

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

Department of the Treasury Internal Revenue Service

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).

2024

Department of Labor Employee Benefits Security Administration

Complete all entries in accordance with the instructions to the Form 5500.

Pension Benefit Guaranty Corporation

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify) C, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, C If the plan is a collectively-bargained plan, check here, D Check box if filing under: Form 5558, automatic extension, the DFVC program, special extension, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan MYCOMPASS INDEX CONSERVATIVE 2045 FUND, 1b Three-digit plan number (PN) 485, 1c Effective date of plan, 2a Plan sponsor's name (employer, if for a single-employer plan) GREAT GRAY TRUST COMPANY, LLC, 2b Employer Identification Number (EIN) 38-4097339, 2c Plan Sponsor's telephone number 866-427-6885, 2d Business code (see instructions)

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

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

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

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 <hr/> 2024 <hr/> 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>MYCOMPASS INDEX CONSERVATIVE 2045 FUND</u>	B Three-digit plan number (PN)	<u>485</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	D Employer Identification Number (EIN) <u>38-4097339</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BR MSCI ACWI EX-US IMI INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4955447-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8936817</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>COMMODITY INDEX DAILY FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-4616854-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>DEVELOPED REAL ESTATE INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>27-2659367-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FTSE NAREIT ALL EQUITY REITS INDEX</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>99-3288435-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1279735</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>GLOBAL CORE INFRASTRUCTURE INDEX FU</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>99-2814912-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>729449</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LONG TERM CREDIT BOND INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>87-1467186-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1868414</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LONG TERM GOV BOND INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>82-3997809-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2243802</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 1000 INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3357216-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16320889
a Name of MTIA, CCT, PSA, or 103-12 IE: RUSSELL 2000 INDEX FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3318704-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 789170
a Name of MTIA, CCT, PSA, or 103-12 IE: U.S. TIPS FUND F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 36-4495972-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: 0-5 YEAR U.S. TREASURY INFLATION PR		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 47-3988722-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 102379
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	NOTPOLISH, INC 401K PLAN	
b	Name of plan sponsor	NOTPOLISH, INC	c EIN-PN 82-4271790-001
a	Plan name	401(K) PLAN OF HOCHHEIM PRAIRIE FARM MUTUAL INSURANCE ASSOCIATION	
b	Name of plan sponsor	HOCHHEIM PRAIRIE FARM MUTUAL INSURANCE ASSOCIATION	c EIN-PN 74-0685915-003
a	Plan name	549 SPORTS 401(K) PLAN	
b	Name of plan sponsor	549 SPORTS	c EIN-PN 83-3672587-001
a	Plan name	A & L RV SALES LLC 401(K) PLAN	
b	Name of plan sponsor	A & L RV SALES LLC	c EIN-PN 46-1745260-001
a	Plan name	A&E REAL ESTATE 401(K) PLAN	
b	Name of plan sponsor	A&E REAL ESTATE MANAGEMENT, LLC	c EIN-PN 45-1842743-002
a	Plan name	AAC CONTRACTING, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	AAC CONTRACTING, LLC	c EIN-PN 46-4694985-003
a	Plan name	AARDVARK THERAPEUTICS INC. 401K PROFIT SHARING	
b	Name of plan sponsor	AARDVARK THERAPEUTICS INC	c EIN-PN 82-1606367-001
a	Plan name	ABRAMS, COHEN & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	LAW OFFICE OF BARRY COHEN, LLC	c EIN-PN 26-3494329-001
a	Plan name	ACCUTREATED LLC 401(K) PLAN	
b	Name of plan sponsor	ACCUTREATED,LLC	c EIN-PN 81-4764001-001
a	Plan name	ACKER MERRALL & CONDIT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ACKER MERRALL & CONDIT	c EIN-PN 13-0412134-001
a	Plan name	ADAMS RESOURCES AND ENERGY, INC., AND SUBSIDIARIES 401K PLAN	
b	Name of plan sponsor	ADAMS RESOURCES AND ENERGY, INC.	c EIN-PN 74-1753147-004
a	Plan name	ADG, P.C. 401(K) PLAN	
b	Name of plan sponsor	ADG, P.C.	c EIN-PN 73-1104907-001

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	ADIRONDACK CABLING, INC. 401(K) PLAN
b	Name of plan sponsor	ADIRONDACK CABLING, INC.
c	EIN-PN	14-1686851-001
a	Plan name	ADVANCED STUCCO 401(K) PLAN
b	Name of plan sponsor	JAMES J. BROOKS, INC DBA ADVANCED STUCCO
c	EIN-PN	65-0914022-001
a	Plan name	ADVERTISER PERCEPTIONS 401(K) PLAN
b	Name of plan sponsor	ADVERTISER PERCEPTIONS HOLDINGS LLC
c	EIN-PN	92-1751487-001
a	Plan name	AERO CORP. 401(K) PLAN
b	Name of plan sponsor	AERO CORPORATION
c	EIN-PN	23-1696257-001
a	Plan name	AFRICAN ANCESTRY INC 401K PSP
b	Name of plan sponsor	GINA PAIGE
c	EIN-PN	92-0383947-001
a	Plan name	AGENCYEA 401K PLAN
b	Name of plan sponsor	AGENCYEA
c	EIN-PN	36-4345593-001
a	Plan name	ALL AMERICAN PREMIER 401(K) PLAN
b	Name of plan sponsor	ALL AMERICAN PREMIER LLC
c	EIN-PN	82-1367710-001
a	Plan name	ALL COUNTY FIRE, INC. 401(K) PLAN
b	Name of plan sponsor	ALL COUNTY FIRE, INC.
c	EIN-PN	20-5087243-001
a	Plan name	ALLIANCE PRECISION PLASTICS CORPORATION 401(K) PLAN
b	Name of plan sponsor	ALLIANCE PRECISION PLASTICS CORPORATION
c	EIN-PN	16-1550809-001
a	Plan name	ALLIED OMS 401(K) PLAN
b	Name of plan sponsor	ALLIED OMS, LLC
c	EIN-PN	83-3175824-001
a	Plan name	ALLIVET 401(K) RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	AGROPEC TRADING, LLC
c	EIN-PN	59-3214707-001
a	Plan name	ALONSO & ALONSO ATTORNEYS AT LAW PL 401(K) PLAN
b	Name of plan sponsor	ALONSO & ALONSO ATTORNEYS AT LAW PL
c	EIN-PN	81-5029552-001

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	ALPINE FIRESIDE 401K PLAN	
b Name of plan sponsor	ALPINE FIRESIDE HEALTH CENTER, LTD	c EIN-PN 36-2753251-001
a Plan name	ALPINE PLUMBING GROUP 401(K) PLAN	
b Name of plan sponsor	ALPINE PLUMBING GROUP LLC	c EIN-PN 85-3623692-001
a Plan name	ALTITUDE PEDIATRICS, LLC 401(K) PLAN	
b Name of plan sponsor	ALTITUDE PEDIATRICS, LLC	c EIN-PN 86-2908312-001
a Plan name	AMAN NEW YORK 401(K) PLAN	
b Name of plan sponsor	CROWN STAFF LLC	c EIN-PN 83-1318244-001
a Plan name	AMARILLO HEART INSTITUTE 401(K) AND PSP	
b Name of plan sponsor	AMARILLO HEART INSTITUTE	c EIN-PN 88-3862154-001
a Plan name	AMBASSADORS WORSHIP CENTER 401(K) PLAN	
b Name of plan sponsor	HARVEST TABERNAC CH DBA AMBASSADORS WSHIP CTR	c EIN-PN 47-0779351-001
a Plan name	AMENDOLA COMMUNICATIONS, LLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	AMENDOLA COMMUNICATIONS, LLC	c EIN-PN 20-0251810-001
a Plan name	AMERICA'S MOTORSPORTS 401K PROFIT SHARING PLAN	
b Name of plan sponsor	PRECISION SALES AND SERVICE, INC.	c EIN-PN 62-1128522-001
a Plan name	AMERICAN COLOR IMAGING, INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	AMERICAN COLOR IMAGING, INC.	c EIN-PN 42-0929536-002
a Plan name	AMERICAN ERECTION, LLC 401(K) SAVINGS PLAN	
b Name of plan sponsor	AMERICAN ERECTION, LLC	c EIN-PN 90-0434941-001
a Plan name	AMERICAN GLASS PROFESSIONALS 401(K) PLAN	
b Name of plan sponsor	AMERICAN GLASS PROFESSIONALS, LLC	c EIN-PN 85-3536192-001
a Plan name	AMERICAN TRAIN DISPATCHERS ASSOCIATION 401K	
b Name of plan sponsor	AMERICAN TRAIN DISPATCHERS	c EIN-PN 36-6000132-001

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 AMES & GOUGH INSURANCE/RISK MANAGEMENT, INC. PROFIT SHARING/401K PLAN	
b	Name of plan sponsor AMES & GOUGH INSURANCE/RISK MANAGEMENT, INC.	c EIN-PN 52-1756461-001
a	Plan name AMISH SHEDS DIRECT OF OHIO 401(K) PLAN	
b	Name of plan sponsor AMISH SHEDS DIRECT OF OHIO LLC	c EIN-PN 83-2747088-001
a	Plan name AMPERSAND INC. 401(K) PLAN	
b	Name of plan sponsor AMPERSAND INC.	c EIN-PN 92-1049630-001
a	Plan name ANDERSON'S GREENHOUSES, INC. EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor ANDERSONS GREENHOUSES, INC.	c EIN-PN 54-0911985-001
a	Plan name ANGEION GROUP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ANGEION GROUP, LLC	c EIN-PN 46-3535702-001
a	Plan name ANGELS OF CARE 401(K) PLAN	
b	Name of plan sponsor AOC OPCO, LLC	c EIN-PN 83-4225264-001
a	Plan name ANS LLC/ NEUROVATIVE DIAGNOSTICS, LLC 401(K) PLAN	
b	Name of plan sponsor MELIORA INNOVATIONS, LLC	c EIN-PN 87-1331246-001
a	Plan name ANSWERNET 401(K) SAVINGS PLAN	
b	Name of plan sponsor ANSWERNET, INC.	c EIN-PN 23-2967465-001
a	Plan name ANTILLES GAS CORPORATION 401(K) PLAN	
b	Name of plan sponsor ANTILLES GAS CORPORATION	c EIN-PN 66-0499224-001
a	Plan name APEX GROUP 401(K) PLAN	
b	Name of plan sponsor APEX ADVANCED TECHNOLOGY, LLC DBA APEX GROUP	c EIN-PN 36-4832779-001
a	Plan name APPLEBROOK GOLF CLUB 401(K) PLAN	
b	Name of plan sponsor APPLEBROOK ASSOCIATES, LLC	c EIN-PN 51-0393792-001
a	Plan name APPLIED INDUSTRIAL MACHINING, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor APPLIED INDUSTRIAL MACHINING, LLC	c EIN-PN 46-1592245-002

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	APPSPACE 401(K) PLAN	
b	Name of plan sponsor	APPSPACE, INC.	c EIN-PN 43-1969532-001
a	Plan name	AREA AGENCY ON AGING PB/TC 401(K) PLAN	
b	Name of plan sponsor	AREA AGENCY ON AGING OF PALM BEACH/	c EIN-PN 65-0087858-001
a	Plan name	ARISE CHILD & FAMILY SERVICE, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	ARISE CHILD & FAMILY SERVICE, INC.	c EIN-PN 16-1186293-003
a	Plan name	ASCEND 401(K) PLAN	
b	Name of plan sponsor	ASCEND RESIDENTIAL ELEVATORS, LLC	c EIN-PN 86-2670105-001
a	Plan name	ASCENDIENT HEALTHCARE ADVISORS, INC. 401K SAFE HARBOR PLAN	
b	Name of plan sponsor	ASCENDIENT HEALTHCARE ADVISORS, INC.	c EIN-PN 56-1884205-001
a	Plan name	ASCENDIX TECHNOLOGIES, INC. 401(K) PLAN	
b	Name of plan sponsor	ASCENDIX TECHNOLOGIES, INC.	c EIN-PN 75-2698944-001
a	Plan name	ASHLEY PEDIATRICS 401(K) PLAN	
b	Name of plan sponsor	SAROJINI BOSE, MD PA	c EIN-PN 32-0014517-001
a	Plan name	ASSOCIATED CONSTRUCTION AND ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ASSOCIATED CONSTRUCTION AND ENGINEERING, INC.	c EIN-PN 27-4752336-001
a	Plan name	ASSURED INSURANCE CONSULTANTS, LLC 401(K) PLAN	
b	Name of plan sponsor	ASSURED INSURANCE CONSULTANTS, LLC	c EIN-PN 84-4393166-001
a	Plan name	ATLAS TECHNICA LLC 401(K) PLAN	
b	Name of plan sponsor	ATLAS TECHNICA LLC	c EIN-PN 81-1729355-001
a	Plan name	AUER STEEL & HEATING SUPPLY COMPANY RETIREMENT PLAN	
b	Name of plan sponsor	AUER STEEL & HEATING SUPPLY CO.	c EIN-PN 39-0139306-002
a	Plan name	AURORA TECHNICAL SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	AURORA TECHNICAL SERVICES, LLC	c EIN-PN 47-4473226-001

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	AUSTAL USA. LLC 401(K) PLAN	
b Name of plan sponsor	AUSTAL USA. LLC	c EIN-PN 63-1238756-001
a Plan name	AUTOMATED CUSTOMS EXPERTS GROUP 401(K) PLAN	
b Name of plan sponsor	AUTOMATED CUSTOMS EXPERTS GROUP	c EIN-PN 33-0961730-001
a Plan name	AUTOMOX, INC. 401(K) PLAN	
b Name of plan sponsor	AUTOMOX, INC.	c EIN-PN 47-3845439-001
a Plan name	AUTOSMITH OF GEORGIA, INC. 401K PLAN	
b Name of plan sponsor	AUTOSMITH OF GEORGIA, INC.	c EIN-PN 58-1966553-001
a Plan name	AVS 401(K) RETIREMENT PLAN	
b Name of plan sponsor	AMBULATORY VETERINARY SURGERY	c EIN-PN 87-3026862-001
a Plan name	AWARE RECOVERY CENTER 401(K) SAVINGS PLAN	
b Name of plan sponsor	AWARE RECOVERY CARE INC	c EIN-PN 45-2829077-002
a Plan name	AXISNORTH SOLUTIONS, INC 401(K) PSP AND TRUST	
b Name of plan sponsor	AXISNORTH SOLUTIONS, INC.	c EIN-PN 48-1810603-001
a Plan name	BACK TO HEALTH PHYSICAL THERAPY ASSOCIATES, PA PROFIT SHARING PLAN	
b Name of plan sponsor	BACK TO HEALTH PHYSICAL THERAPY	c EIN-PN 20-4461846-001
a Plan name	BARKER GROUND SERVICES, INC. 401(K) PLAN	
b Name of plan sponsor	BARKER GROUND SERVICES, INC.	c EIN-PN 33-1127639-001
a Plan name	BARMASH FAMILY HOLDING CORP 401K PLAN	
b Name of plan sponsor	BARMASH FAMILY HOLDING CORP	c EIN-PN 99-2972819-001
a Plan name	BARRINGTON VENTURE/THE GARLANDS OF BARRINGTON RETIREMENT SAVINGS PLAN	
b Name of plan sponsor	BARRINGTON VENTURE HOLDING COMPANY, LLC	c EIN-PN 36-4154944-001
a Plan name	BAYSINGER PARTNERS ARCHITECTURE 401(K) PLAN	
b Name of plan sponsor	BAYSINGER PARTNERS ARCHITECTURE, PC	c EIN-PN 93-1193494-001

