLER PROFIT SHARING PLAN	
b	Name of plan sponsor LOWENSTEIN SANDLER LLP	c EIN-PN 46-0920520-007
a	Plan name LOWENSTEIN SANDLER 2016 PROFIT SHARING PLAN	
b	Name of plan sponsor LOWENSTEIN SANDLER LLP	c EIN-PN 46-0920520-009
a	Plan name THE LINCOLN PROPERTY COMPANY 401(K) RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor LPC SERVICES, INC.	c EIN-PN 75-2356213-001
a	Plan name LPR CONSTRUCTION COMPANY PROFIT SHARING PLAN WITH 401(K) ARRANGEMENT	
b	Name of plan sponsor LPR CONSTRUCTION CO.	c EIN-PN 84-0792665-001
a	Plan name MACH RESOURCES, LLC 401(K) PLAN	
b	Name of plan sponsor MACH RESOURCES, LLC	c EIN-PN 81-4809861-001
a	Plan name MACLEAN-FOGG COMPANY PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor MACLEAN-FOGG COMPANY	c EIN-PN 36-2431745-003
a	Plan name MANCHESTER, NEWMAN & BENNETT, A LEGAL PROFESSIONAL ASSOCIATION 401K PR	
b	Name of plan sponsor MANCHESTER, NEWMAN & BENNETT, A LEGAL PROFESSIONAL	c EIN-PN 34-1206385-001

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 MANTECH INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor MANTECH INTERNATIONAL CORPORATION	c EIN-PN 22-1852179-002
a	Plan name MAP COMMUNICATIONS HOLDINGS, INC. 401(K) EMPLOYEES' STOCK OWNERSHIP PL	
b	Name of plan sponsor MAP COMMUNICATIONS HOLDINGS, INC.	c EIN-PN 71-0918983-002
a	Plan name MARBORG INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor MARBORG INDUSTRIES	c EIN-PN 95-2884838-002
a	Plan name MARS ADVERTISING, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor MARS ADVERTISING, INC.	c EIN-PN 38-2029315-001
a	Plan name MARSH AUTOMOTIVE GROUP 401(K) PLAN & TRUST	
b	Name of plan sponsor MARSH AUTOMOTIVE GROUP	c EIN-PN 38-3260370-001
a	Plan name MARTIN MARIETTA SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor MARTIN MARIETTA MATERIALS, INC.	c EIN-PN 56-1848578-006
a	Plan name MASCO CORPORATION 401(K) PLAN	
b	Name of plan sponsor MASCO CORPORATION	c EIN-PN 38-1794485-033
a	Plan name MASON COMPANIES RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor MASON COMPANIES, INC	c EIN-PN 39-0455220-001
a	Plan name MAYER BROWN LLP USA SAVINGS PLAN	
b	Name of plan sponsor MAYER BROWN LLP	c EIN-PN 36-1447220-004
a	Plan name MCALPINE COMPANIES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MCALPINE TANKERSLEY ARCHITECTURE, P.C.	c EIN-PN 63-0855597-001
a	Plan name MCCARTY LAW LLP PROFIT SHARING PLAN	
b	Name of plan sponsor MCCARTY LAW LLP	c EIN-PN 39-1050524-001
a	Plan name MCFARLAND EMPLOYEES CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor MCFARLAND & COMPANY, INC. PUBLISHER	c EIN-PN 56-1250364-001

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	MCGRATH RENTCORP EMPLOYEE STOCK OWNERSHIP AND 401(K) PLAN	
b	Name of plan sponsor	MCGRATH RENTCORP	c EIN-PN 94-2579843-001
a	Plan name	MCKIM & CREED, INC. 401(K) PLAN	
b	Name of plan sponsor	MCKIM & CREED, INC.	c EIN-PN 56-2136769-001
a	Plan name	MCMICHAEL INSURANCE AGENCY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MCMICHAEL INSURANCE AGENCY	c EIN-PN 34-1810096-001
a	Plan name	MCNEES WALLACE & NURICK SAVINGS PLAN	
b	Name of plan sponsor	MCNEES WALLACE & NURICK LLC	c EIN-PN 23-1256003-003
a	Plan name	MCNEES WALLACE & NURICK ASSOCIATES AND OF COUNSEL SAVINGS PLAN	
b	Name of plan sponsor	MCNEES WALLACE & NURICK LLC	c EIN-PN 23-1256003-004
a	Plan name	MERCEDES-BENZ FINANCIAL SERVICES USA LLC RETIREMENT PLAN	
b	Name of plan sponsor	MERCEDES-BENZ FINANCIAL SERVICES USA LLC	c EIN-PN 20-8653034-001
a	Plan name	MERCEDES-BENZ U.S. INTERNATIONAL, INC. RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor	MERCEDES-BENZ U.S. INTERNATIONAL, INC.	c EIN-PN 36-3879353-001
a	Plan name	MERCEDES-BENZ USA, LLC EMPLOYEES' RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MERCEDES-BENZ USA, LLC	c EIN-PN 22-2375138-002
a	Plan name	MERIDIAN LABORATORY CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MERIDIAN LABORATORY CORPORATION	c EIN-PN 95-4896039-001
a	Plan name	METSO RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	METSO USA INC.	c EIN-PN 88-0298664-024
a	Plan name	MGA ENTERTAINMENT INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	MGA ENTERTAINMENT	c EIN-PN 95-3726898-001
a	Plan name	MGIC PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor	MGIC INVESTMENT CORPORATION	c EIN-PN 39-1486475-002

