

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) M ☐ 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 L3HARRIS RETIREMENT SAVINGS PLAN MASTER TRUST
1b	Three-digit plan number (PN) ▶ 101
1c	Effective date of plan 12/31/2019
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) L3HARRIS TECHNOLOGIES, INC. 1025 WEST NASA BOULEVARD MELBOURNE, FL 32919-0001
2b	Employer Identification Number (EIN) 22-3566412
2c	Plan Sponsor's telephone number 321-724-3554
2d	Business code (see instructions)

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

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

SIGN HERE	Filed with authorized/valid electronic signature.		
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2025	ANDREA HARTMAN
	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
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) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

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

9a Plan funding arrangement (check all that apply) (1) ☐ 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 L3HARRIS RETIREMENT SAVINGS PLAN MASTER TRUST	B Three-digit plan number (PN) ▶	101
C Plan sponsor's name as shown on line 2a of Form 5500 L3HARRIS TECHNOLOGIES, INC.	D Employer Identification Number (EIN) 22-3566412	

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
FIDELITY INVESTMENTS INST. OPS. CO.
04-2647786

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
NORTHERN TRUST COMPANY
36-1561860

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SANDS CAPITAL MANAGEMENT, LLC
20-2830751

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
T. ROWE PRICE ASSOCIATES, INC.
52-0556948

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

DODGE & COX

94-1441976

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

GALLIARD CAPITAL MANAGEMENT, INC.

41-1813702

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

BLACKROCK INSTITUTIONAL TRUST CO.

94-3112180

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

ALLIANCE BERNSTEIN L.P

13-4064930

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

ATLANTA CAPITAL MANAGEMENT CO.

58-2236910

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

THOMPSON, SIEGEL, & WALMSLEY

54-0854396

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

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

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)

BLACKROCK INSTITUTIONAL TRUST CO.

94-3112180

(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?
24 28 50 51 21 24 28 50 51		2701749	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

T. ROWE PRICE ASSOCIATES, INC.

52-0556948

(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 51 68		3917023	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

DODGE & COX

94-1441976

(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?
51 68		2424995	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

STRATEGIC ADVISORS, INC.

04-2654524

(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?
27 50		1999377	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALLIANCE BERNSTEIN L.P

13-4064930

(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 51 68		1351429	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

FIDELITY INVESTMENTS INST. OPS. CO.

04-2647786

(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?
37 64 65 71 50		918292	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

ATLANTA CAPITAL MANAGEMENT CO.

58-2236910

(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?
68 71		701319	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

THOMPSON, SIEGEL, & WALMSLEY

54-0854396

(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 68		619409	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

SANDS CAPITAL MANAGEMENT, LLC

20-2830751

(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?
51 68		483289	Yes ☒ No ☐	Yes ☒ No ☐	0	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)

CALLAN LLC

94-2192581

(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 27 50		455227	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NORTHERN TRUST COMPANY

36-1561860

(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?
21 50		256722	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☐

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

SIDLEY AUSTIN LLP

36-4474078

(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?
29 50		58833	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)

MOSS ADAMS LLP

91-0189318

(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 50		55000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ALIGHT SOLUTIONS LLC

82-1061233

(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 50		53034	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

H&CO, LLP

47-2427769

(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 50		27500	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)

WEAVER & TIDWELL LLP

75-0786316

(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 50		20000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SEGAL BENZ

13-1835864

(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 50		8438	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OGLETREE, DEAKINS, NASH, SMOAK