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 BECKLEY SURGERY CENTER 401(K) PLAN	
b	Name of plan sponsor BECKLEY SURGERY CENTER, INC.	c EIN-PN 55-0764318-001
a	Plan name BEDESCHI AMERICA 401(K) PLAN	
b	Name of plan sponsor BEDESCHI AMERICA, INC.	c EIN-PN 20-0682291-001
a	Plan name BELL LAW GROUP PLLC 401(K) PLAN	
b	Name of plan sponsor BELL LAW GROUP PLLC	c EIN-PN 36-4785865-001
a	Plan name BENTEC MEDICAL OPCO LLC 401(K) PLAN	
b	Name of plan sponsor BENTEC MEDICAL OPCO LLC	c EIN-PN 81-4616903-001
a	Plan name BETSY ROSS REHABILITATION CENTER INC 401K PLAN	
b	Name of plan sponsor BETSY ROSS REHABILITATION CENTER INC	c EIN-PN 16-1549991-002
a	Plan name BIGGE CRANE AND RIGGING CO. 401(K) PROFIT	
b	Name of plan sponsor BIGGE CRANE AND RIGGING CO.	c EIN-PN 94-3291765-001
a	Plan name BIGZBYS CONCRETE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BIGZBYS CONCRETE, INC.	c EIN-PN 75-2979821-001
a	Plan name BLACK TALON SECURITY, LLC 401(K) PLAN	
b	Name of plan sponsor BLACK TALON SECURITY, LLC	c EIN-PN 82-2130779-001
a	Plan name BLAIR AND COMPANY 401(K) PLAN	
b	Name of plan sponsor BLAIR AND COMPANY	c EIN-PN 90-0007224-001
a	Plan name BLATCHFORD, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BLATCHFORD, INC.	c EIN-PN 31-1419100-001
a	Plan name BLUE DUCK MEDIA 401(K) PLAN	
b	Name of plan sponsor BLUE DUCK MEDIA, INC.	c EIN-PN 82-2339514-001
a	Plan name BLUE FROG 401(K) PLAN	
b	Name of plan sponsor DOUBLE V. INDUSTRIES, INC.	c EIN-PN 77-0585908-001

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	BLUE SEA CAPITAL 401(K) PLAN	
b	Name of plan sponsor	BLUE SEA CAPITAL	c EIN-PN 90-0907274-001
a	Plan name	BLUE STAR SEAFOOD 401K P S PLAN	
b	Name of plan sponsor	BLUE STAR SEAFOOD CO	c EIN-PN 88-2156442-001
a	Plan name	BOGLIOLI FUNERAL HOMES 401(K) PLAN	
b	Name of plan sponsor	BOGLIOLI FUNERAL HOMES	c EIN-PN 47-2458025-001
a	Plan name	BOLD PENGUIN 401(K) PLAN	
b	Name of plan sponsor	BOLD PENGUIN INC.	c EIN-PN 81-3064148-001
a	Plan name	BOMNIN AUTOMOTIVE GROUP 401(K) PLAN	
b	Name of plan sponsor	BOMNIN AUTOMOTIVE, LLC DBA	c EIN-PN 81-3872123-001
a	Plan name	BRAD HALL COMPANIES 401(K) PLAN	
b	Name of plan sponsor	BRAD HALL & ASSOCIATES, INC.	c EIN-PN 84-3298308-001
a	Plan name	BRUEGMANN 401K PLAN	
b	Name of plan sponsor	BRUEGMANN USA INC	c EIN-PN 75-2929790-001
a	Plan name	BUCKEYE VET CLINIC 401(K) PLAN	
b	Name of plan sponsor	BUCKEYE VETERINARY CLINIC LLC	c EIN-PN 27-2294734-001
a	Plan name	BUDGET BLINDS OF RACINE AND KENOSHA 401(K) PLAN	
b	Name of plan sponsor	BUDGET BLINDS OF RACINE AND KENOSHA	c EIN-PN 47-2666892-001
a	Plan name	BYNDER 401(K) PLAN	
b	Name of plan sponsor	BYNDER, LLC	c EIN-PN 30-0809702-002
a	Plan name	C & D ELECTRONICS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	C & D ELECTRONICS, INC.	c EIN-PN 04-2900207-001
a	Plan name	C & K PLASTICS GA NC 401(K) PROFIT SHARE PL & TRUST	
b	Name of plan sponsor	C & K PLASTICS GEORGIA, LLC.	c EIN-PN 47-3915468-001

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 C & K PLASTICS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor C & K PLASTICS, INC.	c EIN-PN 22-1829669-002
a	Plan name C&D HOSPITALITY, LLC 401(K) PSP	
b	Name of plan sponsor C&D HOSPITALITY, LLC	c EIN-PN 83-2094338-001
a	Plan name C&G ELECTRIC 401K PLAN	
b	Name of plan sponsor C&G ELECTRIC	c EIN-PN 75-2120764-001
a	Plan name CANYON VIEW MEDICAL GROUP LC 401(K) AND PSP	
b	Name of plan sponsor CANYON VIEW MEDICAL GROUP LC	c EIN-PN 84-1367175-002
a	Plan name CAPITAL REALTY GROUP INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CAPITAL REALTY GROUP INC	c EIN-PN 20-1127702-001
a	Plan name CARNAHAN, PROCTOR & ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CARNAHAN, PROCTOR AND CROSS, INC.	c EIN-PN 59-1768002-001
a	Plan name CARNEY TIRE CAR CARE CENTER & TITLE SERVICES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CARNEY TIRE CAR CARE CENTER & TITLE SERVICES, INC.	c EIN-PN 52-1550551-001
a	Plan name CAROLE L. HONG, OD, INC.RETIREMENT PLAN	
b	Name of plan sponsor CAROLE L. HONG, OD, INC.	c EIN-PN 81-4834551-001
a	Plan name CAS MANAGEMENT GROUP. LLC 401K PLAN	
b	Name of plan sponsor CAS MANAGEMENT GROUP LLC	c EIN-PN 81-3192194-002
a	Plan name CASA 401(K) PLAN	
b	Name of plan sponsor CASA NISSAN, INC.	c EIN-PN 74-2325378-001
a	Plan name CASTLE LANES 401(K) PLAN	
b	Name of plan sponsor ELDER INNOVATIONS, LLC	c EIN-PN 01-0740554-001
a	Plan name CAVINESS & CATES BUILDING AND DEVELOPMENT 401(K)	
b	Name of plan sponsor CAVINESS & CATES BUILDING AND	c EIN-PN 56-2119964-001

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	CAVITCH, FAMILO & DURKIN CO. , LPA RETIREMENT PLAN	
b	Name of plan sponsor	CAVITCH, FAMILO & DURKIN CO., LPA	c EIN-PN 34-1083489-003
a	Plan name	CENTERS FOR PAIN CONTROL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CENTERS FOR PAIN CONTROL, INC.	c EIN-PN 26-3681128-001
a	Plan name	CENTRAL FLORIDA KIDNEY CARE PA PROFIT SHARING PLAN	
b	Name of plan sponsor	CENTRAL FLORIDA KIDNEY CARE, P.A.	c EIN-PN 59-2034551-002
a	Plan name	CEPRA LANDSCAPE LLC 401(K)PLAN	
b	Name of plan sponsor	CEPRA LANDSCAPE LLC	c EIN-PN 47-3033703-001
a	Plan name	CHAMPLIN FAMILY DENTAL 401(K) PLAN	
b	Name of plan sponsor	CHAMPLIN FAMILY DENTAL	c EIN-PN 13-4228119-001
a	Plan name	CHENOWETH FORD, INC. 401(K) PLAN	
b	Name of plan sponsor	CHENOWETH FORD, INC.	c EIN-PN 55-0569173-001
a	Plan name	CHILDREN'S CASE MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	CHILDRENS CASE MANAGEMENT ORGANIZATION, INC.	c EIN-PN 65-0166352-001
a	Plan name	CHITIMACHA TRIBE OF LOUISIANA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CHITIMACHA TRIBE OF LOUISIANA	c EIN-PN 72-0705406-001
a	Plan name	CHOOZLE, INC. 401K PLAN	
b	Name of plan sponsor	CHOOZLE, INC.	c EIN-PN 46-1258463-001
a	Plan name	CHRISTIE LITES 401(K) PLAN	
b	Name of plan sponsor	CHRISTIE LITES	c EIN-PN 87-1871139-001
a	Plan name	CIGARETTE STORE 401(K) PLAN	
b	Name of plan sponsor	THE CIGARETTE STORE LLC	c EIN-PN 84-1182893-001
a	Plan name	CINCINNATI ASSOCIATION FOR THE BLIND 401(K) PLAN	
b	Name of plan sponsor	CINCINNATI ASSOCIATION FOR THE BLIND	c EIN-PN 31-0538511-001

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	CITY OF MISSION VIEJO PROFIT SHARING PLAN	
b	Name of plan sponsor	CITY OF MISSION VIEJO	c EIN-PN 33-0283448-401
a	Plan name	CJB TAX AND BOOKKEEPING 401(K) PLAN	
b	Name of plan sponsor	CJB TAX AND BOOKKEEPING	c EIN-PN 27-3267973-001
a	Plan name	CLANCY CONTRACTING SERVICES, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CLANCY CONTRACTING SERVICES, INC.	c EIN-PN 43-2095322-001
a	Plan name	CLEANING SPECIALISTS, INC. 401(K) PLAN	
b	Name of plan sponsor	CLEANING SPECIALISTS, INC.	c EIN-PN 41-1254192-001
a	Plan name	CLINILABS, INC. 401(K) PLAN	
b	Name of plan sponsor	CLINILABS, INC.	c EIN-PN 13-4116482-001
a	Plan name	CLUNK HOOSE CO., LPA 401(K) PLAN	
b	Name of plan sponsor	CLUNK HOOSE CO., LPA	c EIN-PN 34-1937930-001
a	Plan name	CM SOLUTIONS, LLC PROFIT SHARING	
b	Name of plan sponsor	COMPLETE MECHANICAL SOLUTIONS, LLC	c EIN-PN 83-9738322-001
a	Plan name	CMI MANAGEMENT RETIREMENT PLAN	
b	Name of plan sponsor	CMI MANAGEMENT LLC	c EIN-PN 54-1524907-003
a	Plan name	CNC INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	CNC INDUSTRIES, INC.	c EIN-PN 35-1970529-001
a	Plan name	COASTAL SALES & SERVICES, LLC 401(K) PLAN	
b	Name of plan sponsor	COASTAL SALES & SERVICES, LLC	c EIN-PN 88-2259974-001
a	Plan name	COLE VALLEY CHRISTIAN SCHOOLS 401K RETIREMENT	
b	Name of plan sponsor	COLE VALLEY CHRISTIAN SCHOOLS	c EIN-PN 86-2425049-001
a	Plan name	COLLEGE HEALTH ENTERPRISES 401(K) SAVINGS PLAN	
b	Name of plan sponsor	COLLEGE HOSPITAL GROUP, INC.	c EIN-PN 20-1514870-002

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	COLMENA CAPITAL RETIREMENT PLAN	
b	Name of plan sponsor	COLMENA CAPITAL	c EIN-PN 26-3329187-001
a	Plan name	COMFORT HOMES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	COMFORT HOMES, INC.	c EIN-PN 04-2955441-001
a	Plan name	COMMSYS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	COMMSYS, INC.	c EIN-PN 31-1281721-001
a	Plan name	COMMUNITY BRIDGE, INC. 401(K) PLAN	
b	Name of plan sponsor	COMMUNITY BRIDGE, INC.	c EIN-PN 75-2984355-001
a	Plan name	COMMUNITY SCHOOL OF CLEBURNE COUNTY, INC. 401(K) PLAN	
b	Name of plan sponsor	COMMUNITY SCHOOL OF CLEBURNE COUNTY, INC.	c EIN-PN 71-0649286-001
a	Plan name	COMPLETE MOBILE DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	COMPLETE MOBILE DENTISTRY, INC.	c EIN-PN 11-3651272-001
a	Plan name	COMPONENT SOURCING INTERNATIONAL, LLC 401K PLAN	
b	Name of plan sponsor	COMPONENT SOURCING INTERNATIONAL, LLC A DE LLC	c EIN-PN 37-1759561-001
a	Plan name	CONANT AUTOMOTIVE 401(K) PLAN	
b	Name of plan sponsor	CONANT AUTOMOTIVE, INC.	c EIN-PN 20-5717380-001
a	Plan name	CONEXUS MEDSTAFF, LLC 401(K) PLAN	
b	Name of plan sponsor	CONEXUS MEDSTAFF, LLC	c EIN-PN 27-1511706-001
a	Plan name	COPPOLA SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	COPPOLA SERVICES, INC.	c EIN-PN 13-3328023-002
a	Plan name	CORBIN ELECTRICAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	CORBIN ELECTRICAL SERVICES, INC.	c EIN-PN 22-3121404-001
a	Plan name	CORDEA CONSULTING LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CORDEA CONSULTING, LLC	c EIN-PN 26-1302879-001

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 COURTLAND WASTE SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor COURTLAND WASTE HANDLING, INC.	c EIN-PN 20-5129781-001
a	Plan name COYOTE RIDGE VETERINARY CLINIC 401(K) PLAN	
b	Name of plan sponsor RL YELLOW DOG, LLC D/B/A COYOTE RIDGE VET CLNC	c EIN-PN 92-1079116-001
a	Plan name CPM & ROSEMURGY PROPERTIES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor CAMPBELL PROPERTY MANAGEMENT	c EIN-PN 59-6058179-001
a	Plan name CREC PROPERTY MANAGEMENT 401K PLAN	
b	Name of plan sponsor CHARLESTONREALESTATECAFELLCDBACRECPROMGMT	c EIN-PN 46-3321546-001
a	Plan name CROWN CONCRETE CONSTRUCTORS, INC. 401(K) PLAN	
b	Name of plan sponsor CROWN CONCRETE CONSTRUCTORS, INC.	c EIN-PN 35-2574937-001
a	Plan name CSW CART, INC 401(K) PLAN	
b	Name of plan sponsor CSW CART, INC	c EIN-PN 83-3281159-001
a	Plan name CURRIE GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor BILL CURRIE FORD, INC.	c EIN-PN 59-0910014-001
a	Plan name CUSTOM SERVICE HARDWARE LLC 401(K) PLAN & TRUST	
b	Name of plan sponsor CUSTOM SERVICE HARDWARE LLC	c EIN-PN 47-4598383-001
a	Plan name CYFAH LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CYFAH LLC	c EIN-PN 46-4032485-001
a	Plan name D & D CARTING 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor D&D CARTING CO. INC.	c EIN-PN 11-1967569-001
a	Plan name DALLAS PLASTIC SURGERY INSTITUTE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DALLAS PLASTIC SURGERY INSTITUTE, INC.	c EIN-PN 75-2404682-004
a	Plan name DANN MARINE TOWING, L. C. 401(K) PLAN	
b	Name of plan sponsor DANN MARINE TOWING, L.C.	c EIN-PN 52-1900224-001