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 RIGHT PLAN	
b	Name of plan sponsor	MIDWEST REEMPLOYMENT ASSOC., INC. DBA RIGHT MGMT CONSULTANTS	c EIN-PN 38-2385487-001
a	Plan name	MILLERKNOLL RETIREMENT PLAN	
b	Name of plan sponsor	MILLERKNOLL, INC.	c EIN-PN 38-0837640-002
a	Plan name	MEDIAKIND 401(K) PLAN	
b	Name of plan sponsor	MK SYSTEMS USA, INC.	c EIN-PN 82-5378266-001
a	Plan name	MNS ENGINEERS, INC. 401(K) PLAN	
b	Name of plan sponsor	MNS ENGINEERS, INC.	c EIN-PN 95-2080889-001
a	Plan name	MOMENCE PACKING COMPANY, INC. NON-UNION RETIREMENT PLAN	
b	Name of plan sponsor	MOMENCE PACKING COMPANY, INC.	c EIN-PN 36-3163573-002
a	Plan name	MOMENCE PACKING COMPANY, INC. UNION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	MOMENCE PACKING COMPANY, INC.	c EIN-PN 36-3163573-003
a	Plan name	MOMENTIVE TECHNOLOGIES SAVINGS PLAN	
b	Name of plan sponsor	MOMENTIVE PERFORMANCE MATERIALS	c EIN-PN 34-1839929-002
a	Plan name	MOMENTIVE PERFORMANCE MATERIALS SAVINGS PLAN	
b	Name of plan sponsor	MOMENTIVE PERFORMANCE MATERIALS INC.	c EIN-PN 20-5748297-002
a	Plan name	MOMENTUM TELECOM, INC. 401(K) PLAN	
b	Name of plan sponsor	MOMENTUM TELECOM, INC.	c EIN-PN 63-1248402-001
a	Plan name	MONTGOMERY TRANSPORT, LLC 401(K) PLAN	
b	Name of plan sponsor	MONTGOMERY TRANSPORT, LLC	c EIN-PN 45-1743971-001
a	Plan name	SAVEALOT 401(K) SAVINGS PLAN	
b	Name of plan sponsor	MORAN FOODS, LLC	c EIN-PN 43-1283296-001
a	Plan name	SAVE A LOT 401(K) PLAN	
b	Name of plan sponsor	MORAN FOODS, LLC	c EIN-PN 43-1283296-018

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	MORAN TOWING CORPORATION 401(K) PLAN	
b	Name of plan sponsor	MORAN TOWING CORPORATION	c EIN-PN 13-5256830-001
a	Plan name	MORAN SAN JUAN, INC. RETIREMENT PLAN	
b	Name of plan sponsor	MORAN TOWING CORPORATION	c EIN-PN 31-1514758-004
a	Plan name	MEDPHARM 401(K) PLAN	
b	Name of plan sponsor	MP PHARMA SERVICES, INC.	c EIN-PN 47-4770463-001
a	Plan name	NACG TEXAS, INC. 401(K) PLAN	
b	Name of plan sponsor	NACG TEXAS, INC.	c EIN-PN 38-4139947-001
a	Plan name	NASHVILLE SOCCER CLUB 401K PLAN	
b	Name of plan sponsor	NASHVILLE SOCCER CLUB LLC	c EIN-PN 36-4901222-001
a	Plan name	ASE 401(K) PLAN	
b	Name of plan sponsor	NATIONAL INSTITUTE FOR AUTOMOTIVE SERVICE EXCELLENCE	c EIN-PN 52-0954597-002
a	Plan name	NATIONAL LIFE GROUP 401(K) PLAN	
b	Name of plan sponsor	NATIONAL LIFE INSURANCE COMPANY	c EIN-PN 03-0144090-004
a	Plan name	NATIONAL LIFE INSURANCE COMPANY AGENTS RETIREMENT PLAN	
b	Name of plan sponsor	NATIONAL LIFE INSURANCE COMPANY	c EIN-PN 03-0144090-005
a	Plan name	NATIONAL MACHINE GROUP 401K SAVINGS PLAN	
b	Name of plan sponsor	NATIONAL MACHINE COMPANY	c EIN-PN 34-1011007-001
a	Plan name	NATIONS ROOF, LLC 401(K) PLAN	
b	Name of plan sponsor	NATIONS ROOF LLC	c EIN-PN 75-3161782-001
a	Plan name	NEP BROADCASTING, LLC 401(K) PLAN	
b	Name of plan sponsor	NEP BROADCASTING, LLC	c EIN-PN 25-1869517-001
a	Plan name	NERCON ENG. & MFG. INC .RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NERCON ENG. & MFG.INC.	c EIN-PN 39-1257432-004