57-1044820

(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?
29 50		6257	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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
INVESCO DIVIDEND INC FD A 11 GREENWAY PLAZA STE 100 HOUSTON, TX 77046	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
AMG YACHTMAN FOCUSED N 600 STEAMBOAT RD STE 300 GREENWICH, CT 06830	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
AMG RIVER ROAD SMMID CAP VAL 600 STEAMBOAT RD STE 300 GREENWICH, CT 06830	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ABERDEEN INTL SM CAP FD CL A 1735 MARKET ST 32ND FL PHILADELPHIA, PA 19103	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADV PREFERRED GOLD BULLION S 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED ECKHARDT MANAGD F 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED GLOBAL FD INVT 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS PRFD QUANFDMANAGED 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED RISING DIV TACTIC 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED GOVT T INC TACTIC 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED TACTICAL SECTOR F 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS PRFD QUANFDMARKET L 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED COMMON GROUND FD 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED PATTERN RECOGNITI 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
QUANTIFIED TACTICAL FIXED IN 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS PRFD QUANFDALTER IN 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS PREFERRED QUANTIFIE 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GQG PARTNERS EMERG MARKETS E 1 FREEDOM VALLEY DR OAKS, PA 19456	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GQG PARTNERS EMRGING MARKETS 1 FREEDOM VALLEY DR OAKS, PA 19456	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GQG PARTNERS US QUALITY SEL 1 FREEDOM VALLEY DR OAKS, PA 19456	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GQG PARTNERS US QULTSELECT E 1 FREEDOM VALLEY DR OAKS, PA 19456	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
INVESCO INTL SM MID COMPANY 11 GREENWAY PLAZA STE 100 HOUSTON, TX 77046	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALGER SM CAP FOCUS CL A 600 PLAZA ONE 6TH FL JERSEY CITY, NJ 07311	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALGER SPECTRA FD CL CL A 600 PLAZA ONE 6TH FL JERSEY CITY, NJ 07311	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB HIGH INC ADVISOR 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB LRG CAP GROWTH CL A 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB SM CAP GROWTH PORT CL A 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB GROWTH CL A 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB SUSTAINABLE GLOBAL THEMAT 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AB INC FD ADVISOR 8000 IH 10 W STE 1400 14TH FL SAN ANTONIO, TX 78230	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMANA MUTUAL FD TRUST INC 1300 NORTH STATE ST BELLINGHAM, WA 98225	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMANA MUTUAL FD TRUST GROWTH 1300 NORTH STATE ST BELLINGHAM, WA 98225	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMANA GROWTH FD INSTITUTIONA 1300 NORTH STATE ST BELLINGHAM, WA 98225	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN BALANCED CL A 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	18

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN BALANCED CL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN BEACON AHL MNGD FUT 220 E LAS COLINAS BLVD STE 1200 IRVING, TX 75039	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY HIGH INC IN 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0025

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY MULTISECTOR 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0025

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AVANTIS US SM CAP VALUE FD 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AVANTIS EMERGING MARKETS EQU 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0005

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY EQUITY INC 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CEN FOCUSED DYNAMIC 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY EQUITY GROW 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY SELECT INVT 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY INT L GROWT 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN CENTURY EMERGING MA 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN FDS INFLTLINKED BON 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN FDS CONV GRWTH & IN 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN STRATEGIC BOND FD F 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN STRATEGIC BOND FD F 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN MUTUAL FDCL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARBITRAGE FD CL I 1290 BROADWAY STE 1100 DENVER, CO 80203	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARIEL FD 811 E WISCONSIN AVE MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARISTOTLE FLOATING RATE INC 2220 E ROUTE 66 SUITE 226 GLENDORA, CA 91740	0.0012

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARTISAN SM CAP FD INVT CL 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.0039

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARTISAN GLOBAL DISCOVERY INV 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.0039

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ARTISAN DEVELOPING WORLD FD 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.0039

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BBH LIMITED DURATIONFD CL N 140 BROADWAY NEW YORK, NY 10005	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BBH LIMITED DURATION FD CL I 140 BROADWAY NEW YORK, NY 10005	0.0005

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BNY MELLON INC STOCK INVT SH 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BNY MELLON NATURAL RESOURCES 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BNY MELLON DYNAMIC VALUE I 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BNY MELLON LRG CAPSECURITIES 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BNY MELLON APPRECIATION INVS 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BAIRD AGGREGATE BOND FD INST 777 E WISCONSIN AVE 18TH FL MILWAUKEE, WI 53202	0.0003

