

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) C

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

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

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

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

special extension (enter description)

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

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>PRINCIPAL/BLACKROCK S&P 500 INDEX CIT</u>	1b Three-digit plan number (PN) ▶ <u>001</u> 1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>SEI TRUST COMPANY</u> <u>1 FREEDOM VALLEY DRIVE</u> <u>OAKS, PA 19456</u>	2b Employer Identification Number (EIN) <u>94-3224211</u> 2c Plan Sponsor's telephone number <u>610-676-2369</u> 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.

SIGN HERE		Date	Enter name of individual signing as plan administrator
	Signature of plan administrator		
SIGN HERE		Date	Enter name of individual signing as employer or plan sponsor
	Signature of employer/plan sponsor		
SIGN HERE	Filed with authorized/valid electronic signature.	10/07/2025	HEATHER BILLERA
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 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 _____ (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
		2024
		This Form is Open to Public Inspection.

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

A Name of plan <u>PRINCIPAL/BLACKROCK S&P 500 INDEX CIT</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>SEI TRUST COMPANY</u>	D Employer Identification Number (EIN) <u>94-3224211</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)

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>EQUITY INDEX FUND F</u>		
b Name of sponsor of entity listed in (a): <u>BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.</u>		
c EIN-PN <u>94-3262720-001</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>3710011000</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

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

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

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

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c EIN-PN

d Entity code

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d Entity code

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a Name of MTIA, CCT, PSA, or 103-12 IE:

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c EIN-PN

d Entity code

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

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	401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	BPI TECHNOLOGY, INC.	c EIN-PN 94-2740498-001
a	Plan name	401(K) PLAN AND EMPLOYEES TRUST OF HASTINGS IRRIGATION PIPE CO.	
b	Name of plan sponsor	HASTINGS IRRIGATION PIPE CO.	c EIN-PN 47-0371670-002
a	Plan name	401(K) PLAN FOR HOURLY EMPLOYEES OF TIGHTCO, INC.	
b	Name of plan sponsor	TIGHTCO, INC.	c EIN-PN 57-0934530-001
a	Plan name	401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF EYE ASSOCIATES OF NEW MEXICO, LTD.	
b	Name of plan sponsor	EYE ASSOCIATES OF NEW MEXICO	c EIN-PN 85-0246856-002
a	Plan name	401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	EQUIX, INC.	c EIN-PN 47-2794108-001
a	Plan name	A&K RAILROAD MATERIALS, INC. RETIREMENT & SAVINGS PLAN	
b	Name of plan sponsor	A&K RAILROAD MATERIALS, INC.	c EIN-PN 94-1631996-001
a	Plan name	AAA MINNEAPOLIS 401(K) SAVINGS PLAN	
b	Name of plan sponsor	AAA MINNEAPOLIS	c EIN-PN 41-0134600-002
a	Plan name	ABILL REALTY CORP. PROFIT-SHARING PLAN	
b	Name of plan sponsor	ABILL REALTY CORP.	c EIN-PN 22-1768133-001
a	Plan name	ACCESS VG, LLC 401(K) PLAN	
b	Name of plan sponsor	ACCESS VG LLC.	c EIN-PN 87-0432299-002
a	Plan name	ACE-TEX ENTERPRISES, INC. SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	ACE TEX ENTERPRISES, LLC	c EIN-PN 38-3388057-001
a	Plan name	ADAMS GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ADAMS GROUP	c EIN-PN 94-2200898-003
a	Plan name	ADVANCED DEFENSE CONCEPTS, INC. 401(K) PLAN	
b	Name of plan sponsor	ADVANCED DEFENSE CONCEPTS, INC.	c EIN-PN 54-1969151-002

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 A-E EMPLOYEES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ANDERSON ERICKSON DAIRY CO.	c EIN-PN 42-0115611-003
a	Plan name AGORO CARBON ALLIANCE US, INC. 401(K) PLAN	
b	Name of plan sponsor AGORO CARBON ALLIANCE US, INC.	c EIN-PN 87-1205506-001
a	Plan name ALINABAL, INC. RETIREMENT PLAN	
b	Name of plan sponsor ALINABAL, INC.	c EIN-PN 13-3009406-001
a	Plan name ALLAN INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALLAN INDUSTRIES, INC.	c EIN-PN 22-2647098-001
a	Plan name ALLEGIS GROUP, INC. RETIREMENT SAVINGS PLAN ONE	
b	Name of plan sponsor ALLEGIS GROUP, INC.	c EIN-PN 52-1304931-004
a	Plan name ALLEGIS GROUP, INC. RETIREMENT SAVINGS PLAN THREE	
b	Name of plan sponsor ALLEGIS GROUP, INC.	c EIN-PN 52-1304931-003
a	Plan name ALLEGIS GROUP, INC. RETIREMENT SAVINGS PLAN TWO	
b	Name of plan sponsor ALLEGIS GROUP, INC.	c EIN-PN 52-1304931-002
a	Plan name ALLERGY PARTNERS MANAGMENT LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ALLERGY PARTNERS PLLC	c EIN-PN 56-1249571-001
a	Plan name ALVINE AND ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALVINE AND ASSOCIATES, INC.	c EIN-PN 47-0469868-001
a	Plan name AMERICA II CORP. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor AMERICA II CORP	c EIN-PN 59-3270107-001
a	Plan name AMERICAN ASSOCIATION OF INSURANCE SERVICES EMPLOYEES PENSION PLAN	
b	Name of plan sponsor AMERICAN ASSOCIATION OF INSURANCE SERVICES	c EIN-PN 36-2021360-001
a	Plan name AMERICAN OPTICAL/M&R INDUSTRIES THRIFT PLAN	
b	Name of plan sponsor VISTA CAPITAL LLC	c EIN-PN 51-0529512-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	AMERICAN TRUETZSCHLER, INC. PROFIT SHARING AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	AMERICAN TRUETZSCHLER, INC.	c EIN-PN 56-0932757-001
a	Plan name	AMPACET CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AMPACET CORPORATION	c EIN-PN 13-2546877-003
a	Plan name	AMPACET CORPORATION EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor	AMPACET CORP.	c EIN-PN 13-2546877-002
a	Plan name	ANCHORAGE FRACTURE AND ORTHOPEDIC CLINIC, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor	ANCHORAGE FRACTURE AND ORTHOPEDIC CLINIC, P.C.	c EIN-PN 20-2070854-002
a	Plan name	ANCIRA ENTERPRISES EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	ANCIRA ENTERPRISES	c EIN-PN 74-2299389-001
a	Plan name	ANDERSON ERICKSON EMPLOYEES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	ANDERSON ERICKSON DAIRY CO	c EIN-PN 42-0115611-003
a	Plan name	ANDEX INDUSTRIES INC & ANTHONY & CO. RETIREMENT PLAN	
b	Name of plan sponsor	ANDEX INDUSTRIES, INC.	c EIN-PN 38-1652680-001
a	Plan name	ANIAK LIGHT & POWER COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	ANIAK LIGHT & POWER COMPANY, INC.	c EIN-PN 92-0072174-002
a	Plan name	ANNUITY FUND OF THE POLICE BENEVOLENT ASSOCIATION OF THE CITY OF NEW YORK	
b	Name of plan sponsor	PATROLMENS BENEVOLENT ASSOCIATION	c EIN-PN 13-6302673-999
a	Plan name	ANTHONYS RESTAURANTS PROFIT SHARING PLAN	
b	Name of plan sponsor	ANTHONYS	c EIN-PN 91-0889684-001
a	Plan name	APEX COLOR 401(K) PLAN	
b	Name of plan sponsor	APEX COLOR	c EIN-PN 59-1346610-001
a	Plan name	AQUATEX WATER CONDITIONING, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	AQUATEX WATER CONDITIONING INC	c EIN-PN 76-0110237-001

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	ARGOS USA RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ARGOS USA	c EIN-PN 98-0469794-001
a	Plan name	ARGOS USA ROBERTA PLANT 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	ARGOS USA, LLC	c EIN-PN 45-2429726-003
a	Plan name	ARROW SHED, LLC HOURLY EMPLOYEES PENSION PLAN	
b	Name of plan sponsor	ARROW SHED, LLC	c EIN-PN 27-1885904-001
a	Plan name	ASBESTOS WORKER SYRACUSE ANNUITY FUND	
b	Name of plan sponsor	ASBESTOS WORKERS SYRACUSE ANNUITY FUND OFFICE	c EIN-PN 16-1298413-002
a	Plan name	ASSOCIATION OF THE UNITED STATES ARMY, INC. RETIREMENT INCOME PLAN	
b	Name of plan sponsor	ASSOCIATION OF THE UNITED STATES ARMY, INC.	c EIN-PN 53-0193361-001
a	Plan name	ASTRO 401(K) PLAN	
b	Name of plan sponsor	AMERICAN SOCIETY FOR RADIATION ONCOLOGY	c EIN-PN 42-0943164-001
a	Plan name	ATEK COMPANIES SAVINGS PLAN	
b	Name of plan sponsor	ATEK COMPANIES, INC.	c EIN-PN 47-5196837-003
a	Plan name	AURORA WORLD, INC. 401(K) PLAN	
b	Name of plan sponsor	AURORA WORLD, INC.	c EIN-PN 95-4353244-001
a	Plan name	AZTEC IMPORTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AZTEC IMPORTS, INC.	c EIN-PN 34-1322648-001
a	Plan name	B.V. HEDRICK GRAVEL & SAND COMPANY SALARY DEFERRAL & PROFIT SHARING PLAN	
b	Name of plan sponsor	BV HEDRICK GRAVEL & SAND COMPANY	c EIN-PN 56-0257665-002
a	Plan name	BAYLEY CONSTRUCTION PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	BAYLEY CONSTRUCTION	c EIN-PN 91-1764930-001
a	Plan name	BEKAERTDESLEE USA INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BEKAERTDESLEE USA INC.	c EIN-PN 13-4252286-001

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	BEL BRANDS USA 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	BEL BRANDS USA	c EIN-PN 22-2019556-001
a	Plan name	BELL-CARTER FOODS, LLC EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	BELL-CARTER FOODS, INC.	c EIN-PN 94-1338890-002
a	Plan name	BENECARD 401(K) PLAN	
b	Name of plan sponsor	BENECARD SERVICES, INC.	c EIN-PN 22-2998772-001
a	Plan name	BILTMORE WORKFORCE MANAGEMENT 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BILTMORE WORKFORCE MANAGEMENT, INC.	c EIN-PN 47-3797737-001
a	Plan name	BOH COMPANIES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BOH COMPANY, LLC	c EIN-PN 72-1277309-001
a	Plan name	BONTEN MEDIA GROUP INC. EMPLOYEE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SINCLAIR BROADCAST GROUP, INC.	c EIN-PN 52-1494660-005
a	Plan name	BORDER STATES ELECTRIC SUPPLY 401(K) PLAN	
b	Name of plan sponsor	BORDER STATES INDUSTRIES, INC.	c EIN-PN 45-0275004-003
a	Plan name	BRADLEY DIXIE COMPANIES RETIREMENT PLAN	
b	Name of plan sponsor	BRADLEY DIXIE COMPANIES	c EIN-PN 58-0958295-001
a	Plan name	BRAUNSTEIN & STEWART PROFIT SHARING PLAN	
b	Name of plan sponsor	BRAUNSTEIN & STEWART A PROF CORP	c EIN-PN 95-2690123-001
a	Plan name	BRESCOME BARTON, INC. RETIREMENT & SAVINGS PLAN FOR LIQUOR SALES UNION LOCAL 2-D	
b	Name of plan sponsor	BRESCOME BARTON, INC.	c EIN-PN 06-0676916-001
a	Plan name	BRICKLAYERS AND TROWEL TRADES INTERNATIONAL RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	BRICKLAYERS AND TROWEL TRADES INTERNATIONAL PENSION FUND	c EIN-PN 52-6127746-003
a	Plan name	BROOKS EQUIPMENT COMPANY 401(K) PLAN	
b	Name of plan sponsor	BROOKS EQUIPMENT COMPANY, INC.	c EIN-PN 88-0161234-002

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 BUCK CONSULTANTS RETIREMENT PLAN	
b	Name of plan sponsor BUCK GLOBAL, LLC	c EIN-PN 13-3954297-003
a	Plan name BUFFALO CRUSHED STONE PENSION PLAN FOR HOURLY RATED EMPLOYEES	
b	Name of plan sponsor NEW ENTERPRISE STONE & LIME CO., INC.	c EIN-PN 23-1374051-001
a	Plan name BUILDERS PRODUCTS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor BUILDERS PRODUCTS INC	c EIN-PN 74-1227450-001
a	Plan name BULLDOG VENTURES, LTD. 401(K) PLAN	
b	Name of plan sponsor EMPIRE MERCHANTS, LLC	c EIN-PN 20-5779029-001
a	Plan name BUZZI UNICEM USA INC. RETIREMENT SAVINGS PLAN FOR HOURLY EMPLOYEES	
b	Name of plan sponsor BUZZI UNICEM USA INC.	c EIN-PN 23-3022369-020
a	Plan name BUZZI UNICEM USA INC. RETIREMENT SAVINGS PLAN FOR SALARIED EMPLOYEES	
b	Name of plan sponsor BUZZI UNICEM USA INC.	c EIN-PN 23-3022369-030
a	Plan name C.D. MOODY CONSTRUCTION COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor C.D. MOODY CONSTRUCTION COMPANY, INC.	c EIN-PN 58-1778748-001
a	Plan name CALBAG METALS COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor CALBAG METALS COMPANY	c EIN-PN 93-0466199-001
a	Plan name CALIENTE CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor CALIENTE CONSTRUCTION, INC.	c EIN-PN 86-0697201-001
a	Plan name CALIFORNIA DENTAL ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor CALIFORNIA DENTAL ASSOCIATION	c EIN-PN 95-2822367-002
a	Plan name CAMCO MANUFACTURING, LLC 401(K) PLAN	
b	Name of plan sponsor YELLOWSTONE HOLDINGS GROUP, LLC	c EIN-PN 87-2200548-001
a	Plan name CARDINAL RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CARDINAL GLASS INDUSTRIES, INC.	c EIN-PN 41-1989305-002