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 PEOPLES BANK, INC. 401(K) PLAN	
b	Name of plan sponsor	NEW PEOPLES BANK, INC.	c EIN-PN 54-1880861-001
a	Plan name	FIDUCIENT ADVISORS PEP	
b	Name of plan sponsor	NEWPORT GROUP, INC.	c EIN-PN 27-2037969-031
a	Plan name	NATIONAL GYPSUM 401(K) AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NG OPERATIONS, LLC	c EIN-PN 85-3196048-075
a	Plan name	NICE-PAK PRODUCTS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NICE-PAK PRODUCTS, INC.	c EIN-PN 13-5648554-003
a	Plan name	NISSAN EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	NISSAN NORTH AMERICA, INC.	c EIN-PN 95-2108010-006
a	Plan name	NORTHCOAST HEALTH CARE MANAGEMENT SERVICES, LTD. 401(K) RETIREMENT AND	
b	Name of plan sponsor	NORTHCOAST HEALTH CARE MANAGEMENT SERVICES, LTD.	c EIN-PN 34-1832442-001
a	Plan name	NORTHEAST COMMUNICATIONS OF WI, INC DBA NSIGHT	
b	Name of plan sponsor	NORTHEAST COMMUNICATIONS OF WISCONSIN, INC. DBA NSIGHT	c EIN-PN 39-1417019-001
a	Plan name	THE LONG ISLAND HOME 401(K) PLAN	
b	Name of plan sponsor	NORTHWELL HEALTH INC.	c EIN-PN 11-2837244-003
a	Plan name	NORTHWELL HEALTH 401(K) PLAN	
b	Name of plan sponsor	NORTHWELL HEALTH, INC.	c EIN-PN 11-3418133-001
a	Plan name	NU-TOOL INDUSTRIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NU-TOOL INDUSTRIES, INC.	c EIN-PN 34-1283846-001
a	Plan name	O.C. TANNER RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor	O.C. TANNER COMPANY	c EIN-PN 87-0182665-001
a	Plan name	OGLETHORPE POWER CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	OGLETHORPE POWER CORPORATION (AN ELECTRIC MEMBERSHIP CORPORATION)	c EIN-PN 58-1211925-002

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 OWENS-ILLINOIS, INC. STOCK PURCHASE AND SAVINGS PROGRAM	
b	Name of plan sponsor O-I GLASS, INC.	c EIN-PN 22-2781933-003
a	Plan name OWENS-ILLINOIS, INC. LONG-TERM SAVINGS PLAN	
b	Name of plan sponsor O-I GLASS, INC.	c EIN-PN 22-2781933-017
a	Plan name TLI 401K PLAN	
b	Name of plan sponsor ORANO USA LLC	c EIN-PN 38-3791565-002
a	Plan name O'REILLY AUTOMOTIVE, INC. PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor OREILLY AUTOMOTIVE, INC.	c EIN-PN 27-4358837-002
a	Plan name O'REILLY RANCILIO P.C. EMPLOYEES' 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor OREILLY, RANCILIO, P.C.	c EIN-PN 38-2567969-001
a	Plan name ORLANS P.C. 401(K) PLAN	
b	Name of plan sponsor ORLANS P.C.	c EIN-PN 38-3389922-001
a	Plan name OUTRIGGER HOTELS HAWAII PROFIT SHARING AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor OUTRIGGER HOTELS HAWAII	c EIN-PN 99-0241640-002
a	Plan name PACIFIC LIFE INSURANCE COMPANY RETIREMENT INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor PACIFIC LIFE INSURANCE COMPANY	c EIN-PN 95-1079000-007
a	Plan name PAGE SOUTHERLAND PAGE 401(K) PLAN	
b	Name of plan sponsor PAGE SOUTHERLAND PAGE, INC	c EIN-PN 46-4258046-002
a	Plan name PAYCHEX, INC. 401(K) INCENTIVE RETIREMENT PLAN	
b	Name of plan sponsor PAYCHEX, INC.	c EIN-PN 16-1124166-001
a	Plan name PEA SOUP ANDERSEN'S-SANTA NELLA, INC EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor PEA SOUP ANDERSENS-SANTA NELLA,	c EIN-PN 20-5889934-001
a	Plan name PEDERNALES ELECTRIC COOPERATIVE, INC. EMPLOYEES DEFINED BENEFIT RETIRE	
b	Name of plan sponsor PEDERNALES ELECTRIC COOPERATIVE, INC.	c EIN-PN 74-0828412-001