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON ASSET 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON OPPORTUNITY FD 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON GROWTH FD INSTL CL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON DURABLE ADVANTAGE FD I 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON DISCOVERY FDRETAIL SHA 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON PARTNERS FD 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON FOCUSED GROWTHFD 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BARON PARTNERS FD INSTL CL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.001	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BARON REAL ESTATE FD RETAIL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BARON WEALTHBUILDER FD RETAI 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BARON EMERGING MARKETS FD RE 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BERKSHIRE FOCUS FD 475 MILAN DR STE 103 SAN JOSE, CA 95134	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BLACKROCK MID CAP GROWTH EQU 40 EAST 52ND ST NEW YORK, NY 10022	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BLACKROCK TECHNOLOGYOPPORTUN 40 EAST 52ND ST NEW YORK, NY 10022	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BLACKROCK HEALTH SCIENCES OP 40 EAST 52ND ST NEW YORK, NY 10022	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BLACKROCK EMERGING MARKETS F 40 EAST 52ND ST NEW YORK, NY 10022	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ISHARES MSCI EAFE INTL IDX C 40 EAST 52ND ST NEW YORK, NY 10022	0.003

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WILLIAM BLAIR SM MID CAP GRO 222 WEST ADAMS ST 12TH FL CHICAGO, IL 60606	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WILLIAM BLAIR LRG CAP GROWTH 222 WEST ADAMS ST 12TH FL CHICAGO, IL 60606	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BOSTON TRUST ASSET MANAGEMEN 1 BEACON ST 33RD FL BOSTON, MA 02108	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BOSTON TRUST MIDCAP FD 1 BEACON ST 33RD FL BOSTON, MA 02108	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
BOSTON TRUST WALDEN SM CAP F 1 BEACON ST 33RD FL BOSTON, MA 02108	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BUFFALO INTL INSTITUTIONAL C 615 E MICHIGAN ST MILWAUKEE, WI 53202	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BUFFALO SM CAP GROWTH 615 E MICHIGAN ST MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CALAMOS MARKET NEUTRAL INC C 2020 CALAMOS COURT NAPERVILLE, IL 60563	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CALVERT CORE BOND FD CL I 4550 MONTGOMERY AVE STE 1000 N BETHESDA, MD 20814	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CALVERT US MID CAP CORE RSPN 4550 MONTGOMERY AVE STE 1000 N BETHESDA, MD 20814	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CALVERT INTL EQUITY CL A 4550 MONTGOMERY AVE STE 1000 N BETHESDA, MD 20814	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CALVERT EMERGING MARKETS EQU 4550 MONTGOMERY AVE STE 1000 N BETHESDA, MD 20814	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FULLERTHALER BEHV SM CAP EQT 411 BOREL AVE STE 300 SAN MATEO, CA 94402	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CARILLON CLARIVEST INTERNATI P O BOX 33022 ST PETERSBURG, FL 33733	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CAUSEWAY INTERNATNALVALUE IN P O BOX 1100 OAKS, PA 19456	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CAUSEWAY INTERNATNALVALUE IN P O BOX 1100 OAKS, PA 19456	0.0015	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
COHEN & STEERS REAL ESTATE S 280 PARK AVE 10TH FL NEW YORK, NY 10017	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COHEN & STEERS REALTY CL A 280 PARK AVE 10TH FL NEW YORK, NY 10017	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COHEN & STEERS INSTL REALTY 280 PARK AVE 10TH FL NEW YORK, NY 10017	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA THERMOSTAT CL A 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA MORTGAGE OPPORTUNIT 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA LRG CAP CORE FD CL 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA DIVIDEND INC CL A 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA SELIGMAN GLOBAL TEC 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COLUMBIA SELIGMAN TECH AND I 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
COMMERCE VALUE INSTITUTIONAL 922 WALNUT ST 4TH FL KANSAS CITY, MO 64106	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CONESTOGA SM CAP INVT CL 225 PICTORIA DR STE 450 CINCINNATI, OH 45246	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CS FLOATING RATE HIGH INC CL ONE MADISON AVE 10TH FL NEW YORK, NY 10010	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
DFA INTERNATIONAL CORE EQUIT 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA US CORE EQUITY II 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA US CORE EQUITY I 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA EMERGING MRKTS CORE EQU 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA US MICRO CAP PRTF INSTL 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA ONE YEAR FIXED INC PRTF 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INTERNATIONAL SM COMPANY 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.
DFA INT L SM CAP VALUE	6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.
DFA US SM CAP VALUE PRTF INS	6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.
DFA US LRG CAP VALUE PRTF IN	6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INTERMEDIATE GOVT F I PR 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA FIVE YEAR GLBL FIXED INC 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INTERNATIONAL SM CAP GRW 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INTERNATIONAL LR CAP GR 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INVESTMENT GRADE PORTFOL 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA GLOBAL REAL ESTATE SEC P 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DWS LATIN AMERICA EQUITY FD 280 PARK AVE 9TH FLR NEW YORK, NY 10026	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA WORLD EX US CORE EQUITY 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DFA INTERNATIONAL VALUE PRTF 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746	0.0002