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 CARLISLE FOODSERVICE PRODUCTS INCORPORATED 401(K) PLAN	
b	Name of plan sponsor CARLISLE FOODSERVICE PRODUCTS INC.	c EIN-PN 31-1075965-002
a	Plan name CARLISLE, LLC EMPLOYEE INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor CARLISLE COMPANIES, INC.	c EIN-PN 23-0457510-019
a	Plan name CARMAX, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CARMAX, INC.	c EIN-PN 54-1821055-003
a	Plan name CAROLINA BIOLOGICAL SUPPLY COMPANY SAVINGS AND PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor CAROLINA BIO SUPPLY	c EIN-PN 56-0364367-001
a	Plan name CAROLINA ICE PALACE, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor CAROLINA ICE PALACE, LLC	c EIN-PN 58-2317013-001
a	Plan name CARROLL COMPANIES, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor CARROLL COMPANIES, INC.	c EIN-PN 56-1087247-001
a	Plan name CASE FOODS, INC. 401(K) PLAN	
b	Name of plan sponsor CASE FOODS, INC.	c EIN-PN 52-1702529-001
a	Plan name CASH-WA DISTRIBUTING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CASH WA DISTRIBUTING COMPANY OF KEA	c EIN-PN 47-0499172-002
a	Plan name CCP NORTH AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor CCP NORTH AMERICA, INC.	c EIN-PN 98-0512710-001
a	Plan name CCWD OPEB TRUST	
b	Name of plan sponsor CONTRA COSTA WATER DISTRICT	c EIN-PN 47-6386712-999
a	Plan name CCWD RET PLAN-MAP ACCOUNT	
b	Name of plan sponsor CONTRA COSTA WATER DISTRICT	c EIN-PN 94-6000489-999
a	Plan name CEC MOTOR & UTILITY SERVICES, LLC. 401(K) PLAN	
b	Name of plan sponsor CEC MOTOR & UTILITY SERVICES, LLC..	c EIN-PN 27-5084842-001

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	CEDAR RIVER CONTRACTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CEDAR RIVER CONTRACTING	c EIN-PN 42-1433596-001
a	Plan name	CENTENNIAL PLASTICS, INC. RETIREMENT PLAN	
b	Name of plan sponsor	CENTENNIAL PLASTICS, INC	c EIN-PN 47-0841062-001
a	Plan name	CENTURY DIRECT, LLC RETIREMENT PLAN	
b	Name of plan sponsor	CENTURY DIRECT, LLC	c EIN-PN 11-3583330-002
a	Plan name	CHARLOTTE PIPE & FOUNDRY COMPANY 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CHARLOTTE PIPE & FOUNDRY CO.	c EIN-PN 56-0174030-002
a	Plan name	CHARLOTTE REGIONAL BUSINESS ALLIANCE RETIREMENT PLAN	
b	Name of plan sponsor	CHARLOTTE REGIONAL BUSINESS ALLIANCE	c EIN-PN 56-0173610-002
a	Plan name	CHARTER PROPERTIES, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	CHARTER PROPERTIES, INC.	c EIN-PN 56-0953735-002
a	Plan name	CHERRINGTON, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	CHERRINGTON INC.	c EIN-PN 87-0383997-001
a	Plan name	CHESTER COUNTY NATURAL GAS AUTHORITY DEFINED BENEFIT PENSION PLAN	
b	Name of plan sponsor	CHESTER COUNTY NATURAL GAS AUTHORITY	c EIN-PN 57-6008075-999
a	Plan name	CHEVRON FEDERAL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor	CHEVRON FEDERAL CREDIT UNION	c EIN-PN 94-0878385-003
a	Plan name	CITATION BOX AND PAPER CO. PROFIT SHARING PLAN AND RETIREMENT TRUST	
b	Name of plan sponsor	CITATION BOX & PAPER CO.	c EIN-PN 36-2201785-001
a	Plan name	CITY OF ARLINGTON PST/DIP	
b	Name of plan sponsor	CITY OF ARLINGTON	c EIN-PN 75-6000450-999
a	Plan name	CITY OF DELANO PENSION	
b	Name of plan sponsor	CITY OF DELANO	c EIN-PN 95-6000702-999

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 LANSING DC PLAN	
b	Name of plan sponsor	CITY OF LANSING	c EIN-PN 38-6004628-999
a	Plan name	CITY OF MARQUETTE POLICE & FIRE	
b	Name of plan sponsor	CITY OF MARQUETTE	c EIN-PN 38-6113682-999
a	Plan name	CITY OF SAN DIEGO 2009 401(A) PLAN	
b	Name of plan sponsor	CITY OF SAN DIEGO, SPSP/401(K) TRUSTEE BOARD	c EIN-PN 95-6000776-999
a	Plan name	CITY OF SPRINGFIELD, OREGON RETIREMENT PLAN	
b	Name of plan sponsor	CITY OF SPRINGFIELD	c EIN-PN 93-6002558-999
a	Plan name	CITY VENTURES COMMUNITIES, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CITY VENTURES COMMUNITIES, LLC	c EIN-PN 90-0609362-001
a	Plan name	CKE SAVINGS PLAN	
b	Name of plan sponsor	CKE RESTAURANTS HOLDINGS, INC.	c EIN-PN 90-0941003-001
a	Plan name	CLARK NEXSEN, INC. 401(K) PLAN	
b	Name of plan sponsor	CLARK, NEXSEN, OWEN, BARBIERI & GIBSON	c EIN-PN 54-0613222-001
a	Plan name	CLOUD CONSTRUCTION CO., INC. 401(K) PLAN	
b	Name of plan sponsor	CLOUD CONSTRUCTION COMPANY, INC.	c EIN-PN 74-0935687-001
a	Plan name	CNPPD EMPLOYEES RETIREMENT PLAN DB	
b	Name of plan sponsor	CENTRAL NEBRASKA PUBLIC POWER DISTRICT	c EIN-PN 47-6000076-999
a	Plan name	COASTAL CHILDRENS CLINIC, P.A. PROFIT SHARING PLAN	
b	Name of plan sponsor	COASTAL CHILDRENS CLINIC, P.A.	c EIN-PN 74-1662481-002
a	Plan name	COLUMBIA CORRUGATED BOX CO., INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	COLUMBIA CORRUGATED BOX	c EIN-PN 93-0565177-002
a	Plan name	COMMANDER, NAVY INSTALLATIONS COMMAND NON-APPROPRIATED FUND 401(K) SAVINGS PLAN	
b	Name of plan sponsor	COMMANDER, NAVY INSTALLATIONS COMMAND	c EIN-PN 52-0813349-999

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	COMMERCIAL CREDIT GROUP INC. 401(K) PLAN	
b	Name of plan sponsor	COMMERCIAL CREDIT GROUP INC.	c EIN-PN 20-1409176-001
a	Plan name	COMMERCIAL TIRE, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	COMMERCIAL TIRE, INC.	c EIN-PN 82-0289818-001
a	Plan name	COMPREHENSIVE DECOMMISSIONING INTERNATIONAL 401(K) PLAN	
b	Name of plan sponsor	COMPREHENSIVE DECOMMISSIONING INTERNATIONAL 401(K) PLA	c EIN-PN 83-0628420-001
a	Plan name	CONNELL RESOURCES, INC. 401(K) PS PLAN	
b	Name of plan sponsor	CONNELL RESOURCES, INC. 401(K) PS PLAN	c EIN-PN 84-0588541-001
a	Plan name	CONNER INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CONNER INDUSTRIES, INC.	c EIN-PN 75-1787238-001
a	Plan name	CORNHUSKER INTL TRUCKS, INC. 401(K) PLAN	
b	Name of plan sponsor	CORNHUSKER INTL TRUCKS, INC. 401(K) PLAN	c EIN-PN 47-0604747-001
a	Plan name	CORPUS CHRISTI REGIONAL TRANSPORTATION AUTHORITY DEFINED BENEFIT PLAN & TRUST	
b	Name of plan sponsor	REGIONAL TRANSPORTATION AUTHORITY	c EIN-PN 74-2390259-999
a	Plan name	CORVESTA, INC. NEW COMPARABILITY CASH OR DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	CORVESTA, INC.	c EIN-PN 02-0594515-001
a	Plan name	COVENANT CARE 401(K) PLAN	
b	Name of plan sponsor	COVENANT CARE CALIFORNIA INC	c EIN-PN 33-0631540-001
a	Plan name	COVINA VALLEY UROLOGIC MEDICAL GROUP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	COVINA VALLEY UROLOGIC MEDICAL GROUP, INC.	c EIN-PN 54-2122693-001
a	Plan name	COWANGATES, PC EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor	COWANGATES, PC	c EIN-PN 54-1398928-003
a	Plan name	CP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SOO LINE RAILROAD COMPANY	c EIN-PN 41-6009079-002

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	CREATIVE TOUCH RETIREMENT PLAN	
b	Name of plan sponsor	THE CREATIVE TOUCH, INC	c EIN-PN 23-1905173-001
a	Plan name	CREGGER CO., INC 401(K)	
b	Name of plan sponsor	CREGGER COMPANY, INC.	c EIN-PN 57-0673420-001
a	Plan name	CRESCENT ELECTRIC SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor	CRESCENT ELECTRIC SUPPLY COMPANY	c EIN-PN 42-0201220-002
a	Plan name	CROPLIFE AMERICA 401(K) PLAN PLUS	
b	Name of plan sponsor	CROPLIFE AMERICA	c EIN-PN 53-0190293-002
a	Plan name	CROSBY TUGS 401(K) PLAN	
b	Name of plan sponsor	CROSBY TUGS, LLC	c EIN-PN 72-0914194-001
a	Plan name	CUMBERLAND GRAVEL AND SAND COMPANY SALARY DEFERRAL AND PROFIT SHARING PLAN	
b	Name of plan sponsor	BV HEDRICK GRAVEL & SAND COMPANY	c EIN-PN 56-0513208-002
a	Plan name	CYPRESS LAWN CEMETERY ASSN RETIREMENT PLAN	
b	Name of plan sponsor	CYPRESS LAWN CEMETERY ASSOCIATION	c EIN-PN 94-0416370-001
a	Plan name	D & C EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	DILLON SUPPLY COMPANY	c EIN-PN 56-0201300-002
a	Plan name	D.P. NICOLI, INC.	
b	Name of plan sponsor	D.P. NICOLI, INC.	c EIN-PN 93-0820835-002
a	Plan name	DAKOTA SUPPLY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	DAKOTA SUPPLY GROUP, INC.	c EIN-PN 45-0421041-002
a	Plan name	DAKTRONICS, INC. 401(K) PLAN	
b	Name of plan sponsor	DAKTRONICS INC & SUBSIDIARIES	c EIN-PN 46-0306862-002
a	Plan name	DANIELS CADILLAC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DANIELS BMW	c EIN-PN 23-1601170-001

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 DAVIS, BROWN, KOEHN, SHORS & ROBERTS P.C. RETIREMENT PLAN	
b	Name of plan sponsor DAVIS, BROWN, KOEHN, SHORS & ROBERTS	c EIN-PN 42-1343884-001
a	Plan name DECKER TRUCK LINE, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor DECKER TRUCK LINE INC	c EIN-PN 42-0860957-001
a	Plan name DEFERRED SALARY PROFIT SHARING THRIFT PLAN FOR EMPLOYEES OF SCIENCE & TECHNOLOGY	
b	Name of plan sponsor SCIENCE & TECHNOLOGY CORPORATION	c EIN-PN 54-1144165-001
a	Plan name DEFINED BENEFIT PLAN FOR UNITED WAY OF NEW YORK CITY	
b	Name of plan sponsor UNITED WAY OF NEW YORK CITY	c EIN-PN 13-2617681-001
a	Plan name DEGENKOLB ENGINEERS PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor DEGENKOLB ENGINEERS	c EIN-PN 94-1432527-002
a	Plan name DELTA LIFE INSURANCE COMPANY 401(K) PLAN	
b	Name of plan sponsor DELTA LIFE INSURANCE COMPANY	c EIN-PN 58-0838961-001
a	Plan name DELTAHAWK ENGINES, INC. 401(K) PS AND TRUST	
b	Name of plan sponsor DELTAHAWK ENGINES, INC. 401(K) PS AND TRUST	c EIN-PN 20-5161606-001
a	Plan name DETROIT ENTERTAINMENT LLC PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor DETROIT ENTERTAINMENT, L.L.C.	c EIN-PN 38-3362971-001
a	Plan name DEWBERRY 401(K)/PROFIT SHARING PLAN	
b	Name of plan sponsor DEWBERRY	c EIN-PN 13-0746510-001
a	Plan name DIAGNOSTIC PHYSICIANS GROUP PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DIAGNOSTIC PHYSICIANS GROUP PC	c EIN-PN 47-2261224-001
a	Plan name DICON FIBEROPTICS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor DICON FIBEROPTICS, INC.	c EIN-PN 94-3006185-001
a	Plan name DIMENSION-POLYANT, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor GAMMA HOLDING USA	c EIN-PN 06-1310091-001

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	DIVERSIFIED ADJUSTMENT SERVICE 401(K) PLAN	
b	Name of plan sponsor	DIVERSIFIED ADJUSTMENT SERVICE, INC.	c EIN-PN 41-1389763-001
a	Plan name	DNA GROUP, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	DNA GROUP, INC.	c EIN-PN 22-2834616-001
a	Plan name	DOBBS COMPANIES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PREMIER DISTRIBUTING COMPANY	c EIN-PN 85-0301940-001
a	Plan name	DODSON BROS. EXTERMINATING CO., INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	DODSON BROTHERS EXTERMINATING CO., INC.	c EIN-PN 54-0624996-001
a	Plan name	DOT HOLDINGS CO AND 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DOT HOLDINGS CO	c EIN-PN 82-3213853-003
a	Plan name	DOUGHERTY COUNTY DEFINED BENEFIT RETIREMENT PLAN	
b	Name of plan sponsor	DOUGHERTY COUNTY	c EIN-PN 58-6000817-999
a	Plan name	E A SWEEN COMPANY EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	E.A. SWEEN COMPANY	c EIN-PN 41-0878603-001
a	Plan name	E.F. BELK & SON, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	E.F. BELK & SON, INC.	c EIN-PN 56-0986325-001
a	Plan name	EAR, NOSE & THROAT SPECIALTYCARE OF MINNESOTA, P.A. SECTION 401(K) PLAN AND TRUST	
b	Name of plan sponsor	ENT SPECIALTYCARE OF MN, P.A.	c EIN-PN 41-0951475-001
a	Plan name	ECM INDUSTRIES, LLC 401(K) PLAN	
b	Name of plan sponsor	ECM INDUSTRIES, LLC	c EIN-PN 83-0845689-001
a	Plan name	ECMD, INC. PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	ECMD, INC.	c EIN-PN 56-1318735-001
a	Plan name	ELECTRO MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	ELECTRO MANAGEMENT CORP	c EIN-PN 42-1197181-002

