

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A	This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☐ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information			
1a	Name of plan ENGAGE PEO RETIREMENT SAVINGS PLAN	1b	Three-digit plan number (PN) ▶	001
		1c	Effective date of plan 01/01/2012	
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) THE S2 HR GROUP, LLC 3001 EXECUTIVE DRIVE, SUITE 340 ST. PETERSBURG, FL 33762	2b	Employer Identification Number (EIN) 45-2441552	
		2c	Plan Sponsor's telephone number 888-780-8807	
		2d	Business code (see instructions) 541214	

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

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
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 35077
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.....	6a(1) 27434 6a(2) 30449 6b 0 6c 10261 6d 40710 6e 0 6f 40710 6g(1) 17608 6g(2) 23364 6h 81
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:

2E 2F 2G 2J 2K 2T 2V 3D

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) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ 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) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☒ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☐ **A** (Insurance Information) – Number Attached _____
- (4) ☒ **C** (Service Provider Information)
- (5) ☐ **D** (DFE/Participating Plan Information)
- (6) ☐ **G** (Financial Transaction Schedules)

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 C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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 ENGAGE PEO RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 THE S2 HR GROUP, LLC	D Employer Identification Number (EIN) 45-2441552

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a

Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....

Yes

☒

No
- b

If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 50	TPA	1861641	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

SLAVIC MUTUAL FUND MANAGEMENT CORP.

59-2749576

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	INVESTMENT MGMT	1317662	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

THE S2 HR GROUP, LLC

45-2441552

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14	PLAN ADMINISTRATOR	690992	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

COHNREZNICK LLP

33-4144829

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	76350	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

BKS RETIREMENT SERVICES

84-1921272

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 50	INVESTMENT ADVISOR	39989	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

MCHENRY CONSULTING

9300 CONROY-WINDERMERE RD
SUITE 3247
WINDERMERE, FL 34786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16	CONSULTING	20000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

(a) Enter name and EIN or address (see instructions)

CARON & BLETZER, PLLC

1 LIBRARY LANE
KINGSTON, NH 03848

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	17500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

JASON F. CLAUSEN P.C.

16650 15 MILE RD
FRASER, MI 48026

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	AUDITOR	13800	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

(a) Enter name and EIN or address (see instructions)

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	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 ENGAGE PEO RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) 001
C Plan sponsor's name as shown on line 2a of Form 5500 THE S2 HR GROUP, LLC	D Employer Identification Number (EIN) 45-2441552	

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	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2552824	3273808
(2) Participant contributions.....	1b(2)	1721573	2920742
(3) Other	1b(3)	88446	136373
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	9336836	13849773
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	732903685	1018783416
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	746603364	1038964112
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	746603364	1038964112

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)	36018362	
(B) Participants	2a(1)(B)	88537494	
(C) Others (including rollovers)	2a(1)(C)	12428284	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		136984140
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)	810509	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		810509
(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)	41276000	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		41276000
(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)		
(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)		58720727
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		237791376

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	96278928	
(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)		96278928
f Corrective distributions (see instructions)	2f		815818
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	122904	
(2) Contract administrator fees	2i(2)	2552633	
(3) Recordkeeping fees	2i(3)	1377652	
(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)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		4053189
j Total expenses. Add all expense amounts in column (b) and enter total	2j		101147935

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		136643441
l Transfers of assets:			
(1) To this plan	2l(1)		214111491
(2) From this plan	2l(2)		58394184

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: **COHNREZNICK LLP**

(2) EIN: **33-4144829**

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?	☒		500000
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)
CORNERSTONE CONCRETE, LLC 401(K) PLAN	26-4329692	001
ADP TOTALSOURCE RETIREMENT SAVINGS PLAN	59-2452823	001
COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	27-3007025	333
INSPERITY 401(K) PLAN	76-0178498	001

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 _____.

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)
AIR HAWK HEATING AND COOLING LLC 401(K) PLAN	47-2622506	001
TOP JOB, LLC 401(K) PLAN	26-0175229	001
DECISIONHR RETIREMENT SAVINGS PLAN	59-3405686	333
HUPER OPTIK USA 401(K) PLAN	76-0638357	001

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 _____.

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)
FIRE SAFE INCORPORATED 401(K) PROFIT SHARING PLAN & TRUST	52-1786048	001
YACHT STARSHIP DINING CRUISES LLC 401(K) PLAN	20-8686227	001
AMPLIFY HR MANAGEMENT RETIREMENT SAVINGS PLAN	82-1671832	001
VENSURE RETIREMENT PLAN	39-2377547	016

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 _____.

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)
SUCCESSWISE POOLED EMPLOYER PLAN	85-3213245	314
MORRIS COUNTY FARM, INC. 401(K) PLAN	22-1571211	001
LYNESS CONSTRUCTION LP 401K PLAN AND TRUST	75-2585489	002
ALERA POOLED EMPLOYER PLAN	84-2923954	876

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 _____.

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)
PROPEL HR 401(K) PLAN	20-5888849	333
FIESTA INSURANCE FRANCHISE CORPORATION 401(K) PLAN	20-4606759	002
HARBOR 401(K) PLAN	92-0678860	001
MAGNOLIA PLANTATION CORPORATE 401(K) PLAN	57-0878972	001

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 _____.

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)
GERSH AUTISM 401(K) PLAN	20-1774665	001
ANESTHESIA CARE CONSULTANTS, INC. 401(K) PLAN	20-8584688	001
PHOTON BROTHERS INC 401(K) PLAN	46-3430499	001
ARC HEALTH PARTNERS 401(K) PLAN	87-0915789	001

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 _____.

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)
SECURE CHOICE POOLED EMPLOYER PLAN	59-3708427	019
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN	37-1508469	001
MAVERICK BANKCARD INC 401K PLAN	32-0358047	001
OASIS RETIREMENT SAVINGS PLAN	65-0731524	333

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 _____.

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)
LV COLLECTIVE 401(K) PLAN	46-1300559	001
HRD MASTER POOLED RETIREMENT SAVINGS PLAN	92-1375379	352
G & A PARTNERS MULTIPLE EMPLOYER 401(K) PLAN	76-0461926	001
TRIADA 401(K) PLAN	82-5371810	001

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 _____.

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)
TRINET 401K PLAN	48-1304650	333
EXTENSIS GROUP RETIREMENT SAVINGS PLAN	86-1064991	333
MESMERISE GROUP 401(K) PLAN	87-3596415	001
ELM STAFFING, INC. 401(K) PLAN	63-1249564	001

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 _____.

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)
ADEX 401(K) PLAN	13-3741300	002

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 _____.

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 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.	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 ENGAGE PEO RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 THE S2 HR GROUP, LLC	D Employer Identification Number (EIN) 45-2441552	

Part I	Distributions
--------	---------------

All references to distributions relate only to payments of benefits during the plan year.

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 65-0708495		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
---------	--

4	Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.				
5	If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6	a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
	b Enter the amount contributed by the employer to the plan for this plan year	6b		
	c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.				
7	Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8	If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
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9	If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase	☐ Decrease	☐ Both	☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

d Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box ☐ and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month _____ Day _____ Year _____

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for: a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)..... b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)..... c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	14a 14b 14c	
15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	
16 Information with respect to any employers who withdrew from the plan during the preceding plan year:		
a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20. a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation: _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☐ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☐ Design-based safe harbor method ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter <u>06 / 30 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q702352A</u> .	

SCHEDULE MEP (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	MULTIPLE-EMPLOYER RETIREMENT PLAN 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.	OMB No. 1210-0110 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 ENGAGE PEO RETIREMENT SAVINGS PLAN	B Three-digit Plan number (PN)..... ►	001
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF THE S2 HR GROUP, LLC	D Administrator's EIN 45-2441552	

Part I	Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.
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1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

a ☐ association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)

b ☒ professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)

c ☐ pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)

d ☐ other multiple-employer pension plan (Describe) _____ (Complete Part II)

Part II	Participating Employer Information.
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2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer THE S2 HR GROUP LLC	2b EIN 45-2441552	2c Percentage of Total Contributions for the Plan Year 2.46	2d Aggregate Account Balances Attributable to Participating Employer 21332871
2a Name of Participating Employer LMS 165 LLC	2b EIN 45-3213369	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 4607

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e Does the plan include any individuals not participating through an employer or who are individual working owners?	2e	☐ Yes ☒ No
2f If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	2f	
2g If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	2g	

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CEOHR INC	82-2861313	0.02	226915
2a Name of Participating Employer ADVANTAGE CAREER INSTITUTE INC	2b EIN 20-3476575	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 447340
2a Name of Participating Employer MINUTEMAN INSURANCE AGENCY INC	2b EIN 04-3392196	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer ALAN A SMITH MD LLC	2b EIN 26-3195583	2c Percentage of Total Contributions for the Plan Year 0.04	2d Aggregate Account Balances Attributable to Participating Employer 471960
2a Name of Participating Employer UNITED BENEFITS CONSULTING INC DBA ZAMP HR	2b EIN 56-2551817	2c Percentage of Total Contributions for the Plan Year 0.31	2d Aggregate Account Balances Attributable to Participating Employer 2283114
2a Name of Participating Employer BAY AREA CHEST PHYSICIANS PA	2b EIN 59-3051816	2c Percentage of Total Contributions for the Plan Year 0.74	2d Aggregate Account Balances Attributable to Participating Employer 10393273
2a Name of Participating Employer RASPBERRY GOLF INVESTORS LLC DBA RASPBERRY FALLS GOLF	2b EIN 47-1853802	2c Percentage of Total Contributions for the Plan Year 0.04	2d Aggregate Account Balances Attributable to Participating Employer 528920
2a Name of Participating Employer FUSION EMPLOYER SERVICES LLC	2b EIN 13-4337327	2c Percentage of Total Contributions for the Plan Year 0.05	2d Aggregate Account Balances Attributable to Participating Employer 3057318
2a Name of Participating Employer WINCHESTER MOUNT VERNON HOUSE	2b EIN 04-2104317	2c Percentage of Total Contributions for the Plan Year 0.07	2d Aggregate Account Balances Attributable to Participating Employer 1341990

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DRIVE MARKETINGDRIVE FULFILLMENT	47-2519886	0.08	1830732
2a Name of Participating Employer RBB COMMUNICATIONS LLC	65-1144624	0.55	6882792
2a Name of Participating Employer OLD HICKORY GOLF CLUB	54-2057960	0.04	1342119
2a Name of Participating Employer CRAIGS GOOSE COPS LLC DBA TRISTATE GEESSE POLICE	32-0195995	0.00	114497
2a Name of Participating Employer KINGSWOOD GOLF CLUB	02-0279210	0.01	221123
2a Name of Participating Employer ROBERTSON ELECTRIC LLC	27-2375527	0.01	185222
2a Name of Participating Employer AMERICAN FRIENDS OF JORDAN RIVER VILLAGE	36-4558884	0.01	208877
2a Name of Participating Employer AUGUSTINE GOLF INVESTORS LLC DBA AUGUSTINE GOLF CLUB	27-5079482	0.00	91043
2a Name of Participating Employer DVORAK AND ASSOCIATES LLC	20-5538403	0.02	2136934

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BYGGMEISTER INC	04-2835306	0.17	2338943
2a Name of Participating Employer FLORIDA STREET MEDIA LLC	87-3386274	0.00	254571
2a Name of Participating Employer US STREET RODS COLLISION	47-4408185	0.02	231323
2a Name of Participating Employer BR GOLF INVESTORS LLC DBA BULL RUN GOLF CLUB	27-1940712	0.02	71122
2a Name of Participating Employer EASCO SHOWER DOORS COMPANY	22-3779484	0.06	4261691
2a Name of Participating Employer THE DANCE INN INC	04-2935793	0.02	943171
2a Name of Participating Employer CARING AND SHARING CENTER FOR INDEPENDENCE LIVING INC DBA	59-3102837	0.01	60694
2a Name of Participating Employer CORNERSTONE CONCRETE LLC	26-4329692	0.00	0
2a Name of Participating Employer PARTNERS IN RADIOLOGY LLCHEALTH IMAGING SERVICES LLC	02-0620715	0.12	2107260

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRAXIS S10 LLC	38-4003195	0.01	35491
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ESTENDA SOLUTIONS INC	81-0605924	0.05	3764798
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEALTH PARTNERS OF NE INC	04-3442646	0.03	1452594
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GILLISS AND GILLISS INC	59-3519730	0.00	754612
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WESTERN PAVING INC	87-0260065	0.03	433284
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ESBECK INVESTMENTS LLC DBA ANDRICK AND ASSOCIATES	47-4001000	0.03	222228
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GEMCO VALVE CO LLC	22-3537778	0.01	1185495
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NANTERO INC	04-3555102	0.04	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GROUP WA INC	05-0634499	0.01	246035

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DIRECTORY RESOURCES LLC	87-0624961	0.00	446269
MEGATRAN INC	59-2332736	0.00	1157279
TREASURE COAST INFECTIOUS DISEASE CONSULTANTS PA	65-0352543	0.01	57576
GENERAL MACHINE CO OF NJ INC	22-1417152	0.01	1415792
LIVEDATA INC	04-3127161	0.58	6560591
COMMUNITY HEALTH CENTERS ALLIANCE INC	59-3631620	0.06	1204725
KMW CONSTRUCTION	26-2131694	0.03	367500
GULF SHORE RX LLC JC RESOURCES LLC	47-2737415	0.02	262417
GEOPEAK ELECTRIC LLC	80-0776322	0.01	468158

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAHE OUTDOORS NORTH AMERICA INC	32-0043610	0.04	1214023
VR CLUB INC	86-3700756	0.23	1391485
ENGAGE PEO PLAN EXPENSE ACCOUNT	80-8080188	0.00	166285
CAPON SPRINGS AND FARMS LLC	55-0560797	0.03	91153
GERSHON BIEGELESSEN CPAS LLC	46-4245481	0.07	2463300
CLINICAL 1 HOME MEDICAL INC	04-3486671	0.13	4451852
PICKERING ELECTRIC INC	87-0649050	0.02	178392
BROAD STREET OPERATIONS	26-2648715	0.00	293555
NATIONAL CHRISTIAN FOUNDATION TAMPA BAY INC	47-3162614	0.04	236098