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 DB INSURANCE CO., LTD. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor DB INSURANCE CO., LTD.	c EIN-PN 34-2055087-001
a	Plan name DELTA GRINDING INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor DELTA GRINDING INC.	c EIN-PN 91-1748097-001
a	Plan name DENTAL MONITORING AMERICAN, INC. 401(K) PLAN	
b	Name of plan sponsor DENTAL MONITORING AMERICA, INC.	c EIN-PN 61-1757534-001
a	Plan name DESIGN MOLDED PRODUCTS LLC 401K PLAN	
b	Name of plan sponsor DESIGN MOLDED PRODUCTS LLC	c EIN-PN 92-3828778-001
a	Plan name DIAGNOSTIC OUTPATIENT IMAGING 401(K) PLAN	
b	Name of plan sponsor DIAGNOSTIC OUTPATIENT IMAGING	c EIN-PN 74-2896901-001
a	Plan name DIBLASI PAINTING INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DIBLASI PAINTING	c EIN-PN 82-3570376-001
a	Plan name DIRECT WASTE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor DIRECT WASTE SERVICES, INC.	c EIN-PN 22-1765778-001
a	Plan name DISCOVERY INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor MATTHEW MCBRIDE	c EIN-PN 92-1726325-001
a	Plan name DLZ HOLDINGS 401(K) PLAN	
b	Name of plan sponsor DLZ HOLDINGS LLC	c EIN-PN 81-3302714-001
a	Plan name DOLPHIN POOL & SPA RETIREMENT PLAN	
b	Name of plan sponsor DOLPHIN POOLS, INC.	c EIN-PN 41-1995674-001
a	Plan name DORSKY YUE INTERNATIONAL, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DORSKY YUE INTERNATIONAL, LLC	c EIN-PN 27-1532615-001
a	Plan name DPACC 401K PLAN	
b	Name of plan sponsor DALLAS PULMONARY & CRITICAL CARE PA	c EIN-PN 45-4323821-002

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	DUNHAM-BUSH RETIREMENT PLAN	
b	Name of plan sponsor	DUNHAM-BUSH USA LLC	c EIN-PN 47-3971862-001
a	Plan name	DVELE OMEGA 401(K) PLAN	
b	Name of plan sponsor	DVELE OMEGA, INC.	c EIN-PN 82-4296597-001
a	Plan name	DYNAMIC MACHINING X MANUFACTURING LLC 401K PLAN	
b	Name of plan sponsor	DYNAMIC MACHINING X MANUFACTURING	c EIN-PN 20-1982900-001
a	Plan name	EAST PEAK DENTAL 401(K) PLAN & TRUST	
b	Name of plan sponsor	NICOLE H. BUELL, DDS, INC	c EIN-PN 46-3148208-001
a	Plan name	EASTWOOD MACHINE, LLC 401(K) PLAN	
b	Name of plan sponsor	EASTWOOD MACHINE, LLC	c EIN-PN 20-3525484-001
a	Plan name	ECONOMY FREIGHT, INC. RETIREMENT PLAN	
b	Name of plan sponsor	ECONOMY FREIGHT INC.	c EIN-PN 22-3513547-001
a	Plan name	EDDIE AXNER CONSTRUCTION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EDDIE AXNER CONSTRUCTION, INC.	c EIN-PN 45-2932390-001
a	Plan name	EDINBURG ANIMAL HOSPITAL	
b	Name of plan sponsor	EDINBURG ANIMAL HOSPITAL	c EIN-PN 22-1977471-001
a	Plan name	EDNEY DISTRIBUTING COMPANY, INC. EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	EDNEY DISTRIBUTING COMPANY, INC.	c EIN-PN 46-0258826-002
a	Plan name	EGR, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	EGR INCORPORATED	c EIN-PN 98-0137281-001
a	Plan name	EKC ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor	EKC ENTERPRISES, INC.	c EIN-PN 45-4434673-001
a	Plan name	ELITE BUILDING SERVICES 401(K) PLAN	
b	Name of plan sponsor	ELITE BUILDING SERVICES	c EIN-PN 51-0326838-001

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 EMBASSY SPECIALTY VEHICLES RETIREMENT PLAN	
b	Name of plan sponsor EMBASSY SPECIALTY VEHICLES, LLC	c EIN-PN 84-3638971-001
a	Plan name EMPLOYEE BENEFIT PLAN OF G. V. INDUSTRIES, INC.	
b	Name of plan sponsor G. V. INDUSTRIES, INC.	c EIN-PN 95-3652044-003
a	Plan name EMS 401(K) PLAN	
b	Name of plan sponsor ENGINEERED MOBIL SOLUTIONS, LLC.	c EIN-PN 26-1314880-001
a	Plan name ENCORE HCS LLC 401K PLAN	
b	Name of plan sponsor ENCORE HCS LLC	c EIN-PN 93-4786492-001
a	Plan name ENT SPECIALISTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EAR NOSE AND THROAT SPECIALISTS	c EIN-PN 11-3762043-001
a	Plan name EQUILIEM, INC. 401(K) PLAN	
b	Name of plan sponsor EQUILIEM, INC.	c EIN-PN 22-3367209-002
a	Plan name ES&A 401(K) PLAN	
b	Name of plan sponsor ELLIS SCOTT & ASSOCIATES, INC.	c EIN-PN 31-1366998-001
a	Plan name EVO AQUATICS 401(K) PLAN	
b	Name of plan sponsor EVO AQUATICS LLC	c EIN-PN 87-0799017-001
a	Plan name EXCEL GROUP 401(K) SAVINGS PLAN	
b	Name of plan sponsor EXCEL CONTRACTORS, LLC	c EIN-PN 72-0969587-001
a	Plan name EXCELSIOR ORTHOPAEDICS, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EXCELSIOR ORTHOPAEDICS LLP	c EIN-PN 16-1608040-001
a	Plan name EXEMPLAR ORAL SURGERY CENTER 401(K) PLAN	
b	Name of plan sponsor EXEMPLAR ORAL SURGERY CENTER, LLC	c EIN-PN 85-3768814-001
a	Plan name EXO GROUP RETIREMENT PLAN	
b	Name of plan sponsor EXO GROUP, LLC	c EIN-PN 26-4680417-001

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	FABRICATION SOLUTIONS & TECHNOLOGIES, LLC 401K	
b	Name of plan sponsor	FABRICATION SOLUTIONS & TECHNOLOGIES LLC	c EIN-PN 81-0826630-001
a	Plan name	FAISAL A. QUERESHY, M.D., D.D.S., INC. 401(K) PLAN	
b	Name of plan sponsor	FAISAL A. QUERESHY, M.D., D.D.S., INC.	c EIN-PN 03-0383504-001
a	Plan name	FAMILIES UNITED NETWORK 401(K) PLAN	
b	Name of plan sponsor	FAMILIES UNITED NETWORK	c EIN-PN 23-2857929-002
a	Plan name	FAMILY SUPPORT ORG OF BERGEN COUNTY, INC. 401K PLN	
b	Name of plan sponsor	FAMILY SUPPORT ORG OF BERGEN CTY	c EIN-PN 22-3841046-002
a	Plan name	FELIX ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	FELIX ASSOCIATES OF FLORIDA, INC.	c EIN-PN 26-4299335-001
a	Plan name	FERGUSON TOWNSHIP 457B	
b	Name of plan sponsor	FERGUSON TOWNSHIP	c EIN-PN 25-1197270-457
a	Plan name	FIBRIX LLC 401(K) PLAN	
b	Name of plan sponsor	FIBRIX, LLC	c EIN-PN 20-8436514-001
a	Plan name	FIJI ELEVATOR 401(K) PLAN	
b	Name of plan sponsor	FIJI ELEVATOR COMPANY, INC	c EIN-PN 82-1909277-001
a	Plan name	FINEOS CORPORATION 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	FINEOS CORPORATION	c EIN-PN 04-3512701-001
a	Plan name	FIRE PROTECTION SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	FIRE PROTECTION SERVICES, INC.	c EIN-PN 41-2120050-001
a	Plan name	FIREBIRD RESTAURANT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	FIREBIRD RESTAURANT GROUP, LLC	c EIN-PN 26-1926860-001
a	Plan name	FIRST STATE BANK OF THE SOUTH, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	FIRST STATE BANK OF SOUTH, INC.	c EIN-PN 63-0903224-001

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	FIX-IT GROUP, LLC 401K PLAN	
b	Name of plan sponsor	FIX-IT GROUP, LLC	c EIN-PN 85-1087910-001
a	Plan name	FLAGSHIP BIOSCIENCE, INC. 401(K) PROFIT SHARING	
b	Name of plan sponsor	FLAGSHIP BIOSCIENCE INC.	c EIN-PN 47-2846226-001
a	Plan name	FLEXSHOPPER, LLC 401(K) PLAN	
b	Name of plan sponsor	FLEXSHOPPER, LLC	c EIN-PN 80-0930385-001
a	Plan name	FLIGHT PRO INTERNATIONAL 401K PLAN	
b	Name of plan sponsor	FLIGHT PRO INTERNATIONAL LLC	c EIN-PN 85-2879115-001
a	Plan name	FNB BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FNB BANK	c EIN-PN 42-0544770-001
a	Plan name	FOBI 401(K) PLAN	
b	Name of plan sponsor	FOBI INC.	c EIN-PN 76-0510639-001
a	Plan name	FOOTHILLS ANIMAL SHELTER 401(K) PLAN	
b	Name of plan sponsor	FOOTHILLS ANIMAL SHELTER	c EIN-PN 84-1311450-001
a	Plan name	FOREFRONT HEALTHCARE GOVERNMENT SAVINGS PLAN	
b	Name of plan sponsor	FOREFRONT HEALTHCARE, LLC	c EIN-PN 83-2894435-002
a	Plan name	FORSITE RENEWABLES 401(K) PLAN	
b	Name of plan sponsor	FORSITE RENEWABLES, LLC	c EIN-PN 85-3937803-002
a	Plan name	FOX BROS 401(QUE) PLAN	
b	Name of plan sponsor	FOX SOB, LLC	c EIN-PN 20-8178135-001
a	Plan name	FOXBILT ELECTRIC, INC. 401(K) PLAN	
b	Name of plan sponsor	FOXBILT ELECTRIC, INC.	c EIN-PN 99-0305548-001
a	Plan name	FPIN 401(K) PLAN	
b	Name of plan sponsor	FAMILY PRACTICE INQ. NETWORK CONSORTIUM, INC.	c EIN-PN 43-1933409-001

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 FRENCH PLUMBING LLC 401(K) PLAN	
b	Name of plan sponsor FRENCH PLUMBING LLC 401(K) PLAN	c EIN-PN 83-2228734-001
a	Plan name FRESHGOGO 401(K) PLAN	
b	Name of plan sponsor FRESHGOGO, INC.	c EIN-PN 38-4012822-001
a	Plan name FRIEDMAN, GILBERT + GERHARDSTEIN, LLC 401(K) PLAN	
b	Name of plan sponsor FRIEDMAN, GILBERT + GERHARDSTEIN, LLC	c EIN-PN 34-1647133-001
a	Plan name FRONTERA WORLDWIDE LLC 401(K) PLAN	
b	Name of plan sponsor FRONTERA WORLDWIDE	c EIN-PN 85-4151516-001
a	Plan name FUNKO 401(K) PLAN	
b	Name of plan sponsor FUNKO, LLC	c EIN-PN 20-2508659-001
a	Plan name GARDINER'S BAY COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor GARDINERS BAY COUNTRY CLUB	c EIN-PN 11-1679626-001
a	Plan name GASSER HARDWARE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GASSER, INC.	c EIN-PN 39-1147887-001
a	Plan name GATEWAY PARTNERS RETIREMENT PLAN	
b	Name of plan sponsor GATEWAY PARTNERS HOLDINGS LLC	c EIN-PN 87-3934771-001
a	Plan name GATOR GRADING & PAVING, LLC 401(K) PLAN	
b	Name of plan sponsor GATOR GRADING & PAVING, LLC	c EIN-PN 20-8670315-001
a	Plan name GBC FOOD SERVICES 401(K) PLAN	
b	Name of plan sponsor GBC FOOD SERVICES, LLC	c EIN-PN 45-2304217-001
a	Plan name GBG 401(K) PLAN	
b	Name of plan sponsor GENE BY GENE, LTD.	c EIN-PN 76-0640295-001
a	Plan name GECKO'S HOSPITALITY GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor GECKOS HOSPITALITY GROUP, LLC	c EIN-PN 65-1000598-001

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	GENERAL INFOMATICS 401(K) PLAN (001)	
b	Name of plan sponsor	GENERAL INFOMATICS, INC.	c EIN-PN 20-2970699-001
a	Plan name	GENERATE UPCYCLE 401K	
b	Name of plan sponsor	GENERATE UPCYCLE	c EIN-PN 88-1823138-001
a	Plan name	GENERATION HEALTHCARE PROFIT SHARING PLAN	
b	Name of plan sponsor	GENERATION HEALTHCARE	c EIN-PN 31-1670500-003
a	Plan name	GEOCORR LLC RETIREMENT PLAN	
b	Name of plan sponsor	GEOCORR, LLC	c EIN-PN 20-5353917-001
a	Plan name	GEOFFREY R. HYLAND, P.L.L.C. 401(K) PLAN	
b	Name of plan sponsor	GEOFFREY R. HYLAND, P.L.L.C.	c EIN-PN 26-0427859-001
a	Plan name	GERRICK ELECTRIC COMPANY, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	GERRICK ELECTRIC COMPANY, LLC	c EIN-PN 55-0773725-001
a	Plan name	GHOST MANAGEMENT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	GHOST MANAGEMENT GROUP, LLC	c EIN-PN 46-1522438-001
a	Plan name	GILLIATTE GENERAL CONTRACTORS 401(K) PLAN	
b	Name of plan sponsor	GILLIATTE GENERAL CONTRACTORS	c EIN-PN 35-1626666-001
a	Plan name	GILMAN PARTNERS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GILMAN PARTNERS, LLC	c EIN-PN 13-4271239-001
a	Plan name	GINGER PATZ INSURANCE AGENCY 401K PS PLAN	
b	Name of plan sponsor	GINGER PATZ INSURANCE AGENCY	c EIN-PN 95-3729189-001
a	Plan name	GIUMENTA CORPORATION 401(K) PLAN	
b	Name of plan sponsor	GIUMENTA CORPORATION	c EIN-PN 11-1951208-002
a	Plan name	GL SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GL SOLUTIONS, INC.	c EIN-PN 27-1118238-001

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 GLOBAL-E US INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GLOBAL-E US INC.	c EIN-PN 30-0946616-001
a	Plan name GNAGEY GAS & OIL INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GNAGEY GAS & OIL INC	c EIN-PN 25-1264000-002
a	Plan name GOLDFINGER, INC. 401(K) PLAN	
b	Name of plan sponsor GOLDFINGER, INC.	c EIN-PN 81-4741603-001
a	Plan name GOOD FAITH ENERGY 401(K) SAVINGS PLAN	
b	Name of plan sponsor GOOD FAITH ENERGY, LLC	c EIN-PN 47-1136310-001
a	Plan name GOVX INCORPORATED 401(K) PLAN	
b	Name of plan sponsor GOVX INCORPORATED	c EIN-PN 36-4716877-001
a	Plan name GREATER ANESTHESIA SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor GREATER ANESTHESIA SOLUTIONS, LLC	c EIN-PN 46-5734331-001
a	Plan name GREATFORCE INSURANCE AGENTS, LLC	
b	Name of plan sponsor GREATFORCE INSURANCE AGENTS, LLC	c EIN-PN 47-4031009-001
a	Plan name GREYSTON BAKERY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GREYSTON BAKERY, INC.	c EIN-PN 13-3456330-001
a	Plan name GT'S LIVING FOODS 401(K) PLAN	
b	Name of plan sponsor GTS LIVING FOODS, LLC	c EIN-PN 95-4526003-001
a	Plan name GUTTMANN AND BLAEVOET AMENDED PROFIT SHARING AND 401K PLAN	
b	Name of plan sponsor GUTTMANN AND BLAEVOET	c EIN-PN 94-1643454-001
a	Plan name H. A. BERKHEIMER, INC. RETIREMENT PLAN	
b	Name of plan sponsor H.A. BERKHEIMER, INC.	c EIN-PN 23-1669661-001
a	Plan name HAPPY FUTURE 401(K) PLAN	
b	Name of plan sponsor COLLABORATIVE SOLUTIONS IN PSYCHIATRY, SC	c EIN-PN 47-4108548-001