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 EMERALD PACKAGING, INC. EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EMERALD PACKAGING, INC.	c EIN-PN 94-1557703-002
a	Plan name EMPIRE MERCHANTS, LLC 401(K) PLAN	
b	Name of plan sponsor EMPIRE MERCHANTS, LLC	c EIN-PN 20-5431037-001
a	Plan name EMPLOYEES 401(K) PLAN OF NORTH CAROLINA FARM BUREAU MUTUAL INSURANCE COMPANY, INC.	
b	Name of plan sponsor NORTH CAROLINA FARM BUREAU MUTUAL INSURANCE COMPANY	c EIN-PN 56-0586973-002
a	Plan name EMPLOYEES' 401(K) PLAN OF RGC RESOURCES, INC.	
b	Name of plan sponsor RGC RESOURCES, INC.	c EIN-PN 54-1909697-001
a	Plan name EMPLOYEES 401(K) PLAN OF THE NORTH CAROLINA FARM BUREAU FEDERATION, INC.	
b	Name of plan sponsor NORTH CAROLINA FARM BUREAU FEDERATION, INC.	c EIN-PN 56-0340590-002
a	Plan name EMPLOYEES 401(K) RETIREMENT SAVINGS PLAN OF U.S. AIR CONDITIONING DISTRIBUTORS	
b	Name of plan sponsor US AIRCONDITIONING DISTRIBUTORS, LLC	c EIN-PN 26-0852920-001
a	Plan name EMS-CHEMIE (NORTH AMERICA) INC. RETIREMENT PLAN	
b	Name of plan sponsor EMS-CHEMIE NORTH AMERICA INC.	c EIN-PN 57-0703806-003
a	Plan name ENGINE POWER SOURCE, INC. EMPLOYEES' RETIREMENT SAVINGS PLAN AND TRUST	
b	Name of plan sponsor ENGINE POWER SOURCE, INC.	c EIN-PN 56-1527828-001
a	Plan name EPCOR WATER (USA), INC. PENSION PLAN	
b	Name of plan sponsor EPCOR WATER (USA), INC.	c EIN-PN 46-0525312-001
a	Plan name ERICKSON COMMUNITY 401(K) PLAN	
b	Name of plan sponsor ERICKSON COMMUNITY	c EIN-PN 52-1874053-002
a	Plan name ERSTAD & RIEMER, P.A. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ERSTAD & RIEMER P A	c EIN-PN 41-1673278-001
a	Plan name EYEBOBS, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor EYEBOBS LLC	c EIN-PN 47-3286642-001

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 FABIAN VANCOTT RETIREMENT PLAN & TRUST	
b	Name of plan sponsor FABIAN & CLENDENIN	c EIN-PN 87-0373839-001
a	Plan name FAMILY CARE PARTNERS OF NORTHEAST FLORIDA, LLC EMPLOYEES SVGS AND RET PLAN	
b	Name of plan sponsor FAMILY CARE PARTNERS OF NORTHEAST FLORIDA	c EIN-PN 54-2113873-001
a	Plan name FARIBAULT FOODS, INC. PENSION PLAN	
b	Name of plan sponsor FARIBAULT FOODS, INC.	c EIN-PN 41-0246215-001
a	Plan name FARM & CREDIT SERVICE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor FARM & CREDIT SERVICE, INC.	c EIN-PN 81-0454354-001
a	Plan name FGI 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor FGI INDUSTRIES INC.	c EIN-PN 22-2860846-001
a	Plan name FIRST BANCORP, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor FIRST BANCORP, INC.	c EIN-PN 61-1030770-003
a	Plan name FIRSTSTREET FOR BOOMERS AND BEYOND, INC.	
b	Name of plan sponsor FIRSTSTREET FOR BOOMERS AND BEYOND, INC. 401(K) PLAN	c EIN-PN 62-1314909-001
a	Plan name FKC INTERNATIONAL INC. DEFINED BENEFIT PENSION PLAN	
b	Name of plan sponsor FKC INTERNATIONAL INC.	c EIN-PN 20-0222244-001
a	Plan name FLORIDA PLYWOODS INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor FLORIDA PLYWOODS, INC.	c EIN-PN 59-0762651-001
a	Plan name FLYNN RESTAURANT GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor APPLE AMERICAN GROUP	c EIN-PN 45-1734458-001
a	Plan name FORD METER BOX COMPANY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor FORD METER BOX COMPANY, INC.	c EIN-PN 35-0315220-003
a	Plan name FORSYTH COUNTY DEFINED BENEFIT PLAN	
b	Name of plan sponsor FORSYTH COUNTY GOVERNMENT	c EIN-PN 58-6000828-999

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	FRONT PORCH RETIREMENT PLAN	
b	Name of plan sponsor	FRONT PORCH COMMUNITIES AND SERVICES	c EIN-PN 95-4538269-001
a	Plan name	FYFFES NORTH AMERICA INC. CASH OR DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	FYFFES NORTH AMERICA INC	c EIN-PN 59-1304116-001
a	Plan name	G.E. HUEBNER CONCRETE CO. PROFIT SHARING PLAN	
b	Name of plan sponsor	G.E. HUEBNER CONCRETE, INC.	c EIN-PN 74-1926465-001
a	Plan name	GAMING AND LEISURE PROPERTIES, INC. 401(K) PLAN	
b	Name of plan sponsor	PENN NATIONAL GAMING, INC.	c EIN-PN 46-2116489-001
a	Plan name	GARY M SCHWARZ, DDS MSD PA, 401(K) PSP	
b	Name of plan sponsor	GARY M SCHWARTZ, DDS, MSD, PA	c EIN-PN 20-0280987-001
a	Plan name	GCHI RETIREMENT PLAN	
b	Name of plan sponsor	GIANT CEMENT HOLDING, INC.	c EIN-PN 57-0997411-006
a	Plan name	GEOLOGICS CORPORATION 401L(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GEOLOGICS CORPORATION	c EIN-PN 52-1638914-001
a	Plan name	GEORGE S. AND DOLORES DORE ECCLES FOUNDATION DEFINED BENEFIT PENSION PLAN	
b	Name of plan sponsor	GEORGE S. AND DOLORES DORE ECCLES FOUNDATION	c EIN-PN 87-6118245-001
a	Plan name	GER INDUSTRIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	GER INDUSTRIES, INC.	c EIN-PN 13-2793835-001
a	Plan name	GESS CO. EMPLOYEES THRIFT PLAN	
b	Name of plan sponsor	GESS CO.	c EIN-PN 20-2003430-002
a	Plan name	GLEN DIVE MEDICAL CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GLEN DIVE MEDICAL CENTER	c EIN-PN 81-6016016-002
a	Plan name	GMI 401(K) PLAN	
b	Name of plan sponsor	MSCI INC.	c EIN-PN 13-4038723-004

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	GOODIN COMPANY PROFIT SHARING THRIFT PLAN	
b Name of plan sponsor	GOODIN COMPANY	c EIN-PN 41-0281472-001
a Plan name	GRAHAM HOSPITAL THRIFT AND SAVINGS PLAN	
b Name of plan sponsor	GRAHAM HOSPITAL	c EIN-PN 37-0673506-002
a Plan name	GRAND ISLAND CLINIC, INC. PROFIT SHARING PLAN AND TRUST	
b Name of plan sponsor	GRAND ISLAND CLINIC INC	c EIN-PN 47-0176330-001
a Plan name	GREAT LAKES RUBBER AND SUPPLY, INC. 401(K) SAVINGS PLAN	
b Name of plan sponsor	GREAT LAKES RUBBER & SUPPLY, INC.	c EIN-PN 39-1743065-001
a Plan name	GREINER BIO-ONE NORTH AMERICA, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b Name of plan sponsor	GREINER BIO-ONE NORTH AMERICA, INC.	c EIN-PN 52-2041193-001
a Plan name	GROUP USA, INC. 401(K) PLAN	
b Name of plan sponsor	GROUP USA, INC.	c EIN-PN 22-2702612-001
a Plan name	GUNNISON FIREMENS PENSION FUND	
b Name of plan sponsor	CITY OF GUNNISON	c EIN-PN 84-6000673-999
a Plan name	H W CULP LUMBER CO. INC 401K	
b Name of plan sponsor	H W CULP LUMBER COMPANY	c EIN-PN 56-0193850-002
a Plan name	HAERING PRECISION 401K RETIREMENT PLAN	
b Name of plan sponsor	HAERING PRECISION	c EIN-PN 47-2965416-001
a Plan name	HALLSTAR SERVICES CORP INCENTIVE SAVINGS PLAN	
b Name of plan sponsor	HALLSTAR SERVICES CORPORATION	c EIN-PN 20-0924709-004
a Plan name	HALLSTAR SERVICES CORP. HOURLY EMPLOYEES PENSION PLAN	
b Name of plan sponsor	HALLSTAR SERVICES CORPORATION	c EIN-PN 20-0924709-002
a Plan name	HALLSTAR SERVICES CORPORATION RETIREMENT INCOME PLAN	
b Name of plan sponsor	HALLSTAR SERVICES CORPORATION	c EIN-PN 20-0924709-003

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	HANFORD MULTI-EMPLOYER PENSION PLAN	
b	Name of plan sponsor	HANFORD	c EIN-PN 90-0501441-003
a	Plan name	HARRISON INTERESTS, LTD. RETIREMENT PLAN	
b	Name of plan sponsor	HARRISON INTERESTS, LTD.	c EIN-PN 74-2062734-001
a	Plan name	HARRISON, MORELAND, WEBBER & SIMPLOT, P.C. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HARRISON MORELAND, WEBBER & SIMPLOT PC	c EIN-PN 42-1177483-002
a	Plan name	HARVEY COMPANIES PROFIT SHARING PLAN	
b	Name of plan sponsor	TIDEWATER TRANSIT CO. INC.	c EIN-PN 56-0515560-002
a	Plan name	HASTINGS FIREFIGHTER PEN - PRE 1984	
b	Name of plan sponsor	CITY OF HASTINGS, NE	c EIN-PN 47-6006221-999
a	Plan name	HASTINGS POLICE PRE-1984 PEN TRUST	
b	Name of plan sponsor	CITY OF HASTINGS, NE	c EIN-PN 47-6006221-999
a	Plan name	HAZELDEN BETTY FORD FOUNDATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HAZELDEN FOUNDATION	c EIN-PN 41-0682405-001
a	Plan name	HAZEN RESEARCH, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HAZEN RESEARCH, INC.	c EIN-PN 84-0511412-002
a	Plan name	HEALTH PLAN OF SAN MATEO D/B PL DB	
b	Name of plan sponsor	HEALTH PLAN OF SAN MATEO	c EIN-PN 94-3020555-999
a	Plan name	HEALTH TRUST 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	CARE CAPITAL PROPERTIES, INC.	c EIN-PN 30-1006088-001
a	Plan name	HEARTHSIDE BANK CORPORATION 401(K)/EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	HEARTHSIDE BANK	c EIN-PN 61-0305840-002
a	Plan name	HENRY MODELL & CO., INC. EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	MODELLS, INC.	c EIN-PN 13-5518048-001

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 HERBERT BRAUNSTEIN MD & ROBERT A. STEWART MD, INC. DBA ARROWHEAD PATHOLOGY MEDICAL GROUP MONEY PURCHASE PENSION PLAN	
b	Name of plan sponsor ARROWHEAD PATHOLOGY MEDICAL GROUP	c EIN-PN 95-2690123-002
a	Plan name HERCULES INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor HERCULES INDUSTRIES, INC.	c EIN-PN 84-0516481-002
a	Plan name HG 401(K) PLAN	
b	Name of plan sponsor HANKEY INVESTMENT COMPANY LP	c EIN-PN 95-4361557-001
a	Plan name HILLSIDE WAREHOUSE & TRUCKING CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HILLSIDE WAREHOUSE & TRUCKING CO INC	c EIN-PN 22-2063735-001
a	Plan name HOLES OF SAN ANTONIO, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HOLES OF SAN ANTONIO, INC.	c EIN-PN 74-2113095-001
a	Plan name HOLTEC INTERNATIONAL PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor HOLTEC INTERNATIONAL	c EIN-PN 20-4598433-001
a	Plan name HOME HEALTH RESOURCES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor HOME HEALTH RESOURCES, INC.	c EIN-PN 76-0494537-001
a	Plan name HORTON HOLDING, INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor HORTON HOLDING, INC.	c EIN-PN 41-0713535-001
a	Plan name HOUSTONIAN 401(K) PLAN	
b	Name of plan sponsor HOUSTONIAN CAMPUS LTD	c EIN-PN 26-0466230-001
a	Plan name HUNTINGTON INGALLS INDUSTRIES SAVINGS PLAN	
b	Name of plan sponsor HUNTINGTON INGALLS INDUSTRIES, INC	c EIN-PN 90-0607005-011
a	Plan name HUSQVARNA PENSION PLAN	
b	Name of plan sponsor HUSQVARNA CONSUMER OUTDOOR PRODUCTS N.A., INC.	c EIN-PN 20-3600732-003
a	Plan name IDENTISYS INCORPORATED 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor IDENTISYS INC.	c EIN-PN 41-1938567-001