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HANSON GENERAL CONTRACTING INC	23-2949836	0.01	462011
LABELS INC	04-2611614	0.42	7181980
PINELLAS PROVISION CORPORATION	30-0078212	0.11	1178791
BENNETT PAVING AND CONSTRUCTION INC	11-3693859	0.04	422954
CAPITAL CITY HOTELS	58-2472203	0.01	26504
LEONS AUTO SALES INC DBA THE AUTO WAREHOUSE	36-4097426	0.06	193612
HOSPITALITY MANAGEMENT SERVICES INC DBA FOODWERX	22-3618590	0.02	313082
BUNKER HILL MANAGEMENT LLC	20-0052362	0.07	6510258
PRESERVATION RESOURCE INC	65-0979202	0.00	63

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZEUS NESTORA LLC	20-2298506	0.02	370134
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PLEASANTBURG HOSPITALITY INC	57-0992218	0.00	9851
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INFECTIOUS DISEASES ASSOCIATES PA	59-2319380	0.76	3978628
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INVESTMENT TITLE LLC	81-4597417	0.01	302074
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INNOVENT TECHNOLOGIES LLC	65-1262159	0.41	5823370
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ELITE REPAIRS AND SPECIALIZED SERVICES	26-1332053	0.01	31910
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAL LODGING LLC	57-1047897	0.00	4366
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HIGH WIRE NETWORKS INC PARTICIPATING EMPLOYERS	81-5055489	0.15	1599425
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEGEND SERVICES LLC	06-1640133	0.01	207951

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOCA SYSTEMS INC	04-3474437	1.08	12884160
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SEMCO CONSTRUCTION INC	59-1570067	0.08	1653524
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMFORT CONNECTION LLC	20-2732804	0.06	543450
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VISTA HOTEL PARTNERS	30-0187567	0.02	542030
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DAVID CAULFIELDS AUTO BOOBOO LLC DBA FIX AUTO ANAHEIM N	82-3479300	0.01	11267
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LENAPE PRODUCTS INC	21-0740867	0.00	299210
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CUBBY OIL CO INC	04-2212270	0.19	2029335
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAGE HOME SOLUTIONS LLC	47-2698855	0.02	65464
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIVERPLACE HOTEL PARTNERS	20-1298300	0.00	140175

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ISLES YACHT CLUB INC	59-1673859	0.04	143401
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MARKET ACCESS SOLUTIONS LLC	20-5775178	0.01	546159
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCANDINAVIAN CHARITABLE SOCIETY OF GB	04-2105955	0.06	685204
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HT PHOTRONICS	82-0977289	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NELWOOD CORPORATION DBA KURU FOOTWEAR	87-0750454	0.20	3575065
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FIRST STREET LODGING	20-5337329	0.00	4263
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WESTCHESTER GOLD INC	65-1008666	0.06	190796
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BINNACLE CAPITAL SERVICES LLC	20-0511762	0.12	2707068
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAILORS WHARF INC	59-2521027	0.02	237588

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HURRICANE FAMILY PHARMACY INC	81-0874995	0.19	1402204
2a Name of Participating Employer ETV OF LONG BRANCH INC DBA EATONTOWN TV APPLIANCE	22-1821513	0.00	31335
2a Name of Participating Employer KELLYS AIR CONDITIONING AND HEATING INC	90-0874542	0.00	34247
2a Name of Participating Employer MERCHANT ADVOCATE LLC	20-5877291	0.10	1737837
2a Name of Participating Employer MONNICK SUPPLY	04-2240643	0.01	480418
2a Name of Participating Employer ASSOCIATION OF CHANGE MANAGEMENT PROFESSIONALS INC	45-1441537	0.02	186841
2a Name of Participating Employer VALLEY LAND SURVEYING	45-3642996	0.01	48327
2a Name of Participating Employer DEPEND O DRAIN INC	59-1141349	0.21	1947447
2a Name of Participating Employer KAUFMAN COMPANY INC	04-1495190	0.46	7984591

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HOLMES PROPERTY MAINTENANCE	27-3943161	0.00	17051
MISSION HEALTH COMMUNITIES LLC	26-2218195	1.19	9235817
CROWDER BROS HARDWARE INC	59-1214282	0.00	72281
NEW JERSEY PORCELAIN COMPANY	21-0524335	0.00	101
WILKINSGEDDES BEAUDET INC	27-2693909	0.50	8041677
VILLAGE GARDENER	83-0322020	0.01	81858
RGMRMG LLC DBA ROYAL MANCHESTER GOLF LINKS	27-2438001	0.00	17708
PACKAGE KARE INC	22-2716306	0.00	270137
MATRIVAX RD CORPORATION	26-1151482	0.06	1152953

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TIMBER GREENS COMMUNITY ASSOCIATION INC	59-3238342	0.02	122134
HENDRICKSON TOWING RECOVERY LLC DBA STAUFFERS TOWING	83-1107550	0.08	772652
GWINNETT HOUSING RESOURCE PARTNERSHIP INC DBA THE IMPACT	58-2055819	0.00	16184
SAHO ANIMAL HOSPITALSAHO SKIATOOK ANIMAL HOSPITAL	46-1405359	0.00	124427
PICTURE MOSAICS LLC	20-5739708	0.01	181679
TWIN TECHNOLOGIES LLC	92-0188790	0.29	4113986
PRENTICEWORX LLC	46-4843323	0.36	1729336
R A NICHOLS PLUMBING HEATING	26-1417015	0.00	130
PINNACLE COSMETIC PACKAGING LLC	26-0045246	0.00	224366

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PINNACLE REHABILITATION NETWORK	74-3091892	0.03	0
AIR HAWK HEATING COOLING LLC	47-2622506	0.00	0
FLEXIBLE JEWELRY LLC DBA ENSO RINGS LLC	83-0752448	0.12	1089181
RK ENVIRONMENTAL SERVICES LLC	13-4146807	0.00	0
FYXIFY LLC	84-4144118	0.00	33541
POS AMERICA INC	22-3053828	0.04	1865421
WINDSOR ARCHITECTURAL WOODWORKING	04-2828872	0.12	2763428
ACORE CONCRETE POURING INC	83-0883978	0.02	91626
PROFESSIONAL RESOURCE PARTNERS LLC	45-5177947	0.01	345906

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UTILITY TRAILERS OF NEW ENGLAND LLC	04-2836250	0.17	2687691
TRENDZACT LLC	83-2447342	0.02	229055
PREMIER PROPERTY MANAGEMENT	68-0486303	0.04	72326
RICK ALLENS AUTO REPAIR INC	22-2963667	0.02	557766
WESTERNACHER PARTNER CONSULTING INC	04-3441938	1.07	9586297
SUCCESS BY DESIGN OF PINELLAS COUNTY LLC	80-0562636	0.05	251019
PET BRANDS LLC DBA AMERICAN PET NUTRITION	84-4815205	0.09	1908372
MR IS OPTICAL CO OF SOUTH MIAMI INC	65-0066754	0.00	20140
RUTAN POLY INDUSTRIES INC	22-2092078	0.06	4055956

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCHAEFERROLLS INC	26-2376499	0.05	728005
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RENEWAL REHABILITATION INC	59-3218012	0.00	237649
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE CLUB AT RANCHARRAH	82-0910591	0.14	871035
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COCO LUNETTE HOLDING LLC CO ADOPTING COMPANIES	01-0698291	0.00	930
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SANNER OF AMERICA	22-3475755	0.02	263157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SEABORN MANAGEMENT LLC	85-1855245	0.39	2890995
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DG CONCRETE INC	87-0486156	0.00	32690
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOMERSET SYRUP CONCESSION SUPPLY CORP	22-2983621	0.02	514325
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HISTORIC HIGHFIELD INC	04-3237612	0.02	140248

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTHAM AND ASSOCIATES INC	87-0656353	0.05	838397
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE KITCHEN LLC	54-2032679	0.13	1177625
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOS CORPORATION	22-2712974	0.00	477916
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORRIS MURRAY PELOQUIN LLC	82-5527384	0.22	3318239
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DILO COMPANY	52-1686859	0.02	48254
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AGE SCIENCES INC DBA PMD BEAUTY	27-2511920	0.04	906490
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTHFIELD CAPITAL LP	80-0772911	0.18	4557861
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SELUX DIAGNOSTICS INC	47-2384587	1.16	5675699
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FILTER SERVICE TESTING CORP	75-2980773	0.02	145671

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOZIO INC	80-0603691	0.11	2249459
THAYERMAHAN INC	81-1110282	1.89	6782121
EAGAR HEATING COOLING	26-4041367	0.02	102944
ROYSBOYS PIZZA LLC	75-3050173	0.00	2761
STRATEGIC HEALTH ALLIANCE LLC	22-3741029	0.00	172217
BLUESTAR GROUP LLC	90-1020899	0.01	111492
DOWN UNDER CONSTRUCTION LLC	87-0577803	0.01	331048
TAG ONLINE	22-3448957	0.02	613800
ATREIDES MANAGEMENT LP	83-3130520	0.59	2815021

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SUNCOAST CENTER FOR INDEPENDENT LIVING INC	65-0209424	0.00	3323
JERRY BROOME CONCRETE LLC	37-1488852	0.00	42816
TESORO WOODS LLC	80-0415459	0.00	228826
FOODSERVICE INSURANCE GROUP INC	20-0096497	0.10	444601
RHYTHM HEALTHCARE LLC	85-1558216	0.00	54811
ACTIVUS LLC	82-5002819	0.03	173910
ULTIMATE SECURITY SYSTEMS INC	22-2209339	0.01	1219729
FREEDOM REINSURANCE UNDERWRITERS INC	37-1940230	0.12	704252
ACTIVE HOSPICE LLC	81-1369623	0.08	305281

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WEINBERG KAPLAN SMITH PA	22-2200010	0.03	1500218
BROADPEAK VIDEO SYSTEMS CORPORATION	47-3916506	0.35	1553546
CLEARVIEW BUSINESS INTELLIGENCE LLC	45-5599761	0.29	1956638
ABLE TECHNOLOGY PARTNERS LLC	46-2512022	0.00	46493
PLAT4MATION LLC	61-1896962	0.00	289719
FOCUS SERVICES LLC FOCUS SERVICES ILLINOIS LLC	20-3612405	0.02	120898
APR RENEWABLES LLC	88-2979908	0.03	777829
SANTRON INC	04-2397079	0.06	3422100
WEALTH MANAGEMENT CPAS LLC	46-0763406	0.04	236922

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RED STICK LLC	27-3449301	0.01	31343
AURORA MULTIMEDIA CORP	22-3532640	0.02	1082098
ENVENTIVE ENGINEERING INC	68-0519296	0.11	1334687
THE S2 HR GROUP LLC SUSPENSE ACCOUNT	45-2442525	0.00	1075248
NORTH AMERICAN MANAGEMENT LLC	75-3090723	0.05	437484
BBZ LIMOUSINE LIVERY SERVICE INC	22-3379940	0.03	459031
CONCERT GROUP SERVICES INC	87-1967382	0.43	1382563
GOLD STREAM CONSTRUCTION CORP	45-3192427	0.03	203740
BUYERS INTELLIGENCE GROUP	20-2579785	0.02	234701

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FIDA BIOSYSTEMS APS	98-1595674	0.07	103850
TOP JOB LLC	26-0175229	0.01	663
SUNCREST SUPPLY INC	59-2639835	0.05	1104744
CORE XRM	47-0999955	0.00	135798
SCILUCENT INC	54-1888199	0.81	9167767
TRUEINSIGHT LLC	87-1862439	0.10	1118918
COTA LOGISTICS CORP	81-3008730	0.00	8519
LEUKOCARE INC	36-4978579	0.00	26580
CHARLEES CONSTRUCTION SERVICES	87-0649522	0.02	105781

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOMENICK GROUP LLC	81-3037183	0.00	10979
FORMAL OIL CO INC	04-2739727	0.03	128275
ECOBRITE SERVICES LLC	27-0953331	0.01	14218
FIMBEL ARCHITECTURAL DOORS	34-2000937	0.02	200482
MFN PARTNERS MANAGEMENT LP	37-1842647	0.51	5056748
IN TIME TEC LLC	26-4143088	0.65	6246419
FORTUNE TITLE AGENCY INC	22-3734149	0.03	2524813
EMC ANALYTICAL SERVICES LLC	26-3289672	0.02	52279
DENTALQORE LLC	26-2079296	0.13	1196538

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENERAL LOGISTICS INTERNATIONAL INC	22-3672445	0.00	1452901
UNCOMPLICATE IT INCORPORATED	83-3396444	0.06	149894
SB ALPHA LLC DBA INSPIRE WIFI	26-2092115	0.00	1922
FORTIFIED BENEFITS LLC DBA UTAH SENIOR PLANNING	26-1127079	0.06	997004
HANDILIFT INC	22-3600457	0.03	2636500
P R DOUGLAS CO INC	77-0617114	0.02	68249
PARKSIDE COMPLIANCE PARTNERS LLC	87-1379449	0.03	91253
HEALING AT HIDDEN RIVER LLC	47-1518326	0.01	111760
ADISO THERAPEUTICS INC	81-5422776	0.19	641713