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 PEERLESS STEEL COMPANY EMPLOYEES' PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor PEERLESS STEEL COMPANY	c EIN-PN 38-1573882-001
a	Plan name PENCO TOOL 401K RETIREMENT PLAN	
b	Name of plan sponsor PENCO ACQUISITION COMPANY DBA PENCO TOOL	c EIN-PN 82-2487522-001
a	Plan name PEPSI-COLA BOTTLERS STANDING-IN-THE-FUTURE 401(K) MULTIPLE EMPLOYER PL	
b	Name of plan sponsor PEPSI-COLA BOTTLERS STANDING-IN-THE-FUTURE 401(K) MULTIPLE EMPLOYER	c EIN-PN 47-4984225-001
a	Plan name PEPSI-COLA MCALESTER, OK	
b	Name of plan sponsor PEPSI-COLA BOTTLERS STANDING-IN-THE-FUTURE 401(K) MULTIPLE EMPLOYER PL	c EIN-PN 81-3373944-001
a	Plan name PEPSI-COLA BOTTLING COMPANY OF CENTRAL VIRGINIA	
b	Name of plan sponsor PEPSI-COLA BOTTLING COMPANY OF CENTRAL VIRGINIA	c EIN-PN 54-0483531-501
a	Plan name PERRIGO COMPANY PROFIT-SHARING AND INVESTMENT PLAN	
b	Name of plan sponsor PERRIGO COMPANY	c EIN-PN 38-2799573-003
a	Plan name PETERSON CONTRACTORS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor PETERSON CONTRACTORS, INC.	c EIN-PN 42-0921654-002
a	Plan name PHOENIX DERMATOLOGY, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PHOENIX DERMATOLOGY, LLC	c EIN-PN 20-1680881-001
a	Plan name PHYSICIANS EAST PA PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor PHYSICIANS EAST PA	c EIN-PN 56-1968491-001
a	Plan name POINT32HEALTH 401(K) PLAN	
b	Name of plan sponsor POINT32HEALTH	c EIN-PN 04-2985923-001
a	Plan name HEALTH PLANS, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor POINT32HEALTH	c EIN-PN 04-2734278-002
a	Plan name ENPRESS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor POLYMER & STEEL TECHNOLOGIES, INC.	c EIN-PN 27-0024875-001

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	POMPS TIRE SERVICE INC SALARY SAVINGS PLAN	
b	Name of plan sponsor	POMPS TIRE SERVICE INC.	c EIN-PN 39-0838986-001
a	Plan name	PORTLAND GENERAL ELECTRIC COMPANY 401K PLAN	
b	Name of plan sponsor	PORTLAND GENERAL ELECTRIC COMPANY	c EIN-PN 93-0256820-005
a	Plan name	PRO FOOD SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	PRO FOOD SYSTEMS, INC.	c EIN-PN 43-1821151-002
a	Plan name	PROCESSBARRON 401(K) PLAN	
b	Name of plan sponsor	PROCESS EQUIPMENT, INC.	c EIN-PN 63-0799730-001
a	Plan name	PSYCARE, INC. 401(K) PLAN	
b	Name of plan sponsor	PSYCARE, INC.	c EIN-PN 34-1481214-001
a	Plan name	PS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PUBLIC STORAGE	c EIN-PN 95-3551121-001
a	Plan name	PURITY WHOLESALE GROCERS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PURITY WHOLESALE GROCERS, INC.	c EIN-PN 36-3161525-001
a	Plan name	QUARTZ HEALTH SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	QUARTZ HEALTH SOLUTIONS, INC.	c EIN-PN 46-5710709-001
a	Plan name	R.J. O'BRIEN & ASSOCIATES, LLC PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor	R.J. OBRIEN & ASSOCIATES, LLC	c EIN-PN 56-2667517-004
a	Plan name	REINHART BOERNER VAN DEUREN, S.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	REINHART BOERNER VAN DEUREN, S.C.	c EIN-PN 39-1126909-001
a	Plan name	401(K) PLAN FOR RESERVE GROUP MANAGEMENT CO. EMPLOYEES	
b	Name of plan sponsor	RESERVE GROUP MANAGEMENT COMPANY	c EIN-PN 34-1806678-001
a	Plan name	RMS HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor	RMS HEALTHCARE	c EIN-PN 20-0725958-001

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	ROBERT D. PERROTT, D. M. D. , LIMITED 401(K) PLAN	
b	Name of plan sponsor	ROBERT D. PERROTT, D.M.D., LIMITED	c EIN-PN 90-1504158-001
a	Plan name	THE ROBINS & MORTON RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ROBINS & MORTON	c EIN-PN 63-1076743-001
a	Plan name	ROMEO-RIM, INC. 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	ROMEO-RIM, INC.	c EIN-PN 38-2438198-003
a	Plan name	ROTARY INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor	ROTARY INTERNATIONAL	c EIN-PN 36-1707667-003
a	Plan name	RPC 401(K) PLAN	
b	Name of plan sponsor	RPC, INC.	c EIN-PN 58-1550825-002
a	Plan name	RPM INTERNATIONAL INC. UNION 401(K) TRUST AND PLAN	
b	Name of plan sponsor	RPM INTERNATIONAL INC.	c EIN-PN 02-0642224-007
a	Plan name	RPM INTERNATIONAL INC. 401(K) TRUST AND PLAN	
b	Name of plan sponsor	RPM INTERNATIONAL INC.	c EIN-PN 02-0642224-011
a	Plan name	RUSH ENTERPRISES, INC. EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	RUSH ENTERPRISES, INC.	c EIN-PN 74-2786267-001
a	Plan name	THE SHARPSVILLE CONTAINER CORPORATION 401(K) PLAN	
b	Name of plan sponsor	S.C. ACQUISITION CO. (DBA SHARPSVILLE CONTAINER CORPORATION)	c EIN-PN 31-1542185-001
a	Plan name	SAFE STREETS USA LLC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	SAFE STREETS USA LLC	c EIN-PN 27-4001370-001
a	Plan name	SAFEGUARD PROPERTIES MANAGEMENT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SAFEGUARD PROPERTIES MANAGEMENT, LLC	c EIN-PN 90-0881590-001
a	Plan name	SAN ANTONIO RETAIL MERCHANTS ASSOCIATION 401(K) PROFIT SHARING RETIREM	
b	Name of plan sponsor	SAN ANTONIO RETAIL MERCHANTS ASSOCIATION	c EIN-PN 74-0879730-002