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	INDUSTRY EMPLOYEES INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor	INDUSTRY EMPLOYEES INCENTIVE SAVING	c EIN-PN 95-3075353-333
a	Plan name	INGLES MARKETS, INCORPORATED INVESTMENT/PROFIT SHARING PLAN	
b	Name of plan sponsor	INGLES MARKETS, INCORPORATED	c EIN-PN 56-0846267-001
a	Plan name	INGRAM WALLIS & COMPANY EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor	INGRAM WALLIS & COMPANY	c EIN-PN 74-2073801-002
a	Plan name	INTAT PRECISION, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	INTAT PRECISION INC.	c EIN-PN 58-1773607-002
a	Plan name	INVESTOR FORCE, INC. 401(K) PLAN	
b	Name of plan sponsor	MSCI INC.	c EIN-PN 13-4038723-002
a	Plan name	IOWA BANKERS INSURANCE AND SERVICES, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor	IOWA BANKERS INSURANCE & SERVICES I	c EIN-PN 42-0984998-002
a	Plan name	IPR HEALTHCARE SYSTEM, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	IPR HEALTHCARE SYSTEM, INC	c EIN-PN 76-0492632-001
a	Plan name	ISPC, P.A. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	ISPC, P.A.	c EIN-PN 36-4510829-001
a	Plan name	J. S. HOVNIANIAN & SONS, LLC 401(K) PLAN	
b	Name of plan sponsor	J. S. HOVNIANIAN & SONS, LLC	c EIN-PN 22-3842774-001
a	Plan name	JACK BUELL EMPLOYEE BENEFIT TRUST	
b	Name of plan sponsor	JMF COMPANY, INC. DBA JACK BUELL TRUCKING	c EIN-PN 82-0299482-001
a	Plan name	JAMES LEARNER DO PLLC 401K PLAN	
b	Name of plan sponsor	JAMES LEARNER DO PLLC	c EIN-PN 36-9502293-001
a	Plan name	JAMUL INDIAN VILLAGE DEVELOPMENT CORPORATION 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	JAMUL INDIAN VILLAGE DEVELOPMENT CORPORATION	c EIN-PN 47-5387551-001

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 JOHANNA BEVERAGE CO., LLC SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor JOHANNA FOODS, INC.	c EIN-PN 20-8256706-001
a	Plan name JOHANNA FOODS, INC. LACTO DIVISION SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor JOHANNA FOODS, INC.	c EIN-PN 22-2973062-006
a	Plan name JOHN A. KNUTSON & COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOHN A. KNUTSON & COMPANY	c EIN-PN 41-0879566-001
a	Plan name JOHN C. ERNST & CO., INC. SALARY SAVINGS PLAN	
b	Name of plan sponsor JOHN C. ERNST & CO., INC.	c EIN-PN 22-1867091-001
a	Plan name JOHN HENRY FOSTER MINNESOTA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JOHN HENRY FOSTER MINNESOTA, INC.	c EIN-PN 41-1464257-001
a	Plan name JOHNSON BROTHERS 401(K) PLAN	
b	Name of plan sponsor JOHNSON BROTHERS LIQUOR COMPANY	c EIN-PN 41-0810551-001
a	Plan name JW MCCLENAHAN CO. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor JW MCCLENAHAN	c EIN-PN 51-0649863-001
a	Plan name KAMPGROUNDS OF AMERICA, INC. SALARY REDUCTION PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KAMPGROUNDS OF AMERICA INC	c EIN-PN 81-0292967-005
a	Plan name KENNEDY AND GRAVEN CHARTERED 401(K) SAVINGS PLAN	
b	Name of plan sponsor KENNEDY AND GRAVEN CHARTERED	c EIN-PN 41-1225694-008
a	Plan name KENOSHA BEEF INTERNATIONAL, LTD. EMPLOYEES PENSION PLAN	
b	Name of plan sponsor KENOSHA BEEF INTERNATIONAL, LTD.	c EIN-PN 39-0994777-003
a	Plan name KENOSHA BEEF INTERNATIONAL, LTD. EMPLOYEES' PENSION PLAN FOR NON-UNION EMPLOYEES	
b	Name of plan sponsor KENOSHA BEEF INTERNATIONAL, LTD.	c EIN-PN 39-0994777-001
a	Plan name KEYSTONE CEMENT COMPANY RETIREMENT FOR HOURLY EMPLOYEES	
b	Name of plan sponsor GIANT CEMENT HOLDING, INC.	c EIN-PN 20-2268581-002

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 KLINGSPOR ABRASIVES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor KLINGSPOR ABRASIVES, INC.	c EIN-PN 56-1252941-001
a	Plan name KOLACHE FACTORY, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor KOLACHE FACTORY, INC.	c EIN-PN 76-0206525-001
a	Plan name KOLBE & KOLBE MILLWORK CO., INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor KOLBE & KOLBE MILLWORK CO INC	c EIN-PN 39-1193314-002
a	Plan name KRUGER PULP AND PAPER SALES, INC PENSION PLAN	
b	Name of plan sponsor KRUGER PULP AND PAPER SALES INC.	c EIN-PN 02-0260404-005
a	Plan name KURT S. ADLER, INC EMPLOYEES PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor KURT S. ADLER, INC	c EIN-PN 13-5654539-001
a	Plan name K-VA-T 401(K) PLAN	
b	Name of plan sponsor K-VA-T FOOD STORES, INC.	c EIN-PN 55-0421484-003
a	Plan name KWIK KAFE VENDING COMPANY, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor KWIK KAFE VENDING COMPANY, INC.	c EIN-PN 54-0755362-002
a	Plan name LACROSSE FOOTWEAR, INC. EMPLOYEES' RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor LACROSSE FOOTWEAR INC.	c EIN-PN 93-1446816-003
a	Plan name LACROSSE FOOTWEAR, INC. PENSION PLAN	
b	Name of plan sponsor LACROSSE FOOTWEAR, INC.	c EIN-PN 39-1446816-002
a	Plan name LAKEWOOD CEMETERY ASSOCIATION PENSION PLAN	
b	Name of plan sponsor LAKEWOOD CEMETERY ASSOCIATION	c EIN-PN 41-0364020-001
a	Plan name LAMINEX, INC. 401(K) PLAN	
b	Name of plan sponsor WAGON ROAD PROPERTIES, INC.	c EIN-PN 57-0902335-001
a	Plan name LANGFORD TOOL & DRILL CO. PROFIT SHARING PLAN	
b	Name of plan sponsor LANGFORD TOOL & DRILL	c EIN-PN 41-0808861-001

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	LAREDO TRANSIT MANAGEMENT, INC. DEFINED BENEFIT PLAN	
b	Name of plan sponsor	LAREDO TRANSIT MANAGEMENT, INC.	c EIN-PN 02-0668666-002
a	Plan name	LARKIN HOFFMAN DALY & LINDGREN LTD PROFIT SHARING PLAN	
b	Name of plan sponsor	LARKIN HOFFMAN DALY & LINDGREN LTD	c EIN-PN 41-0953357-001
a	Plan name	LARKIN, HOFFMAN, DALY & LINDGREN, LTD. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LARKIN, HOFFMAN, DALY & LINDGREN, LTD.	c EIN-PN 41-0953357-001
a	Plan name	LARSEN, MELVIN PSP	
b	Name of plan sponsor	LARSEN, MELVIN	c EIN-PN 92-0112791-999
a	Plan name	LEANIN' TREE INC. 401(K) PLAN	
b	Name of plan sponsor	LEANIN TREE, INC.	c EIN-PN 84-1130457-002
a	Plan name	LEROY SPRINGS & COMPANY, INC. 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	LEROY SPRINGS & COMPANY, INC.	c EIN-PN 57-0344121-002
a	Plan name	LESTER RETIREMENT BUILDER SAVINGS PLAN	
b	Name of plan sponsor	LESTER BUILDING SYSTEMS, LLC	c EIN-PN 20-1262938-001
a	Plan name	LHB, INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	LHB, INC.	c EIN-PN 41-0904334-001
a	Plan name	LIBERTY LINES TRANSIT, INC. PENSION PLAN	
b	Name of plan sponsor	LIBERTY LINES TRANSIT, INC.	c EIN-PN 13-3096342-001
a	Plan name	LIFETIME BRANDS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	LIFETIME BRANDS, INC.	c EIN-PN 11-2682486-002
a	Plan name	LINDQUIST MACHINE CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor	LINDQUIST MACHINE CORPORATION	c EIN-PN 39-1288747-001
a	Plan name	LINDT & SPRUNGLI NORTH AMERICA, INC. AND RUSSELL STOVER CHOCOLATES, LLC 401(K) PLAN	
b	Name of plan sponsor	RUSSELL STOVER CANDIES, INC.	c EIN-PN 43-1243415-002

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 LIPPERT COMPONENTS, INC. EMPLOYEE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor LIPPERT COMPONENTS, INC.	c EIN-PN 25-1217067-002
a	Plan name LOGISTICS AND ENVIRONMENTAL SOLUTIONS CORP. (DBA LESCO) 401(K) RETIREMENT PLAN	
b	Name of plan sponsor LOGISTICS & ENVIRONMENTAL SUPORT SERVICES CORPORATION	c EIN-PN 63-1071824-001
a	Plan name LONGS DRUGSTORES OF SC INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor LONGS DRUGSTORES OF SC, INC.	c EIN-PN 57-0290371-001
a	Plan name LOOP LLC EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor LOOP LLC	c EIN-PN 72-1335490-001
a	Plan name MAC PAPERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MAC PAPERS, INC.	c EIN-PN 59-1059698-001
a	Plan name MACKAY COMMUNICATIONS, INC. EMPLOYEE RETIREMENT SAVINGS PLAN AND TRUST	
b	Name of plan sponsor MACKAY COMMUNICATIONS, INC.	c EIN-PN 56-1550100-001
a	Plan name MACKAY COMMUNICATIONS, INC. EMPLOYEES PENSION PLAN	
b	Name of plan sponsor MACKAY COMMUNICATIONS, INC.	c EIN-PN 56-1550100-002
a	Plan name MAG INSTRUMENT INC PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MAG INSTRUMENT INC	c EIN-PN 95-2912384-001
a	Plan name MAGNUM CONSTRUCTION CO. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MAGNUM CONSTRUCTION CO	c EIN-PN 38-2477184-001
a	Plan name MAINTAINCO/STARLIFT PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor MAINTAINCO, INC.	c EIN-PN 22-1628030-001
a	Plan name MANHATTAN BROADCASTING COMPANY OF MANHATTAN, KANSAS PROFIT SHARING TRUST	
b	Name of plan sponsor MANHATTAN BROADCASTING CO	c EIN-PN 48-0538710-001
a	Plan name MANIER & HEROD, A TENNESSEE PROFESSIONAL CORP PROFIT SHARING PLAN	
b	Name of plan sponsor MANIER & HEROD, A TENNESSEE PROFESSIONAL CORPORATION	c EIN-PN 62-1040990-001

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	MANUFACTURERS RESERVE SUPPLY 401(K) PLAN	
b	Name of plan sponsor	MANUFACTURERS RESERVE SUPPLY, INC.	c EIN-PN 22-1090400-002
a	Plan name	MAPCO 401(K) PLAN	
b	Name of plan sponsor	MAPCO EXPRESS, INC.	c EIN-PN 52-2308712-001
a	Plan name	MARSHALL E. CAMPBELL CO 401K PROFIT SHARING	
b	Name of plan sponsor	MARSHALL E CAMPELL COMPANY	c EIN-PN 38-0396632-001
a	Plan name	MARTIN'S FAMOUS PASTRY SHOPPE, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MARTINS FAMOUS PASTRY SHOPPE, INC.	c EIN-PN 25-1291977-001
a	Plan name	MATRIX MACHINE, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	MATRIX MACHINE, INC.	c EIN-PN 86-0363560-001
a	Plan name	MATTEL INVESTMENT PLAN	
b	Name of plan sponsor	MATTEL, INC.	c EIN-PN 95-1567322-001
a	Plan name	MAXITRANSFERS CORPORATION 401(K) PLAN	
b	Name of plan sponsor	MAXITRANSFERS CORPORATION	c EIN-PN 58-2563969-001
a	Plan name	MBDA INCORPORATED EMPLOYEES SAVINGS AND INVESTMENT PLAN	
b	Name of plan sponsor	MBDA INCORPORATED	c EIN-PN 36-3778090-002
a	Plan name	MCDONALD DISTRIBUTING COMPANY 401K PS PLAN	
b	Name of plan sponsor	MCDONALD DISTRIBUTING COMPANY	c EIN-PN 41-1775697-001
a	Plan name	MCMAHON TRUCK CENTERS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	MACK TRUCK SALES OF CHARLOTTE, INC.	c EIN-PN 56-1784884-001
a	Plan name	ME WEST CASTINGS PENSION PLAN FOR TEMPE BARGAINING UNIT EMPLOYEES	
b	Name of plan sponsor	ME GLOBAL INC.	c EIN-PN 62-1870545-001
a	Plan name	MEGEN CONSTRUCTION COMPANY, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor	MEGEN CONSTRUCTION COMPANY, INC.	c EIN-PN 31-1397782-001