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 HARDIN AUTO GROUP 401K PLAN	
b	Name of plan sponsor HARDIN ENTERPRISES INC	c EIN-PN 30-0894143-001
a	Plan name HARDIN, KUNDLA, MCKEON & POLETTI, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HARDIN, KUNDLA, MCKEON & POLETTI, P.A.	c EIN-PN 22-3541348-001
a	Plan name HARRISON WESTERN CONSTRUCTION CORPORATION 401(K) PLAN	
b	Name of plan sponsor HARRISON WESTERN CONSTRUCTION CORPORATION	c EIN-PN 84-1079486-001
a	Plan name HAWTHORNE GSPL CHRCH 401K	
b	Name of plan sponsor HAWTHORNE GSPL CHRCH	c EIN-PN 22-1500526-001
a	Plan name HB & G BUILDING PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor HB & G BUILDING PRODUCTS, INC.	c EIN-PN 94-3331018-001
a	Plan name HEALING HEARTS SD 401K PLAN	
b	Name of plan sponsor HEALING HEARTS COUNSELING CENTER SD, INC.	c EIN-PN 86-3744122-001
a	Plan name HEALTH MONITORING SYSTEMS INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HEALTH MONITORING SYSTEMS INC.	c EIN-PN 20-4604085-001
a	Plan name HEARTH MANAGEMENT, LLC RETIREMENT PLAN	
b	Name of plan sponsor HEARTH MANAGEMENT, LLC	c EIN-PN 16-1584917-001
a	Plan name HENNING'S CHEESE 401(K) PLAN	
b	Name of plan sponsor HENNINGS CHEESE FACTORY, INC	c EIN-PN 39-1665652-001
a	Plan name HFH IN MONMOUTH COUNTY 401(K) PLAN	
b	Name of plan sponsor HABITAT FOR HUMANITY IN MONMOUTH COUNTY	c EIN-PN 22-3284309-001
a	Plan name HIGHSPANS ENGINEERING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HIGHSPANS ENGINEERING, INC.	c EIN-PN 77-0681624-001
a	Plan name HIGHTECH SIGNS 401(K) PLAN	
b	Name of plan sponsor SIGNIFICANT IMPRESSIONS, INC. DBA HIGHTECH SIGNS	c EIN-PN 31-1285452-001

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	HILL CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor	PETE HILL CONSTRUCTION COMPANY, INC.	c EIN-PN 33-0080189-001
a	Plan name	HINGE STRATEGY, LLC 401(K) PLAN	
b	Name of plan sponsor	HINGE STRATEGY, LLC	c EIN-PN 26-2232786-002
a	Plan name	HIRSCHI MASONRY, LLC 401(K) PLAN	
b	Name of plan sponsor	HIRSCHI MASONRY, LLC	c EIN-PN 27-1336637-001
a	Plan name	HITECH PAINTING, INC. 401(K) PLAN	
b	Name of plan sponsor	HITECH PAINTING, INC.	c EIN-PN 82-3625935-001
a	Plan name	HOLCOMB BUS SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor	HOLCOMB BUS SERVICE	c EIN-PN 22-2641266-001
a	Plan name	HOLLAND FLOWER MARKET, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	HOLLAND FLOWER MARKET, INC.	c EIN-PN 95-4124067-001
a	Plan name	HOME BUILDERS ASSOC OF IA & STATE REGIONAL OFFICE	
b	Name of plan sponsor	HOME BUILDERS ASSOCIATION OF IOWA	c EIN-PN 42-1017955-001
a	Plan name	HOMETOWN AMERICA, LLC RETIREMENT READINESS 401(K) PLAN	
b	Name of plan sponsor	HOMETOWN AMERICA INSURANCE SERVICE, LLC	c EIN-PN 36-4196688-001
a	Plan name	HOMEWARD INC. 401(K) PLAN	
b	Name of plan sponsor	HOMEWARD, INC.	c EIN-PN 32-0594976-001
a	Plan name	HONEST & FAIR APPLIANCE REPAIR 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	HONEST & FAIR APPLIANCE REPAIR	c EIN-PN 46-1634215-001
a	Plan name	HOOSIER TRAILER & TRUCK EQUIPMENT, INC. 401(K) SALARY REDUCTION PLAN & TRUST	
b	Name of plan sponsor	HOOSIER TRAILER ACQUISITION CORP. DBA HOOSIER TRAILER & TRUCK EQUIPMEN	c EIN-PN 03-0387020-001
a	Plan name	HOSPICE FOR ALL SEASONS 401(K) PLAN	
b	Name of plan sponsor	HOSPICE FOR ALL SEASONS	c EIN-PN 27-3524967-001

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	HRH HOLDINGS LLC 401(K) PLAN	
b	Name of plan sponsor	HRH HOLDINGS LLC	c EIN-PN 87-1549473-001
a	Plan name	HUB, INC. 401(K) EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	HUB, INC.	c EIN-PN 43-1730084-001
a	Plan name	HUGHES SYSTIQUE 401K PLAN	
b	Name of plan sponsor	HUGHES SYSTIQUE PRIVATE LIMITED	c EIN-PN 98-0561217-001
a	Plan name	IFPG 401(K) PLAN	
b	Name of plan sponsor	INTERNATIONAL FRANCHISE PROFESSIONALS GROUP LLC	c EIN-PN 88-2120674-001
a	Plan name	IGNITE MEDICAL RESORTS EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	IGNITE MEDICAL RESORTS MEP	c EIN-PN 82-3928071-002
a	Plan name	IL MULINO 401(K) PLAN	
b	Name of plan sponsor	CENTRAL IM REST, LLC	c EIN-PN 85-4363996-001
a	Plan name	IL MULINO NEW YORK 401(K) PLAN	
b	Name of plan sponsor	MANAGER IM REST, LLC	c EIN-PN 85-4364335-001
a	Plan name	ILL ORAL SURGERY & IMPLANT CENTER OF NAPERVILLE 40	
b	Name of plan sponsor	ILL ORAL SURGERY & IMPLANT CENTER OF NAPERVILL	c EIN-PN 83-3159975-001
a	Plan name	ILLUMINATE USA 401(K) PLAN	
b	Name of plan sponsor	ILLUMINATE USA LLC	c EIN-PN 92-1878550-001
a	Plan name	IMAGINE STAFFING TECHNOLOGY, INC. 401(K) PLAN	
b	Name of plan sponsor	IMAGINE STAFFING TECHNOLOGY, INC.	c EIN-PN 27-1490649-001
a	Plan name	INCERTEC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	INNOVATIVE CERTIFIED TECHNICAL PLATING, LLC DBA INCERTEC	c EIN-PN 45-0925320-001
a	Plan name	INCITE INFORMATICS RETIREMENT PLAN	
b	Name of plan sponsor	INCITE INFORMATICS, LLC	c EIN-PN 01-0944335-001

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	INSIGHT FINANCIAL PARTNERS POOLED EMPLOYER PLAN	
b	Name of plan sponsor	PLAN COMPLIANCE SERVICES, INC.	c EIN-PN 59-3708427-002
a	Plan name	INSPECTECH PROFIT SHARING PLAN	
b	Name of plan sponsor	INSPECTECH CORP.	c EIN-PN 39-1697191-002
a	Plan name	INSTAGRID 401(K) PLAN	
b	Name of plan sponsor	INSTAGRID, INC.	c EIN-PN 93-4478971-001
a	Plan name	INSURANCE NEWSNET.COM INC. 401(K) PLAN	
b	Name of plan sponsor	INSURANCE NEWSNET.COM INC.	c EIN-PN 58-2459163-001
a	Plan name	INSURANCE TRUST RETIREMENT PLAN	
b	Name of plan sponsor	INSURANCE TRUST	c EIN-PN 01-6020129-002
a	Plan name	INTERACTIVE GOVERNMENT HOLDING 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	INTERACTIVE GOVERNMENT HOLDING	c EIN-PN 26-1497882-001
a	Plan name	INTERACTIVE LIFE FORMS LLC 401(K) PROFIT SHARING	
b	Name of plan sponsor	INTERACTIVE LIFE FORMS LLC	c EIN-PN 77-0367193-001
a	Plan name	INTERNATIONAL CRANE FOUNDATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	INTERNATIONAL CRANE FOUNDATION, INC.	c EIN-PN 39-1187711-002
a	Plan name	INTERNATIONAL SPICES RETIREMENT PLAN	
b	Name of plan sponsor	INTERNATIONAL SPICES LTD	c EIN-PN 47-0650948-001
a	Plan name	INTERSTATE POWERWASHING LLC 401(K) PSP	
b	Name of plan sponsor	INTERSTATE POWERWASHING LLC	c EIN-PN 22-3698707-001
a	Plan name	INVENRA 401(K) PLAN	
b	Name of plan sponsor	INVENRA INC.	c EIN-PN 45-3916683-001
a	Plan name	IRIS 401(K) PLAN	
b	Name of plan sponsor	IRIS SOFTWARE INC.	c EIN-PN 22-3424909-001

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	J.A. MYERS BUILDING & DEVELOPMENT, INC. 401(K) PLAN	
b	Name of plan sponsor	J.A. MYERS BUILDING & DEVELOPMENT, INC.	c EIN-PN 23-1983961-001
a	Plan name	J.L. CARR ENTERPRISES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	J.L. CARR ENTERPRISES, INC.	c EIN-PN 46-0921129-001
a	Plan name	JABELLAC CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	JABELLAC CORPORATION	c EIN-PN 87-1228246-001
a	Plan name	JACKSON CUSTOM POOLS 401(K) PLAN	
b	Name of plan sponsor	JACKSON CUSTOM POOLS AND OUTDOOR LIVING	c EIN-PN 82-4169395-001
a	Plan name	JACKSON TOWNSHIP 401(A) PLAN	
b	Name of plan sponsor	JACKSON TOWNSHIP	c EIN-PN 25-6001828-401
a	Plan name	JAMES M STUART DDS PA 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	JAMES M STUART DDS PA	c EIN-PN 56-2075995-001
a	Plan name	JASON BENNETT CONTRACTING, INC. 401K PLAN	
b	Name of plan sponsor	JASON BENNETT CONTRACTING, INC.	c EIN-PN 65-0983176-001
a	Plan name	JAYMARC HOMES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JAYMARC HOMES, LLC	c EIN-PN 38-3822158-001
a	Plan name	JB DENTAL LAB LLC 401(K) PLAN	
b	Name of plan sponsor	JB DENTAL LAB LLC	c EIN-PN 46-3130477-001
a	Plan name	JMJD LEASING CO., INC. 401(K) PLAN	
b	Name of plan sponsor	JMJD LEASING CO., INC.	c EIN-PN 88-0670684-001
a	Plan name	JMRT SOLUTIONS LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	JMRT SOLUTIONS, LLC D/B/A WORKSTREAM TECHNOLOGY	c EIN-PN 46-3449080-001
a	Plan name	JMS WIND ENERGY 401(K) PLAN	
b	Name of plan sponsor	JMS WIND ENERGY	c EIN-PN 26-1998739-001

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 JOEC 401(K) PLAN	
b	Name of plan sponsor JOY OUTDOOR EDUCATION CENTER	c EIN-PN 26-0153957-001
a	Plan name JOHN W GLEIM JR INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor JOHN W GLEIM JR INC	c EIN-PN 23-2227978-002
a	Plan name JOICOM CORPORATION 401(K) PLAN	
b	Name of plan sponsor JOICOM CORPORATION	c EIN-PN 37-1870056-001
a	Plan name JORDISON CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor JORDISON CONSTRUCTION, INC.	c EIN-PN 42-1426767-001
a	Plan name JOY-MARK, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor JOY-MARK, INC.	c EIN-PN 39-1287057-002
a	Plan name JSTOOGOOD, LLC 401(K) P/S PLAN	
b	Name of plan sponsor JSTOOGOOD, LLC	c EIN-PN 46-3248961-001
a	Plan name JTM REPAIRS LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JTM REPAIRS LLC	c EIN-PN 85-2338298-001
a	Plan name K & A APPLIANCE, INC. 401(K) PLAN	
b	Name of plan sponsor K & A APPLIANCE, INC.	c EIN-PN 86-1076592-001
a	Plan name K FRIESE & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor K FRIESE & ASSOCIATES, INC.	c EIN-PN 48-1304687-001
a	Plan name K.B. JOHNSON OIL AND GAS COMPANY 401(K) PLAN	
b	Name of plan sponsor K.B. JOHNSON OIL AND GAS COMPANY	c EIN-PN 56-0840057-101
a	Plan name KEELER MOTOR CAR CO LIMITED 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KEELER MOTOR CAR CO LIMITED	c EIN-PN 14-1687678-001
a	Plan name KEI 401K PLAN	
b	Name of plan sponsor KOENIG EQUIPMENT, INC.	c EIN-PN 34-1152820-002

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	KELSCH ASSOCIATES, INC., (NJ) RETIREMENT PLAN	
b Name of plan sponsor	KELSCH ASSOCIATES, INC., (NJ)	c EIN-PN 22-2298243-001
a Plan name	KERBERROSE S.C. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	KERBERROSE S.C.	c EIN-PN 39-1658423-001
a Plan name	KINGMEN CONSTRUCTION 401(K) PLAN	
b Name of plan sponsor	KINGMEN CONSTRUCTION, INC.	c EIN-PN 81-3665914-001
a Plan name	KL OPERATIONS 401(K) PLAN	
b Name of plan sponsor	KL OPERATIONS, LLC	c EIN-PN 87-1011272-001
a Plan name	KLEENUP RESTORATION INC. 401(K) PLAN	
b Name of plan sponsor	KLEENUP RESTORATION INC.	c EIN-PN 13-4184624-001
a Plan name	KNK CONCRETE EXPRESS 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	KNK CONCRETE EXPRESS INC.	c EIN-PN 73-1679934-001
a Plan name	KNOLLWOOD 401(K) PLAN	
b Name of plan sponsor	KNOLLWOOD FARM, LLC	c EIN-PN 80-0005296-001
a Plan name	KVH 401(K) PLAN	
b Name of plan sponsor	KVH, LLC	c EIN-PN 88-4366582-001
a Plan name	KWIAT, INC. RETIREMENT PLAN	
b Name of plan sponsor	KWIAT, INC.	c EIN-PN 13-1982132-003
a Plan name	LA DOLCE VITA, LLC 401(K) PLAN	
b Name of plan sponsor	LA DOLCE VITA, LLC	c EIN-PN 20-1892386-001
a Plan name	LA GAUGE COMPANY, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	LA GAUGE COMPANY, INC.	c EIN-PN 26-0545660-001
a Plan name	LANDRO FOX CITIES REALTY, LLC 401(K) PLAN	
b Name of plan sponsor	LANDRO FOX CITIES REALTY, LLC	c EIN-PN 87-0758489-001