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	SANTANDER 401(K) PLAN	
b	Name of plan sponsor	SANTANDER HOLDINGS USA, INC.	c EIN-PN 23-2453088-002
a	Plan name	SATELYTICS INC 401(K) PLAN	
b	Name of plan sponsor	SATELYTICS INC	c EIN-PN 94-3450803-001
a	Plan name	SAUL EWING RETIREMENT PLAN	
b	Name of plan sponsor	SAUL EWING LLP	c EIN-PN 23-1416352-003
a	Plan name	SANTA BARBARA AUTO GROUP 401(K) PLAN	
b	Name of plan sponsor	SB AUTOMOTIVE, LLLP DBA SANTA BARBARA AUTO GROUP	c EIN-PN 20-0772500-001
a	Plan name	SCHERBA INDUSTRIES, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	SCHERBA INDUSTRIES, INC.	c EIN-PN 34-1463575-001
a	Plan name	SCHNEIDER NATIONAL, INC. 401(K) SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	SCHNEIDER NATIONAL, INC.	c EIN-PN 39-1258315-002
a	Plan name	SCOTT ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCOTT MANUFACTURING SOLUTIONS, INC.	c EIN-PN 95-2548660-001
a	Plan name	SAGP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SEACOAST AFFILIATED GROUP PRACTICE, INC.	c EIN-PN 04-3485648-001
a	Plan name	SEAGATE 401(K) PLAN	
b	Name of plan sponsor	SEAGATE U.S. LLC	c EIN-PN 77-0545987-001
a	Plan name	SEQUENCE, INC. 401(K) PS PLAN	
b	Name of plan sponsor	SEQUENCE, INC.	c EIN-PN 47-0870575-001
a	Plan name	SERIGRAPH, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SERIGRAPH, INC.	c EIN-PN 39-1591367-001
a	Plan name	SG360 SAVINGS PLAN	
b	Name of plan sponsor	SG360	c EIN-PN 36-2324752-002

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 SHARP EMPLOYEES SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor SHARP ELECTRONICS CORPORATION	c EIN-PN 13-1968872-003
a	Plan name SHERRILL SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor SHERRILL FURNITURE COMPANY	c EIN-PN 56-0475593-002
a	Plan name THE SHURTAPE TECHNOLOGIES PROFIT SHARING AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SHURTAPE TECHNOLOGIES LLC	c EIN-PN 56-1941023-001
a	Plan name SIDLEY AUSTIN LLP RETIREMENT PLAN FOR PARTNERS	
b	Name of plan sponsor SIDLEY AUSTIN LLP	c EIN-PN 36-4474078-004
a	Plan name SIDLEY AUSTIN LLP MASTER TRUST FOR CERTAIN DEFINED CONTRIBUTION PLAN A	
b	Name of plan sponsor SIDLEY AUSTIN LLP	c EIN-PN 90-0619567-017
a	Plan name SIDLEY AUSTIN LLP SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor SIDLEY AUSTIN LLP	c EIN-PN 36-4474078-100
a	Plan name SIDLEY AUSTIN LLP RET PLAN FOR SECRETARIAL STAFF	
b	Name of plan sponsor SIDLEY AUSTIN LLP	c EIN-PN 36-4474078-101
a	Plan name SIERRA INTERNATIONAL MACHINERY, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SIERRA INTERNATIONAL MACHINERY, LLC	c EIN-PN 14-1879945-001
a	Plan name SKIPCO 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SKIPCO FINANCIAL ADJUSTERS, INC.	c EIN-PN 34-1528677-001
a	Plan name STATLAB 401(K) PLAN	
b	Name of plan sponsor SLMP, LLC	c EIN-PN 27-0779549-001
a	Plan name SMITH, ANDERSON, BLOUNT, DORSETT, MITCHELL & JERNIGAN 401(K) PROFIT SH	
b	Name of plan sponsor SMITH, ANDERSON, ET AL L.L.P.	c EIN-PN 56-0402850-002
a	Plan name SOLID GEAR, INC. 401(K) PLAN	
b	Name of plan sponsor SOLID GEAR, INC.	c EIN-PN 46-3831864-001