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DIREXION MONTHLY NASDAQ100BU 155 SEAPORT BOULEVARD STE P8 BOSTON, MA 02210	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DOUBLELINE TOTAL RT BOND FD 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
DOUBLELINE LOW DURATION BOND 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EATON VANCE GREATER INDIA FD TWO INTERNATIONAL PLACE BOSTON, MA 02110	16

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EATON VANCE TOTAL RETURN BON TWO INTERNATIONAL PLACE BOSTON, MA 02110	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EATON VANCE EMRG MARKETS LOC TWO INTERNATIONAL PLACE BOSTON, MA 02110	16

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FMI INTERNATIONAL 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FMI COMMON STOCK FD 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FEDERATED HERMES KAUFMANN SM 4000 ERICSSON DR WARRENDALE, PA 15086	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FEDERATED HERMES PRUDENT BEA 4000 ERICSSON DR WARRENDALE, PA 15086	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FAM DIVIDEND FOCUS FD 384 NORTH GRAND ST COBLESKILL, NY 12043	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EMERALD FINANCE AND BANKING 3175 OREGON PIKE LEOLA, PA 17540	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FIRST EAGLE GOLD CL A 1345 AVE OF THE AMERICAS 48TH FLR NEW YORK, NY 10105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FIRST EAGLE GLOBAL CL A 1345 AVE OF THE AMERICAS 48TH FLR NEW YORK, NY 10105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FRANKLIN GOLD AND PRECIOUS M 100 FOUNTAIN PARKWAY ST PETERSBURG, FL 33716	16

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
FROST TOTAL RETURN BOND FD I PO BOX 2509 SAN ANTONIO, TX 78299	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN FDAMENTAL INVTS CL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
POLEN GROWTH FD RETAIL SHARE 1825 NW CORPORATE BLVD STE 300 BOCA RATON, FL 33431	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GABELLI GOLD FD CLAA 401 THEODORE FREMD AVE RYE, NY 10580	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GAMCO GLOBAL GROWTH FD AAA 401 THEODORE FREMD AVE RYE, NY 10580	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOEHRING & ROZENCWAJG RES IN 1290 BROADWAY ST STE 1100 DENVER, CO 80203	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS INTL EQUITY IN 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS TECH OPPORTUNI 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS SM CAP VALUE I 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS INTL EQUITY IN 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS GQG PARTNERS I 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.0017

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLDMAN SACHS GQG PART INTER 71 S WACKER DR 4TH FL CHICAGO, IL 60606	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN GROWTH FDOF AMERICA 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	18