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 MESERVE, MUMPER & HUGHES, LLP PROFIT SHARING KEOGH PLAN	
b	Name of plan sponsor MESERVE, MUMPER & HUGHES	c EIN-PN 95-1000539-001
a	Plan name METSO OUTOTEC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor METSO OUTOTEC USA INC.	c EIN-PN 88-0298664-024
a	Plan name MEYDENBAUER CENTER RETIREMENT PLAN & TRUST	
b	Name of plan sponsor MEYDENBAUER CONVENTION CENTER	c EIN-PN 91-1491650-999
a	Plan name MICRO CONTROL 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor MICRO CONTROL COMPANY	c EIN-PN 41-1275162-001
a	Plan name MID RIVERS TELEPHONE COOPERATIVE INC EMPLOYEES SAV	
b	Name of plan sponsor MID-RIVERS TELEPHONE COOPERATIVE IN	c EIN-PN 81-0239277-003
a	Plan name MIDSOUTH BANCORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MIDSOUTH BANCORPORATION	c EIN-PN 63-0906823-002
a	Plan name MIDWEST CONTRACTING DEFINED CONTRIBUTION / 401(K) PLAN AND TRUST	
b	Name of plan sponsor MIDWEST CONTRACTING, LLC	c EIN-PN 41-1867753-001
a	Plan name MIDWEST HARDWOOD CORPORATION 401(K) PLAN	
b	Name of plan sponsor MIDWEST HARDWOOD CORPORATION	c EIN-PN 41-1432572-001
a	Plan name MILTENYI BIOTEC NORTH AMERICA INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MILTENYI BIOTEC, INC.	c EIN-PN 82-4304020-001
a	Plan name MINNEAPOLIS CLINIC EMPLOYEES' PENSION PLAN	
b	Name of plan sponsor MINNEAPOLIS CLINIC OF NEUROLOGY LTD	c EIN-PN 41-0999094-003
a	Plan name MINNEAPOLIS CLINIC PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor MINNEAPOLIS CLINIC OF NEUROLOGY, LTD.	c EIN-PN 41-0999094-001
a	Plan name MINNESOTA MASONIC CHARITIES 401(K) PLAN	
b	Name of plan sponsor MINNESOTA MASONIC CHARITIES	c EIN-PN 41-1495325-002

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 MINNETRONIX, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor MINNETRONIX, INC.	c EIN-PN 41-1828303-001
a	Plan name MINNWEST CORPORATION 401(K) PLAN	
b	Name of plan sponsor MINNWEST CORPORATION	c EIN-PN 41-1549950-001
a	Plan name MISSION NEIGHBORHOOD HEALTH CENTER 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MISSION NEIGHBORHOOD HEALTH CENTER	c EIN-PN 94-2284365-001
a	Plan name MOELLER ENTERPRISES 401(K) PLAN	
b	Name of plan sponsor MOELLER MFG. COMPANY LLC	c EIN-PN 38-1723023-005
a	Plan name MOELLER MANUFACTURING COMPANY AIRCRAFT UNION 401(K) PLAN	
b	Name of plan sponsor MOELLER MANUFACTURING COMPANY	c EIN-PN 38-1723023-004
a	Plan name MONEYTREE, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor MONEYTREE, INC.	c EIN-PN 91-1218621-001
a	Plan name MORAVIAN CHURCH NORTHERN PROVINCE AMENDED AND RESTATED 403(B)(9) PENSION PLAN	
b	Name of plan sponsor MORAVIAN CHURCH NORTHERN PROVINCE	c EIN-PN 24-0826166-999
a	Plan name MORGAN SERVICES, INC. SAVINGS PLUS PLAN	
b	Name of plan sponsor MORGAN SERVICES INC.	c EIN-PN 36-2904675-040
a	Plan name MORNING STAR COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MORNING STAR COMPANY	c EIN-PN 94-2421552-003
a	Plan name MORRISON-MAIERLE, INC. 401(K) PLAN	
b	Name of plan sponsor MORRISON-MAIERLE, INC.	c EIN-PN 81-0217149-002
a	Plan name MOSBACHER ENERGY COMPANY RETIREMENT PLAN	
b	Name of plan sponsor MOSBACHER ENERGY CO	c EIN-PN 74-1948846-001
a	Plan name MOSBACHER PROPERTIES GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor MOSBACHER PROPERTIES GROUP, LLC	c EIN-PN 13-3980840-002

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 MOUNTAINSIDE FARMS, A DIVISION OF WORCESTER CREAMERIES CORP. 401(K) SAVINGS PLAN	
b	Name of plan sponsor MOUNTAINSIDE FARMS, A DIVISION OF WORCESTER CREAMERIES CORP.	c EIN-PN 14-1623557-005
a	Plan name MOUNTAINVIEW PENSION PLAN	
b	Name of plan sponsor MOUNTAINVIEW NURSING HOME	c EIN-PN 57-0360090-001
a	Plan name MSC INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor MSC INC.	c EIN-PN 13-4038723-001
a	Plan name MUELLER DIE CUT SOLUTIONS, INC 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor MUELLER DIE CUT SOLUTIONS, INC.	c EIN-PN 22-1541384-002
a	Plan name MURATA MACHINERY USA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MURATA MACHINERY USA	c EIN-PN 23-2575678-001
a	Plan name MURRAY CALLOWAY COUNTY HOSPITAL AND CONVALESCENT DIVISION RETIREMENT PLAN	
b	Name of plan sponsor MURRAY-CALLOWAY COUNTY HOSPITAL	c EIN-PN 61-0620567-999
a	Plan name NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS 401(K) PLAN	
b	Name of plan sponsor NATIONAL ASSOCIATION OF WHOLESALER-DISTRIBUTORS	c EIN-PN 53-0188893-002
a	Plan name NATIONAL CONSTRUCTION RENTALS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NATIONAL CONSTRUCTION RENTALS, INC.	c EIN-PN 95-2965905-001
a	Plan name NATIONAL RELIABLE LENDING LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor NATIONS RELIABLE LENDING, LLC	c EIN-PN 20-5973457-001
a	Plan name NAVAJO NATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor NAVAJO NATION	c EIN-PN 86-0092335-999
a	Plan name NEW JERSEY FEDERATION OF YMHA'S AND YWHA'S CAMPS EMPLOYEES' SAVINGS & 401(K) PLAN	
b	Name of plan sponsor NEW JERSEY FEDERATION OF YMHA'S AND YWHA'S CAMPS	c EIN-PN 22-1487266-002
a	Plan name NEW MEXICO OIL & GAS ASSOCIATION DEFINED CONTRIBUTION PLAN	
b	Name of plan sponsor NEW MEXICO OIL & GAS ASSOCIATION	c EIN-PN 85-0056996-003

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	NEWCO, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	NEWCO, INC.	c EIN-PN 84-0533758-002
a	Plan name	NEWTON INSTRUMENT COMPANY, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	NEWTON INSTRUMENT COMPANY	c EIN-PN 56-0636072-001
a	Plan name	NIEMANN FOODS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NIEMANN FOODS, INC.	c EIN-PN 37-0475125-001
a	Plan name	NODAK INSURANCE COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NODAK INSURANCE COMPANY	c EIN-PN 45-0216631-004
a	Plan name	NORTHERN ENGINE & SUPPLY CO. PROFIT SHARING & 401(K) PLAN	
b	Name of plan sponsor	NORTHERN ENGINE AND SUPPLY COMPANY	c EIN-PN 41-0836288-001
a	Plan name	NORTHLAND DEALERS INVESTMENT GROUP, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	NORTHLAND DEALERS INVESTMENT GROUP	c EIN-PN 41-1978633-001
a	Plan name	NOTT COMPANY RETIREMENT SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	NOTT COMPANY	c EIN-PN 41-0452050-001
a	Plan name	NOVOZYMES NORTH AMERICA, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	NOVOZYMES NORTH AMERICA, INC.	c EIN-PN 13-2639630-001
a	Plan name	NUECES FARM CENTER, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NUECES FARM CENTER, INC..	c EIN-PN 74-1649707-001
a	Plan name	NUSTAR GP, LLC PENSION PLAN	
b	Name of plan sponsor	NUSTAR GP, LLC	c EIN-PN 74-2958816-001
a	Plan name	O&W, INC. 401 (K) PLAN	
b	Name of plan sponsor	O&W, INC.	c EIN-PN 38-1540106-003
a	Plan name	OLD REPUBLIC NATIONAL TITLE HOLDING CO. /TROON MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	OLD REPUBLIC NATIONAL TITLE HOLDING COMPANY	c EIN-PN 41-1421620-003

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	ONEIDA NATION ENTERPRISE 401(K) PLAN	
b	Name of plan sponsor	ONEIDA TRIBE OF INDIANS OF WISCONSIN	c EIN-PN 39-6081138-004
a	Plan name	O'RIELLY MOTOR COMPANY & AFFILIATES EMPLOYEE INVESTMENT/SAVINGS PLAN	
b	Name of plan sponsor	O'RIELLY MOTOR COMPANY & AFFILIATES	c EIN-PN 86-0077638-002
a	Plan name	PACIFIC VIEW COMPANIES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	PACIFIC VIEW COMPANIES, INC.	c EIN-PN 95-2002255-001
a	Plan name	PACWEST MACHINERY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PACWEST MACHINERY LLC	c EIN-PN 47-5633567-001
a	Plan name	PANERA BREAD COMPANY 401(K) PLAN	
b	Name of plan sponsor	PANERA BREAD COMPANY	c EIN-PN 04-2723701-001
a	Plan name	PAPER PRODUCTS MARKETING (USA), INC. 401 (K) PLAN	
b	Name of plan sponsor	PAPER PRODUCTS MARKETING (USA) INC.	c EIN-PN 93-0794439-001
a	Plan name	PARTRIDGE WELL DRILLING COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	PARTRIDGE WELL DRILLING COMPANY, INC.	c EIN-PN 59-1564237-001
a	Plan name	PBA EMPLOYEES AND FUND OFFICE STAFF PENSION PLAN	
b	Name of plan sponsor	PATROLMENS BENEVOLENT ASSOCIATION	c EIN-PN 13-5308915-333
a	Plan name	PBBS EQUIPMENT CORP EMPLOYEES PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor	PBBS EQUIPMENT CORPORATION	c EIN-PN 39-0888681-001
a	Plan name	PBI PERFORMANCE PRODUCTS, INC. HOURLY EMPLOYEES RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PBI PERFORMANCE PRODUCTS, INC.	c EIN-PN 20-1977207-002
a	Plan name	PBI PERFORMANCE PRODUCTS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	PBI PERFORMANCE PRODUCTS, INC.	c EIN-PN 20-1977207-001
a	Plan name	PEACHTREE PACKAGING, INC. 401(K) PLAN	
b	Name of plan sponsor	PEACHTREE PACKAGING, INC.	c EIN-PN 74-2033278-001

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 PEETS COFFEE & TEA, LLC SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor PEETS COFFEE & TEA INC	c EIN-PN 91-0863396-001
a	Plan name PENSION PLAN FOR BARGAINING UNIT EMPLOYEES OF NEXTIRAONE LLC	
b	Name of plan sponsor DELANEY TELECOM, INC	c EIN-PN 23-2388066-001
a	Plan name PENSION PLAN FOR EMPLOYEES OF OUR LADY OF PERPETUAL HELP HOME	
b	Name of plan sponsor OUR LADY OF PERPETUAL HELP HOME	c EIN-PN 58-0566234-999
a	Plan name PENSION PLAN FOR EMPLOYEES OF SHINTECH INC. AND CERTAIN AFFILIATES	
b	Name of plan sponsor SHINTECH INCORPORATED	c EIN-PN 74-1750521-001
a	Plan name PENSION PLAN FOR EMPLOYEES OF SM ENERGY COMPANY	
b	Name of plan sponsor SM ENERGY COMPANY	c EIN-PN 41-0518430-001
a	Plan name PENSION PLAN FOR THE EMPLOYEES OF THE SYNOD OF THE PACIFIC	
b	Name of plan sponsor SYNOD OF THE PACIFIC	c EIN-PN 23-7217973-001
a	Plan name PENSION PLAN FOR THE SERVICE EMPLOYEES' LOCAL NO. 1 S.E.I.U.	
b	Name of plan sponsor SERVICE EMPLOYEES LOCAL NO. 1	c EIN-PN 36-0899855-004
a	Plan name PENSKE MOTOR GROUP 401K PLAN	
b	Name of plan sponsor PENSKE MOTOR GROUP	c EIN-PN 45-4060873-001
a	Plan name PEOPLES BANK OF GRACEVILLE PROFIT SHARING PLAN	
b	Name of plan sponsor PEOPLES BANK OF GRACEVILLE	c EIN-PN 59-1510993-001
a	Plan name PEPSI-COLA BOTTLING COMPANY OF HICKORY, N.C., INC. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor PEPSI-COLA BOTTLING COMPANY OF HICKORY	c EIN-PN 56-0585594-001
a	Plan name PERFORMANCE GROUP 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PENSKE RACING SOUTH, INC.	c EIN-PN 22-3024255-002
a	Plan name PETER PAN SEAFOODS, INC. EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor PSF, INC.	c EIN-PN 91-0556456-001

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 PFNONWOVENS, LLC 401(K) PLAN	
b	Name of plan sponsor PFNONWOVENS LLC	c EIN-PN 23-2861315-001
a	Plan name PHOENIX TUBE COMPANY, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PHOENIX TUBE COMPANY, INC.	c EIN-PN 22-2330200-001
a	Plan name PILOT CORPORATION OF AMERICA EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor PILOT CORPORATION OF AMERICA	c EIN-PN 11-2277015-002
a	Plan name PIMA MEDICAL INSTITUTE 401(K) PLAN	
b	Name of plan sponsor PIMA MEDICAL INSTITUTE	c EIN-PN 86-0260863-001
a	Plan name PINEHURST RESORT 401(K) SAVINGS PLAN	
b	Name of plan sponsor PINEHURST, LLC	c EIN-PN 75-1945201-001
a	Plan name PL SUBSIDIARY, INC. 401(K) PLAN	
b	Name of plan sponsor PL SUBSIDIARY, INC.	c EIN-PN 56-1571891-001
a	Plan name PLASTERERS LOCAL 67 PENSION TRUST FUND	
b	Name of plan sponsor PLASTERERS LOCAL 67	c EIN-PN 38-6103880-001
a	Plan name PLUMB SUPPLY COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PLUMB SUPPLY COMPANY	c EIN-PN 20-5528317-002
a	Plan name POARCH BAND OF CREEK INDIANS 401-K GOVERNMENT PLAN	
b	Name of plan sponsor POARCH BAND OF CREEK INDIANS	c EIN-PN 63-0705119-999
a	Plan name POLYDECK SCREEN CORPORATION 401(K) PLAN	
b	Name of plan sponsor POLYDECK SCREEN CORPORATION	c EIN-PN 57-0673179-001
a	Plan name POOL COMPANY RETIREMENT INCOME PLAN	
b	Name of plan sponsor POOL COMPANY/NABORS INDUSTRIES INC.	c EIN-PN 76-0306172-003
a	Plan name POPULUS GROUP, LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor POPULUS GROUP, LLC	c EIN-PN 38-3659021-001