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	SONOS, INC. 401(K) PLAN	
b	Name of plan sponsor	SONOS, INC.	c EIN-PN 03-0479476-001
a	Plan name	SOUTHWEST AIRLINES CO. PROFITSHARING PLAN	
b	Name of plan sponsor	SOUTHWEST AIRLINES CO.	c EIN-PN 74-1563240-001
a	Plan name	SOUTHWEST AIRLINES CO. 401K PLAN	
b	Name of plan sponsor	SOUTHWEST AIRLINES CO.	c EIN-PN 74-1563240-004
a	Plan name	SPARTANBURG STEEL PRODUCTS, INC. 401(K) SAVINGS AND INVESTMENT PLAN FO	
b	Name of plan sponsor	SPARTANBURG STEEL HOLDINGS, INC.	c EIN-PN 31-1039895-004
a	Plan name	SPARTANBURG STEEL PRODUCTS, INC. SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	SPARTANBURG STEEL PRODUCTS, INC.	c EIN-PN 31-1039895-003
a	Plan name	SPARTANNASH COMPANY SAVINGS PLUS PLAN	
b	Name of plan sponsor	SPARTANNASH COMPANY	c EIN-PN 38-0593940-002
a	Plan name	SPARTANNASH COMPANY SAVINGS PLUS PLAN FOR UNION ASSOCIATES	
b	Name of plan sponsor	SPARTANNASH COMPANY	c EIN-PN 38-0593940-003
a	Plan name	SPERRY RAIL, INC. SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor	SPERRY RAIL, INC.	c EIN-PN 06-0917470-002
a	Plan name	SPRAYING SYSTEMS CO. EMPLOYEES' PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	SPRAYING SYSTEMS CO	c EIN-PN 36-1922920-002
a	Plan name	STANDARD PROCESS INC. 401K AND PROFIT SHARING PLAN	
b	Name of plan sponsor	STANDARD PROCESS INC.	c EIN-PN 39-0762936-001
a	Plan name	STANTEC 401(K) PLAN	
b	Name of plan sponsor	STANTEC CONSULTING SERVICES INC.	c EIN-PN 11-2167170-001
a	Plan name	SIGNET JEWELERS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	STERLING JEWELERS INC.	c EIN-PN 27-3967537-001

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	STITES & HARBISON, PLLC RESTATED SECURITY PLAN I	
b	Name of plan sponsor	STITES & HARBISON	c EIN-PN 61-0680249-001
a	Plan name	SIA RETIREMENT PLAN	
b	Name of plan sponsor	SUBARU OF INDIANA AUTOMOTIVE, INC.	c EIN-PN 35-1709710-004
a	Plan name	SUNKIST MATCH PLUS SAVINGS PLAN	
b	Name of plan sponsor	SUNKIST GROWERS, INC.	c EIN-PN 95-0595000-336
a	Plan name	SUPERIOR FABRICATION COMPANY LLC 401(K) SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	SUPERIOR FABRICATION COMPANY LLC	c EIN-PN 20-0627546-001
a	Plan name	SWIFT, CURRIE, MCGHEE & HIERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SWIFT, CURRIE, MCGHEE & HIERS	c EIN-PN 58-0955936-003
a	Plan name	SYNEOS HEALTH SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor	SYNEOS HEALTH	c EIN-PN 33-0723120-001
a	Plan name	T M MACHINE & TOOL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	T M MACHINE & TOOL, INC.	c EIN-PN 34-1552843-001
a	Plan name	THE 401(K) PLAN	
b	Name of plan sponsor	TANK HOLDING CORP.	c EIN-PN 45-5472404-001
a	Plan name	TANNER ADVANTAGE 401(K) PLAN	
b	Name of plan sponsor	TANNER MEDICAL CENTER, INC	c EIN-PN 58-1790149-003
a	Plan name	TARO PHARMACEUTICALS U.S.A., INC 401(K) PLAN	
b	Name of plan sponsor	TARO PHARMACEUTICALS U.S.A., INC.	c EIN-PN 11-2072868-001
a	Plan name	TBM CONSULTING GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	TBM CONSULTING GROUP, INC.	c EIN-PN 06-1313147-001
a	Plan name	TAG THE ASPEN GROUP 401(K) PLAN	
b	Name of plan sponsor	TEAM TAG SERVICES, LLC	c EIN-PN 88-1639559-003

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	TELCON, LLC EMPLOYEES 401(K) SAVINGS PLAN
b	Name of plan sponsor	TELCON, LLC
c	EIN-PN	45-2549149-001
a	Plan name	TELECOM TECHNICIANS INC. 401(K) PLAN
b	Name of plan sponsor	TELECOM TECHNICIANS INC.
c	EIN-PN	38-2518737-002
a	Plan name	TEXAS-LEHIGH CEMENT COMPANY PROFIT SHARING AND RETIREMENT PLAN
b	Name of plan sponsor	TEXAS LEHIGH CEMENT COMPANY, LP
c	EIN-PN	75-2109658-001
a	Plan name	TEXAS-LEHIGH CEMENT COMPANY 401(K) PLAN
b	Name of plan sponsor	TEXAS LEHIGH CEMENT COMPANY, LP
c	EIN-PN	75-2109658-004
a	Plan name	BUCKLE 401(K) PLAN
b	Name of plan sponsor	THE BUCKLE, INC.
c	EIN-PN	47-0366193-001
a	Plan name	THE CENTER FOR SIGHT EMPLOYEE PROFIT SHARING
b	Name of plan sponsor	THE CENTER FOR SIGHT, P.C.
c	EIN-PN	38-2043586-002
a	Plan name	THE CHRISTMAN COMPANY PROFIT SHARING RETIREMENT PLAN
b	Name of plan sponsor	THE CHRISTMAN COMPANY
c	EIN-PN	38-0419740-001
a	Plan name	THE DYSON CORPORATION 401(K) RETIREMENT PLAN
b	Name of plan sponsor	THE DYSON CORPORATION
c	EIN-PN	34-1717963-001
a	Plan name	THE EYE ACADEMY OF AMERICA, LTD. 401(K) PLAN
b	Name of plan sponsor	THE EYE ACADEMY OF AMERICA, LTD.
c	EIN-PN	84-1596691-001
a	Plan name	THE HAVI GROUP LIMITED PARTNERSHIP PROFIT SHARING AND SAVINGS PLAN
b	Name of plan sponsor	THE HAVI GROUP LIMITED PARTNERSHIP
c	EIN-PN	36-3600106-001
a	Plan name	INDIANA RAIL ROAD COMPANY 401(K) PLAN
b	Name of plan sponsor	THE INDIANA RAIL ROAD COMPANY
c	EIN-PN	35-1673889-001
a	Plan name	THE JIM HENSON COMPANY, INC. RETIREMENT SAVINGS 401K PLAN
b	Name of plan sponsor	THE JIM HENSON COMPANY, INC.
c	EIN-PN	13-2571101-001