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STATISTICS SOLUTIONS LLC	20-1836172	0.06	402292
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONNECT BUSINESS SOLUTIONS LLC	86-3171652	0.01	88238
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOMESTEAD EXPERTS LLC	81-1446999	0.00	6807
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CLEARB THERAPEUTICS INC	82-3186447	0.12	450545
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FAIRWAY DRIVE INVESTMENTS DBA BEST WESTERN PLUS	26-0499960	0.03	34704
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CALL CENTER SERVICES LLC	20-2578200	0.03	111875
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INDEPENDENCE ENGINEERING LLC	83-1117923	0.03	363045
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HIGHLAND CAPITAL PARTNERS LLC	04-3729730	0.13	22029585
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IDAHO NATURAL AND ORGANIC FOODS LLC	84-3577706	0.00	12122

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INSTITUTE FOR LIFE SCIENCE ENTREPRENEURSHIP	46-5632420	0.02	661548
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOUNT WASHINGTON OBSERVATORY INC	02-0225135	0.07	246093
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MNKG HOSPITALITY INC	47-0847561	0.00	7765
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STAR V CORPORATE TRAINING LLC	20-0278222	0.01	355776
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTERSTATE WELDING MFG CO INC	22-1948227	0.02	584167
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SERVUS CONSULTING PARTNERS LLC	87-3458553	0.03	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIONS ENVIRONMENTAL SERVICES NJ INC	20-5030621	0.02	456423
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOSTON CAPITAL HOLDINGS LP	04-3235421	0.22	12885984
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LPW TRAINING SERVICES LLC	20-1840125	0.03	801990

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GYRO SERVICES INC	88-2317561	0.02	51473
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STATUS HOSPITALITY MANAGEMENT	26-1759565	0.00	25910
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HERNANDEZ FAMILY VENTURES INC	81-4253028	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MATRIX ENGAGEMENT GROUP	88-1491132	0.01	107907
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ABSOLUTE PRECISION	04-3241868	0.03	82793
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
106 HOSPITALITY GROUP LLC	86-3943539	0.00	1272
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAYR CORPORATION	22-2937938	0.04	1151776
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOMESTART INC	04-3311270	0.27	1699749
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MICHAELS COMMUNITY SERVICES CORPORATION DBA BETTER TOMORROWS	45-3199958	0.05	1141483

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CRAFTSMAN TECHNOLOGY GROUP LLC	47-4323943	0.63	2948867
RIVERSIDE HOSPITALITY GROUP LLC	80-0824245	0.00	180
NEW CELL CENTERS LLC	83-2665988	0.02	369952
JRNI INC	47-5014587	0.14	710982
GT WORLD DISTRIBUTION LTD	42-1666234	0.00	86188
OPHTHALMOLOGY DISPENSING SERVICE	20-2836941	0.16	3192004
COMET HOLDINGS LLC DBA SEVEN HOMES	33-1869633	0.08	2860795
SHSPANISH FORK LLC	82-2688485	0.00	7461
WINDIRECT USA INC	47-1468348	0.00	24483

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OTAVA INC	82-3495278	0.00	111804
2a Name of Participating Employer TWO GUYS SMOKE SHOP OF NH INC	02-0492361	0.18	1862534
2a Name of Participating Employer KENCO BUCKET TRUCKS LLC	81-0618573	0.10	1075350
2a Name of Participating Employer PAYROLL FUNDING SERVICES LLC	57-1232504	0.04	771565
2a Name of Participating Employer MACOMBER CRYOGENICS INC	04-2650111	0.00	33020
2a Name of Participating Employer KUSUM ENTERPRISES	86-1069130	0.00	1675
2a Name of Participating Employer PEACE AGING CARE EXPERTS LLC	20-4656801	0.00	38700
2a Name of Participating Employer BUSA WINE SPIRITS	05-0466977	0.00	24292
2a Name of Participating Employer WESTFALL CONSTRUCTORS LTD	76-0209976	0.01	326455

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PLANNED PARENTHOOD KEYSTONE	23-2450112	0.05	1593244
EDUCATIONAL TRAINING SYSTEMS INC	04-2529485	0.00	21422
DUKE ELECTRIC LLC	22-3708698	0.00	70286
PRECISION FORMS INC	22-1570418	0.07	6205328
BEST MORTGAGE COMPANY INC	04-3381059	0.00	227432
PARKWAY HOSPITALITY GROUP LLC	81-1185143	0.00	8490
PROFICIENCY LLC	26-4621630	0.12	1371058
POINT OF VIEW INC	88-0273832	0.00	27585
YASH PAYAL HOTEL GROUP INC	27-0122698	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROTECALL LLC	84-3791976	0.00	27284
2a Name of Participating Employer NORTHEAST BULK TRANS INC	04-2849777	0.00	10150
2a Name of Participating Employer PROFITABLE PPOS LLC	45-4859231	0.07	989074
2a Name of Participating Employer PURPLE MOON AGENCY LLC	92-0722707	0.04	437961
2a Name of Participating Employer OUTSOURCING USA INC	04-3280817	0.00	9315
2a Name of Participating Employer PAPPYS ENTERPRISES LLC DBA MAACO BODY AND PAINT	35-2613731	0.03	113764
2a Name of Participating Employer SENTRY SELFSTORAGE MANAGEMENT LC	65-0849049	0.14	2459134
2a Name of Participating Employer QUIKTEKS LLC	04-3646543	0.01	126345
2a Name of Participating Employer QUALITY AIR SYSTEMS INC	04-3172160	0.00	269783

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WORLD CLASS INTEGRATION LLC	82-3490990	0.01	32703
RELEVANCE LLC	47-5627606	0.00	12837
FIRST CHOICE OFFICE SVCS	04-3083167	0.00	14393
RH BORDEN AND COMPANY LLC	27-2531542	0.08	233445
RICHARD J DANIELS MD PA	46-0816538	0.00	202906
TANTARA NEW ENGLAND LLC	38-3553985	0.00	27628
MIC ROCK SENIOR CARE LLC DBA COVINGTON OF OREM	46-2463744	0.01	26188
ROOSEVELT STRATEGIC COUNCIL DBA DEFENSE STRATEGIES INSTITUTE	27-5136749	0.01	160735
BATTERY PROS INC	04-2566254	0.00	84148

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LEHI ASSISTED LIVING PARTNERSLLCDBACOVINGTONSENRORLIVING	81-4153502	0.02	57627
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOCIETY HILL CONDO ASSOCIATION	22-2261558	0.00	71448
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GALLAGHER HOME BUILDERS INC	04-3020683	0.00	121851
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
S2CARES LLC DBA SYNERGY HOMECARE	47-2343563	0.00	98238
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOLID ROCK IT SOLUTIONS LLC	46-4197047	0.01	522069
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADVANCEMENT PLUS INC	04-3323595	0.00	38494
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIVENDELL TREE EXPERTS	46-4710960	0.03	110499
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTH COMMONWEALTH PARTNERS	45-4633386	0.01	335255
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPARANO FACE NASAL INSTITUTE	27-3833475	0.02	945601

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOOD LIST INC	04-3468697	0.00	3119
2a Name of Participating Employer MOSHER INITIATIVES INC DBA SYNERGY HOMECARE	20-5859260	0.01	42262
2a Name of Participating Employer SUSSAN GREENWALD AND WESLER	46-1579117	0.03	569520
2a Name of Participating Employer CARBYS INC	04-2488251	0.00	15015
2a Name of Participating Employer MCON MANAGEMENT LLC	88-0613801	0.07	228739
2a Name of Participating Employer SYNERGEM INC	22-3528015	0.00	860428
2a Name of Participating Employer J S MEDICAL ASSOCIATES INC	06-2478007	0.00	649
2a Name of Participating Employer ATACAMA CAPITAL MANAGEMENT LLC	92-1958238	0.01	27034
2a Name of Participating Employer HUPER OPTIK USA LP	76-0638357	0.02	0

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TECHNICAL TOOLBOXES POWERTOOLS INC	87-4070948	0.06	1220994
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROMMAN TECHNOLOGIES INC	04-3191802	0.00	17212
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PATRIOT ROOFING CONSTRUCTION LLC	82-1367144	0.00	68977
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALERIE SCHLITT ASSOCIATES INC	04-3706166	0.01	50308
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INNOVENT HOLDING CORP	04-2804952	0.00	132764
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEAK OUTDOORS LLC	82-1181111	0.02	77983
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LASER WORKS INC	75-2524127	0.00	7228
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHY LOGISTICS LLC	84-4415801	0.02	622709
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CAR BAR LLC	56-2333844	0.00	15931

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DIAMOND 7 LLC	45-3554021	0.01	13256
WANAMAKER HARDWARE INC	04-2242788	0.00	853174
AXIS EXCAVATION	84-3157938	0.02	70709
EDETEK INC	27-1480018	0.10	2426980
INNOPAD TECHNOLOGY INC	46-3998918	0.00	149879
CONTROL POWER CONCEPTS DBA CPC INC	20-8613472	0.09	463925
KINGSMILL POLICE DEPARTMENT INC	47-5605327	0.06	874550
FLOCKHEART LLC	37-1893416	0.00	1279
VINCENZI MANAGEMENT CORP	20-8079562	0.00	10510

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SYNC AGGREGATE	87-3088088	0.00	5873
SAFIER GROUP LLC	92-1559739	0.01	209540
AERO TEC LABORATORIES INC	22-1988656	0.07	898021
PRECISION MEDIA MANAGEMENT LLC	26-3503115	0.00	14294
ALLIANCE WEALTH MANAGEMENT GROUP	47-1769702	0.06	2991849
BACKUPIFY INC	27-1827141	0.00	11536
THE POINTE AT MERIDIAN LLC	26-4447891	0.00	24083
AMERICAN PHYSICAL THERAPY ASSOCIATION OF NJ	51-0204505	0.00	33894
GAMMA MEDICA INC	46-1735895	0.00	3050

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SNOW CANYON RETIREMENT COMMUNITY LLC	84-3943424	0.00	3487
TISSUEGEN INC	75-2890803	0.11	813425
CLOUDLABS INC	45-4833635	0.03	718852
JOHNSON VETERINARY SERVICES DBA RICHFIELD VETERINARY CLINIC	46-3440731	0.04	62745
DELAWARE VALLEY SAFETY COUNCIL	22-3350085	0.01	239544
BETTERPATH INC	46-1055301	0.00	5123
MACKENZIE EXHIBITS	65-1310036	0.06	146318
BKBG ENTERPRISES INC DBA DEVANCO FOODS	20-1397746	0.34	2787384
DETORRES DEGEORGE LLC	27-5233094	0.02	404675

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CHARTER SCHOOL SUPPORT SERVICES INC	27-5410664	0.00	73098
MATTRESS WAREHOUSE MANAGEMENT LLC	20-5684678	0.01	126447
RENAL MANAGEMENT GROUP LLC	43-1971830	0.07	677103
INSIDE OUT COMMUNICATIONS	04-2976006	0.00	325648
BAR W ANGUS CATTLE CO LLCWRIGHT DIRECTION LLC	20-4097196	0.05	173052
HUDSON RIVER MILLS INC	11-3280849	0.03	389056
MAXX ORTHOPEDICS INC	43-2109628	0.12	2323655
BLANCHARD CONTACT LENSES	02-0403374	0.00	178467
FIRE SAFE INCORPORATED	52-1786048	0.02	0

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MASSACHUSETTS EHEALTH COLLABORATIVE INC	20-1913059	0.00	2053045
SOUTH HAVEN HOMES LC	26-3829246	0.01	183095
THE NIGHTINGALE GROUP LLC OTHER ADOPTING GROUPS	20-3457370	0.00	479035
CODESHIP INC	99-0385563	0.00	25677
CATCH INC	27-3483547	0.02	42825
SHORE SURGICAL PAVILION LLC	94-3487741	0.00	178700
PING4 INC	27-5037170	0.00	159331
STUARTS AUDIO INC	22-1806057	0.00	364964
ELLIOT WHITTIER INSURANCE SERVICES LLC	03-0518537	0.00	389053

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RIVER STREET LODGING LLC	46-2152283	0.03	149305
2a Name of Participating Employer THE CENTER FOR REGENERATIVE THERAPY AND PAIN MANAGEMENT LLC	45-0450798	0.00	76595
2a Name of Participating Employer RIPTIDE AUTONOMOUS SOLUTIONS LLC	47-2841150	0.00	51079
2a Name of Participating Employer 180 FUSION LLC	27-1969139	0.00	2377
2a Name of Participating Employer RIGHT AT HOME	57-1193599	0.07	368354
2a Name of Participating Employer BUSA BROS LIQUORS INC	04-2295403	0.00	4842
2a Name of Participating Employer TREX PROPERTIES LP	27-5223342	0.00	262521
2a Name of Participating Employer LIGHTS4FUN INC	32-0482872	0.00	10672
2a Name of Participating Employer VINEBROOK CORPORATION	04-2169148	0.00	62839

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRIOSTACK LLC	45-3556766	0.00	8769
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CFH GROUP LLC	14-1878290	0.54	6279539
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPEAR RESEARCH LLC	47-3462867	0.00	580593
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CLEAR CHOICE ADMIN SERVICES LLC	47-4934995	0.00	12019
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHAH TOTAL PLANNING CORP	84-4153890	0.00	107946
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
197 TECHNOLOGY LLC	86-2381678	0.00	13103
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JANUS AMC LLC	27-2648482	0.00	44732
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHFIELDS INC	47-2702080	0.00	140916
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLLINS LOUGHRAN PELOQUIN PC	04-3543119	0.00	205189

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SW HEALTHCARE CORPORATION	59-3098996	0.14	2018133
NANTUCKET BEADBOARD INC	02-0522198	0.00	194376
MONUMENT HOLDINGS MANAGER LLC	86-2678988	0.00	32069
COMPUVISION SYSTEMS USA INC	47-0949466	0.00	64926
PURPLE MOON PRODUCTIONS LLC	92-3354090	0.00	5676
TALLA INC	47-4898559	0.00	325387
SUPERIOR GRINDING SALES INC	87-0478414	0.00	280
SPIDERBOOST COMMUNICATION LLC	81-1451770	0.01	101937
GRAS LAWN LLC	81-1092416	0.03	35879