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN GROWTH FDOF AMERICA 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GUGGENHEIM MACRO OPPORTUNITIT 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GUINNESS ATKINSON ALTERNATIV 2220 E ROUTE 66 STE 226 GLENDORA, CA 91740	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JOHN HANCOCK BOND CL A 601 CONGRESS ST 9TH FL BOSTON, MA 02210	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARBOR INTL INV 111 S WACKER DR 34TH FL CHICAGO, IL 60606	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARBOR DISRUPTIVE INNOVATION 111 S WACKER DR 34TH FL CHICAGO, IL 60606	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARBOR CAP APP INV 111 S WACKER DR 34TH FL CHICAGO, IL 60606	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARDING LOEVNER INTL EQUITY PO BOX 4766 CHICAGO, IL 60680	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
OAKMARK FD INVT CL 111 SOUTH WACKER DR CHICAGO, IL 60606	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
OAKMARK SELECT INVT CL 111 SOUTH WACKER DR CHICAGO, IL 60606	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARTFORD CORE EQUITYCL A 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARTFORD MID CAP FD CL Y 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARTFORD STRATEGIC INC FD CL 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HARTFORD SCHRODERS INTL STOC 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
HARTFORD SCHRODERS INTL STOC 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
HENNESSY CORNERSTONEGROWTH I 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
HENNESSY CORNERSTONEMID CAP 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HENNESSY CORNERSTONE GROWTH 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HENNESSY CORNERSTONE MID CAP 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HENNESSY MIDSTREAM INV 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HENNESSY JAPAN SM CAP CL INS 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HENNESSY JAPAN SMCAP INVT CL 7250 REDWOOD BLVD STE 200 NOVATO, CA 94945	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HOTCHKIS & WILEY VALUE OPP C 725 S FIGUEROA 39TH FL LOS ANGELES, CA 90017	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN INTERMEDIATBOND FD 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
INVESCO DYNAMIC CRED OPPORTU 11 GREENWAY PLAZA STE 100 HOUSTON, TX 77046	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
THE INTERNET FD 470 PARK AVE SOUTH NEW YORK, NY 10016	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
INTREPID INC FD INSTITUTIONA 1400 MARSH LANDING PKWY STE 106 JACKSONVILLE BEACH, FL 32250	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN INVESTMNT CO OF AME 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	18

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN INVESTMENT CO OF AM 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WCM FOCUSED INTL GROWTH FD I 2220 EAST ROUTE 66 STE 226 GLENDORA, CA 91740	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EP EMERGING MARKETS CL A LOTS 81 82 ST C STE 204 DORADO, PR 00646	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EUROPAC GOLD FD CL A LOTS 81 82 ST C STE 204 DORADO, PR 00646	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AXS THOMAS REUTERS VENTURE C 181 WESTCHESTER AVE STE 402 PORT CHESTER, NY 10573	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MACQUARIE MID CAP GROWTH CL 2005 MARKET ST PHILADELPHIA, PA 19103	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN HEDGED EQUITY CL I 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN SHORT DURATION CORE 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JP MORGAN HEDGED EQUITY 2 FD 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JP MORGAN INTL HEDGED EQUITY 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN EQUITY PREM INC I 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JACOB MICRO CAP GROWTH INV C 727 2ND ST STE 106 HERMOSA BEACH, CA 90254	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON GL LIFE SCIE 151 DETROIT ST DENVER, CO 80206	15

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON SM CAP VALUE 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON CONTRARIAN T 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON GLOB TECH & 151 DETROIT ST DENVER, CO 80206	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON ENTERPRISE T 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON RESEARCH T 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON BALANCED T 151 DETROIT ST DENVER, CO 80206	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON MID CAP VALU 151 DETROIT ST DENVER, CO 80206	15

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON ENTERPRISE I 151 DETROIT ST DENVER, CO 80206	15

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON MULTISECTOR 151 DETROIT ST DENVER, CO 80206	0.0035