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 KARCHER GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor THE KARCHER GROUP, INC.	c EIN-PN 52-2248129-001
a	Plan name THE LANLY COMPANY PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor THE LANLY COMPANY	c EIN-PN 34-0350203-002
a	Plan name THE M. K. MORSE COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor THE M. K. MORSE COMPANY	c EIN-PN 34-1575148-002
a	Plan name THE NATIONAL TELEPHONE SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor THE NATIONAL TELEPHONE SUPPLY COMPANY	c EIN-PN 34-0422070-002
a	Plan name THE ORVIS COMPANY 401(K) PLAN	
b	Name of plan sponsor THE ORVIS COMPANY, INC.	c EIN-PN 03-0215459-002
a	Plan name THE SELINSKY FORCE, LLC 401(K) PLAN	
b	Name of plan sponsor THE SELINSKY FORCE, LLC	c EIN-PN 20-8865828-001
a	Plan name THE WALLACE FORGE CO., INC., 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE WALLACE FORGE COMPANY	c EIN-PN 34-1001125-001
a	Plan name THOMAS, JUDY AND TUCKER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THOMAS, JUDY AND TUCKER P.A.	c EIN-PN 56-1965804-001
a	Plan name THOR INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor THOR INDUSTRIES, INC.	c EIN-PN 93-0768752-001
a	Plan name TOSCA SERVICES, LLC 401(K) PROFIT SHARING TRUST	
b	Name of plan sponsor TOSCA SERVICES, LLC	c EIN-PN 39-0961783-001
a	Plan name TOSCA, LTD. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TOSCA SERVICES, LLC	c EIN-PN 39-0961783-003
a	Plan name TRANS/AIR MANUFACTURING CORPORATION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor TRANS/AIR MANUFACTURING CORPORATION	c EIN-PN 23-2201348-001

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	TRAPAC 401(K) & RETIREMENT PLAN	
b	Name of plan sponsor	TRAPAC, LLC	c EIN-PN 33-0119198-001
a	Plan name	TWIN LIQUORS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TWIN LIQUORS, LP	c EIN-PN 74-2212335-001
a	Plan name	UAW RETIREE MEDICAL BENEFITS TRUST SAVINGS PLAN	
b	Name of plan sponsor	UAW RETIREE MEDICAL BENEFITS TRUST	c EIN-PN 90-0424876-001
a	Plan name	UNIVERSAL HEALTH SERVICES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	UNIVERSAL HEALTH SERVICES, INC.	c EIN-PN 23-2077891-001
a	Plan name	UMA RETIREMENT PLAN	
b	Name of plan sponsor	UNIVERSITY MEDICAL ASSOCIATES OF THE MEDICAL UNIVERSITY OF S.C.	c EIN-PN 57-0935917-001
a	Plan name	UNIVISION SAVINGS TAX ADVANTAGE RETIREMENT PLAN	
b	Name of plan sponsor	UNIVISION COMMUNICATIONS INC.	c EIN-PN 95-4398884-002
a	Plan name	UVA COMMUNITY HEALTH RETIREMENT PLAN	
b	Name of plan sponsor	UVA COMMUNITY HEALTH	c EIN-PN 81-0868533-001
a	Plan name	VALMET, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VALMET, INC.	c EIN-PN 56-1508400-024
a	Plan name	VALUE DRUG COMPANY 401(K) PROFIT-SHARING PLAN	
b	Name of plan sponsor	VALUE DRUG COMPANY	c EIN-PN 23-1179140-001
a	Plan name	VAR INCORPORATED EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	VAR INCORPORATED	c EIN-PN 34-1625594-002
a	Plan name	VCNA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VCNA PRAIRIE LLC	c EIN-PN 26-1320351-001
a	Plan name	VCNA PRAIRIE, INC. SAVINGS PLAN FOR UNION EMPLOYEES	
b	Name of plan sponsor	VCNA PRAIRIE LLC	c EIN-PN 26-1320351-002