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	LANDX MOTORS, INC 401(K) PLAN	
b	Name of plan sponsor	LANDX MOTORS, INC	c EIN-PN 93-3903418-001
a	Plan name	LANGER JUICE COMPANY 401(K) PLAN	
b	Name of plan sponsor	LANGER JUICE COMPANY	c EIN-PN 95-2969736-001
a	Plan name	LAP OF LOVE RETIREMENT PLAN	
b	Name of plan sponsor	LAP OF LOVE SERVICES LLC	c EIN-PN 84-4089050-001
a	Plan name	LAW OFFICES OF JONATHAN Z. PAZ 401(K) PLAN	
b	Name of plan sponsor	LAW OFFICES OF JONATHAN Z. PAZ LLC	c EIN-PN 83-4268014-001
a	Plan name	LAZO LANDSCAPING 401(K) PLAN	
b	Name of plan sponsor	LAZO LANDSCAPING	c EIN-PN 20-0398793-001
a	Plan name	LB LIGHTS WEST, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	L.B. LIGHTS WEST, INC.	c EIN-PN 68-0137656-001
a	Plan name	LEANDNA 401(K) PLAN	
b	Name of plan sponsor	LEANDNA, INC.	c EIN-PN 38-3682250-001
a	Plan name	LEBARON & CARROLL, LLC 401(K) PLAN	
b	Name of plan sponsor	LEBARON & CARROLL, LLC	c EIN-PN 61-1503841-001
a	Plan name	LEEDING EDGE CONSULTING SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	LEEDING EDGE CONSULTING SERVICES, LLC	c EIN-PN 26-3464789-001
a	Plan name	LEGACY PARK ADVISORS, LLC 401(K) PLAN	
b	Name of plan sponsor	LEGACY PARK ADVISORS, LLC	c EIN-PN 87-2496512-001
a	Plan name	LEVY & LEVY, S.C. PROFIT SHARING PLAN	
b	Name of plan sponsor	LEVY & LEVY, S.C.	c EIN-PN 39-1126255-001
a	Plan name	LHOME 401(K) PLAN	
b	Name of plan sponsor	LHOME	c EIN-PN 45-4127209-001

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	LIPARI & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	LIPARI & ASSOCIATES, INC.	c EIN-PN 26-0836898-001
a	Plan name	LIQUORS 44 401K RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LFFHA, INC. DBA LIQUORS 44 HADLEY	c EIN-PN 04-3528586-001
a	Plan name	LITE-SOURCE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	LITE-SOURCE, INC.	c EIN-PN 93-0848278-001
a	Plan name	LITERATI INC. 401K PLAN	
b	Name of plan sponsor	LITERATI INC.	c EIN-PN 81-3863147-001
a	Plan name	LITTLE GAY BOOK, LLC 401K PLAN	
b	Name of plan sponsor	LITTLE GAY BOOK, LLC	c EIN-PN 27-1514643-001
a	Plan name	LIZOTTE GLASS, INC. PS 401(K) PLAN	
b	Name of plan sponsor	LIZOTTE GLASS, INC.	c EIN-PN 04-3496835-001
a	Plan name	LONGEVITY HOLDINGS, INC. 401(K) PS PLAN	
b	Name of plan sponsor	LONGEVITY HOLDINGS INC	c EIN-PN 82-4722389-001
a	Plan name	LOOMIS PROPERTY SERVICES 401(K) PLAN	
b	Name of plan sponsor	LOOMIS PROPERTY SERVICES, LLC	c EIN-PN 45-3656374-001
a	Plan name	LORANN OILS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LORANN OILS, INC.	c EIN-PN 38-1981129-001
a	Plan name	LT TAX SERVICES 401(K) PLAN	
b	Name of plan sponsor	LT TAX SERVICES, INC.	c EIN-PN 45-2024401-001
a	Plan name	LUIHN VANTEDGE PARTNERS LLC 401(K) PLAN	
b	Name of plan sponsor	LUIHN VANTEDGE PARTNERS LLC	c EIN-PN 83-2686934-001
a	Plan name	LUMIRADX, INC. 401(K) PLAN	
b	Name of plan sponsor	LUMIRADX, INC	c EIN-PN 47-1763048-001

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	LUMOS PHARMA, INC. 401K PLAN	
b	Name of plan sponsor	LUMOS PHARMA, INC.	c EIN-PN 42-1491350-001
a	Plan name	LUXURY LANDSCAPE 401(K) PLAN	
b	Name of plan sponsor	LUXURY LANDSCAPE SUPPLY LLC	c EIN-PN 46-1625268-001
a	Plan name	LYNXSPRING, INC. 401(K) PLAN	
b	Name of plan sponsor	LYNXSPRING, INC.	c EIN-PN 47-0867589-001
a	Plan name	M2 INGREDIENTS 401K PSP TRUST	
b	Name of plan sponsor	M2 INGREDIENTS INC	c EIN-PN 27-3525747-001
a	Plan name	M2E LLC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	M2E LLC	c EIN-PN 38-4137907-001
a	Plan name	MABUCHI MOTOR AMERICA CORPORATION RETIRMENT PLAN	
b	Name of plan sponsor	MABUCHI MOTOR AMERICA CORPORATION	c EIN-PN 13-2881841-001
a	Plan name	MAC'S OZM RETIREMENT PLAN	
b	Name of plan sponsor	DAVES CLEANING SERVICE, INC.	c EIN-PN 22-3544707-001
a	Plan name	MAI EPIC RETIREMENT PLAN	
b	Name of plan sponsor	THE FINWAY GROUP	c EIN-PN 42-1468222-018
a	Plan name	MAINLINE TCS 401(K) RETIMENT PLAN	
b	Name of plan sponsor	MAINLINE TRAFFIC CONTROL SERVICES LLC	c EIN-PN 88-2237699-001
a	Plan name	MAK ENVIRONMENTAL LLC 401(K) PLAN	
b	Name of plan sponsor	MAK ENVIRONMENTAL LLC	c EIN-PN 47-2905376-001
a	Plan name	MAKE MY CAPS LLC 401(K) PLAN	
b	Name of plan sponsor	MAKE MY CAPS LLC	c EIN-PN 92-3617777-001
a	Plan name	MAKESY 401(K) PLAN	
b	Name of plan sponsor	WOOD CANDLE WICK TECHNOLOGIES INC. DBA MAKESY	c EIN-PN 47-4943475-001

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	MANNIX WINDOW PRODUCTS 401(K) PLAN
b	Name of plan sponsor	AMERICAN WINDOW PRODUCTS CORP.
c	EIN-PN	99-0794045-001
a	Plan name	MANTEL TECHNOLOGIES, INC. 401(K) PLAN
b	Name of plan sponsor	MANTEL TECHNOLOGIES, INC.
c	EIN-PN	46-2914110-001
a	Plan name	MANTELL-HECATHORN BUILDERS 401(K) PLAN
b	Name of plan sponsor	MANTELL-HECATHORN BUILDERS, INC.
c	EIN-PN	30-0008275-001
a	Plan name	MARCIA SELDEN CUSTOM CATERING 401(K) PROFIT SHARING AND TRUST
b	Name of plan sponsor	MARCIA SELDEN CUSTOM CATERING
c	EIN-PN	06-1417616-001
a	Plan name	MARIC HEALTHCARE 401K PLAN
b	Name of plan sponsor	MARIC HEALTHCARE, LLC
c	EIN-PN	04-3768758-001
a	Plan name	MARIELA COGORNO M.D. PLLC 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MARIELA COGORNO, M.D. PLLC
c	EIN-PN	82-4063635-001
a	Plan name	MARINE BANK & TRUST 401K PROFIT SHARING PLAN
b	Name of plan sponsor	MARINE BANK & TRUST
c	EIN-PN	65-0644585-001
a	Plan name	MASTER SYSTEMS COURTS 401K PLAN
b	Name of plan sponsor	MASTER SYSTEMS COURTS
c	EIN-PN	46-3815842-001
a	Plan name	MATICA CORP 401(K) PLAN
b	Name of plan sponsor	MATICA CORP
c	EIN-PN	82-3756061-002
a	Plan name	MAVAGI ENTERPRISES RETIREMENT PLAN
b	Name of plan sponsor	MAVAGI ENTERPRISES, INC.
c	EIN-PN	74-3008826-003
a	Plan name	MAXCOM SECURITIES, INC 401K PLAN
b	Name of plan sponsor	MAXCOM SECURITIES INC
c	EIN-PN	75-2967169-001
a	Plan name	MC CONSULTANTS, INC. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MC CONSULTANTS, INC.
c	EIN-PN	33-0356700-001

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	MCCONNELL VAN PELT 401(K) PLAN	
b	Name of plan sponsor	MCCONNELL VAN PELT, LLC	c EIN-PN 84-3766013-001
a	Plan name	MCELLISTREM, FARGIONE, RORVIG & MOE, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MCELLISTREM, FARGIONE, RORVIG & MOE, P.A.	c EIN-PN 41-1389975-001
a	Plan name	MCGREW MANAGEMENT COMPANY, LLC 401(K) PLAN	
b	Name of plan sponsor	MCGREW MANAGEMENT COMPANY, LLC	c EIN-PN 27-0660696-001
a	Plan name	MCILHENNY COMPANY REPLACEMENT PLAN	
b	Name of plan sponsor	MCILHENNY COMPANY	c EIN-PN 72-0256940-003
a	Plan name	MCM LEARNING 401K PLAN	
b	Name of plan sponsor	MCM LEARNING INCORPORATED	c EIN-PN 38-3035383-002
a	Plan name	MCMACKIN MECHANICAL COMPANY LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MCMACKIN MECHANICAL COMPANY LLC	c EIN-PN 45-2927419-001
a	Plan name	MEADOWS BANK 401K RETIREMENT PLAN	
b	Name of plan sponsor	MEADOWS BANK	c EIN-PN 26-1777425-001
a	Plan name	MEDOVENT SOLUTIONS 401K RETIREMENT PLAN	
b	Name of plan sponsor	MEDOVENT SOLUTIONS, LLC	c EIN-PN 83-4559217-001
a	Plan name	MEDRECEIVABLES ADVISOR HEALTHCARE, INC., 401(K) PLAN	
b	Name of plan sponsor	MEDRECEIVABLES ADVISOR HEALTHCARE, INC.	c EIN-PN 99-2005014-001
a	Plan name	MEDTECH SOLUTIONS RSP	
b	Name of plan sponsor	MEDTECH	c EIN-PN 26-3619381-002
a	Plan name	MEGRIC CORP 401K PLAN	
b	Name of plan sponsor	MEGRIC CORP	c EIN-PN 22-2411929-001
a	Plan name	MELIA ASSOCIATES, L.L.C. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MELIA ASSOCIATES, LLC	c EIN-PN 87-3824775-001

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	MENDOTA FINANCIAL GROUP 401K PLAN	
b	Name of plan sponsor	MENDOTA FINANCIAL GROUP	c EIN-PN 20-3018987-001
a	Plan name	MENTORMATE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MENTORMATE, LLC	c EIN-PN 47-1191484-001
a	Plan name	MERIBEAR PRODUCTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	MERIBEAR PRODUCTIONS, INC.	c EIN-PN 95-3611147-001
a	Plan name	MERWIN & PAOLAZZI 401(K) PLAN	
b	Name of plan sponsor	MERWIN & PAOLAZZI INSURANCE AGENCY	c EIN-PN 20-3380131-001
a	Plan name	METRO PHYSICIANS GROUP 401(K) PLAN	
b	Name of plan sponsor	METRO PHYSICIANS, LLC	c EIN-PN 88-3149512-001
a	Plan name	MF GARZA LAW FIRM 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MF GARZA LAW FIRM, PLLC	c EIN-PN 83-4053832-001
a	Plan name	MIAMI VALLEY HOUSING OPPORTUNITIES 401K RETIREMENT PLAN	
b	Name of plan sponsor	MIAMI VALLEY HOUSING OPPORTUNITIES	c EIN-PN 31-1321426-001
a	Plan name	MICHAEL T. KRATZ, D.D.S., P.A. EMPLOYEES PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MICHAEL T. KRATZ, D.D.S., P.A.	c EIN-PN 41-1847179-001
a	Plan name	MIDWEST INSURANCE GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	MIDWEST INSURANCE GROUP, LLC	c EIN-PN 39-2001560-001
a	Plan name	MIEKLES NORTHSIDE HARDWARE, INC. 401(K) PS PLAN	
b	Name of plan sponsor	MEIKLES NORTHSIDE HARDWARE, INC.	c EIN-PN 39-1274699-001
a	Plan name	MILLER & COMPANY, LLP PROFIT SHARING PLAN I	
b	Name of plan sponsor	MILLER & COMPANY, LLP	c EIN-PN 27-0030728-003
a	Plan name	MILLER'S SONS CONTRACTING 401(K) PLAN	
b	Name of plan sponsor	MILLERS SONS CONTRACTING, LLC	c EIN-PN 82-1828857-001

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 MINNESOTA MILLWORK & FIXTURES 401(K) PLAN	
b	Name of plan sponsor MINNESOTA MILLWORK & FIXTURES LLC	c EIN-PN 81-2994436-001
a	Plan name MONTGOMERY NURSING HOME 401(K) PLAN	
b	Name of plan sponsor MONTGOMERY NURSING HOME	c EIN-PN 14-1739366-002
a	Plan name MORTISE AND TENON LLC 401(K) PROFIT SHARING PL & T	
b	Name of plan sponsor MORTISE AND TENON LLC	c EIN-PN 92-0534285-001
a	Plan name MUNICIPAL TRUST AND SAVINGS BANK EMPLOYEES' 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MUNICIPAL TRUST AND SAVINGS BANK	c EIN-PN 36-3144306-001
a	Plan name MWC 401(K) PLAN	
b	Name of plan sponsor MWC GROUP, INC.	c EIN-PN 37-1786956-001
a	Plan name NATHAN D. LEISKE, DDS, PC 401(K) PLAN	
b	Name of plan sponsor NATHAN D. LEISKE, DDS, PC	c EIN-PN 81-3840360-001
a	Plan name NATIONAL NOVELTY COMPANY 401(K) PLAN	
b	Name of plan sponsor NATIONAL NOVELTY COMPANY INCORPORATED	c EIN-PN 23-1501381-001
a	Plan name NAVON TECHNOLOGIES LLC 401(K) PLAN	
b	Name of plan sponsor NAVON TECHNOLOGIES LLC	c EIN-PN 87-3179622-001
a	Plan name NB VENTURES, INC. 401(K) PLAN	
b	Name of plan sponsor NB VENTURES, INC.	c EIN-PN 22-3721259-001
a	Plan name NDT GLOBAL, LLC 401(K) PLAN	
b	Name of plan sponsor NDT GLOBAL, LLC	c EIN-PN 45-4904579-002
a	Plan name NELSON INTELLIGENCE SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor NELSON INTELLIGENCE SOLUTIONS LLC	c EIN-PN 81-1932439-001
a	Plan name NEOPOD SYSTEMS LLC 401(K) PLAN	
b	Name of plan sponsor NEOPOD SYSTEMS LLC	c EIN-PN 27-0162689-001

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	NETCO, INC. 401(K) PLAN	
b	Name of plan sponsor	NETCO, INC.	c EIN-PN 01-0537606-001
a	Plan name	NEUROBEHAVIORAL INSTITUTE 401K PLAN	
b	Name of plan sponsor	MJEN, LLC	c EIN-PN 26-3901525-001
a	Plan name	NEW LOOK SKIN LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEW LOOK SKIN LLC CASH BALANCE	c EIN-PN 20-8680382-001
a	Plan name	NEW MEDICAL CENTER 401(K) PLAN	
b	Name of plan sponsor	NEW MEDICAL CENTER, S.C.	c EIN-PN 84-2233887-001
a	Plan name	NEW SPECTRUM HEALTH LLC 401(K) PLAN	
b	Name of plan sponsor	NEW SPECTRUM HEALTH LLC	c EIN-PN 87-2296793-001
a	Plan name	NEW YORK ISLANDERS HOCKEY CLUB, LP 401(K) PLAN	
b	Name of plan sponsor	NEW YORK ISLANDERS HOCKEY CLUB, LP	c EIN-PN 11-2254417-001
a	Plan name	NJ EDGE.NET, INC. 401(K) PLAN	
b	Name of plan sponsor	NJ EDGE.NET, INC.	c EIN-PN 22-3781807-001
a	Plan name	NORTH COAST LOGISTICS, INC. EMPLOYEE SALARY	
b	Name of plan sponsor	NORTH COAST LOGISTICS, INC.	c EIN-PN 34-1722265-001
a	Plan name	NORTH RIVER ARCHITECTURE & PLANNING PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NORTH RIVER ARCHITECTURE & PLANNING PC	c EIN-PN 27-1315203-001
a	Plan name	NOVATO POOL SCENE 401(K) PLAN	
b	Name of plan sponsor	NOVATO POOL SCENE, INC.	c EIN-PN 26-3943098-001
a	Plan name	NOVINGER GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NOVINGER GROUP, INC.	c EIN-PN 23-2454580-001
a	Plan name	NUMBERS UP LLC 401(K) PLAN	
b	Name of plan sponsor	NUMBERS UP, LLC	c EIN-PN 46-2840455-001