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENESIS HR SOLUTIONS INC	04-3106172	0.23	6515737
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GLASS MASTERS 801 LLC DBA GLASS DOCTOR	93-4563787	0.00	157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREEN EFFECT LLC	93-2712811	0.00	2501
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AUTISM AND BEHAVIORAL INTERVENTIONINTEGRITY BILLING	46-3068145	0.03	32043
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DJI SUPPLY COMPANY LLC DBA QUALITY AUTO REPAIR	99-1262225	0.00	25575
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ASTIRA CAPITAL PARTNERS LP	92-3288985	0.16	852354
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OM MANUFACTURING LLC	87-4063225	0.03	104852
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
YACHT STARSHIP DINING CRUISES LLCPIRATE WATER TAXI LLC	20-8686227	0.09	248
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUNDER SYSTEMS INC	04-2602690	0.15	188791

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOUNTAIN WEST SEED CO INC	87-0667769	0.01	384015
SCRIVAS	46-5147371	0.06	224083
NEURODEX INC	83-1644694	0.10	248718
SUNSET COUNSELING SERVICES LLC	83-3464103	0.01	16171
BEND MAILING SERVICES LLC DBA BMS TECHNOLOGIES	20-5994788	0.27	2310866
JIM DORSEY AND SON INC	04-2909166	0.01	417582
CKC OPERATIONS LLC	46-4031171	0.00	133127
INTERNATIONAL SEAWAYS SHIP MANAGEMENT LLC	81-3657605	1.56	20880961
WENDEL KLEIN BUILDERS	26-1168363	0.01	61653

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CO BUILDING SYSTEMS MANUFACTURING COADOPTING COMPANY	87-0435873	0.00	4785
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SESAME SUSTAINABILITY INC	88-1823983	0.04	43959
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HI SERVICES INC DBA HUNSAKER SERVICES	92-1507059	0.01	9403
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIAS IMPORTS LTD	11-2658997	0.00	2
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRUST 1 SERVICES	86-1414569	0.06	217214
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HUNSAKER FAMILY FOUNDATION	87-3986574	0.00	1463
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHIO PHARMACEUTICALS CORPORATION	45-3215903	0.02	1225631
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SANPETE COUNTY BROADCASTING CO DBA MIDUTAH RADIO	87-0315982	0.00	5500
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ARCHES MSO RHODE ISLAND LLCARCHES RHODE ISLAND PC	99-0932306	0.28	547415

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TRIVIUM INTERACTIVE LLC	81-3005025	0.04	320024
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EAGLE SPRINKLER FIRE PROTECTION INC	33-1162086	0.04	651193
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NAMBE LLC	20-3697954	0.11	2552386
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ST MARYS CENTER FOR WOMEN AND CHILDREN	04-3201844	0.06	71889
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTHEASTERN ORTHOPAEDIC SURGEONS PLLC	81-2172172	0.00	92650
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ITF THERAPEUTICS INC	61-2164887	0.11	237011
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EAGLE HYDROCARBONS INC	47-0978449	0.00	935113
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FH MANAGEMENT LLC DBA ELLIE MENTAL HEALTH	88-4388038	0.00	2201
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
METRO BOSTON MENTAL HEALTH PLLC DBA ELLIE MENTAL HEALTH	92-3126988	0.01	13970

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AB REALTY SERVICES INC	81-2770545	0.00	1151945
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REGO ELECTRIC INC GENESISHR PAYROLL	36-4920765	0.00	19323
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MRI MANAGEMENT LLC	58-2397041	0.04	736244
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNCOAST OPEN MRI LLC	58-2377947	0.00	834
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SACCONNESSET GOLF SOCIETY LLC DBA SACCONNESSET GOLF CLUB	47-5467886	0.03	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHYSICIANS MRI INC DBA OPEN MRI OF MACON	58-1797919	0.00	54331
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EVERYDAY BLESSINGS INC	30-2578702	0.04	239658
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WALDMAN BARNETT PL	81-5189222	0.00	1568800
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MPAC HEALTHCARE MANAGEMENT LLC	47-5067556	0.10	345162

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MIDWEST POST ACUTE CARE LLC	47-1519244	0.27	1783318
PANDEL INC	58-1747652	0.15	3501773
CENTER FOR VENOUS DISEASE MANAGEMENT ACCOUNT PLLC	46-3163369	0.01	147763
PROJECT VERITAS	27-2894856	0.00	16698
IQ FORMULATIONS LLC	27-3184444	0.00	29433
SSL MANAGEMENT LLC	81-1928906	0.32	1351973
PRO STAR RENTAL LLC	46-4857542	0.10	1186719
SOUTHPOINT FINANCIAL SERVICES INC	58-2363251	0.13	2092037
SECURITY PEST DBA PESTBEAR	04-3643157	0.04	189641

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ADLER REALTY INVESTMENTS INC	95-4827820	0.49	5657652
HR SLATER	36-3995714	0.01	21480
ANCHOR HEALTH SYSTEMS DBA ANCHOR HOME HEALTH CARE	35-1830736	0.02	85370
SRC MANAGEMENT COMPANY LP	90-0821730	0.07	658272
PROJECT QUEST INC	74-2643545	0.12	1160789
NOVEDA TECHNOLOGIES INC	80-0749474	0.00	242814
FORTUNE PARTNERS INC DBA TEXAS CERTIFIED MOTORSMANAGEMENT	46-1981383	0.00	8808
DRAKE REAL ESTATE PARTNERS LLC	46-1953849	0.25	2045015
COPPERSANDS INC	86-0920218	0.00	960764

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GEHL INSTITUTE	47-3249218	0.00	30915
VASCALERT LLC	01-0748592	0.00	37142
COMMON JUSTICE INC	82-0993366	0.16	0
R JAMES PROPERTIES INC	58-2081340	0.30	1863899
CALHOUN MACHINE TOOL INC DBA GEORGIA MACHINE	58-2060038	0.07	669320
BEACON HEALTH MGMT LLC PWW HEALTHCARE LLC	35-2470293	0.33	1786850
PB BROWN LLC PB BROWN DATACOMM LLC	45-1618078	0.20	996169
EMC MANAGEMENT CONCEPTS	20-0991592	0.00	21043
CENCO BUILDING SERVICES LLC	46-2959437	0.08	299908

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CLINE MACHINE	73-0785268	0.00	13588
PULIDO TRANSPORT LP	76-0471774	0.02	120666
TRCW LLC	47-4689674	0.00	45027
CAPITAL TECHNOLOGIES LLC COADOPTING ENTITIES	93-0835354	0.32	4417251
RAVINIA COMMUNITIES LLC	45-3741473	0.19	662049
PETRODOME ENERGY LLC	26-4272248	0.02	187032
PRINTECH LABEL CORPORATION	58-2062282	0.04	260085
HEALTHY START COALITION OF PINELLAS INC	59-3109517	0.02	138006
MUSIC DOING GOOD	26-2377013	0.00	146008

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ARAIZA LAW FIRM PC	81-4837789	0.03	658744
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE SCHAEFFER LAW FIRM A PROFESSIONAL CORPORATION	76-0678111	0.00	297422
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REEL STORIES TEEN FILMMAKING INC	20-0936377	0.14	722372
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JON D DONSHIK MD PA	06-1674114	0.00	144064
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREGOR INDUSTRIES INCORPORATED	26-1930522	0.00	1113
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ROCK SOLID IMAGES INC	76-0586788	0.00	2851389
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RALPH VICKERS CO INC	58-1238026	0.00	997722
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BUTLER DOORS AND MORE INC	86-1082119	0.06	419271
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ETA PHI SYSTEMS INC	73-1689659	0.09	628510

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ISM RESTAURANT SERVICES LLC	26-3854317	0.08	655409
MEPERIA DE LLC	82-4778904	0.24	2244532
LINDA KING DDS DBA SWEET SPOT SMILES	54-2088839	0.00	736
ACCURITY ASSOCIATES LLC VALCO MANAGEMENT LLC	47-1110031	0.00	113800
PRESTIGE WEALTH MANAGEMENT GROUP LLC ADOPTING ENTITIES	22-3346932	0.23	3764888
FG INDUSTRIES INC	75-2183510	0.07	274556
INTEGRITY SENIOR PROPERTIES INVESTMENTS LLC	46-5430880	0.02	52201
CLAY CONSULTING	74-2975481	1.25	4279274
JUNGLE QUEENS INC	59-0856488	0.00	58124

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH GEORGIA PHYSICAL THERAPY ASSOCIATES INC	58-1801335	0.00	128726
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIGHT SPEED AUTOMATION LLC	26-2881720	0.00	464481
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ESJ CAPITAL PARTNERS LLC	26-3739583	0.14	704563
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MULTISPECIALTY PHYSICIAN PARTNERS LLC	26-4244621	0.05	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MCVEIGH GLOBAL MEETINGS AND EVENTS LLC	82-4624430	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HPC PROPERTY SERVICES LLC	75-2531739	0.00	45417
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAL HOTELS LLC	47-4565993	0.02	114451
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEAT TRANSFER SYSTEMS OF GEORGIA LLC	46-1476730	0.22	1849052
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LUMENOPTIX INC	81-0786065	0.00	41678

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHALLENGER MANAGEMENT LLC	81-0785257	0.00	139303
ORCHESTRA BIOMED INC	81-4914672	0.00	72
SHADOW SYSTEMS LLC	81-2901265	0.05	221718
WEST SANITATION SERVICES INC	95-3892145	0.03	255954
NELIX INC MATTCAVE LLC	36-4352930	0.00	20085
REMOTIV LLC	20-8443802	0.01	529677
ISTROUMA HOSPITALITY	47-1500420	0.01	261168
THE COLONNADE SENIOR LIVING AND ITS AFFILIATES	45-4885588	0.05	912471
NICKSON LLC	81-1791269	0.24	620887

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INFINITY SOUND LTD	20-0631289	0.00	6
2a Name of Participating Employer ST JOHNS CARE DBA SYNERGY HOMECARE OF LITTLE ROCK	81-3452370	0.00	7552
2a Name of Participating Employer MAR PRIMARY CARE LLC	83-1611860	0.05	193107
2a Name of Participating Employer ENABLEWISE LLC	82-3283883	0.04	345285
2a Name of Participating Employer MERIDIAN CONSTRUCTORS LLC	76-0633580	0.12	1946691
2a Name of Participating Employer HIGHLAND GC LLC ALL CONTROL GROUP COMPANIES	45-3036964	0.05	320906
2a Name of Participating Employer KC CROSSROADS HOSPITALITY LLC	81-2304704	0.01	103098
2a Name of Participating Employer GEZOLAN KRAIBURG LP	81-2041636	0.12	916421
2a Name of Participating Employer MORRIS COUNTY FARMS INC	22-1571211	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTHWAY SPC LLC	46-4378533	0.05	420620
BISTRO MD LLC	86-2008389	0.22	1611396
ML DEER MANAGEMENT CO	76-0595894	0.04	249585
PARSOLEX GMP CENTER INC	04-3793695	0.00	786963
BUENA VISTA GAMING AUTHORITY	27-5343243	0.92	5452324
WOODRUFF BROKERAGE COMPANY	58-1819726	0.04	1865380
BIRCHWOOD HEALTHCARE PARTNERS LLC	82-2606131	0.21	561125
NPS PUBLIC FURNITURE CORP DBA NATIONAL PUBLIC SEATING	45-1215935	0.68	3824933
GERSH ACADEMY INC ALL CONTROL GROUP COMPANIES	20-1774665	0.00	823

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRODUCTION LIFT COMPANIES INC DBA PRODUCTION LIFT SYSTEMS	75-2315500	0.06	372154
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NATIONAL DIALYSIS ACCREDITATION COMMISSION LLC	82-4575068	0.04	247809
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COUNCIL CREST INDUSTRIES DBA LANNON MILLWORK	83-2537297	0.06	378156
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KERROW RESTAURANTS	47-4516774	0.10	870859
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SILVER DUNES CONDOMINIUM OF DESTIN INC	59-1471816	0.01	91678
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAN ENTERPRISES STORAGE MANAGEMENT SOLUTIONS	27-0647098	0.14	831229
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOC WICHITA LLC	81-5128715	0.00	1676
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMP LLC DBA ADVANCED MEDICAL PEDIATRIC	47-2379390	0.00	9426
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VLADMIR LTD DBA GLOBAL THE SOURCE	02-0532682	0.39	4201035

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOLZER PATEL DRENNAN PC	46-2637704	0.00	0
COPPER HEALTH ORO VALLEY	46-3460750	0.00	30541
DJ ACQUISITIONS	27-2402963	0.02	231526
MONDIAL AUTOMOTIVE INC	11-3301281	0.14	1884438
US CERAMICS MANAGEMENT LLC	83-4177104	0.00	603664
GREEN LAKE TUBE LLC	01-0952241	0.20	1608566
CARPENTERS WORKSHOP GALLERY LLC	61-1769619	0.01	10294
AGROPRO LLC	20-4733834	0.01	105628
AMENITY CONSULTING LLC	26-1882873	0.10	3587418

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRIZMAH CENTER FOR JEWISH DAY SCHOOLS	81-1750864	0.34	2649507
MC SQUARED PARTNERS LLC	81-3562394	0.03	58769
CAPITOL COLLISION REPAIR SPECIALISTS INC	86-0657735	0.01	908
BEACON CAPITAL MANAGEMENT LLC	02-0739554	0.40	3532842
MORESPACE MANAGEMENT	81-4527596	0.02	147259
DOUGLAS B SECKENDORF DC PC AND ALL CONTROL GROUP COMPANIES	13-3985645	0.05	383313
GRAND COMPANIONS DBA SYNERGY HOMECARE	83-2696906	0.00	559
SYSTOPIA INTERNATIONAL	37-1713124	0.00	48948
CAMPBELL STREET SERVICES LLC	82-4599476	0.31	1233312