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 PORKY PRODUCTS, INC. EMPLOYEES PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor PORKY PRODUCTS	c EIN-PN 13-1956931-001
a	Plan name PRECISION COATINGS, INC. RETIREMENT AND SAVINGS PLAN	
b	Name of plan sponsor PRECISION COATINGS INC	c EIN-PN 38-1917611-003
a	Plan name PREMIER HOME HEALTH CARE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor PREMIER HOME HEALTH CARE SERVICES, INC.	c EIN-PN 13-3452656-001
a	Plan name PREMIER RESEARCH INTERNATIONAL LLC 401(K) PLAN	
b	Name of plan sponsor PREMIER RESEARCH INTERNATIONAL LLC	c EIN-PN 26-2481486-001
a	Plan name PRESTAGE FARMS EMPLOYEE 401(K) PROFIT SHARING PAN	
b	Name of plan sponsor PRESTAGE FARMS, INC.	c EIN-PN 56-1368357-001
a	Plan name PRETTL ELECTRIC CORPORATION 401(K) PLAN	
b	Name of plan sponsor PRETTL ELECTRIC CORPORATION	c EIN-PN 57-0879681-001
a	Plan name PRIDE MOBILITY PRODUCTS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRIDE MOBILITY PRODUCTS CORPORATION	c EIN-PN 23-2443538-001
a	Plan name PRIMARK US CORP 401(K) PLAN	
b	Name of plan sponsor PRIMARK US CORPORATION	c EIN-PN 47-1063988-001
a	Plan name PRO CAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PRO CAL PROFESSIONAL DECALS, INC.	c EIN-PN 57-0789417-001
a	Plan name PROFIT SHARING PLAN FOR EMMET, MARVIN & MARTIN LLP	
b	Name of plan sponsor EMMET, MARVIN & MARTIN LLP	c EIN-PN 13-5054210-002
a	Plan name PROLIFICS, INC. 401(K) PLAN	
b	Name of plan sponsor PROLIFICS CORP	c EIN-PN 11-2497724-001
a	Plan name PS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PUBLIC STORAGE, INC.	c EIN-PN 95-3551121-001

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 QUAKER EQUITIES, LTD. 401(K) PLAN	
b	Name of plan sponsor QUAKER EQUITIES, LTD.	c EIN-PN 13-3411457-001
a	Plan name QUALIFIED RETIREMENT PLAN FOR J.J. ASSOCIATES, INC.	
b	Name of plan sponsor J.J. ASSOCIATES, INC.	c EIN-PN 91-1257897-001
a	Plan name RADIATION ONCOLOGY ASSOC., CHTD PROFIT SHARING PLAN	
b	Name of plan sponsor RADIATION ONCOLOGY ASSOC., CHTD	c EIN-PN 88-0217865-001
a	Plan name RADIOLOGY CONSULTANTS OF IOWA, PLC 401(K) PLAN	
b	Name of plan sponsor RADIOLOGY CONSULTANTS OF IOWA, PLC	c EIN-PN 42-1480598-001
a	Plan name RCS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor RETAIL CONSTRUCTION SERVICES, INC.	c EIN-PN 41-1330800-002
a	Plan name REEVE ELECTRIC COMPANY INC. EMPLOYEES 401(K) PLAN & TRUST	
b	Name of plan sponsor REEVE ELECTRIC COMPANY INC.	c EIN-PN 63-0462902-001
a	Plan name RELIABLE CREDIT ASSOCIATION, INC. PROFIT SHARING AND TRUST	
b	Name of plan sponsor RELIABLE CREDIT ASSOCIATION, INC.	c EIN-PN 93-0472382-001
a	Plan name RET PLN FOR EMPL OF MNA	
b	Name of plan sponsor METROPOLITAN NASHVILLE AIRPORT AUTHORITY	c EIN-PN 62-0819271-999
a	Plan name RETIREMENT PLAN FOR EMPLOYEES OF ROCK HILL COCA-COLA BOTTLING COMPANY	
b	Name of plan sponsor ROCK HILL COCA-COLA BOTTLING COMPANY	c EIN-PN 57-0236040-001
a	Plan name RETIREMENT PLAN FOR EMPLOYEES OF ROYAL GORGE COMPANY OF COLORADO	
b	Name of plan sponsor ROYAL GORGE COMPANY OF COLORADO	c EIN-PN 75-0922562-001
a	Plan name RETIREMENT PLAN FOR EMPLOYEES OF SOUTHWEST SAW	
b	Name of plan sponsor SOUTHWEST SAW CORPORATION	c EIN-PN 74-1465605-001
a	Plan name RETIREMENT PLAN FOR EMPLOYEES OF THE LIBERTY NATIONAL BANK IN PARIS	
b	Name of plan sponsor THE LIBERTY NATIONAL BANK IN PARIS	c EIN-PN 75-0393555-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name RETIREMENT PLAN FOR HOURLY EMPLOYEES OF MATHEWS READYMIX LLC	
b	Name of plan sponsor MATHEWS READYMIX LLC	c EIN-PN 94-1271919-001
a	Plan name RETIREMENT PLAN FOR HOURLY EMPLOYEES OF TEXAS LEHIGH CEMENT COMPANY LP	
b	Name of plan sponsor TEXAS-LEHIGH CEMENT COMPANY	c EIN-PN 75-2109658-002
a	Plan name RETIREMENT PLAN FOR THE BOTTLING EMPLOYEES OF SWIRE PACIFIC HOLDINGS INC. AND ITS AFFILIATES	
b	Name of plan sponsor SWIRE HOLDINGS INC AND ITS AFFILIATES	c EIN-PN 87-0424812-001
a	Plan name RETIREMENT PLAN OF JERAS CORPORATION	
b	Name of plan sponsor JERAS CORP	c EIN-PN 23-1163960-001
a	Plan name RETIREMENT PLAN OF LOUISIANA PIGMENT COMPANY, L.P.	
b	Name of plan sponsor LOUISIANA PIGMENT COMPANY LP	c EIN-PN 72-1249283-002
a	Plan name RETIREMENT SAVINGS PLAN FOR EMPLOYEES OF 3D SYSTEMS CORPORATION	
b	Name of plan sponsor 3D SYSTEMS CORPORATION	c EIN-PN 95-4431352-001
a	Plan name RETIREMENT SAVINGS PLAN OF WINSTON-SALEM TRANSIT AUTHORITY	
b	Name of plan sponsor TRANSDEV SERVICES, INC.	c EIN-PN 52-1493194-005
a	Plan name REVISED RANSOM & RANDOLPH PENSION PLAN	
b	Name of plan sponsor RANSOM & RANDOLPH, LLC	c EIN-PN 85-4287075-007
a	Plan name RICK ENGINEERING COMPANY PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor RICK ENGINEERING COMPANY	c EIN-PN 95-1859899-004
a	Plan name RIDGEVIEW CLINICS 401(K) PLAN	
b	Name of plan sponsor RIDGEVIEW CLINICS	c EIN-PN 41-1651783-002
a	Plan name RIDGEVIEW MEDICAL CENTER, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RIDGEVIEW MEDICAL CENTER	c EIN-PN 31-1667875-002
a	Plan name RLJ COMPANIES, LLC 401(K) PLAN	
b	Name of plan sponsor RLJ COMPANIES, LLC	c EIN-PN 42-1697894-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name ROBERT MADDEN INDUSTRIES, LTD. 401(K) PLAN	
b	Name of plan sponsor ROBERT MADDEN INC	c EIN-PN 75-1666322-001
a	Plan name ROBERTSHAW CONTROLS COMPANY 401(K) PLAN	
b	Name of plan sponsor ROBERTSHAW CONTROLS COMPANY	c EIN-PN 54-1419531-001
a	Plan name ROBINSON TOWNSHIP POLICE DB TRUST	
b	Name of plan sponsor ROBINSON TOWNSHIP	c EIN-PN 25-6002657-999
a	Plan name ROTARY CORPORATION 401(K) PROFIT SAVINGS PLAN	
b	Name of plan sponsor ROTARY CORPORATION	c EIN-PN 58-0959394-001
a	Plan name RP AUTOMOTIVE II RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RP AUTOMOTIVE II, INC.	c EIN-PN 26-2643749-001
a	Plan name RP AUTOMOTIVE RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RP AUTOMOTIVE, INC.	c EIN-PN 90-0389057-001
a	Plan name RPX CORPORATION RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor RPX CORPORATION	c EIN-PN 26-2990113-001
a	Plan name SALEM HOLDING COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SALEM HOLDING CORPORATION	c EIN-PN 56-1740888-001
a	Plan name SAVINGS PLAN FOR ASSOCIATES OF EMMET, MARVIN & MARTIN, LLP	
b	Name of plan sponsor EMMET, MARVIN & MARTIN, LLP	c EIN-PN 13-5054210-003
a	Plan name SAVINGS PLAN FOR THE SUBSIDIARIES OF SOUTHSIDE BANCSHARES, INC.	
b	Name of plan sponsor SOUTHSIDE BANCSHARES, INC.	c EIN-PN 75-1848732-002
a	Plan name SAVOR STREET FOODS, INC. RETIREMENT SAVINGS	
b	Name of plan sponsor SAVOR STREET FOODS, INC.	c EIN-PN 23-2048971-003
a	Plan name SAWS RETIREE HEALTH TR	
b	Name of plan sponsor SAN ANTONIO WATER SYSTEM	c EIN-PN 74-2632530-999

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	SCOTTMADDEN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCOTTMADDEN, INC.	c EIN-PN 56-1445505-001
a	Plan name	SEATON PUBLISHING COMPANY, INC. OF MANHATTAN, KANSAS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SEATON PUBLISHING INC	c EIN-PN 48-0507216-001
a	Plan name	SEATTLE SYMPHONY PLAYERS PENSION PLAN	
b	Name of plan sponsor	TRUSTEES OF THE SEATTLE SYMPHONY PLAYERS PENSION PLAN	c EIN-PN 91-1082288-001
a	Plan name	SEE'S RETIREMENT PLAN	
b	Name of plan sponsor	SEE'S CANDIES, INC.	c EIN-PN 94-0852350-004
a	Plan name	SEW-EURODRIVE, INC. PROFIT SHARING/401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SEW-EURODRIVE, INC.	c EIN-PN 31-0870891-001
a	Plan name	SHAKER ADVERTISING AGENCY EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor	SHAKER ADVERTISING AGENCY	c EIN-PN 36-2683937-001
a	Plan name	SHELDONS INC. RETIREMENT INCOME PLAN	
b	Name of plan sponsor	SHELDONS INC.	c EIN-PN 39-0886011-002
a	Plan name	SHELTERLOGIC CORP 401(K) PLAN	
b	Name of plan sponsor	SHELTERLOGIC CORP.	c EIN-PN 45-2872214-001
a	Plan name	SHERIDAN NEWSPAPERS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	SHERIDAN NEWSPAPERS, INC.	c EIN-PN 83-0161919-001
a	Plan name	SIBLEY MEMORIAL HOSPITAL 401(K) PLAN	
b	Name of plan sponsor	SIBLEY MEMORIAL HOSPITAL	c EIN-PN 53-0196602-002
a	Plan name	SIERRA CLUB 1081 PLAN FOR PUERTO RICO EMPLOYEES	
b	Name of plan sponsor	SIERRA CLUB	c EIN-PN 94-1153307-001
a	Plan name	SILVER BOW CONSTRUCTION PROFIT SHARING PLAN	
b	Name of plan sponsor	SILVER BOW CONSTRUCTION, INC.	c EIN-PN 92-0048332-001

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	SLOUGH EQUIPMENT COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	SLOUGH EQUIPMENT COMPANY	c EIN-PN 75-1588907-001
a	Plan name	SMC INC EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	SOIL AND MATERIAL CONSULTANTS INC	c EIN-PN 36-3094075-001
a	Plan name	SMYTH COMPANIES SAVINGS AND PROFIT SHARING PLAN	
b	Name of plan sponsor	SMYTH COMPANIES, LLC	c EIN-PN 90-0743685-001
a	Plan name	SNBL U.S.A. LTD. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SNBL USA, LTD.	c EIN-PN 54-1595945-001
a	Plan name	SOLAR CITY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	SOLAR CITY, INC.	c EIN-PN 59-2010522-001
a	Plan name	SONIFI SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	SONIFI SOLUTIONS, INC.	c EIN-PN 46-0371161-001
a	Plan name	SOUTHEASTERN CONCRETE PRODUCTS COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	SOUTHEASTERN CONCRETE PRODUCTS COMPANY	c EIN-PN 57-0281727-003
a	Plan name	SOUTHERN CONCRETE MATERIALS, INC. SALARY DEFERRAL & PROFIT SHARING PLAN	
b	Name of plan sponsor	BV HEDRICK GRAVEL & SAND COMPANY	c EIN-PN 56-0663876-001
a	Plan name	SOUTHERN FARM BUREAU AND ADOPTING COMPANIES 401(K) PLAN	
b	Name of plan sponsor	SOUTHERN FARM BUREAU CASUALTY INSURANCE COMPANY	c EIN-PN 64-0288243-004
a	Plan name	SOUTHERN OREGON ORTHOPEDICS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTHERN OREGON ORTHOPEDICS, INC.	c EIN-PN 93-0587572-001
a	Plan name	SOUTHERN OREGON ORTHOPEDICS, INC. CASH BALANCE PLAN	
b	Name of plan sponsor	SOUTHERN OREGON ORTHOPEDICS, INC.	c EIN-PN 93-0587572-003
a	Plan name	SOUTHERN PIPE & SUPPLY COMPANY, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	SOUTHERN PIPE & SUPPLY COMPANY, INC.	c EIN-PN 64-0291778-002