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 NURTUR HOLDINGS LLC 401(K) PLAN	
b	Name of plan sponsor NURTUR HOLDINGS LLC	c EIN-PN 20-1230907-001
a	Plan name OAK PHILANTHROPY (US), INC. 401(K) PLAN	
b	Name of plan sponsor OAK PHILANTHROPY (US), INC	c EIN-PN 92-1938010-002
a	Plan name ODK MEDIA, INC. 401(K) PLAN	
b	Name of plan sponsor ODK MEDIA INC	c EIN-PN 45-4561037-002
a	Plan name ODYSSEY SPACE RESEARCH, L. L. C. 401(K) PLAN	
b	Name of plan sponsor ODYSSEY SPACE RESEARCH, L.L.C.	c EIN-PN 20-0381879-001
a	Plan name OMAHA PRIMARY EYECARE 401(K) PLAN	
b	Name of plan sponsor OMAHA PRIMARY EYECARE	c EIN-PN 47-0808437-001
a	Plan name ONE CLAIM SOLUTION 401(K) PLAN	
b	Name of plan sponsor ONE CLAIM SOLUTION	c EIN-PN 61-2183215-001
a	Plan name ONEDIGITAL OPEN POOLED EMPLOYER PLAN	
b	Name of plan sponsor PLAN FIDUCIARY SERVICES, INC	c EIN-PN 27-3523833-008
a	Plan name ORANGE COUNTY SANITATION DISTRICT 457(B) DEFERRED COMPENSATION	
b	Name of plan sponsor ORANGE COUNTY SANITATION DISTRICT	c EIN-PN 95-6003940-457
a	Plan name ORANGE PACKAGING 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ORANGE DIE CUTTING CORP.	c EIN-PN 14-1323013-001
a	Plan name ORCHID CONSULTING GROUP, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ORCHID CONSULTING GROUP, LLC	c EIN-PN 92-1593457-001
a	Plan name OREGON SURGICAL SPECIALISTS, P.C. NEW COMPARABILITY CASH BALANCE PLAN	
b	Name of plan sponsor OREGON SURGICAL SPECIALISTS, P.C.	c EIN-PN 93-0592325-003
a	Plan name ORTHOECONOMICS 401(K) PLAN	
b	Name of plan sponsor ORTHOECONOMICS, INC.	c EIN-PN 45-4925255-001

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	ORTHOPEDIC SURGEONS OF WISCONSIN, S.C. RETIREMENT PLAN	
b	Name of plan sponsor	ORTHOPEDIC SURGEONS OF WISCONSIN, S.C.	c EIN-PN 20-0217581-001
a	Plan name	OTUVY, INC	
b	Name of plan sponsor	OTUVY, INC. 401(K) PLAN	c EIN-PN 26-0067117-002
a	Plan name	OUTLOOK FLOORING 401(K) SAFE HARBOR AND PROFIT SHARING PLAN	
b	Name of plan sponsor	OUTLOOK FLOORING	c EIN-PN 27-4194569-001
a	Plan name	OVERCASHIER & HORST PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor	OVERCASHIER & HORST HEATING & AIR CONDITIONING INC.	c EIN-PN 34-1734701-001
a	Plan name	PACIFIC COAST CLEANING 401(K) PLAN	
b	Name of plan sponsor	PACIFIC COAST CLEANING, INC.	c EIN-PN 20-8257225-001
a	Plan name	PACIFIC KOAST GRAPHICS INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	PACIFIC KOAST GRAPHICS INC	c EIN-PN 77-0156465-001
a	Plan name	PAGA MANAGEMENT, LLC., 401(K) PLAN	
b	Name of plan sponsor	PAGA MANAGEMENT, LLC	c EIN-PN 92-1550044-001
a	Plan name	PAIDEIA MONTESSORI SCHOOL, INC. 401K PLAN	
b	Name of plan sponsor	PAIDEIA MONTESSORI SCHOOL, INC.	c EIN-PN 22-3508570-001
a	Plan name	PAISAR SWAMP CAMP INDUSTRIES INC. 401(K) PLAN	
b	Name of plan sponsor	PAISAR SWAMP CAMP INDUSTRIES INC.	c EIN-PN 47-3917769-001
a	Plan name	PARAGON MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	CARDINAL HOMES, INC. DBA PARAGON MANAGEMENT	c EIN-PN 02-0616466-001
a	Plan name	PARK FAMILY & COSMETIC DENTISTRY 401(K) PLAN	
b	Name of plan sponsor	MAI HUYNH-LE DMDPA DBA PARK FAM & COSME DENT	c EIN-PN 32-0275580-001
a	Plan name	PATINA GALLERY 401(K) PLAN	
b	Name of plan sponsor	PATINA GALLERY INC.	c EIN-PN 85-0461261-001

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	PAULSEN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PAULSEN, INC.	c EIN-PN 47-0397153-001
a	Plan name	PAWNIE'S HOME CARE 401(K) PLAN	
b	Name of plan sponsor	BARDISON ENTERPRISES INC. DBA PAWNIES HOME CARE	c EIN-PN 84-2238944-001
a	Plan name	PAY CLEARLY LLC 401(K) PLAN & TRUST	
b	Name of plan sponsor	PAY CLEARLY LLC	c EIN-PN 82-2496569-001
a	Plan name	PEACE HEALTH 401(K) PLAN	
b	Name of plan sponsor	CBR ENTERPRISES	c EIN-PN 41-2032063-001
a	Plan name	PEDIATRIC DENTISTRY & ORTHODONTICS OF CHATTANOOGA PARTNERSHIP 401(K) PLAN	
b	Name of plan sponsor	PEDIATRIC DENTISTRY AND ORTHODONTICS OF CHATTANOOGA	c EIN-PN 83-2956929-002
a	Plan name	PENN STATION, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PENN STATION, INC.	c EIN-PN 31-1192253-001
a	Plan name	PHILLIPS WORKPLACE INTERIORS 401(K) PLAN	
b	Name of plan sponsor	PHILLIPS WORKPLACE INTERIORS	c EIN-PN 81-0702997-001
a	Plan name	PHOENIX MEDICAL GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	PHOENIX MEDICAL GROUP LLC	c EIN-PN 82-2819451-001
a	Plan name	PIC WIRE & CABLE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	PIC WIRE AND CABLE, INC.	c EIN-PN 39-2037732-001
a	Plan name	PITTSBURGH VETERINARY CARDIOLOGY 401(K) PLAN	
b	Name of plan sponsor	PITTSBURGH VETERINARY CARDIOLOGY	c EIN-PN 36-4799234-001
a	Plan name	PLEASANT VIEW FARMS, INC. 401(K) PLAN	
b	Name of plan sponsor	PLEASANT VIEW FARMS, INC.	c EIN-PN 06-0655393-001
a	Plan name	POMPEIAN, INC. CASH OR DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	POMPEIAN, INC.	c EIN-PN 52-1036484-001

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 POSITIVE EYE ONS OPTOMETRY 401(K) PLAN	
b	Name of plan sponsor RYAN STYBEL, OD, INC	c EIN-PN 95-4892984-001
a	Plan name PRECISION FURNITURE & STORAGE INC 401K PLAN	
b	Name of plan sponsor PRECISION FURNITURE & STORAGE	c EIN-PN 82-2480260-001
a	Plan name PRECISION STRIPING, INC. 401(K) PLAN	
b	Name of plan sponsor PRECISION STRIPING, INC. 401K PLAN	c EIN-PN 32-0529745-001
a	Plan name PREMIER LOGITECH LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor PREMIER LOGITECH LLC	c EIN-PN 26-0520860-001
a	Plan name PREMIUM COLOR GROUP 401(K) PLAN	
b	Name of plan sponsor PREMIUM COLOR GROUP, LLC	c EIN-PN 26-3206438-001
a	Plan name PRESTIGE WORLDWIDE 401(K) PLAN	
b	Name of plan sponsor CHENEY FLASHING LLC	c EIN-PN 81-4711710-001
a	Plan name PRICE, KONG & CO., C.P.A.'S P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRICE, KONG & CO., C.P.A.S, P.A.	c EIN-PN 86-0611246-001
a	Plan name PRO BACK OFFICE 401(K) PLAN AND TRUST	
b	Name of plan sponsor PRO BACK OFFICE, LLC	c EIN-PN 45-5636672-001
a	Plan name PRO SOURCE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor PRO SOURCE SERVICES, INC.	c EIN-PN 46-3911807-001
a	Plan name PROFESSIONAL TREE CARE 401(K) PLAN & TRUST	
b	Name of plan sponsor ARBORICULTURAL SPECIALTIES, INC	c EIN-PN 94-3226896-001
a	Plan name PROGRESSIVE ELECTRIC SALARY SAVINGS PLAN	
b	Name of plan sponsor PROGRESSIVE HOLDINGS, INC. DBA PROGRESSIVE ELECTRIC	c EIN-PN 20-4021010-002
a	Plan name PROLINE PIPELINE, INC. 401(K) PLAN	
b	Name of plan sponsor PROLINE PIPELINE, INC.	c EIN-PN 26-0532444-001

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	PROVIA 401K PLAN	
b	Name of plan sponsor	PROVIA PAYROLL, LLC	c EIN-PN 34-1519660-001
a	Plan name	PRS 401(K) PLAN	
b	Name of plan sponsor	PAINT REMOVAL SYSTEMS, INC.	c EIN-PN 46-0835843-001
a	Plan name	PSC CONSTRUCTION INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	PSC CONSTRUCTION INC	c EIN-PN 26-3849035-001
a	Plan name	PTPST 401(K) PLAN	
b	Name of plan sponsor	PTPST LLC	c EIN-PN 87-3931612-001
a	Plan name	PUEBLO OF JEMEZ COMMERCIAL ENTERPRISES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PUEBLO JEMEZ	c EIN-PN 85-0213473-002
a	Plan name	PUREPEDIATRICS RETIREMENT PLAN	
b	Name of plan sponsor	PUREPEDIATRICS, P.A.	c EIN-PN 46-1889178-002
a	Plan name	PUSCH & NGUYEN LAW FIRM 401(K)	
b	Name of plan sponsor	PUSCH & NGUYEN INJURY LAWYERS	c EIN-PN 83-1275835-001
a	Plan name	Q LOGISTICS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	Q LOGISTICS, LLC	c EIN-PN 61-1558179-001
a	Plan name	QUALITY BILLING SERVICE, INC. 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor	QUALITY BILLING SERVICE, INC.	c EIN-PN 13-3353427-001
a	Plan name	QUANTUM METALS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	QUANTUM METALS, INC.	c EIN-PN 31-1421523-001
a	Plan name	QUICK-SAV CONSOLIDATED RETIREMENT PLAN	
b	Name of plan sponsor	QUICK-SAV FOOD STORES, LTD	c EIN-PN 38-2208777-002
a	Plan name	RACHEL SCREEN PRINTING 401(K) PLAN	
b	Name of plan sponsor	RACHEL SCREEN PRINTING COMPANY	c EIN-PN 54-1442013-001

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 RAMPART BIOSCIENCE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor RAMPART BIOSCIENCE, INC.	c EIN-PN 83-3688007-001
a	Plan name RAVELING COMPANIES LLC 401(K) PLAN	
b	Name of plan sponsor RAVELING COMPANIES LLC	c EIN-PN 26-4496202-001
a	Plan name RAYMOND J. DOUMAR, PC 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor RAYMOND J. DOUMAR, P.C.	c EIN-PN 58-2124220-001
a	Plan name RCTV RETIREMENT PLAN	
b	Name of plan sponsor RARE COLLECTIBLES TV, LLC	c EIN-PN 46-5705246-001
a	Plan name RECURO HEALTH, INC. 401(K) PLAN	
b	Name of plan sponsor RECURO HEALTH, INC.	c EIN-PN 86-1571589-001
a	Plan name REDEVELOP. AUTH. OF THE CTY OF CUMBERLAND DEF. COMP. 457B PLAN	
b	Name of plan sponsor MARY KUNA	c EIN-PN 23-1994621-457
a	Plan name REGIONAL EYE ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor REGIONAL EYE ASSOCIATES, INC.	c EIN-PN 55-0740986-001
a	Plan name REMARKETS, LLC 401(K) PLAN	
b	Name of plan sponsor REMARKETS, LLC	c EIN-PN 81-1868913-001
a	Plan name RENTSCHLER INC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor RENTSCHLER INC	c EIN-PN 20-8032144-001
a	Plan name RESCH'S TILE INC. 401(K) PLAN	
b	Name of plan sponsor RESCHS TILE, INC.	c EIN-PN 39-1470891-001
a	Plan name RESILIENCE INSURANCE ADVISORY CORP 401K/PSP	
b	Name of plan sponsor RESILIENCE INSURANCE ADVISORY CORP	c EIN-PN 93-1852603-001
a	Plan name RESORTS AT PAYROLL CORP 401(K) PLAN	
b	Name of plan sponsor RESORTS AT PAYROLL CORP	c EIN-PN 93-4236197-002

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	RIVER CITY ENVIRONMENTAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RIVER CITY ENVIRONMENTAL, INC.	c EIN-PN 93-1175217-001
a	Plan name	RKG 401(K) PLAN	
b	Name of plan sponsor	RETIREMENT (K)ONCIERGE GROUP	c EIN-PN 86-1926015-001
a	Plan name	RML CONSTRUCTION INC. 401(K) PLAN	
b	Name of plan sponsor	RML CONSTRUCTION INC.	c EIN-PN 22-3252533-001
a	Plan name	ROADRUNNER RECYCLING 401(K) PLAN	
b	Name of plan sponsor	ROADRUNNER RECYCLING, INC.	c EIN-PN 46-5760171-001
a	Plan name	ROCK HOUSE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	THE COMPANY OF ROCK HOUSE	c EIN-PN 75-2416849-001
a	Plan name	ROKA PARTNERS 401K PLAN	
b	Name of plan sponsor	ROKA DEVELOP CAPITAL INC DBA ROKA PARTNERS	c EIN-PN 99-1770861-001
a	Plan name	ROR PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor	ROR PARTNERS, LLC	c EIN-PN 84-4983521-001
a	Plan name	ROWSON FAMILY PROCESSING, LLC 401(K) PLAN	
b	Name of plan sponsor	ROWSON FAMILY PROCESSING, LLC	c EIN-PN 92-1157540-001
a	Plan name	RUDY'S LIMOUSINE SERVICE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	RUDYS LIMOUSINE SERVICE, INC.	c EIN-PN 06-0946080-001
a	Plan name	RUGGERI PARKS WEINBERG 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	RUGGERI PARKS WEINBERG, LLP	c EIN-PN 87-3909899-001
a	Plan name	RUNERGY USA 401(K) PLAN	
b	Name of plan sponsor	RUNERGY USA INC.	c EIN-PN 92-2908294-001
a	Plan name	RURAL WELLNESS HEALTHCARE, INC. CASH BALANCE PLAN	
b	Name of plan sponsor	RURAL WELLNESS, INC.	c EIN-PN 84-5051558-001