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AIRWAY AEROSPACE INC	45-4312256	0.11	620912
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEALING COMMUNITY CENTER	26-3990559	0.00	40358
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TONY ODISHO EXTENSIONS COADOPTING WITH EXSALONCE SALON	01-0870619	0.06	264902
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLEGRIA AT OCEAN GROVE AND ALL CONTROL GROUP COMPANIES	81-4736789	0.00	90672
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OPCO FARMINGTONMO LLC	82-4691676	0.00	12432
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OPCO FESTUS MO LLC	83-2406502	0.00	18633
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AS MANAGER	83-2387555	0.52	2106082
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AJA TANKS LLC	81-5352821	0.08	445721
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HUFFINES MANAGEMENT PARTNERS	71-1012783	0.40	4659298

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROVIDYN INC	26-2921344	0.00	6
B J WHOLESALE LLC	85-0482776	0.02	32892
FWAVE LLC	37-1793263	0.16	1070569
SENIOR CARE RESIDENCES SAPPHIRE LAKES AT NAPLES LLC	81-5080296	0.00	28583
CORSAIR CONSULTING LLC	45-4687429	0.34	2489282
ADLER REAL ESTATE PARTNERS	46-0565432	0.25	1602556
SUPERIOR GLASS SERVICES INC DBA GLASS DOCTOR	58-2481003	0.12	601951
THE STONEHILL GROUP	58-2446878	0.00	0
AIR DRILLING ASSOCIATES	01-0695270	0.04	215176

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KIRENAGA HOME CARE MANHATTAN INC	47-3736461	0.00	7341
GLENEAGLES CAPITAL MANAGEMENT	62-1689665	0.25	3487545
OPCO NEW LONDON MN LLC	84-2698292	0.04	130020
GPI MANUFACTURING INC	36-3094494	0.04	186347
PRODUCTION TECHNOLOGY AND SERVICES INC	26-0332358	0.05	391016
DOGUETS RICE MILLING COMPANY	74-2160903	0.11	2491297
G4 GEOMATIC RESOURCES LLC	87-1906280	0.29	2392930
IDEAL ENERGY SOLUTIONS INC	26-3923062	0.03	1333553
ASHEVILLE HOSPITALITY	82-3226211	0.01	30247

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BOBCAT OF NY INC	11-1945745	0.26	2076299
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRAINXCHANGE LLC	47-2710172	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SERENITY HOUSE DETOX COADOPTING COMPANIES	45-4656050	0.00	4619
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
200 ELEVENTH AVE CONDOMINIUM	27-1059964	0.02	133520
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LYNESS CONSTRUCTION LP	75-2585489	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRENNER CONSULTING GROUP INC	82-3637631	0.03	166953
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STRUCTURE TECH CORPORATION	65-0353132	0.03	78720
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
112619 DELAWARE ACQUIRECO INC	36-4955799	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATCHMEN PROTECTIVE SERVICES LLC	47-2653326	0.04	152757

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCURITY CONSOLIDATED LLC	84-2923954	0.10	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREEN SPOON LLC	45-4649934	1.11	5092187
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KEYSTONE POLICY CENTER	84-0688506	0.19	5575558
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENVIRO MANAGEMENT GROUP LLC	26-3222678	0.06	156802
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HD MOTORSPORTS LLC	84-4957046	0.01	14580
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLDEN AGE OPERATIONS LLC	36-4915411	0.03	76316
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACIFIC SHORE HOLDING INC	95-4586480	0.54	2457774
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH AMERICAN ECOMMERCE SOLUTIONS	83-3720270	0.03	157555
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOHO MEDICAL DOCTORS PLLC	45-3135227	0.35	2399671

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEMPLE ALIYAH	95-2236425	0.00	23533
SNOWPURE LLC	20-1583740	0.10	945511
MAREL POWER SOLUTIONS INC	83-3948596	0.14	1711109
SOUTHEAST REIMBURSEMENT GROUP LLC	58-2473225	0.37	5683844
THE ROADS HOME HEALTH CARE INC	20-4869457	0.00	89689
NATIONAL PRACTICE SOLUTIONS	46-0898624	0.00	207750
JEWISH FUNERALS USA LLC	45-4980845	0.04	609202
DI DEVELOPMENT COMPANY INC	46-4231157	0.00	0
CALIPER CONTRACTING SERVICES LLC	82-2395275	0.01	38050

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
XIBER LLC	81-2757999	0.00	0
FAT SNAX INC	35-2650971	0.00	124359
CROSSPEAK SOLUTIONS LLC	82-2275699	0.03	191970
ISSAM TINA SOLUTIONS INC DBA IT SOLUTIONS INC	20-1186211	1.01	9133501
RCW ENERGY SERVICES LLC	47-2677170	0.03	1160098
8 BALL MOTORCYCLE INC	81-2631705	0.04	222360
8 BALL MOTORCYCLES OF ESCONDIDO INC	82-4928024	0.00	10277
FIESTA INSURANCE FRANCHISE CORPORATION	20-4606759	0.00	0
ALL OF BLUE LLC	82-3298681	0.12	1026011

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAGO WRIGHT LLC	36-4338057	0.73	9883307
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUIDELINE GEO AMERICAS INC	04-3356113	0.07	708414
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEOPARD SUPERVISION SERVICES LLC	26-3571532	0.14	2054341
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALTUS ACE MANAGEMENT LLC	36-4814820	0.22	846599
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MICKIE SERVICE COMPANY INC	76-0341511	0.18	2653545
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PINNACLE OA INC	85-4268386	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RAVENVOLT INC	84-5142113	0.62	2951747
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
YELLOW ROSE DISTILLING THE ZAMORA AMERICAS	27-4020857	0.17	1751912
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZAMORA COMPANY USA	83-1182395	0.21	1469470

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAGNOLIA PLANTATION CORPORATION	57-0878972	0.03	0
IKAR	20-1210098	0.26	1917972
MB ENTERPRISE LLC DBA FRAME IT EASY	20-1875037	0.10	124649
BG INTERNATIONAL PRODUCTS INC	35-2677899	0.17	2976259
MARSHALL HOTELS RESORTS INC PAYROLL SERVICES	52-1185803	0.10	948568
BLACKPOINTE GROUP CONSTRUCTION AND MANAGEMENT	84-2670627	0.03	117871
SH 1 CASTRO VALLEY LLC DBA EDEN VILLA CASTRO VALLEY	47-4710178	0.03	198239
SH2 SALINAS OPCO LLC	81-1670052	0.01	30189
SH 10 PLEASANTON OPCO	83-3058222	0.03	138549

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SH 3 VISALIA OPCO	81-5166602	0.00	12461
2a Name of Participating Employer HOMEDIALYSIS CENTERS OF RANCHO CUCAMONGA	27-1167446	0.20	1054533
2a Name of Participating Employer HOSPITALITY AMERICA INC	62-1592846	0.09	470617
2a Name of Participating Employer 1852 CAPITAL MANAGEMENT PARTICIPATING EMPLOYERS	82-4269680	0.00	34389
2a Name of Participating Employer RADIO UNITED LLC	61-1975902	0.04	417315
2a Name of Participating Employer TRUEFIRE STUDIOS LLC PARTICIPATING EMPLOYERS	84-3598883	0.17	1705918
2a Name of Participating Employer TOUCHSOURCE LLC	81-4721717	0.45	3736275
2a Name of Participating Employer CAPTIVA CONTAINERS	35-2479054	0.15	375150
2a Name of Participating Employer ACTIVE RESIDENTIAL MANAGEMENT SERVICES	81-3978182	0.03	78584

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HIGH 5 PLUMBING	45-5352465	0.08	206732
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INFOCYTE INC	46-5476536	0.00	18469
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OKLAHOMA AGENTS ALLIANCE	73-1597424	0.08	568526
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROCLINIX SPORTS PHYSICAL THERAPY CHIROPRACTIC PLLC	20-0200926	0.17	598144
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CYNTECH US	99-0361949	0.25	936526
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MY COMMUNITY HOMES	86-3511122	0.52	1766202
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BUSINESS PLATFORMS INC	85-3230193	0.06	191847
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AC DISASTER CONSULTING	83-2157077	0.36	1659484
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WEST BAY HOLDINGS 5 LLC DBA THE CARRINGTON	86-2912231	0.31	685770

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LA MODERN LLC DBA LOS ANGELES MODERN AUCTIONS	87-1766111	0.09	494840
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STAPLE STREET CAPITAL MANAGEMENT LP	47-2036264	0.24	1204780
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HIREQUIP LLC	36-4221810	0.02	76288
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REGENCY ELECTRIC INC	84-1365082	0.23	1796876
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDION HEALTH SCIENCES INC	47-4428421	0.07	319010
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PAYONEER INC	35-2254039	2.61	16519418
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIRGINIAN HOTEL OPERATOR LLC DBA THE VIRGINIAN HOTEL LYNCHB	82-3424617	0.01	9823
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SELECT POWER SYSTEMS	82-3334088	0.13	624445
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNITED VALUATION REAL ESTATE APPRAISAL BROKERAGE INC	47-5541022	0.01	16287

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CITY HEALTH PARTNERS LLC	84-1988103	0.04	64747
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AV DESIGN INTEGRATION INC	02-0675396	0.03	425993
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LEGACY BY GERSH AT CROTCHED MOUNTAIN LLC	85-3751017	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SPINDRIFT BEVERAGE COMPANY	45-4807439	1.07	6275257
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTH TEXAS WATER TREATMENT DBA AUSTIN WATER SOLUTIONS	46-5651303	0.00	9402
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRANSMARINE ACQUISITION LLC	35-2588050	0.15	663003
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REVENUE CYCLE BILLING SERVICES INC	81-5033985	0.93	11486614
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AHG HOTELS LLC	81-5443350	0.01	25319
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
INTEGRATED LABEL CORP	36-4557130	0.10	367035

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORION OFFICE REIT SERVICES LLC	87-3007303	0.59	4946897
2a Name of Participating Employer VITANA DBA VITANA DSO LLC PARTICIPATING EMPLOYERS	87-1132084	0.00	38327
2a Name of Participating Employer SENTE INC	26-2751288	0.13	947712
2a Name of Participating Employer CORVUS CONSTRUCTION COMPANY INC	75-2419513	0.29	2989641
2a Name of Participating Employer BEAR CREEK HOLDINGS LLC DBA TOWNEPLACE SUITES	84-1895871	0.02	111521
2a Name of Participating Employer 360 MEDICAL CONSULTING LLC	84-4677779	0.04	112816
2a Name of Participating Employer LOYALTYLION INC	37-2007676	0.00	3422
2a Name of Participating Employer DNA LOGISTIX MANAGEMENT INC	83-2959096	0.05	101176
2a Name of Participating Employer JDB ASSOCIATES INC DBA NORTHEAST GEORGIA MOTORSPORTS	58-2186700	0.08	405254

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUE OCEAN WEALTH SOLUTIONS LLC	82-2154365	0.13	1320268
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KM REALTY INVESTMENT ADVISORS LLC	30-1037892	0.18	1326081
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STEELHEAD INC	74-2568547	0.12	373650
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VINOCOM LLC DBA TOTAL BEVERAGE SOLUTION	43-1917285	0.59	4333790
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHOTON BROTHERS INC	46-3430499	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAYMOUNT URGENT CARE LLC	20-4859026	0.00	14599
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TWR TRANSPORT LLC	81-4178199	0.02	107384
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ARC HEALTH OPCO LLC	87-0915789	0.00	72
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE DVI GROUP	58-2576726	0.10	871380

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EUROPTICS LLC	88-2512398	0.12	2382104
CARDIOVASCULAR ASSOCIATION PLLC PARTICIPATING EMPLOYERS	76-0565432	1.24	12294717
WUNDERFUL LLC DBA WUNDERKIND	87-1169004	0.01	36931
REGAL CHEMICAL COMPANY	62-0816237	0.01	2512060
PENNINGTON WEALTH MANAGEMENT	20-5078472	0.19	1796584
GREEN LIGHT EXPEDITING LLC	26-3351180	0.02	134520
APAD LLC DBA ANCHOR PLUMBING SERVICES	81-1531656	0.00	75617
PALLADIN CONSULTING LLC DBA PALLADIN TECHNOLOGIES LLC	81-5337322	0.54	1372289
ISRAEL ISRAEL PURDY LLP LAW FIRM	11-3243823	0.35	11372601

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NITTO KOHKI USA INC	36-3005042	0.06	1234991
LANDIO LLC	83-0875358	0.01	32222
LDARTOOLS INC	27-4454484	0.00	661
FINANCEPAL BUSINESS SERVICES LLC	85-4365939	0.00	48146
AAPC LOUNGE SERVICES INC	46-4975118	0.03	58846
STELLER INNOVATION LLC	81-4878678	0.02	75008
SKY UNLIMITED DBA PRONTO PIZZA2S PIZZA DBA PRONTO PIZZA	20-4451641	0.00	721
BIG GAME BRANDS INC PARTICIPATING EMPLOYERS	45-5605093	0.01	375952
PARAMOUNT DEPOT LLC	20-3504849	0.04	86672

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TWO OIL 5 LLC DBA TAKE 5 OIL CHANGE	83-1592559	0.15	314127
GRAMAZINI USA INC	47-4164568	0.00	4324
CANTU HARDEN LLP	87-4339436	0.36	1176371
MARLIN MORTGAGE CAPITAL LLC	84-1858787	0.25	1002160
REEDY PHOTOPROCESS SE CORPORATION	59-2110882	0.10	243807
RGA OFFICE OF ARCHITECTURAL DESIGN INC	33-0523529	0.10	2514496
GLJ INC DBA MIDNITE SNAX	11-3087802	0.02	59448
MITESCO INC PARTICIPATING EMPLOYERS	87-0496850	0.00	130591
KURK MCGINLEY ENTERPRISES INC DBA KURK HOMES	76-0522717	0.18	2526138