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	SOUTHWEST DEALER SERVICES 401(K) PLAN	
b	Name of plan sponsor	SOUTHWEST DEALER SERVICES 401(K)	c EIN-PN 33-0453377-001
a	Plan name	SOUTHWIRE COMPANY HOURLY PENSION PLAN	
b	Name of plan sponsor	SOUTHWIRE COMPANY, LLC	c EIN-PN 58-2020515-013
a	Plan name	SOUTHWORTH-MILTON, INC. BARGAINING UNIT PENSION PLAN	
b	Name of plan sponsor	SOUTHWORTH-MILTON, INC.	c EIN-PN 02-0258444-004
a	Plan name	ST. PETERS HOSPITAL CASHPLUS RETIREMENT PLAN	
b	Name of plan sponsor	ST. PETERS HEALTH	c EIN-PN 81-0233121-001
a	Plan name	STANDARD TILE SUPPLY CO., INC. PROFIT-SHARING PLAN	
b	Name of plan sponsor	MARBIL REALTY CORP.	c EIN-PN 22-1723208-002
a	Plan name	STANDARD TILE SUPPLY CO., INC. PROFIT-SHARING PLAN	
b	Name of plan sponsor	STANDARD TILE IMPORTS, INC.	c EIN-PN 22-2284706-001
a	Plan name	STANISLAUS FARM SUPPLY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STANISLAUS FARM SUPPLY	c EIN-PN 94-1147776-001
a	Plan name	STEAK N SHAKE 401(K) SAVINGS PLAN	
b	Name of plan sponsor	STEAK N SHAKE INC.	c EIN-PN 35-1604308-001
a	Plan name	STEINBERG DIAGNOSTIC MEDICAL IMAGING 401(K) PLAN	
b	Name of plan sponsor	STEINBERG DIAGNOSTIC MEDICAL IMAGING	c EIN-PN 88-0232199-001
a	Plan name	STEINHAFELS INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	STEINHAFELS INC.	c EIN-PN 39-0975161-001
a	Plan name	STELLAR INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	STELLAR INDUSTRIES INC	c EIN-PN 42-1354535-002
a	Plan name	STEBEN FOODS SAVINGS PLAN	
b	Name of plan sponsor	STEBEN FOODS INCORPORATED	c EIN-PN 22-2407431-002

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 STOEL RIVES LLP CASH BALANCE PLAN	
b	Name of plan sponsor STOEL RIVES LLP	c EIN-PN 93-0408771-012
a	Plan name STORY CONSTRUCTION CO RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor STORY CONSTRUCTION CO	c EIN-PN 42-0992152-001
a	Plan name STRATEGIC AMERICA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor STRATEGIC AMERICA, INC.	c EIN-PN 42-1206760-001
a	Plan name STRATEGIC STAFFING SOLUTIONS, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor STRATEGIC STAFFING SOLUTIONS, INC.	c EIN-PN 38-2947621-001
a	Plan name STRATTEC SECURITY CORPORATION EMPLOYEE SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor STRATTEC SECURITY CORPORATION	c EIN-PN 39-1804239-001
a	Plan name STRUCTURAL GROUP, INC. 401(K) SAVINGS PLAN AND TRUST	
b	Name of plan sponsor STRUCTURAL GROUP	c EIN-PN 52-1071818-001
a	Plan name SUBARU DISTRIBUTORS CORP RETIREMENT PLAN & TRUST	
b	Name of plan sponsor SUBARU DISTRIBUTORS CORP.	c EIN-PN 13-2801921-002
a	Plan name SUN PACIFIC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUN PACIFIC SHIPPERS, LP	c EIN-PN 77-0570025-001
a	Plan name SYMMETRY SURGICAL, INC. 401(K) PLAN	
b	Name of plan sponsor SYMMETRY SURGICAL, INC.	c EIN-PN 47-1523659-001
a	Plan name T. D. BROWN OIL CO. OF GADSDEN INC. PROFIT SHARING PLAN	
b	Name of plan sponsor T.D. BROWN OIL CO. OF GADSDEN INC.	c EIN-PN 63-0819006-001
a	Plan name TATA CHEMICALS (SODA ASH) PARTNERS HOURLY EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor TATA CHEMICALS (SODA ASH) PARTNERS	c EIN-PN 22-2802279-004
a	Plan name TCP PETCOKE CORPORATION 401(K) PLAN	
b	Name of plan sponsor TCP PETCOKE CORPORATION	c EIN-PN 13-3649267-002

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	TCS 401(K) PLAN	
b	Name of plan sponsor	TATA AMERICA INTERNATIONAL CORPORATION	c EIN-PN 13-2805758-001
a	Plan name	TECTA AMERICA CORP. PROFIT SHARING AND 401(K) PLAN	
b	Name of plan sponsor	TECTA AMERICA	c EIN-PN 84-1505685-001
a	Plan name	TEICHERT, INC. EMPLOYEE STOCK BONUS PLAN	
b	Name of plan sponsor	A TEICHERT, INC.	c EIN-PN 94-0919260-003
a	Plan name	TENSION ENVELOPE CORPORATION RESTATED RETIREMENT PLAN	
b	Name of plan sponsor	TENSION ENVELOPE CORPORATION	c EIN-PN 22-1589367-005
a	Plan name	TERRA DRIVE SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	TERRA DRIVE SYSTEMS, INC.	c EIN-PN 45-4038749-001
a	Plan name	TETRA TECH, INC. AND SUBSIDIARIES RETIREMENT PLAN	
b	Name of plan sponsor	TETRA TECH INC	c EIN-PN 95-4148514-001
a	Plan name	TEXAS ORGAN SHARING ALLIANCE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TEXAS ORGAN SHARING ALLIANCE	c EIN-PN 74-1849716-001
a	Plan name	THE AMERICAN BOARD OF PSYCHIATRY & NEUROLOGY, INC. EMPLOYEES PENSION PLAN	
b	Name of plan sponsor	AMERICAN BOARD OF PSYCHIATRY	c EIN-PN 41-0654864-001
a	Plan name	THE ASSURANCE GROUP 401(K) PLAN	
b	Name of plan sponsor	THE ASSURANCE GROUP	c EIN-PN 22-2179111-001
a	Plan name	THE BICYCLE SHOP, INC. PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	BICYCLE SHOP, INC.	c EIN-PN 92-0071490-001
a	Plan name	THE BOBRICK CORPORATION PROFIT SHARING RETIREMENT PLAN	
b	Name of plan sponsor	BOBRICK CORP	c EIN-PN 95-2500371-001
a	Plan name	THE BRANCH GROUP, INC. & AFFILIATES EMPLOYEE STOCK OWNERSHIP AND SAVINGS PLAN	
b	Name of plan sponsor	THE BRANCH GROUP, INC	c EIN-PN 54-6047677-003

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 CAMBAY GROUP MANAGEMENT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE CAMBAY GROUP, INC.	c EIN-PN 82-3703505-001
a	Plan name THE CHRISTIAN BARTON PROFIT SHARING PLAN	
b	Name of plan sponsor CHRISTIAN & BARTON, LLP	c EIN-PN 54-0515971-002
a	Plan name THE CRONER COMPANY 401(K) PLAN	
b	Name of plan sponsor CRONER CO	c EIN-PN 94-2513557-002
a	Plan name THE CYXTERA 401(K) SAVINGS PLAN	
b	Name of plan sponsor CYXTERA MANAGEMENT, INC	c EIN-PN 82-0800913-001
a	Plan name THE DAVEY 401KSOP AND ESOP	
b	Name of plan sponsor DAVEY TREE EXPERT CO.	c EIN-PN 34-0176110-004
a	Plan name THE DEPOSITORY TRUST & CLEARING CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor THE DEPOSITORY TRUST & CLEARING CORPORATION	c EIN-PN 13-4086405-003
a	Plan name THE GILLETTE PEPSI COMPANIES, INC. PROFIT SHARING & SAVINGS PLAN	
b	Name of plan sponsor THE GILLETTE PEPSI COMPANIES, INC.	c EIN-PN 81-0868207-002
a	Plan name THE GRINNELL MUTUAL RETIREMENT PLAN	
b	Name of plan sponsor GRINNELL MUTUAL REINSURANCE CO	c EIN-PN 42-0245990-002
a	Plan name THE HOUSTONIAN CAMPUS VALUE SHARING PLAN	
b	Name of plan sponsor HOUSTONIAN CAMPUS LLC	c EIN-PN 26-0466230-002
a	Plan name THE INSTINET SAVINGS PLAN	
b	Name of plan sponsor INSTINET	c EIN-PN 20-3880413-001
a	Plan name THE INTERTECH GROUP, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor THE INTERTECH GROUP, INC.	c EIN-PN 57-0834597-004
a	Plan name THE JOSEPH A. BANK MFG. CO., INC. DEFINED BENEFIT PENSION PLAN	
b	Name of plan sponsor JOS A BANK MANUFACTURING	c EIN-PN 36-3189198-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE LEE COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	THE LEE COMPANY	c EIN-PN 06-0639381-002
a	Plan name	THE LENOIR MIRROR COMPANY PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	THE LENOIR MIRROR COMPANY	c EIN-PN 56-0296980-001
a	Plan name	THE MANCINI PACKING COMPANY 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	THE MANCINI PACKING COMPANY	c EIN-PN 06-0438946-001
a	Plan name	THE MODIFIED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	CENTRAL VALLEY AG	c EIN-PN 47-0834827-010
a	Plan name	THE MORNING STAR COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MORNING STAR COMPANY	c EIN-PN 94-2421552-003
a	Plan name	THE NATIONAL PEN & ASSOCIATES P/S & SVGS PLAN	
b	Name of plan sponsor	NATIONAL PEN CO. LLC	c EIN-PN 46-0911877-001
a	Plan name	THE NOEL CORPORATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THE NOEL CORPORATION	c EIN-PN 91-0826068-003
a	Plan name	THE NORTH WEST COMPANY (INTERNATIONAL) EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	THE NORTH WEST COMPANY	c EIN-PN 92-0144184-001
a	Plan name	THE PENSION PLAN FOR EMPLOYEES OF ST. ANNES MATERNITY HOME	
b	Name of plan sponsor	ST. ANNES MATERNITY HOME	c EIN-PN 95-1691306-001
a	Plan name	THE PETROLEUM CLUB PENSION PLAN	
b	Name of plan sponsor	PETROLEUM CLUB OF HOUSTON	c EIN-PN 74-1098713-001
a	Plan name	THE RANDALL GROUP, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THE RANDALL GROUP, INC.	c EIN-PN 93-1147033-002
a	Plan name	THE RASMUSSEN GROUP, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	RASMUSSEN GROUP INC	c EIN-PN 42-1022912-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name THE RESTATED AG PROCESSING INC RETIREMENT PLAN	
b	Name of plan sponsor AG PROCESSING INC	c EIN-PN 42-0615016-020
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor SILVEREDGE COOPERATIVE	c EIN-PN 39-1900230-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor HEARTLAND COOPERATIVE	c EIN-PN 42-0242420-020
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor PRAIRIE AG COOPERATIVE	c EIN-PN 42-0243950-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor LANDUS COOPERATIVE	c EIN-PN 42-0243650-020
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor FARMERS COOPERATIVE ELEVATOR	c EIN-PN 42-0243480-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor CEDAR COUNTY COOPERATIVE	c EIN-PN 42-0172530-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor FIVE STAR COOPERATIVE	c EIN-PN 42-0179380-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor HAWKEYE COOPERATIVE COMPANY C/O FARMERS WIN COOP	c EIN-PN 42-0782088-001
a	Plan name THE RESTATED CONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor UNITED FARMERS COOPERATIVE	c EIN-PN 42-0241770-020
a	Plan name THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor STATELINE COOPERATIVE	c EIN-PN 42-1023410-020
a	Plan name THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor FCSTONE GROUP, INC.	c EIN-PN 42-1091210-020

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 RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	NEW VISION COOP
c	EIN-PN	41-1916780-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	FARMERS UNION COOP TRANSPORT
c	EIN-PN	47-0159778-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	GOLD-EAGLE COOPERATIVE
c	EIN-PN	42-0243700-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	RIVER VALLEY COOPERATIVE
c	EIN-PN	42-0244210-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	FARMERS COOPERATIVE COMPANY
c	EIN-PN	42-0484570-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	UNITED COOPERATIVE
c	EIN-PN	42-1079220-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	FARMERS COOPERATIVE COMPANY
c	EIN-PN	42-0242040-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	FARMERS UNION COOPERATIVE
c	EIN-PN	42-0243030-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	VIAFIELD
c	EIN-PN	42-0243960-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	GREEN PLAINS GRAIN COMPANY LLC
c	EIN-PN	26-2042403-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	OSAGE COOPERATIVE ELEVATOR
c	EIN-PN	42-0625867-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES
b	Name of plan sponsor	FARMERS COOPERATIVE ASSOCIATION
c	EIN-PN	42-1080586-020

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 RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	FARMER DIRECT FOODS, INC.	c EIN-PN 48-1061509-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	COOPERATIVE FARMERS ELEVATOR	c EIN-PN 42-0244070-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	MID IOWA COOP	c EIN-PN 42-0131810-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	BUCKINGHAM CO-OPERATIVE CO.	c EIN-PN 42-0925005-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	FARMERS COOPERATIVE SOCIETY	c EIN-PN 42-0243080-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	FARMERS COOPERATIVE ELEVATOR COMPANY	c EIN-PN 41-1892592-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	21ST CENTURY COOPERATIVE COMPANY	c EIN-PN 42-0241690-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	MINNESOTA GRAIN & FEED ASSOCIATION	c EIN-PN 41-0248640-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	INNOVATIVE AG SERVICES CO.	c EIN-PN 20-2096489-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	NORTH IOWA COOPERATIVE	c EIN-PN 42-1177465-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	NEW COOPERATIVE, INC.	c EIN-PN 42-1009976-020
a	Plan name	THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor	GOLDEN GROWERS COOPERATIVE	c EIN-PN 27-1312571-020