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	S E & A AUTOMOTIVE, LLC 401(K) PLAN	
b	Name of plan sponsor	S E & A AUTOMOTIVE, LLC	c EIN-PN 20-4850394-001
a	Plan name	S&R ENTERPRISES, LLC 401(K) PLAN	
b	Name of plan sponsor	S&R ENTERPRISES, LLC	c EIN-PN 02-0683468-001
a	Plan name	S4K ENTERTAINMENT LLC 401K PLAN	
b	Name of plan sponsor	SK4 ENTERTAINMENT LLC	c EIN-PN 82-4369928-001
a	Plan name	SAFE-HARBOR 401(K) PROFIT SHARING PLAN FOR EMPLOYEES OF ARIZONA WOMENAND#39;S RECOVERY CENTER	
b	Name of plan sponsor	ARIZONA WOMENAND#39;S RECOVERY CENTE	c EIN-PN 86-0208873-001
a	Plan name	SALZ LOCK & SAFE 401(K) PLAN	
b	Name of plan sponsor	SALZ CORPORATION DBA SALZ LOCK & SAFE	c EIN-PN 99-0167251-001
a	Plan name	SAM BASS FIRE DEPARTMENT 401(K) P/S PLAN	
b	Name of plan sponsor	SAM BASS FIRE DEPARTMENT	c EIN-PN 74-2159454-001
a	Plan name	SANDY AUTO BODY INC. 401K PLAN	
b	Name of plan sponsor	SANDY AUTO BODY INC	c EIN-PN 93-1258439-001
a	Plan name	SCANDIA KITCHENS, LLC 401(K) PLAN	
b	Name of plan sponsor	SCANDIA KITCHENS, LLC	c EIN-PN 41-2273882-002
a	Plan name	SCARP PROPERTY ASSOCIATES LLC 401(K) PLAN	
b	Name of plan sponsor	SCARP PROPERTY ASSOCIATES LLC	c EIN-PN 16-1516814-001
a	Plan name	SCHWARTZ & SCHWARTZ 401(K) PLAN	
b	Name of plan sponsor	SCHWARTZ & SCHWARTZ ENTERPRISES INC.	c EIN-PN 47-2798848-001
a	Plan name	SEAFOOD AMERICA 401(K) PLAN	
b	Name of plan sponsor	SEAFOOD AMERICA LLC	c EIN-PN 20-0659805-001
a	Plan name	SEALAND CONTRACTORS CORP. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SEALAND CONTRACTORS CORP.	c EIN-PN 16-1088501-001

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	SEDBERRY-TOBIN INSURANCE SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEDBERRY-TOBIN INSURANCE SERVICES, INC.	c EIN-PN 20-0813691-001
a	Plan name	SEGALE BROS. WOOD PRODUCTS, INC. 401(K) PLAN	
b	Name of plan sponsor	SEGALE BROS. WOOD PRODUCTS, INC.	c EIN-PN 94-3343891-001
a	Plan name	SEMPER SOLARIS 401(K) PLAN	
b	Name of plan sponsor	SEMPER SOLARIS CONSTRUCTION, INC.	c EIN-PN 87-3344488-001
a	Plan name	SERVED WITH HONOR 401(K) PLAN	
b	Name of plan sponsor	SERVED WITH HONOR, LLC	c EIN-PN 92-0355922-001
a	Plan name	SERVICEMASTER CDR 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	VANTEDGE DISASTER GROUP, LLC DBA SERVICEMASTER CDR	c EIN-PN 92-0539786-001
a	Plan name	SEVEN STONES PROJECTS 401(K) PLAN	
b	Name of plan sponsor	SEVEN STONES PROJECTS CORP.	c EIN-PN 87-2768618-002
a	Plan name	SEXTON INDUSTRIAL, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	SEXTON INDUSTRIAL, INC.	c EIN-PN 31-1582675-001
a	Plan name	SFM MEDICAL DEVICES USA INC. 401K PLAN	
b	Name of plan sponsor	SFM MEDICAL DEVICES USA, INC.	c EIN-PN 81-1298681-001
a	Plan name	SHADOW RIDGE COUNTRY CLUB 401(K) PLAN	
b	Name of plan sponsor	SHADOW RIDGE LIMITED PARTNERSHIP DBA SHADOW RIDGE COUNTRY CLUB	c EIN-PN 47-0746201-002
a	Plan name	SHANAHAN & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	SHANAHAN & ASSOCIATES, INC.	c EIN-PN 23-2970161-001
a	Plan name	SHARROCK MACHINE & WELDING 401(K) PLAN	
b	Name of plan sponsor	SHARROCK MACHINE & WELDING, INC.	c EIN-PN 62-1106401-001
a	Plan name	SHAT-R-SHIELD, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	SHAT-R-SHIELD, INC	c EIN-PN 22-2192625-002

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	SHEEHAN'S PHARMACY, INC. RETIREMENT PLAN	
b	Name of plan sponsor	SHEEHANS PHARMACY, INC.	c EIN-PN 23-2770688-001
a	Plan name	SHERMAN CARTER BARNHART ARCHITECTS, PLLC 401(K) PSP	
b	Name of plan sponsor	SHERMAN CARTER BARNHART ARCHITECTS, PLLC	c EIN-PN 47-3402117-001
a	Plan name	SHOE CORPORATIONS 401(K) PLAN	
b	Name of plan sponsor	SHOE ORTHODONTICS	c EIN-PN 45-4895341-001
a	Plan name	SIKORA SHEET METAL, INC. 401(K) PLAN	
b	Name of plan sponsor	SIKORA SHEET METAL, INC.	c EIN-PN 81-4252468-001
a	Plan name	SINAI TEMPLE EFP RP	
b	Name of plan sponsor	SINAI TEMPLE	c EIN-PN 95-2103898-401
a	Plan name	SINGLE POINT CAPITAL RETIREMENT PLAN	
b	Name of plan sponsor	SBL INVESTMENTS LLC	c EIN-PN 26-0645630-001
a	Plan name	SIX MARITIME, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	SIX MARITIME INC	c EIN-PN 47-2942916-001
a	Plan name	SKYBECK CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	SKYBECK CONSTRUCTION, LLC	c EIN-PN 45-3743492-001
a	Plan name	SKYEPOINT DECISIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	SKYEPOINT DECISIONS, INC.	c EIN-PN 26-4474804-001
a	Plan name	SLAYTON WIRELESS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SLAYTON WIRELESS, LLC	c EIN-PN 45-2921282-001
a	Plan name	SLM WAREHOUSING GROUP HOLDINGS, INC 401(K) PLAN	
b	Name of plan sponsor	SLM WAREHOUSING GROUP HOLDINGS, INC	c EIN-PN 85-3143919-001
a	Plan name	SMART LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	SMART LLC	c EIN-PN 81-0615557-001

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 SMART ROOF 401(K) PLAN	
b	Name of plan sponsor SMART ROOF	c EIN-PN 47-5470097-001
a	Plan name SNOWBIRD TECHNOLOGIES INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor SNOWBIRD TECHNOLOGIES INC	c EIN-PN 59-3129276-001
a	Plan name SOF SURFACES PREVAILING WAGE PLAN	
b	Name of plan sponsor SOF SURFACES USA INC.	c EIN-PN 98-0475606-001
a	Plan name SOLARA HEALTH PROFIT SHARING PLAN	
b	Name of plan sponsor SOLARA HEALTH, INC.	c EIN-PN 81-1553458-001
a	Plan name SOUTHERN ROCK RESTAURANTS, LLC 401(K) PLAN PLAN	
b	Name of plan sponsor SOUTHERN ROCK RESTAURANTS, LLC	c EIN-PN 45-2342647-001
a	Plan name SOUTHWEST TRAFFIC SIGNAL SERVICE, INC. 401(K) PLAN	
b	Name of plan sponsor SOUTHWEST TRAFFIC SIGNAL SERVICE, INC.	c EIN-PN 95-3555279-001
a	Plan name SPIDER COMPANY INC. PROFIT SHARING PLAN	
b	Name of plan sponsor SPIDER COMPANY, INC.	c EIN-PN 36-3453535-001
a	Plan name SPRINGFIELD SPRING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SPRINGFIELD SPRING CORPORATION	c EIN-PN 04-1859606-002
a	Plan name SS INDUSTRIES HOLDINGS INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SS INDUSTRIES HOLDINGS INC	c EIN-PN 85-1979211-001
a	Plan name SS OF SA 401(K) PLAN	
b	Name of plan sponsor SPEECH SPECIALISTS OF SAN ANTONIO, P.C.	c EIN-PN 48-1289134-001
a	Plan name SSG OF GEORGIA, LLC 401(K) PLAN	
b	Name of plan sponsor SSG OF GEORGIA, LLC	c EIN-PN 86-3986306-001
a	Plan name ST. GEORGE TANAQ CORPORATION 401(K) PLAN	
b	Name of plan sponsor ST. GEORGE TANAQ CORPORATION	c EIN-PN 92-0047365-001

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	STAFFING SOLUTIONS ENTERPRISES 401K SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	STAFFING SOLUTIONS ENTERPRISES, INC	c EIN-PN 34-1208971-003
a	Plan name	STBP 401(K) PLAN	
b	Name of plan sponsor	STBP, INC.	c EIN-PN 90-0781206-001
a	Plan name	STELLAR SENIOR LIVING, LLC 401(K) PLAN	
b	Name of plan sponsor	STELLAR SENIOR LIVING, LLC	c EIN-PN 45-4623007-002
a	Plan name	STEPUP RGM INC. 401(K) PLAN	
b	Name of plan sponsor	STEPUP RGM INC.	c EIN-PN 87-2602141-001
a	Plan name	STERLING COMPUTER CONSULTANTS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	STERLING COMPUTER CONSULTANTS, INC.	c EIN-PN 38-2938781-001
a	Plan name	STITT RESTAURANT GROUP 401K PLAN	
b	Name of plan sponsor	BOTTEGA, INC DBA BOTTEGA	c EIN-PN 63-0966105-001
a	Plan name	STRATEGY, LLC 401(K) PLAN	
b	Name of plan sponsor	STRATEGY, LLC	c EIN-PN 45-1099454-001
a	Plan name	STRUCTURECRAFT CONTRACTING, LLC 401(K) PLAN	
b	Name of plan sponsor	STRUCTURECRAFT CONTRACTING, LLC	c EIN-PN 47-3295129-001
a	Plan name	STUCKEY BOSTECH AND NAPA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	STUCKEY BROTHERS PARTS COMPANY, INCORPORATED	c EIN-PN 57-0403411-001
a	Plan name	SUMMIT STAIRS & MILLWORK 401(K) PLAN	
b	Name of plan sponsor	SUMMIT STAIRS & MILLWORK	c EIN-PN 93-2208909-001
a	Plan name	SUN BULB SALARIED EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	SUN BULB COMPANY, INC.	c EIN-PN 59-1677460-002
a	Plan name	SUNRISE TREATMENT CENTER, LLC 401(K) PLAN	
b	Name of plan sponsor	SUNRISE TREATMENT CENTER, LLC	c EIN-PN 26-1184641-001

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	SUNSHINE RIDES EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	TAZCO, INC.	c EIN-PN 84-1162315-001
a	Plan name	SUPERB BUILDING SERVICES, LLC RETIREMENT SAVINGS	
b	Name of plan sponsor	SUPERB BUIDLING SERVICES, LLC	c EIN-PN 84-3667157-001
a	Plan name	SUTTONS INTERNATIONAL N.A., INC. 401(K) PLAN	
b	Name of plan sponsor	SUTTONS INTERNATIONAL N.A., INC.	c EIN-PN 51-0269901-001
a	Plan name	SUZANO PULP AND PAPER AMERICA 401(K) PLAN	
b	Name of plan sponsor	SUZANO PULP AND PAPER AMERICA, INC	c EIN-PN 52-1801618-001
a	Plan name	SWM-GP 401K) PLAN	
b	Name of plan sponsor	STEVE WHITE MOTORS, INC.	c EIN-PN 56-0947841-002
a	Plan name	SYLACAUGA MARINE & ATV, INC. 401(K) PROFIT SHARING	
b	Name of plan sponsor	SYLACAUGA MARINE & ATV, INC.	c EIN-PN 63-1266177-001
a	Plan name	SYNCARDIA SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	SYNCARDIA SYSTEMS, LLC	c EIN-PN 81-3399071-001
a	Plan name	T&E MARSHALL ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	T&E MARSHALL ENTERPRISES	c EIN-PN 84-1262252-001
a	Plan name	T-REX RETIREMENT PLAN	
b	Name of plan sponsor	T-REX MANAGEMENT INC	c EIN-PN 73-1667667-001
a	Plan name	TAG ROOFING AND EXTERIOR LLC 401(K) PLAN	
b	Name of plan sponsor	TAG ROOFING & EXTERIORS LLC	c EIN-PN 47-2265912-001
a	Plan name	TAYLOR IMPLEMENT/COLBY DODGE, CHRYSLER, JEEP RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TAYLOR IMPLEMENT CO., INC.	c EIN-PN 74-2805634-001
a	Plan name	TCR RAIL SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	KY I IRON HORSE RR INVESTS LLCDBATCR RAIL SYS	c EIN-PN 93-2933430-001

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	TDS CUSTOM CABINETS, LLC 401(K) PLAN	
b	Name of plan sponsor	TDS CUSTOM CABINETS, LLC	c EIN-PN 20-5035627-001
a	Plan name	TEAM PRAHL 401(K) PLAN	
b	Name of plan sponsor	MARTA PRAHL	c EIN-PN 87-1676259-001
a	Plan name	TECHNIMETALS, INC. CASH BALANCE PLAN	
b	Name of plan sponsor	TECHNIMETALS, INC	c EIN-PN 20-8119045-002
a	Plan name	TENCO SOLAR 401(K) PLAN	
b	Name of plan sponsor	TENCO SOLAR	c EIN-PN 90-0456446-001
a	Plan name	TERRAL RIVERSERVICE INC 401(K) PLAN	
b	Name of plan sponsor	TERRAL RIVERSERVICE INC.	c EIN-PN 72-0890414-001
a	Plan name	TETHR 401(K) PLAN	
b	Name of plan sponsor	COLLABIP, INC. DBA TETHR	c EIN-PN 26-2132272-002
a	Plan name	TEXAS STRESS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TEXAS STRESS, INC.	c EIN-PN 76-0300725-001
a	Plan name	TEZ TECHNOLOGY, LLC 401(K) PLAN	
b	Name of plan sponsor	TEZ TECHNOLOGY, LLC	c EIN-PN 82-5172229-001
a	Plan name	THE ARTISAN 401(K) PEP - FUTURO HEALTH	
b	Name of plan sponsor	THE ARTISAN 401(K) PEP - FUTURO HEALTH	c EIN-PN 84-3847958-023
a	Plan name	THE BRIDGES CLUB 401(K) PLAN	
b	Name of plan sponsor	THE BRIDGES CLUB AT RANCHO SANTA FE, INC.	c EIN-PN 33-0867612-001
a	Plan name	THE D & F DEVELOPMENT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	THE D & F DEVELOPMENT GROUP, LLC	c EIN-PN 20-1926884-001
a	Plan name	THE DELAWARE NATIONAL BANK OF DELHI 401(K) EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	THE DELAWARE NATIONAL BANK OF DELHI	c EIN-PN 15-0287160-003