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COR HOLDINGS INC PARTICIPATING EMPLOYERS	82-4144073	0.01	36418
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FBX CERAMICS HOLDINGS LLC DBA US CERAMICS LLC	88-1232591	0.21	776836
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE ACTION GROUP LLC	45-4934167	0.03	92102
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PERCEPTIVE TECHNOLOGIES	37-1965877	0.24	691339
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PEPPERMINT TECHNOLOGY INC	38-4165246	0.02	41862
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CANVAS PROPERTY GROUP LLC PARTICIPATING EMPLOYERS	83-0622335	0.04	54780
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VOLANTE SENIOR LIVING LLC PARTICIPATING EMPLOYERS	87-3117459	0.29	715980
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONKILLIAN ENTERPRISES INC DBA ELEMENTS MESSAGE	45-4840175	0.01	14423
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONDUCTOR TECHNOLOGIES INC	47-5475444	0.00	675107

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUADLOGIC CONTROLS CORP	13-3109443	0.13	0
SEN TV INC	36-4828606	0.00	11481
HASKIN AVIATION LLC	82-3105854	0.01	27553
OCEAN HILLS RECOVERY	26-1912596	0.00	18071
CENTRELAKE HOSPITALITY INC	32-0027492	0.00	331
WOODBRIIDGE HOSPITALITY INC	13-4259261	0.00	113
LIVIAN MORTGAGE LLC PARTICIPATING EMPLOYERS	88-1878118	0.00	283
TOSIBOX INC	47-5245559	0.05	307776
FAIRMONT HOSPITALITY INC	27-0030986	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NUANCE MEDICAL LLC	46-2283506	0.23	1587576
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORBIN PACIFIC INC	92-2744557	0.01	9414
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONSIDINE BORREGO LLC DBA RAMS HILL GOLF COURSE	46-3197133	0.09	354241
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOJISTIC LLC	56-2501726	0.32	2862148
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BENNU GROUP INC DBA ABILITY ENGINEERING TECHNOLOGY	26-4288641	0.15	2048188
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ATLANTIS FF OPCO LLC DBA PARKROSE GARDENS OF FAIRFIELD	86-2073322	0.00	156
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ATLANTIS SAC OPCO LLC DBA LEGACY OAKS OF SACRAMENTO	86-2162368	0.00	1124
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RC LENDING PARTNERS LLC	87-3912916	0.00	14342
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KML ENTERPRISES CAREER DEVELOPMENT LLC DBA NEW HORIZONS LEA	20-1170315	0.23	6248252

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MOMENTUM SENIOR LIVING COADOPTING WEST BAY SENIOR	88-0780681	0.09	130987
ENBIO CORP	26-3530484	0.12	912554
MYLES J ZAKHEIM OD OPTOMETRIC CORP	95-3403592	0.01	0
POOSH LLC	83-3287172	0.02	56519
CHAMBERS MEDICAL GROUP INCCHAMBERS MEDICAL GROUP PSC	59-3003599	0.02	495369
ADAR MEDICAL UNIFORMS LLC	27-4379930	0.00	0
BPRESCIENT INC	47-5011327	0.09	289656
MAVERICK BANKCARD INC	32-0358047	0.23	0
PURE AIR FILTRATION	04-3784178	0.24	1185202

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MATERIAL DYNAMICS	58-1096551	0.04	1041363
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UTC OVERSEAS INCUTCEDLOW LOGISTICS INC	13-3511950	0.93	16852835
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RALPH VICKERS CO INC	58-1238026	0.09	227157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DDR TECHNOLOGIES INC	58-2625026	0.02	1455405
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARADISE POINTE OF ORMOND BEACH LLC	84-5089333	0.00	169
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NUANCE SOLUTIONS	36-2858787	0.08	1468162
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GROVE HOTEL GROUP LTD	65-0502465	0.01	162220
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRICKELL HOTEL GROUP LLLP	26-1689696	0.10	995138
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AIRPORT HOTEL GROUP DBA HAMPTON INN	65-0851368	0.05	428118

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PINES HOTEL GROUP LTD DBA HAMPTON INN	65-0794455	0.06	533648
TYREX GROUP LTD	74-2942280	0.32	5167215
COMMONWEALTH LNG HOLDINGS LLC	99-3251896	0.95	3497057
ALMOND STREET COLD STORAGE LTD	75-2856344	0.00	534
HKONY WEST 37 LLC	46-3746357	0.00	5840
BARRIER CREST LLCTREND DISCOVERY HOLDINGS LLC	83-3008136	0.03	67136
SLIGHT EDGE DIFFERENCE DBA THE BLUE COLLAR SUCCESS GROUP	33-1098104	0.11	621023
ELITE WATER SYSTEMS	26-3721592	0.07	144170
LINCOLN VENTURES LLC DBA LV COLLECTIVE	46-1300559	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOHXA LLC	81-1632592	0.07	332966
2a Name of Participating Employer CRYSTAL COAST HEATING AND AIR LLC	20-4134890	0.00	0
2a Name of Participating Employer ADB SAFEGATE AMERICAS LLCDBT TRANSPORTATION SERVICES LLC	94-3470237	2.88	44729778
2a Name of Participating Employer MOVAIR	74-2629714	0.00	0
2a Name of Participating Employer FINANCIAL ACCESS FEDERAL CREDIT UNION	59-0860275	0.03	7525
2a Name of Participating Employer 145 EAST 47TH STREET LLC	45-2213135	0.01	151316
2a Name of Participating Employer INSIGNIA HOTEL LLC	82-0975252	0.04	73234
2a Name of Participating Employer FIRECREST LLC DBA PANORAMA CONSULTING GROUP	83-3681902	0.32	2526955
2a Name of Participating Employer TWEB RESOURCES LLC DBA THE WORLD EGG AND SPERM BANK	47-4426831	0.07	621847

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PH CASTERS COMPANY INC	75-2653257	0.31	5198361
WSM SERVICES	75-2870631	0.01	2569888
UNITY HOME LOANS	88-2342923	0.01	8313
EARLENS CORPORATION	20-3834883	0.76	9417824
NEWMEASURES LLC	46-4841068	0.15	657386
TRIADA HEALTH LLC	82-5371810	0.08	0
LIMELIFE USA LLC	82-1429909	0.25	1615298
CSF CONSULTING LP	20-4087543	0.05	1103418
THE TAILORED CLOSET AND PREMIERGARAGE	81-2901795	0.01	28899

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORLANDO EVENT PRODUCTIONS LCL DBA OPAV	26-2014088	0.00	0
XERO ALLIED BUSINESS ADVANTAGE DBA SECURELY	61-1780025	0.08	198320
HEALTHBRIDGE MEDICAL INC	90-0732054	0.04	83170
ALGUS PACKAGING LLC	36-3760273	0.15	1852779
NPI LLC	20-0139150	0.68	7011391
HB ARCHITECTURAL LIGHTING INCMDSG LLC	27-2951895	0.21	1283289
YK PROPERTY MANAGEMENT GROUP LLC	86-2236976	0.02	49880
NUEHARBOR CAPITAL LLC	92-0717417	0.00	31418
FIREFLY EVENTS INC	26-2250933	0.04	75549

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIDE AVENTON INC	87-4506961	0.11	308044
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NYC HOTEL 33 LLC	27-3732778	0.06	137414
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
555 STORAGE GROUP	20-4759579	0.00	10120
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PSYCHIATRY REDEFINED LLC	85-3144822	0.05	132950
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENCORE STONE STUDIO INCARIA STONE GALLERY LLC	45-3849321	0.03	109948
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GAR VENTURES LLC DBA GAR PRODUCTS	92-0937333	0.07	460946
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VERUS PINNACLE MORTGAGE LLC	88-1500458	0.00	18540
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CITY VIEW HOME LENDING LLC	88-2150598	0.00	737
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PITTWATER	87-4198231	0.01	49183

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GRACE INSTITUTE OF NEW YORK INC	81-0844164	0.09	0
TACTILE ENGINEERING INC	84-3114397	0.02	55866
RMS INDUSTRIES OF NEW YORK INC	47-3597248	0.02	38700
CONNECTIVE HEALTH STRATEGIES LLC	86-1310307	0.01	18780
DIABSOLUT LTD	99-0375427	0.22	1013458
823 39TH ST BROOKLYN LLC	46-2828780	0.00	2475
ARMICHEM INTERNATIONAL CORPORATION THE BRAHMS GROUP INC	59-2220913	0.01	67431
AMERICAN VISION	23-2675616	0.00	0
GEORGIA ASSOCIATION OF MANUFACTURERS	58-0207260	0.15	391066

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PURCHASE SENIOR LEARNING COMMUNITY INC DBA BROADVIEW SENIOR	61-1816180	0.23	402620
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUE MANAGEMENT SERVICES LLC	92-1622490	0.07	156459
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAL INC	76-0372795	0.15	2765939
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MESMERISE USA LLC	87-3596415	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE CHRONICLE OF PHILANTHROPY	87-2037668	0.51	1581224
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LISTEN ENERGY	92-2054742	0.02	51719
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FLAGSHIP MANAGEMENT LLC	47-4216580	0.14	493937
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STARKMAN INDUSTRIES	45-3341586	0.03	74972
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ASCENDANT VR CORP	92-0312429	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IQXR LLC	92-2837945	0.01	0
2a Name of Participating Employer COURTYARD MIDDLETOWN GOSHEN	2b EIN 88-0647008	2c Percentage of Total Contributions for the Plan Year 0.01	2d Aggregate Account Balances Attributable to Participating Employer 15637
2a Name of Participating Employer HAMPTON INN MIDDLETOWN	2b EIN 88-0637878	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 241
2a Name of Participating Employer SPRINGHILL SUITES BY MARRIOTT ROANOKE	2b EIN 92-1312204	2c Percentage of Total Contributions for the Plan Year 0.03	2d Aggregate Account Balances Attributable to Participating Employer 43515
2a Name of Participating Employer GRACEPOINT HOME CARE LLC	2b EIN 85-2520159	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer UHURU DESIGN	2b EIN 52-2413835	2c Percentage of Total Contributions for the Plan Year 0.07	2d Aggregate Account Balances Attributable to Participating Employer 150790
2a Name of Participating Employer CHEMTEC EMPLOYMENT LLC	2b EIN 92-1708909	2c Percentage of Total Contributions for the Plan Year 0.30	2d Aggregate Account Balances Attributable to Participating Employer 1038477
2a Name of Participating Employer G6 CYBER SOLUTIONS LLC	2b EIN 92-0497264	2c Percentage of Total Contributions for the Plan Year 0.13	2d Aggregate Account Balances Attributable to Participating Employer 358286
2a Name of Participating Employer NEWMAN AND TAUB VISION CENTER PLLC	2b EIN 75-2899968	2c Percentage of Total Contributions for the Plan Year 0.21	2d Aggregate Account Balances Attributable to Participating Employer 4378026

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILDER SYSTEMS INC	47-4849461	0.13	518304
2a Name of Participating Employer PRODUCTION BUILDERS SERVICES LLC DBA CARTER CLARK	58-2262039	0.44	2767083
2a Name of Participating Employer HUFFINES ENTERPRISES INC	87-2347986	0.10	217352
2a Name of Participating Employer HEARTLAND PLANT INNOVATIONS INC	26-2721741	0.02	198583
2a Name of Participating Employer HOPE419 LLC	85-1311093	0.11	698084
2a Name of Participating Employer STANDARD INDUSTRIAL MANUFACTURING PARTNERS LLC	38-4009907	0.20	1653446
2a Name of Participating Employer CYNDEO WEALTH PARTNERS LLC	85-1413466	0.39	1650950
2a Name of Participating Employer ADEX CORPORATION	13-3741300	0.00	0
2a Name of Participating Employer NOWTHIS MEDIA GROUP	92-3317999	0.36	1283470

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WHITAKER GROUP II LLC EAGLE TRAILER RENTAL AND STORAGE INC	84-1716718	0.00	5767
CORETRANS LLC	27-0030213	0.07	129078
MISSION HOPE INC	64-0866959	0.02	32168
KIMBERLY M ROSS MD	38-3744511	0.03	61156
VIOLETTA OFFICE LLC ELLEN BROWNING BUILDING LLC	32-0403775	0.19	1664927
JHRA GROUP LLC	20-0989759	0.11	1510436
DYSPHAGIA MANAGEMENT SYSTEMS LLC	46-1379730	0.00	27155
PEARLSTONE PARTNERS LLC LEE REAL ESTATE SERVICES INC	82-3694256	0.02	147105
NANOHIVE INC	93-2235000	0.22	1055484

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FLEETWOOD CONTINENTAL INC	95-2939186	0.24	325623
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOCA GROVE PROPERTY OWNERS ASSOCIATION INC	59-2197321	0.45	2249215
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HM ELP INC DBA HM PLATING COSCHUMACHER DIXIE	92-3236854	0.31	4755643
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
762 MADISON INC PARTICIPATING EMPLOYERS	88-4176024	0.01	11475
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
POWER MANAGEMENT CONCEPTS LLC	11-3467317	0.02	344740
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHRISTIAN LEAGUE FOR THE HANDICAPPED INC	39-0960668	0.03	40829
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MEADOWBROOK SCHOOL	88-4301781	0.02	50123
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEVON MANAGEMENT CORP	06-1148350	0.04	1060994
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HARVEST INVESTMENTS	36-3822533	0.26	1925051