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	VERSITI, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	VERSITI, INC.	c EIN-PN 45-4675354-001
a	Plan name	VIAD CORP CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor	VIAD CORP	c EIN-PN 36-1169950-002
a	Plan name	VIRGINIA TILE COMPANY 401(K) PLAN	
b	Name of plan sponsor	VIRGINIA TILE COMPANY, LLC	c EIN-PN 38-1784315-002
a	Plan name	VISIFI, INC 401(K) PLAN	
b	Name of plan sponsor	VISIFI, INC	c EIN-PN 63-0997390-002
a	Plan name	W. SOULE & CO. 401(K) PLAN	
b	Name of plan sponsor	W. SOULE & CO.	c EIN-PN 38-1811731-001
a	Plan name	WALL FAMILY ENTERPRISE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	WALL FAMILY ENTERPRISE INC.	c EIN-PN 20-8230779-333
a	Plan name	WARWICK INVESTMENT GROUP 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	WARWICK INVESTMENT GROUP	c EIN-PN 47-2380411-001
a	Plan name	WEBSTER FIVE CENTS SAVINGS BANK 401(K) PLAN	
b	Name of plan sponsor	WEBSTER FIVE CENTS SAVINGS BANK	c EIN-PN 04-1953630-002
a	Plan name	WEINSTEIN BEVERAGE COMPANY EMPLOYEE BENEFIT PLAN	
b	Name of plan sponsor	WEINSTEIN BEVERAGE COMPANY	c EIN-PN 91-0712045-501
a	Plan name	WELD MOLD COMPANY EMPLOYEES DEFERRED PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	WELD MOLD COMPANY	c EIN-PN 38-1646390-001
a	Plan name	THE ALTENHEIM 401(K) PLAN	
b	Name of plan sponsor	WEST SIDE DEUTSCHER FRAUEN VEREIN, DBA THE ALTENHEIM	c EIN-PN 34-0726068-002
a	Plan name	WESTERN MILLING LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	WESTERN MILLING LLC	c EIN-PN 77-0543517-001

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 WESTLAKE DEFINED BENEFIT PLAN	
b	Name of plan sponsor WESTLAKE MANAGEMENT SERVICES, INC.	c EIN-PN 76-0321065-001
a	Plan name WILLIAM GRANT & SONS, INC. SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor WILLIAM GRANT & SONS INC	c EIN-PN 22-1757718-002
a	Plan name STONEHAM MEDICAL GROUP, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor WINCHESTER HOSPITAL	c EIN-PN 04-3447765-001
a	Plan name WINCHESTER HEALTHCARE ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor WINCHESTER HOSPITAL	c EIN-PN 04-2932059-001
a	Plan name WINCHESTER PHYSICIAN ASSOCIATES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor WINCHESTER HOSPITAL	c EIN-PN 04-3262963-001
a	Plan name WIRTZ HOLDING COMPANY, INC PROFIT SHARING RETIREMENT&401K PLAN	
b	Name of plan sponsor WIRTZ HOLDING COMPANY, INC.	c EIN-PN 46-1663335-001
a	Plan name WISCONSIN STEEL AND TUBE CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor WISCONSIN STEEL AND TUBE CORPORATION	c EIN-PN 39-0839560-001
a	Plan name BOLTHOUSE FARMS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor WM. BOLTHOUSE FARMS, INC.	c EIN-PN 38-1909570-002
a	Plan name WOODBURY CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WOODBURY CORPORATION	c EIN-PN 87-0195170-001
a	Plan name WORTHINGTON INDUSTRIES, INC. DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor WORTHINGTON ENTERPRISES, INC.	c EIN-PN 31-1189815-333
a	Plan name WORTHINGTON STEEL, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor WORTHINGTON STEEL, INC.	c EIN-PN 92-2632000-001
a	Plan name ZILBER LTD. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor ZILBER LTD.	c EIN-PN 39-1472959-001

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan HARBOR CAPITAL APPRECIATION CIT	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 HARBOR TRUST COMPANY, INC.	D Employer Identification Number (EIN) 84-4022934

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	81717446	113684199
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	124170717	119018775
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	65708823	0
(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)	42950094	0
(B) Common	1c(4)(B)	9522117719	13340895748
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	9836664799	13573598722
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	72570367	102312423
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	72570367	102312423
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	9764094432	13471286299

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)	3424194	
(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)		3424194
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	52293959	
(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)		52293959
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	10066062048	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	9253525337	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		812536711
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	2200677933	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income	2c	376784
d Total income. Add all income amounts in column (b) and enter total	2d	3069309581

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)	3491000
(3) Recordkeeping fees	2i(3)	
(4) IQPA audit fees	2i(4)	29855
(5) Investment advisory and investment management fees	2i(5)	39766265
(6) Bank or trust company trustee/custodial fees	2i(6)	319266
(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)	20940
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	43627326
j Total expenses. Add all expense amounts in column (b) and enter total	2j	43627326

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	3025682255
l Transfers of assets:		
(1) To this plan	2l(1)	5031379748
(2) From this plan	2l(2)	4349870136

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 _____.