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	THE DENTAL STUDIO OF IOWA 401(K) PLAN	
b Name of plan sponsor	THE DENTAL STUDIO OF IOWA	c EIN-PN 82-4393763-001
a Plan name	THE DOCTOR'S RETIREMENT PLAN	
b Name of plan sponsor	PLAN COMPLIANCE SERVICES, INC.	c EIN-PN 59-3708427-021
a Plan name	THE EPISCOPAL SCHOOL OF LOS ANGELES 401(K) PLAN	
b Name of plan sponsor	THE SCHOOL OF LOS ANGELES	c EIN-PN 26-4274906-001
a Plan name	THE GREEN GROUP 401(K) PLAN	
b Name of plan sponsor	EVERGREEN PEST SOLUTIONS, LLC	c EIN-PN 81-1127839-001
a Plan name	THE IVES GROUP INC 401(K) PROFIT SHARING PLAN & TRUST	
b Name of plan sponsor	OFFICE CITY EXPRESS	c EIN-PN 35-1903352-001
a Plan name	THE MONROE CABLE COMPANY, INC. 401(K) PLAN	
b Name of plan sponsor	THE MONROE CABLE COMPANY, INC.	c EIN-PN 06-1377174-001
a Plan name	THE PETERSAN GROUP INC. 401(K) PLAN	
b Name of plan sponsor	THE PETERSAN GROUP INC.	c EIN-PN 13-3796253-003
a Plan name	THE POLICE FOUNDATION PENSION PLAN	
b Name of plan sponsor	POLICE FOUNDATION	c EIN-PN 52-0906599-001
a Plan name	THE PROACTIS 401(K) PLAN	
b Name of plan sponsor	PERFECT COMMERCE, LLC	c EIN-PN 26-0557687-002
a Plan name	THE ROSS AGENCY, INC. 401(K) PLAN	
b Name of plan sponsor	THE ROSS AGENCY, INC.	c EIN-PN 37-1304941-001
a Plan name	THE SYLVANIA ORTHODONTICS, INC. 401(K) PLAN	
b Name of plan sponsor	SYLVANIA ORTHODONTICS, INC.	c EIN-PN 34-1847894-003
a Plan name	THE TURNKEY FOUNDATION INC. 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	THE TURNKEY FOUNDATION INC. DBA ARBOR FINANCIAL GROUP	c EIN-PN 71-1049958-001

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	THEORY PHYSICAL THERAPY, LLC 401(K) PLAN	
b	Name of plan sponsor	THEORY PHYSICAL THERAPY, LLC	c EIN-PN 87-2218691-001
a	Plan name	THIGPEN AUDIOLOGY, PLLC 401(K) PLAN	
b	Name of plan sponsor	THIGPEN AUDIOLOGY, PLLC	c EIN-PN 84-3494239-001
a	Plan name	THOMAS A. DECHELLIS DDS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THOMAS A. DECHELLIS, DDS, LLC	c EIN-PN 93-4589572-001
a	Plan name	THOMPSON, GREENSPON & CO., P.C. 401(K) PSP & TRUST	
b	Name of plan sponsor	THOMPSON, GREENSPON & CO	c EIN-PN 54-1029635-001
a	Plan name	THREATTE-BEAUDRY ANIMAL CLINIC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	THREATTE-BEAUDRY ANIMAL CLINIC	c EIN-PN 59-2155785-001
a	Plan name	THUNDER TECH INC RETIREMENT PLAN	
b	Name of plan sponsor	THUNDER TECH INC	c EIN-PN 16-1637756-001
a	Plan name	TILES BY PERFECTION, INC. 401(K) PLAN	
b	Name of plan sponsor	TILES BY PERFECTION, INC.	c EIN-PN 04-3514230-001
a	Plan name	TINY TEETH PEDIATRIC DENTISTRY, PLLC 401(K) PLAN	
b	Name of plan sponsor	TINY TEETH PEDIATRIC DENTISTRY PLLC	c EIN-PN 88-4249612-001
a	Plan name	TIPP DISTRIBUTORS, INC. DBA NOVAMEX 401(K) PLAN	
b	Name of plan sponsor	TIPP DISTRIBUTORS, INC. DBA NOVAMEX	c EIN-PN 74-2444846-002
a	Plan name	TITAN EARTHWORK, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TITAN EARTHWORK, LLC	c EIN-PN 52-7326734-001
a	Plan name	TOALE BROTHERS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TOALE BROTHERS, INC.	c EIN-PN 59-0479420-002
a	Plan name	TOP COAT, INC. 401(K) PLAN	
b	Name of plan sponsor	TOP COAT, INC.	c EIN-PN 74-2092713-001

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	TORIE L. RICHARDSON, DDS, LLC 401(K) PLAN	
b	Name of plan sponsor	TORIE L. RICHARDSON, DDS, LLC	c EIN-PN 85-3864577-001
a	Plan name	TOTAL SAFETY U. S. , INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TOTAL SAFETY U.S., INC.	c EIN-PN 37-1478877-001
a	Plan name	TRACKER ENERGY 401(K) PLAN	
b	Name of plan sponsor	TRACKER ENERGY SERVICES, INC.	c EIN-PN 46-5188810-001
a	Plan name	TRADES 401(K) PLAN	
b	Name of plan sponsor	TRADES HOLDING CO., LLC	c EIN-PN 82-3677497-001
a	Plan name	TRAVELNET SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRAVELNET SOLUTIONS, INC.	c EIN-PN 90-0132087-001
a	Plan name	TREGARON INDIA HOLDINGS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	GLOW TOUCH LLC	c EIN-PN 20-5850452-001
a	Plan name	TREIBER CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TREIBER CONSTRUCTION COMPANY, INC.	c EIN-PN 42-0944180-001
a	Plan name	TRI-COUNTY ELECTRIC SERVICE, INC. RETIREMENT PLAN	
b	Name of plan sponsor	TRI-COUNTY ELECTRIC SERVICE, INC.	c EIN-PN 20-1327216-001
a	Plan name	TRI-STATE ELECTRIC 401(K) PLAN	
b	Name of plan sponsor	TRI-STATE ELECTRIC, LTD	c EIN-PN 74-3022814-002
a	Plan name	TRI-STATE GASTROENTEROLOGY ASSOCIATES, P.S.C.401(K) PLAN	
b	Name of plan sponsor	TRI-STATE GASTROENTEROLOGY ASSOCIATES, PSC	c EIN-PN 61-1192347-003
a	Plan name	TRIAD TECHNOLOGIES, LLC 401(K) PLAN	
b	Name of plan sponsor	TRIAD TECHNOLOGIES, LLC	c EIN-PN 43-1969651-001
a	Plan name	TRIM-RITE FOOD CORPORATION RETIREMENT SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	TRIM-RITE, INC.	c EIN-PN 36-3873555-002

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 TROY INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor TROY INDUSTRIES, INC.	c EIN-PN 72-1544187-002
a	Plan name TRUE REAL ESTATE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor TRUE TEAM INC. DBA TRUE REAL ESTATE	c EIN-PN 47-2951139-001
a	Plan name TTARL 401(K) PLAN	
b	Name of plan sponsor THERMA-TECH ENGINEERING, INC.	c EIN-PN 86-1107246-001
a	Plan name TURBO FEDERAL LLC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor TURBO FEDERAL LLC	c EIN-PN 26-2632718-001
a	Plan name TURF MASTERS BRANDS PAYROLL MGMT LLC 401K PLAN	
b	Name of plan sponsor TURF MASTER BRNDS PYRLL MGMT LLC	c EIN-PN 74-3058849-002
a	Plan name TVD TRANSPORT CORP. 401(K) PS PLAN	
b	Name of plan sponsor TVD TRANSPORT CORP.	c EIN-PN 47-3985459-001
a	Plan name TW CABLE LLC 401(K) PLAN	
b	Name of plan sponsor TW CABLE LLC	c EIN-PN 11-3355710-002
a	Plan name UNITED HEALTH CENTERS OF THE SAN JOAQUIN VALLEY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor UNITED HEALTH CENTERS OF THE SAN JOAQUIN VALLEY	c EIN-PN 94-1732538-001
a	Plan name UNIVERSITY ORTHOPAEDIC SERVICES, INC. RETIREMENT PLAN	
b	Name of plan sponsor UNIVERSITY ORTHOPAEDIC SERVICES INC	c EIN-PN 16-1406947-001
a	Plan name UPROER 401(K) PLAN	
b	Name of plan sponsor UPROER	c EIN-PN 47-1824852-001
a	Plan name US MEDICAL GLOVE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor US MEDICAL GLOVE COMPANY, LLC	c EIN-PN 85-3322641-001
a	Plan name USA PICKLEBALL ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor USA PICKLEBALL ASSOCIATION	c EIN-PN 20-3557068-001

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	UWAF 401K PLAN	
b	Name of plan sponsor	US WIRE AND CABLE CORPORATION	c EIN-PN 11-2828063-001
a	Plan name	V AND V SUPREMO FOODS, INC. 401(K) PLAN	
b	Name of plan sponsor	V & V SUPREMO FOODS, INC.	c EIN-PN 36-2653261-001
a	Plan name	V CONCRETE CONSTRUCTION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	V CONCRETE CNST LLC, A DANIEL VILLASENOR CO.	c EIN-PN 20-3078447-001
a	Plan name	VALERIAN & UNIVERSITY VILLAGE MEMORY CARE 401(K) PLAN	
b	Name of plan sponsor	VALERIAN HOME HEALTH AND HOSPICE, LLC	c EIN-PN 46-3101143-001
a	Plan name	VALIDIFI 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VALIDIFI INC	c EIN-PN 31-1598543-001
a	Plan name	VASCULAR-INTERVENTIONAL ASSOCIATES, P.C. DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	VASCULAR-INTERVENTIONAL ASSOCIATES, P.C.	c EIN-PN 16-1601847-001
a	Plan name	VERN'S CHEESE, INC. 401(K) PLAN	
b	Name of plan sponsor	VERNS CHEESE, INC.	c EIN-PN 92-1577620-001
a	Plan name	VETERINARIAN PARTNERS 401K PLAN	
b	Name of plan sponsor	VETERINARIAN PARTNERS DBA VET PARTNERS	c EIN-PN 87-3167462-001
a	Plan name	VISTAGEN THERAPEUTICS, INC. 401(K) PLAN	
b	Name of plan sponsor	VISTAGEN THERAPEUTICS, INC.	c EIN-PN 94-3301660-001
a	Plan name	VOYA GOVERNMENT SECURITIES FUND (SEPARATE ACCOUNT NO. 390)	
b	Name of plan sponsor	VOYA RETIREMENT INSURANCE & ANNUITY COMPANY	c EIN-PN 71-0294708-001
a	Plan name	VROOM AUTOMOTIVE FINANCE CORPORATION 401(K) PLAN	
b	Name of plan sponsor	VROOM AUTOMOTIVE FINANCE CORP.	c EIN-PN 94-3211687-001
a	Plan name	WALDROP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WALDROP, INC.	c EIN-PN 57-0707445-002

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	WALLACE DESIGN GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	WALLACE DESIGN GROUP, INC.	c EIN-PN 46-5662058-001
a	Plan name	WATERSTONE MORTGAGE 401(K) PLAN	
b	Name of plan sponsor	WATERSTONE MORTGAGE CORPORATION	c EIN-PN 39-2001010-001
a	Plan name	WBVC PROFIT SHARING PLAN	
b	Name of plan sponsor	WESTBROOK VISION CENTER, PLC	c EIN-PN 20-3013403-001
a	Plan name	WD, LLC 401(K) PLAN	
b	Name of plan sponsor	WD, LLC	c EIN-PN 20-4311152-001
a	Plan name	WD3, LLC 401(K) PLAN	
b	Name of plan sponsor	WD3, LLC	c EIN-PN 46-1556354-001
a	Plan name	WELDED RING PRODUCTS COMPANY, INC. 401(K) PROFIT	
b	Name of plan sponsor	WELDED RING PRODUCTS COMPANY INC	c EIN-PN 34-1479265-001
a	Plan name	WEST SIDE MARKET 401(K) PLAN	
b	Name of plan sponsor	CLEVELAND PUBLIC MARKET CORPORATION	c EIN-PN 92-3866177-001
a	Plan name	WESTERN AG ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	WESTERN AG ENTERPRISES, INC	c EIN-PN 86-0545566-002
a	Plan name	WESTLAKE VILLAGE INN 401(K) PROFIT SHARING PLAN &	
b	Name of plan sponsor	WESTLAKE PROPERTIES INC	c EIN-PN 22-2013733-001
a	Plan name	WESTSIDE FAMILY HEALTHCARE 401(K) PLAN	
b	Name of plan sponsor	WESTSIDE FAMILY HEALTHCARE, INC,	c EIN-PN 22-2488654-002
a	Plan name	WHALLEY COMPUTER ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor	WHALLEY COMPUTER ASSOCIATES, INC.	c EIN-PN 04-2902969-001
a	Plan name	WHITE COFFEE CORPORATION RETIREMENT & 401(K) PLAN	
b	Name of plan sponsor	WHITE COFFEE CORPORATION	c EIN-PN 11-1470678-001

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	WHITLOCK ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor	WHITLOCK ENTERPRISES LLC	c EIN-PN 45-3134696-001
a	Plan name	WILLOW TEX 401K PLAN	
b	Name of plan sponsor	WILLOW TEX LLC	c EIN-PN 46-1397872-001
a	Plan name	WINTER MANAGEMENT CORP. 401(K) PLAN	
b	Name of plan sponsor	WINTER MANAGEMENT CORP.	c EIN-PN 13-1479477-001
a	Plan name	WIST SUPPLY & EQUIPMENT CO. 401(K) SAVING PLAN	
b	Name of plan sponsor	WIST SUPPLY & EQUIPMENT CO.	c EIN-PN 86-0126705-001
a	Plan name	WOODS COMFORT SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	WOODS COMFORT SYSTEMS INC	c EIN-PN 20-2011573-001
a	Plan name	WOODS MAINTENANCE SERVICES RETIREMENT PLAN	
b	Name of plan sponsor	WOODS MAINTENANCE SERVICES, INC.	c EIN-PN 95-4643637-001
a	Plan name	WORTH FINANCE CORPORATION 401(K) PLAN	
b	Name of plan sponsor	WORTH FINANCE CORPORATION	c EIN-PN 74-1881121-001
a	Plan name	XCEL VENTURES LLC 401(K) PLAN	
b	Name of plan sponsor	XCEL VENTURES LLC	c EIN-PN 92-1369456-001
a	Plan name	XGS, LLC 401(K) PLAN	
b	Name of plan sponsor	XPRESS GLOBAL SYSTEMS, LLC	c EIN-PN 62-1261869-001
a	Plan name	YELLOW BRICK ROAD CHILD CARE I	
b	Name of plan sponsor	YELLOW BRICK ROAD CHILD CARE I	c EIN-PN 20-5499295-001
a	Plan name	YOSEMITE FOODS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	YOSEMITE FOODS, INC.	c EIN-PN 81-3809906-001
a	Plan name	YOUNG'S LEGACY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	YOUNGS LEGACY GROUP, INC.	c EIN-PN 93-4113191-001

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 MYCOMPASS INDEX CONSERVATIVE 2045 FUND	B Three-digit plan number (PN) ▶ 485
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 38-4097339

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

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	869599
		4189937
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	25636544
(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)	6220931
(15) Other.....	1c(15)	10386480

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	32727074	46847072
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	14472
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	881028	4189940
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	881028	4204412
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	31846046	42642660

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	145437	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		145437
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		3477926
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		3623363

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	1793	
(5) Investment advisory and investment management fees	2i(5)	36392	
(6) Bank or trust company trustee/custodial fees	2i(6)	14621	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		52806
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		52806

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3570557
l Transfers of assets:			
(1) To this plan.....	2l(1)		15965003
(2) From this plan	2l(2)		8738946

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 _____.