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KMH INDUSTRIES INC DBA MORNING STAR ELEVATOR	82-0544694	0.14	645054
LAND ID INC	92-3535789	0.15	321671
APPALACHIAN DEVELOPMENT CORPORATION	57-0735286	0.03	108889
NEW LOOK VISION GROUP US PARTICIPATING EMPLOYERS	87-3871290	0.13	979847
DREAM REAPER LP	92-1583717	0.01	7624
MD SPINE CARE	86-3654927	0.07	297179
OMNIX USA INC	27-4356969	0.15	4715681
SPARETEK INC	74-2893221	0.02	88454
PARX ACQUISITIONS LLC PARTICIPATING EMPLOYERS	92-1046288	0.22	324916

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HOME CARE ADVANTAGE INC DBA HCA SOLUTIONS	26-3569317	0.14	760601
DISCOUNT TWO WAY RADIO CORPORATION	95-4890200	0.01	149659
DEPIETTO CPA PC	11-3045092	0.09	1408971
FAIRGROUNDS MANAGEMENTCO LLC	92-0443092	0.00	2394
AGORA BRANDS LLC	87-3135950	0.13	183156
ACS PRO TRAINING CENTER LLC	81-3650487	0.01	6341
EDGECORTIX CORPORATION	86-2387897	0.17	244960
FIRST PRIORITY EMERGENCY VEHICLES INC ENGAGE PAYROLL	22-3582913	0.30	1152059
ASSOCIATION OF ENERGY SERVICES PROFESSIONALS INC	33-0369768	0.06	69996

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GRACE OUTREACH INC	86-1110482	0.06	149230
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRU TOUCHING HUMANS LLC DBA TRUTH	27-0966071	0.26	1918664
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORCE3 HOLDING LLC	47-3037193	0.04	51229
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENERGY INFRASTRUCTURE SOLUTIONS LLC	82-2042791	0.10	124994
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRICKELL GROUP CONSTRUCTION LLC	45-3110012	0.06	627660
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOSCOBEL RESTORATION	14-1458845	0.10	1699907
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAPIENT LOGIC LLC	81-1703713	0.13	549082
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
S F RESTAURANT VENTURES INC DBA GATORS DOCKSIDE	65-0483354	0.02	45809
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COGNITIVE CAPITAL PARTNERS LLC	20-5122828	0.08	581677

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PABLO MANAGEMENT LLC	82-4058299	0.11	1270561
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DUCK CREEK LLC DBA ACTION XPRESS	36-4840653	0.09	919405
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EMPOWER LIVING MANAGEMENT LLC PARTICIPATING EMPLOYERS	88-0989192	0.00	6331
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY AND FAMILY AFFINITY SERVICES DBA EQUITY INS	82-4627821	0.02	93258
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DCE LIVE INC	46-1674306	0.03	32981
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KOGNITIVE NETWORKS INC	84-2258198	0.21	1263365
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ANESTHESIA CARE CONSULTANTS INC	20-8584688	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHROMIUM DENTAL II LLC	83-2621865	0.46	2704235
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIONETTI GROUP LLC DBA ROCCOS EUROPEAN GARAGE	85-3548733	0.14	772725

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan.

Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHOLE HEALTH PHARMACY	82-5362792	0.25	923372
2a Name of Participating Employer WECARE SPECIALTY PHARMACY INC DBA PREVEON SPECIALTY PHARMACY	47-4634585	0.17	897410
2a Name of Participating Employer NEOTERIC COSMETICS INC	84-1176439	0.07	85038
2a Name of Participating Employer EVERYTHING2GOCOM	20-3551243	0.12	2529303
2a Name of Participating Employer CSA EMPLOYEE SERVICES COMPANY LLC	92-3687262	0.10	143530
2a Name of Participating Employer HUFFNPUFF FITNESS REPAIR LLC	47-3201503	0.01	57825
2a Name of Participating Employer PROCTORIO INCORPORATED	46-3425539	0.15	890573
2a Name of Participating Employer INFOCAP NETWORKS LLC	46-0846538	0.18	2012359
2a Name of Participating Employer JOURNEYTEAM CONSULTING LLC DBA JOURNEYTEAM	87-4262153	1.27	8604608

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOPIVOT SOLUTIONS LLC	82-0600843	0.09	1608687
KATIE KIME INC	81-2231972	0.01	117151
CABLE HOLDINGS INC	61-1659964	0.09	720468
MEGA MEX LLC	76-0321803	0.05	950251
EEROQ CORPORATION	82-0917313	0.04	56204
VERNAL BIOSCIENCES	85-4270227	0.25	1080389
NH CONNECTION INC	33-1486473	0.02	325360
THRIVEWELL INFUSION LLC PARTICIPATING EMPLOYERS	82-2545644	0.21	324988
UNIPAK AVIATION LLC	11-3584821	0.01	499080

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
D K SALES INC	58-2563627	0.09	2505326
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APOGEE INDUSTRIES INC	23-1940824	0.05	1141760
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACACIA ORIGINALS	76-0562237	0.01	133329
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHOOT EDIT SLEEP LLC DBA THE STORYHIVE	81-1457211	0.09	1482469
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORT WORTH INTERVENTIONAL LLC	87-3107784	0.02	21124
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROJECT UNLOADED INC	87-4212016	0.05	57544
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
3G DISTRIBUTION SERVICES LLC	85-0808571	0.01	89915
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GROVE CLEANERS LAUNDRY INC	65-0310390	0.01	161443
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HEDGES MANAGEMENT INC DBA HEDGES COMPANY	20-1201677	0.06	1830880

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STATLER NAGLE LLC	26-1583191	0.01	12653
CALIFORNIA DELUXE WINDOWS INDUSTRIES INC	95-4745048	0.02	192731
COMPLETE MEDICAL MANAGEMENT LLC	85-3037814	0.00	259
GUARDIAN HOME CARE OF NH LLC	99-2096007	0.02	144726
ADONI PROPERTY GROUP PARTICIPATING EMPLOYERS	86-2065413	0.07	280663
ERSNO EROMO MD INC DBA CONCIERGE HEALTHCARE PARTNERS	83-4164282	0.02	22589
THE CARRIER OF HOPE FOUNDATION	93-4947201	0.00	4138
SOUTHERN GULF SOLUTIONS LLC	82-4437221	0.02	795831
ALTOR NATIONAL LIABILITY INSURANCE LLCMVS 360 LLC	47-3098554	0.01	156531

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
JERRY BRITTINGHAM AC HEAT INC	30-0054181	0.05	63204
DOLPHIN COOLING HEATING INC	45-0822470	0.01	13093
SAFE HARBOR HOME CARE LLC	81-1005331	0.01	6969
OMEGA FORCE APPLIANCE REPAIR	46-2808576	0.03	1157329
RS MANAGEMENT GROUP LLC DBA WASH WORLD LAUNDRY	47-2136567	0.00	999
GENTECH LTD	14-1765913	0.08	93184
MARGIOTTA LLC DBA SLICE HOUSE BY TONY GEMIGNANI	46-4722251	0.02	22032
SCOUT SOURCING PARTNERS LLC	92-2358246	0.01	24469
SEASALT USA RETAIL INC	99-0409462	0.00	1908

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KNIGHT ELECTRIC INC	83-2477196	0.06	301072
MEMBERS FIRST CREDIT UNION	58-1489204	0.16	6513971
ALLIANCE SENIOR LIVING MANAGEMENT COMPANY COADOPTING CO	93-4620108	0.01	7985
CORGAN SERVICES INC DBA RIGHT AT HOME WINTHROP	88-1110202	0.00	11689
RETROTAX LLC	84-3533144	0.05	5161511
LIFETIME PHYSICAL THERAPY CHIROPRACTIC PLLC	47-4398060	0.03	35765
HI RASMUS INC ENGAGE PAYROLL	86-1532393	0.02	42511
TRILOGY SPA SC LLC COADOPTING COMPANIES	80-0855620	0.21	5257723
ACOUSTIGUIDE INCORPORATED	76-0783370	0.02	2019881

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OAC MANAGEMENT CO PARTICIPATING EMPLOYERS	80-0034119	0.03	1436572
TOST BEVERAGES INC	87-3871952	0.01	16290
CNF TECHNOLOGIES CORPORATION	20-1936788	0.32	10462448
GENUINE HOSP LLC	99-1889474	0.08	95987
IRIS VND PARTNERS LLC DBA BALANCE ASSISTED LIVING AND MEM	93-4679262	0.01	7423
NOVEM CAR INTERIOR DESIGN INC	38-3151165	0.15	5279123
B L SERVICE INC	59-0909335	0.03	37934
AARON WEALTH ADVISORS LLC	83-1222676	0.06	2386686
AMERICAN HEALTHCARE MANAGEMENT GROUP LP	02-0728143	0.02	26200

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OXFORD AL LLC DBA THE VISTAS AT OXNARD	99-1151916	0.00	5392
KNB COMMUNICATIONS LLC	06-1557550	0.02	25377
SLICE HOUSE FRANCHISING	87-2509399	0.00	1173
GEOMALI INC	99-2743740	0.00	2370
THE SOCIETY OF THE SISTERS CHRISTIAN CHARITY OF NJ	22-1487348	0.00	866
OXLEY ENERGY LLC	35-2416732	0.01	9935
KNOWLES MECHANICAL INC	45-2447073	0.00	161

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Part III	Pooled Employer Plan Information
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Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44)..... ☐ Yes ☐ No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)
ACK ID _____

Engage PEO Retirement Savings Plan

**Financial Statements
(With Supplementary Information)
and Independent Auditor's Report**

December 31, 2024



Engage PEO Retirement Savings Plan

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Independent Auditor's Report

To the Plan Administrator
Engage PEO Retirement Savings Plan

Opinion

We have audited the financial statements of Engage PEO Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year then ended December 31, 2024, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2024 and 2023, and the changes in net assets available for benefits for the year ended December 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America ("GAAS"). Our responsibilities under those standards are further described in the *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

Management is also responsible for maintaining a current Plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental Schedule of Assets (Held at End of Year) (Schedule H, Line 4i) as of December 31, 2024, is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedule is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

CohnReznick LLP

Chicago, Illinois
October 6, 2025

Engage PEO Retirement Savings Plan

Statements of Net Assets Available for Benefits December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
Assets		
Investments, at fair value	<u>\$1,018,783,416</u>	<u>\$ 732,903,685</u>
Receivables		
Employer contributions	3,273,808	2,552,824
Participant contributions	2,920,742	1,721,573
Other receivables	136,373	88,446
Notes receivable from participants	<u>13,849,773</u>	<u>9,336,836</u>
Total receivables	<u>20,180,696</u>	<u>13,699,679</u>
Net assets available for benefits	<u><u>\$1,038,964,112</u></u>	<u><u>\$ 746,603,364</u></u>

See Notes to Financial Statements.

Engage PEO Retirement Savings Plan

Statement of Changes in Net Assets Available for Benefits Year Ended December 31, 2024

Additions	
Investment income	
Net appreciation in fair value of investments	\$ 58,720,727
Dividends	<u>41,276,000</u>
Total investment income	<u>99,996,727</u>
Interest income on notes receivable from participants	<u>810,509</u>
Contributions	
Employer	36,018,362
Participants	88,537,494
Rollovers	<u>12,428,284</u>
Total contributions	<u>136,984,140</u>
Total additions	<u>237,791,376</u>
Deductions	
Benefits paid to participants	(97,094,746)
Administrative expenses	<u>(4,053,189)</u>
Total deductions	<u>(101,147,935)</u>
Increase in net assets before transfers	<u>136,643,441</u>
Transfers	
Transfers in	214,111,491
Transfers out	<u>(58,394,184)</u>
Net transfers	<u>155,717,307</u>
Net increase in net assets	292,360,748
Net assets available for benefits	
Beginning of year	<u>746,603,364</u>
End of year	<u><u>\$1,038,964,112</u></u>

See Notes to Financial Statements.

Engage PEO Retirement Savings Plan

Notes to Financial Statements December 31, 2024

Note 1 - Description of Plan

The following description of the Engage PEO Retirement Savings Plan (the "Plan") provides only general information. Participants should refer to the Plan document, adoption agreements, and amendments for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan and was formed effective January 1, 2012 by The S2 HR Group, LLC (the "Plan Administrator"). The Plan is a multiple-employer plan and subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

Eligibility

The Plan covers all employees, as defined in the Plan, of the adopting employers (the "Employers") who have completed the age and service requirements selected by each Employer in their respective adoption agreements. New Employers entering the Plan may initially waive the eligibility requirements as of the Plan effective date. Once an employee meets their respective Employer's age and service requirement, they can enter the Plan on the first day of the following month.

Contributions

Participants may elect to contribute up to 98% of eligible pre-tax annual compensation, after-tax annual compensation (Roth), or any combination thereof, as defined in the Plan. These participant contribution percentages may be changed at any time. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment allocation of their contributions into various investment options offered by the Plan. These participant investment allocations may be changed by the participants at any time. The Plan also includes an optional auto-enrollment provision, if elected by the Employer, whereby newly eligible employees are automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan.

Discretionary employer-provided matching contributions may be made to the Plan. The match, if any, will be a specified percentage of the elective contributions the employee makes to the Plan. The Employers will determine the amount of the discretionary contributions, if any, they will make each Plan year. Employers can also elect to make a safe harbor plan design contribution which aids the companies in passing discrimination testing required by ERISA. Discretionary employer-provided profit sharing contributions may also be made to the Plan. Allocation of these contributions to participants will be made in accordance with the formula selected by the Employers, as defined in the Plan. Contributions are subject to certain Internal Revenue Service ("IRS") limitations.

Participant accounts

Each participant's account is credited with the participant's contributions and employer-provided matching contributions, as well as allocations of the employer-provided profit sharing contribution and Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participant contributions and Employer safe harbor matching contributions are automatically 100% vested. Each adopting Employer selects among three options for vesting of employer contributions, and the vesting percentage of the contributions in an employee's account will be based on their

Engage PEO Retirement Savings Plan

Notes to Financial Statements December 31, 2024

years of service from their original date of hire. Under the first option, employer contributions are 20% vested after two years of service, and for each additional year of service. Under the second option, employer contributions are not vested until after three years of service at which time the contributions are 100% vested. The third option is full and immediate vesting, or any accelerated vesting that vests sooner than the first option. Automatic 100% vesting occurs upon attainment of normal retirement age (65), upon retirement due to disability, upon death, and upon termination of the Plan.