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 RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor CORNERSTONE FEED, L.C. C/O KEY COOPERATIVE	c EIN-PN 39-1905059-020
a	Plan name THE RESTATED NONCONTRIBUTORY RETIREMENT PLAN FOR COOPERATIVES	
b	Name of plan sponsor NORTHERN COUNTRY COOPERATIVE	c EIN-PN 42-0539815-020
a	Plan name THE RESTATED THRIFT/PROFIT SHARING PLAN FOR COOPERATIVES	
b	Name of plan sponsor ASSOCIATED BENEFITS CORPORATION	c EIN-PN 42-1279416-030
a	Plan name THE SEATTLE TIMES PENSION PLAN	
b	Name of plan sponsor SEATTLE TIMES COMPANY	c EIN-PN 91-0403890-002
a	Plan name THE SPRINGS COMPANY 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor THE SPRINGS COMPANY	c EIN-PN 57-0145000-001
a	Plan name THE TYDEN SEAL COMPANY USW RETIREMENT INCOME PLAN	
b	Name of plan sponsor E.J. BROOKS COMPANY	c EIN-PN 22-0793310-002
a	Plan name THE WANKE CASCADE PROFIT SHARING PLAN	
b	Name of plan sponsor WANKE CASCADE	c EIN-PN 86-1156612-001
a	Plan name THE WEITZ RETIREMENT AND 401K PLAN	
b	Name of plan sponsor WEITZ COMPANY	c EIN-PN 42-1512625-001
a	Plan name THE WOODBRIDGE GROUP UNITED STATES SALARIED EMPLOYEES' PENSION PLAN	
b	Name of plan sponsor WOODBRIDGE GROUP	c EIN-PN 39-1505258-002
a	Plan name THERMOWORKS, INC. 401(K) PLAN	
b	Name of plan sponsor THERMOWORKS, INC.	c EIN-PN 87-0570676-001
a	Plan name THERMWELL PRODUCTS CO. EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THERMWELL PRODUCTS CO., INC.	c EIN-PN 22-2177331-001
a	Plan name TIGHTCO, INC. AEROSTRUCTURES DIVISION 401(K) PLAN	
b	Name of plan sponsor TIGHTCO, INC.	c EIN-PN 57-0934530-002

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	TIMMONS GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	TIMMONS GROUP, INC.	c EIN-PN 54-1301413-001
a	Plan name	TISHCON CORP 401(K) PLAN	
b	Name of plan sponsor	TISHCON CORP	c EIN-PN 11-2432386-001
a	Plan name	TLINGIT & HAIDA INDIAN TRIBES RETIREMENT AND 401(K) PLAN	
b	Name of plan sponsor	CENTRAL COUNCIL TLINGIT AND HAIDA INDIAN TRIBES	c EIN-PN 92-0036505-999
a	Plan name	TOHONO O'ODHAM NATION 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TOHONO OODHAM NATION	c EIN-PN 86-6350375-999
a	Plan name	TOLTZ, KING, DUVALL, ANDERSON & ASSOCIATES, INC. 401(K) FLEXIBLE SAVINGS PLAN	
b	Name of plan sponsor	TOLTZ KING DUVALL ANDERSON & ASSOC	c EIN-PN 41-0579540-001
a	Plan name	TOWN PUMP, ET AL 401(K) PLAN	
b	Name of plan sponsor	TOWN PUMP, ET AL	c EIN-PN 81-0270360-001
a	Plan name	TRANSIT MANAGEMENT OF CHARLOTTE, INC. DEFERRED COMPENSATION PLAN	
b	Name of plan sponsor	TRANSIT MANAGEMENT OF CHARLOTTE	c EIN-PN 56-1164899-999
a	Plan name	TRUCK EQUIPMENT, INC. EMPLOYEE STOCK OWNERSHIP PLAN	
b	Name of plan sponsor	TRUCK EQUIPMENT, INC.	c EIN-PN 42-0955969-002
a	Plan name	TRUMBULL POLICE BENEFIT FUND	
b	Name of plan sponsor	TOWN OF TRUMBULL	c EIN-PN 06-6002110-999
a	Plan name	TUBULAR TEXTILE MACHINERY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TUBULAR TEXTILE MACHINERY, INC.	c EIN-PN 43-1841618-001
a	Plan name	TULALIP TRIBES OF WASHINGTON EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	TULALIP TRIBES	c EIN-PN 91-0557816-002
a	Plan name	TUTHILL CORPORATION SUPPLEMENTAL INVESTMENT RETIREMENT PLAN	
b	Name of plan sponsor	TUTHILL CORPORATION	c EIN-PN 36-1885005-004

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	TWD & ASSOCIATES, INC. 401(K) PLAN	
b Name of plan sponsor	TWD & ASSOCIATES	c EIN-PN 54-1637078-001
a Plan name	TWIN CITY DIE CASTINGS COMPANY 401(K) PLAN	
b Name of plan sponsor	TWIN CITY DIE CASTINGS COMPANY	c EIN-PN 41-0665109-002
a Plan name	UNITED STARS, INC. 401(K) PLAN	
b Name of plan sponsor	UNITED STARS HOLDINGS, INC.	c EIN-PN 30-1150438-003
a Plan name	UNITED STARS, INC. PENSION PLAN	
b Name of plan sponsor	UNITED STARS HOLDINGS, INC. DBA UNITED STARS, INC.	c EIN-PN 30-1150438-002
a Plan name	UNITED STATES AIR FORCE NONAPPROPRIATED FUND EMPLOYEES' 401(K) SAVINGS PLAN	
b Name of plan sponsor	UNITED STATES AIR FORCE	c EIN-PN 74-2725638-999
a Plan name	UNIV OF ID RETIREE H&W TR- MAP	
b Name of plan sponsor	UNIV OF ID	c EIN-PN 90-6135532-999
a Plan name	USIC 401(K) SAVINGS PLAN	
b Name of plan sponsor	USIC LLC	c EIN-PN 26-2212803-002
a Plan name	VALDESE WEAVERS 401(K) PLAN	
b Name of plan sponsor	CV INDUSTRIES	c EIN-PN 20-0551086-002
a Plan name	VALDESE WEAVERS, LLC 401(K) PLAN	
b Name of plan sponsor	CV INDUSTRIES	c EIN-PN 56-1043374-002
a Plan name	VALMET, INC. DEFINED BENEFIT PLAN	
b Name of plan sponsor	METSO USA, INC	c EIN-PN 56-1508400-333
a Plan name	VALMET, INC. PENSION PLAN AND TRUST	
b Name of plan sponsor	VALMET, INC.	c EIN-PN 56-1508400-001
a Plan name	VARIETY WHOLESALEERS, INC. RETIREMENT SAVINGS 401(K) PLAN	
b Name of plan sponsor	VARIETY WHOLESALEERS, INC.	c EIN-PN 56-0653322-002

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 VENTAS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor VENTAS, INC.	c EIN-PN 61-1055020-001
a	Plan name VEOLIA NORTH AMERICA PENSION PLAN FOR COLLECTIVELY BARGAINED EMPLOYEES	
b	Name of plan sponsor VEOLIA NORTH AMERICA, LLC	c EIN-PN 26-2756568-003
a	Plan name VICINITY ENERGY PENSION PLAN FOR COLLECTIVELY BARGAINED EMPLOYEES	
b	Name of plan sponsor VICINITY ENERGY, LLC	c EIN-PN 38-3680309-002
a	Plan name VION CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor VION CORP.	c EIN-PN 52-1167763-001
a	Plan name WALKER INDUSTRIAL PRODUCTS 401(K) PLAN	
b	Name of plan sponsor WALKER INDUSTRIAL PRODUCTS, INC.	c EIN-PN 11-2421409-001
a	Plan name WALKER, GIROUX & HAHNE, LLC EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor WALKER, GIROUX & HAHNE, LLC	c EIN-PN 41-1359264-001
a	Plan name WARREN RESOURCES INC. 401(K) PLAN	
b	Name of plan sponsor WARREN RESOURCES, INC.	c EIN-PN 11-3024080-001
a	Plan name WARRIOR MET COAL, INC SALARIED 401(K) PLAN	
b	Name of plan sponsor WARRIOR MET COAL, INC	c EIN-PN 81-0706839-001
a	Plan name WAWANESA MUTUAL INSURANCE COMPANY PENSION PLAN	
b	Name of plan sponsor WAWANESA MUTUAL INSURANCE CO	c EIN-PN 95-2907897-001
a	Plan name WEBER'S, INC. EMPLOYEES' SAVINGS PLAN & TRUST	
b	Name of plan sponsor WEBERS INN	c EIN-PN 38-1734391-001
a	Plan name WESTERN QUALITY FOODS, LC RETIREMENT PLAN	
b	Name of plan sponsor STREMICKS HERITAGE FOODS, LLC	c EIN-PN 87-0509318-002
a	Plan name WESTIN HOMES AND PROPERTIES LP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor WESTIN HOMES AND PROPERTIES LP	c EIN-PN 20-0286051-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	WESTLAKE REALTY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	WESTLAKE REALTY GROUP, INC.	c EIN-PN 11-3675140-001
a	Plan name	WHITE MT. APACHE TRIBE GOVERNMENTAL PLAN	
b	Name of plan sponsor	WHITE MOUNTAIN APACHE TRIBE	c EIN-PN 86-0092030-003
a	Plan name	WIKOFF COLOR CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor	WIKOFF COLOR CORPORATION	c EIN-PN 56-0633683-001
a	Plan name	WILCOX FARMS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WILCOX FARMS INC	c EIN-PN 91-0735213-001
a	Plan name	WILDWOOD ELECTRONICS INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	WILDWOOD ELECTRONICS INC.	c EIN-PN 63-0847110-001
a	Plan name	WINTHROP & WEINSTINE, P.A. 401(K) PLAN & TRUST	
b	Name of plan sponsor	WINTHROP & WEINSTINE, P.A.	c EIN-PN 41-1722524-002
a	Plan name	WINTHROP & WEINSTINE, P.A. CASH BALANCE PLAN	
b	Name of plan sponsor	WINTHROP & WEINSTINE, P.A.	c EIN-PN 41-1722524-003
a	Plan name	WIRTZ MANUFACTURING COMPANY, INC. HOURLY RATED EMPLOYEES PENSION PLAN	
b	Name of plan sponsor	WIRTZ MANUFACTURING CO., INC.	c EIN-PN 38-1491059-003
a	Plan name	WJK CORPORATION 401(K) PLAN	
b	Name of plan sponsor	WJK CORPORATION	c EIN-PN 36-4505254-002
a	Plan name	WOLVERINE PIPE LINE COMPANY SAVINGS PLAN FOR EMPLOYEES	
b	Name of plan sponsor	WOLVERINE PIPE LINE COMPANY	c EIN-PN 13-1680453-001
a	Plan name	WRIGHT & MCGILL COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WRIGHT & MCGILL CO.	c EIN-PN 84-0357930-001
a	Plan name	XANTERRA PARKS & RESORTS, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	XANTERRA PARKS & RESORTS	c EIN-PN 13-2735034-001

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	YARA NORTH AMERICA 401(K) SAVINGS PLAN	c	EIN-PN	
b	Name of plan sponsor	YARA NORTH AMERICA, INC.	c	EIN-PN	20-0440296-001
a	Plan name	YOKOHAMA TIRE CORPORATION FROZEN NON-CONTRIBUTORY	c	EIN-PN	
b	Name of plan sponsor	YOKOHAMA TIRE CORPORATION	c	EIN-PN	95-2624417-006
a	Plan name	YUMA REGIONAL MEDICAL CENTER 401(K) PLAN	c	EIN-PN	
b	Name of plan sponsor	YUMA REGIONAL MEDICAL CENTER	c	EIN-PN	86-6007596-002
a	Plan name	ZENS MANUFACTURING INC PROFIT SHARING PLAN	c	EIN-PN	
b	Name of plan sponsor	ZENS MANUFACTURING INC	c	EIN-PN	39-0961829-002
a	Plan name	ZIP, INC. 401(K) PROFIT SHARING PLAN	c	EIN-PN	
b	Name of plan sponsor	ZIP INC	c	EIN-PN	81-0480869-001
a	Plan name	ZIRKLE FRUIT COMPANY 401K PROFIT SHARING PLAN	c	EIN-PN	
b	Name of plan sponsor	ZIRKLE FRUIT COMPANY	c	EIN-PN	91-0979506-401
a	Plan name	ZITO-RUSSELL ARCHITECTS, P.C. 401(K) PROFIT SHARING PLAN	c	EIN-PN	
b	Name of plan sponsor	ZITO-RUSSELL ARCHITECTS, P.C.	c	EIN-PN	20-0688308-002
a	Plan name	ZURN LLC PENSION PLAN	c	EIN-PN	
b	Name of plan sponsor	ZURN LLC	c	EIN-PN	04-3722228-007
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	
a	Plan name		c	EIN-PN	
b	Name of plan sponsor		c	EIN-PN	

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>PRINCIPAL/BLACKROCK S&P 500 INDEX CIT</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SEI TRUST COMPANY</u>	D Employer Identification Number (EIN) <u>94-3224211</u>

Part I Asset and Liability Statement

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.

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	<u>0</u>	<u>3000</u>
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions		
(2) Participant contributions		
(3) Other	<u>53517000</u>	<u>15392000</u>
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)		
(2) U.S. Government securities		
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred		
(B) All other		
(4) Corporate stocks (other than employer securities):		
(A) Preferred		
(B) Common		
(5) Partnership/joint venture interests		
(6) Real estate (other than employer real property)		
(7) Loans (other than to participants)		
(8) Participant loans		
(9) Value of interest in common/collective trusts	<u>3416246000</u>	<u>3710011000</u>
(10) Value of interest in pooled separate accounts		
(11) Value of interest in master trust investment accounts		
(12) Value of interest in 103-12 investment entities		
(13) Value of interest in registered investment companies (e.g., mutual funds)		
(14) Value of funds held in insurance company general account (unallocated contracts)		
(15) Other		

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	3469763000	3725406000
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	53452000	15551000
k Total liabilities (add all amounts in lines 1g through 1j)	1k	53452000	15551000
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	3416311000	3709855000

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)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		
(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)		
(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)		813467000
(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		813467000

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)		
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)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)	184000	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)	441000	
(11) Other expenses.....	2i(11)	766000	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		1391000
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1391000

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		812076000
l Transfers of assets:			
(1) To this plan.....	2l(1)		217687000
(2) From this plan	2l(2)		736219000

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 _____.