To have a year of service for vesting purposes, employees must complete at least 1,000 hours of service during the Plan's calendar year. See each respective Employer's adoption agreement for any variations in the time of service requirement.

Notes receivable from participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate is set at 1% above the prime rate, as defined. Principal and interest is paid ratably through payroll deductions.

Payment of benefits

On termination of service due to death, disability or retirement, a participant may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or annual installments over a 10-year period. For termination of service for other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution.

Forfeited accounts

At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$787,247 and \$920,814, respectively. These accounts can be used to reduce future employer contributions or pay for Plan expenses. During the year ended December 31, 2024, employer contributions were reduced by \$498,559 from forfeited nonvested accounts.

Note 2 - Summary of accounting policies

Basis of accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Actual results could differ from these estimates.

Contributions

Contributions from Plan participants and the matching contributions from the Company are recorded in the year in which the employee contributions are withheld from compensation.

Investment valuation and income recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Engage PEO Retirement Savings Plan

Notes to Financial Statements December 31, 2024

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

Payment of benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Plan administrator. Expenses that are paid by the Plan administrator are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

Subsequent events

The Plan has evaluated subsequent events through October 6, 2025, the date the financial statements were available to be issued.

Note 3 - Fair value measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities ("Level 1") and the lowest priority to unobservable inputs ("Level 3"). The three levels of the fair value hierarchy under Financial Accounting Standards Board Accounting Standards Codification 820 are described as follows:

- Level 1: Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2: Inputs to the valuation methodology include:
 - Quoted prices for similar assets or liabilities in active markets;
 - Quoted prices for identical or similar assets or liabilities in inactive markets;
 - Inputs other than quoted prices that are observable for the asset or liability; and
 - Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Engage PEO Retirement Savings Plan

Notes to Financial Statements December 31, 2024

- Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodology used for assets measured at fair value. There have been no changes in the methodology used at December 31, 2024 and 2023:

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement:

2024				
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 1,018,783,416	\$ 1,018,783,416	\$ -	\$ -
Total investments at fair value	<u>\$ 1,018,783,416</u>	<u>\$ 1,018,783,416</u>	<u>\$ -</u>	<u>\$ -</u>
2023				
	Total	Level 1	Level 2	Level 3
Mutual funds	\$ 732,903,685	\$ 732,903,685	\$ -	\$ -
Total investments at fair value	<u>\$ 732,903,685</u>	<u>\$ 732,903,685</u>	<u>\$ -</u>	<u>\$ -</u>

Note 4 - Related party transactions and party-in-interest transactions

Slavic Integrated Administration, Inc. ("SIA"), the Plan's third-party administrator, receives fees for recordkeeping services along with participant account administrative and asset fees. The total fee paid by the Plan for the year ended December 31, 2024, was \$1,862,169 and is included in administrative expenses on the statement of changes in net assets available for benefits.

Slavic Mutual Fund Management Corporation, which is owned by the stockholders of SIA, is the investment advisor to the Plan. Participants, if they elect this service, are charged a quarterly advisor fee. The total fee paid by the Plan for the year ended December 31, 2024, was \$1,317,662 and is included in administrative fees on the statement of changes in net assets available for benefits.

Quarterly administrative fees are charged to the participant accounts to reimburse the Plan administrator for certain administrative expenses incurred by the Plan administrator in the operation of the Plan. For the year ended December 31, 2024, the Plan administrator expense reimbursements were \$690,992 and are included in administrative expenses on the statement of changes in net assets available for benefits.

Engage PEO Retirement Savings Plan

Notes to Financial Statements December 31, 2024

The Plan allows participants to take loans against their account balances, which are also considered party-in-interest transactions.

The party-in-interest transactions above are exempt from prohibited transactions rules of ERISA.

Note 5 - Transfers to and from other qualified plans

The Plan may receive participant assets directly from or disburse participant assets directly to separate qualified plans at the inception or termination of a Professional Employer Organization co-employer relationship with the Plan. These bulk asset transfers include participant loans and forfeiture funds. As they are not considered rollovers, they are therefore segregated on the statement of changes in net assets available for benefits as transfers in or transfers out.

Note 6 - Plan termination

Although they have not expressed any intent to do so, the Employers have the right under the Plan to discontinue their contributions at any time and to terminate the Plan. In addition, although they have not expressed any intent to do so, the Plan Administrator has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their employer contributions.

Note 7 - Tax status

The IRS has determined and informed the Plan administrator by a letter dated March 31, 2014, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (the "IRC"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Note 8 - Risks and uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near-term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Supplementary Information

Engage PEO Retirement Savings Plan
EIN 45-2441552
Plan # 001

Schedule of Assets (Held at End of Year) (Schedule H, Line 4i)
December 31, 2024

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description	(d) Cost (A)	(e) Current value
	American Century Midcap Value R6	Mutual fund		\$ 2,967,280
	iShares MSCI EAFE International Index K	Mutual fund		12,099,648
	BNY Mellon Sm/Md Cp Gr Y	Mutual fund		164,971
	Fidelity SDBA	Mutual fund		350,290
	Fidelity Sustainability Bond Index	Mutual fund		676,104
	Fidelity Intl Sustainability Idx	Mutual fund		710,708
	Fidelity Emerging Markets Index	Mutual fund		3,372,217
	Fidelity Select Materials Portfolio	Mutual fund		861,572
	Franklin Utilities R6	Mutual fund		1,881,250
	Fidelity 500 Index	Mutual fund		76,733,260
	Fidelity US Bond Index	Mutual fund		18,450,703
	John Hancock Bond R6	Mutual fund		4,785,670
	JPMorgan Mid Cap Growth R6	Mutual fund		1,931,006
	Invesco Oppenheimer Gold & Special Miner	Mutual fund		2,823,112
	T. Rowe Price Dividend Growth I	Mutual fund		9,174,500
	Putnam High Yield Advantage	Mutual fund		2,101,488
	T. Rowe Price All-Cap Opportunities I	Mutual fund		14,423,902
	American Funds EuroPacific R6	Mutual fund		3,776,471
	BlackRock Health Sciences Ops I	Mutual fund		4,475,007
	Vanguard Inflation Protected Securities	Mutual fund		1,640,686
	Vanguard Short-Term Bond Index Admiral	Mutual fund		2,845,676
	Vanguard Total Bond Market Index Admiral	Mutual fund		4,036,004
	Vanguard Equity Income Admiral	Mutual fund		7,218,463
	Vanguard Target Retirement 2055	Mutual fund		50,577,921
	Vanguard Target Retirement 2050	Mutual fund		70,948,936
	Vanguard Target Retirement 2040	Mutual fund		83,297,068
	Vanguard FTSE Social Index Admiral	Mutual fund		2,761,249
	Vanguard Real Estate Index Admiral	Mutual fund		2,513,849
	Vanguard Industrial Index Admiral	Mutual fund		2,892,466
	Vanguard Information Technology Index Ad	Mutual fund		28,436,413
	Vanguard Total Stock Market Index Inst.	Mutual fund		28,383,486
	Vanguard Target Retirement 2065 Inv	Mutual fund		8,299,613
	Vanguard Mid Cap Index Instl	Mutual fund		12,237,879
	Vanguard Cash Reserves Federal Adm	Mutual fund		4,753
	Vanguard Federal Money Market	Mutual fund		17,192,102
	Vanguard Small Cap Growth Index Adm	Mutual fund		5,739,101
	Vanguard Short-Term Federal Admiral	Mutual fund		1,112,559
	Vanguard Small Cap Value Index Adm	Mutual fund		4,882,699
	Vanguard Small Cap Index Admiral	Mutual fund		6,181,599
	Vanguard Target Retirement 2070	Mutual fund		772,431
	Vanguard Short-Term Inf Prot Index Admir	Mutual fund		1,629,277
	Vanguard Target Retirement 2030	Mutual fund		105,048,426
	Vanguard Target Retirement Income	Mutual fund		23,909,148
	Vanguard Target Retirement 2045	Mutual fund		83,775,273
	Vanguard Total Stock Market Index Admira	Mutual fund		33,250,776
	Vanguard Total International Stock Index	Mutual fund		6,102,238
	Vanguard Target Retirement 2035	Mutual fund		119,462,817
	Vanguard Target Retirement 2060	Mutual fund		25,438,933
	Vanguard Target Retirement 2025	Mutual fund		73,940,011
	Vanguard Target Retirement 2020	Mutual fund		42,492,405
	Investments at fair value			1,018,783,416
	* Participant loans	Interest rates from 3.25% - 12.5%, maturing at various dates, secured by participant account balance		13,849,773
	Total assets			<u>\$ 1,032,633,189</u>

* Party-in-interest.

(A) Cost not required.

See Independent Auditor's Report.



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SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT THE END OF THE YEAR).

ENGAGE PEO RETIREMENT SAVINGS PLAN

PLAN # 001

EIN # 45-2441552

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	Vanguard	VTTHX - Vanguard Target Retirement 2035 Fund Investor Shares		119,462,817
	Vanguard	VTHR - Vanguard Target Retirement 2030		105,048,426
	Vanguard	VTIVX - Vanguard Target Retirement 2045		83,775,272
	Vanguard	VFORX - Vanguard Target Retirement 2040 Fund Investor Shares		83,297,067
	Fidelity	FXAIX - Fidelity 500 Index Fund		76,733,260
	Vanguard	VTTVX - Vanguard Target Retirement 2025		73,940,010
	Vanguard	VFIFX - Vanguard Target Retirement 2050 Fund Investor Shares		70,948,936
	Vanguard	VFFVX - Vanguard Target Retirement 2055 Fund Investor Shares		50,577,921
	Vanguard	VTWNX - Vanguard Target Retirement 2020		42,492,405
	Vanguard	VTSAX - Vanguard Total Stock Market Index Fund Admiral Shares		33,250,776
	Vanguard	VITAX - Vanguard Information Technology Index Fund Admiral Shares		28,436,416
	Vanguard	VITSX - Vanguard Total Stock Market Index Inst.		28,383,493
	Vanguard	VTTSX - Vanguard Target Retirement 2060 Fund Investor Shares		25,438,932
	Vanguard	VTINX - Vanguard Target Retirement Income Fund Investor Class		23,909,148
	Fidelity	FXNAX - Fidelity US Bond Index Fund		18,450,702
	Vanguard	VMFXX - Vanguard Federal Money Market Fund Investor Shares		17,192,102
	T. Rowe Price	PNAIX - T. Rowe Price All-Cap Opportunities I		14,423,902
	Vanguard	VMCIX - Vanguard Mid Cap Index Instl		12,237,879
	BlackRock	BTMKX - iShares MSCI EAFE International Index Fund Class K		12,099,649
	T. Rowe Price	PDGIX - T. Rowe Price Dividend Growth I		9,174,501
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		8,299,612
	Vanguard	VEIRX - Vanguard Equity Income Admiral		7,218,462
	Vanguard	VSMAX - Vanguard Small-Cap Index Fund Admiral Shares		6,181,599
	Vanguard	VTSNX - Vanguard Total International Stock Index		6,102,237
	Vanguard	VSGAX - Vanguard Small-Cap Growth Index Fund Admiral Shares		5,739,101
	Vanguard	VSIAX - Vanguard Small Cap Value Index Fund Admiral Shares		4,882,698
	John Hancock	JHBSX - John Hancock Bond R6		4,785,670
	BlackRock	SHSSX - BlackRock Health Sciences Ops I		4,475,006
	Vanguard	VBTLX - Vanguard Total Bond Market Index Fund Admiral Shares		4,036,004
	American Funds	RERGX - American Funds EuroPacific Growth Fund Class R6		3,776,471
	Fidelity	FPADX - Fidelity Emerging Markets Index		3,372,217
	American Century	AMDVX - American Century Midcap Value R6		2,967,280
	Vanguard	VINAX - Vanguard Industrials Index Fund Admiral Shares		2,892,467
	Vanguard	VBIRX - Vanguard Short-Term Bond Index Fund Admiral Shares		2,845,675
	Oppenheimer Funds	OGMIX - Oppenheimer Gold & Special Minerals I		2,823,112
	Vanguard	VFTAX - Vanguard Ftse Social Index Admiral		2,761,248
	Vanguard	VGSLX - Vanguard Real Estate Index Fund Admiral Shares		2,513,849
	Putnam	PHAYX - Putnam High Yield Fund Class Y		2,101,488
	JPMorgan	JMGMX - JPMorgan Mid Cap Growth R6		1,931,006
	Franklin/Templeton	FUFRX - Franklin Utilities Fund Class R6		1,881,250
	Vanguard	VAIPX - Vanguard Inflation-Protected Securities Fund Admiral Shares		1,640,686
	Vanguard	VTAPX - Vanguard Short-Term Inflation-Protected Securities Index Fund Admiral Shares		1,629,277
	Vanguard	VSGDX - Vanguard Short-Term Federal Fund Admiral Shares		1,112,560
	Fidelity	FSDPX - Fidelity Select Materials Portfolio		861,571
	Vanguard	VSVNX - Vanguard Target Retirement 2070		772,431
	Fidelity	FNIDX - Fidelity Intl Sustainability Idx		710,708
	Fidelity	FNDSX - Fidelity Sustainability Bond Index		676,104
	Fidelity	FISDB - Fidelity Self-Directed Brokerage Account		350,289
	BNY Mellon	DBMYX - BNY Mellon Small/Mid Cap Growth Fund Class Y		164,971
	Vanguard	VMRXX - Vanguard Money Mkt Reserve-Prime		4,753
	Participant Loans	3.25% - 12.50%		13,849,773