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON EUROPEAN FOC 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JANUS HENDERSON DEVELOPED WO 151 DETROIT ST DENVER, CO 80206	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JENSEN QUALITY GROWTH FD CL 811 E WISCONSIN AVE 8TH FL MILWAUKEE, WI 53202	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JOHN HANCOCK US GROWTH FND C 601 CONGRESS ST 9TH FL BOSTON, MA 02210	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JOHN HANCOCK GLOBAL SHAREHOL 601 CONGRESS ST 9TH FL BOSTON, MA 02210	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JOHN HAN DISCIPLINEDVALUE MI 601 CONGRESS ST 9TH FL BOSTON, MA 02210	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN UNCONSTRAINED CL 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN INTERNATNL FOCUS FD 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN EMERGING MARKETS EQ 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN SM CAP EQUITY CL A 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JP MORGAN SM CAP BLEND CL A 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN US LG CAP CORE PLUS 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN DIVERS MID CAP GROW 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN INVT GROWTH FD CL 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
KINETICS SM CAP OPPORTUNITIE 470 PARK AVE SOUTH NEW YORK, NY 10016	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
LAZARD GLOBAL LISTEDINFRASTR 30 ROCKEFELLER PLAZA 57TH FL NEW YORK, NY 10112	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CLEARBRIDGE SELECT FD I 100 FOUNTAIN PARKWAY ST PETERSBURG, FL 33716	0.0015	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CLEARBRIDGE VALUE TRUST CL A 100 FOUNTAIN PARKWAY ST PETERSBURG, FL 33716	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CLEARBRIDGE SELECT FD CL A 100 FOUNTAIN PARKWAY ST PETERSBURG, FL 33716	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BRANDYWINEGLOBAL HIGH YIELD 100 FOUNTAIN PARKWAY ST PETERSBURG, FL 33716	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LEUTHOLD CORE INVESTMENT RET 33 SOUTH SIXTH ST STE 4600 MINNEAPOLIS, MN 55402	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LOCORR MACRO STRATEGIES FD C 261 SCHOOL AVE 4TH FL EXCELSIOR, MN 55331	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LOOMIS SAYLES GROWTHCL Y 399 BOYLSTON ST 8TH FL BOSTON, MA 02116	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LORD ABBETT GROWTH LEADERS F 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.0045

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LORD ABBETT DEVELOP GROWTH C 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.0045

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LORD ABBETT HEALTH CARE FD A 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.0045

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LORD ABBETT MICRO CAP GROWTH 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.0045

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
LORD ABBETT SHORT DURATION H 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS MID CAP VALUE FD CL I 111 HUNTINGTON AVE BOSTON, MA 02199	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS EMERGING MARKETS EQUITY 111 HUNTINGTON AVE BOSTON, MA 02199	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS VALUE CL A 111 HUNTINGTON AVE BOSTON, MA 02199	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS GROWTH FD CL A 111 HUNTINGTON AVE BOSTON, MA 02199	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS BLENDED RESEARCHINTRNATL 111 HUNTINGTON AVE BOSTON, MA 02199	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MADISON MID CAP FDIINSTL 550 SCIENCE DR MADISON, WI 53711	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NYLI MACKAY SHRT DURATION HI 30 HUDSON ST 23RD FL ARLINGTON, NJ 07032	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TORTOISE ENGY INFRSTTOTAL RE 4100 WEST 115TH ST STE 1000 LEAWOOD, KS 66211	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
KENSINGTON DYNAMIC GROWTH CL 100 SALEM ST SMITHFIELD, RI 02917	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
KENSINGTON MANAGED INC CL I 100 SALEM ST SMITHFIELD, RI 02917	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HOOD RIVER SM CAPGROWTH INVT 6001 SHADY OAK ROAD STE 200 MINNETONKA, MN 55343	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MANNING & NAPIER HIGH YIELD 290 WOODCLIFF DR FAIRPORT, NY 14450	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MANNING & NAPIER DISCIPL VAL 290 WOODCLIFF DR FAIRPORT, NY 14450	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MANNING & NAPIER HIGH YIELD 290 WOODCLIFF DR FAIRPORT, NY 14450	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MARSICO GLOBAL FD 235 WEST GALENA ST MILWAUKEE, WI 53212	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MFS MASS INVT GROWTH STOCK A 111 HUNTINGTON AVE BOSTON, MA 02199	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MATTHEW 25 PO BOX 2479 JENKINTOWN, PA 19046	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MATTHEWS EMERG MRKTSSM COMPA 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MATTHEWS ASIAN GROWTH & INC 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MATTHEWS INDIA FD 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MATTHEWS ASIAN INNOVATORS FD 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TCW METWEST TOTAL RETURN BON 865 S FIGUEROA ST 1400 LOS ANGELES, CA 90071	0.0035

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MILLER CONVERTIBLE BOND CL I 20 WILLIAM ST STE G5 WELLESLEY, MA 02481	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY DISCOVERY POR 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MSIF GLOBAL FRANCHISE CL A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY GROWTH PORTFO 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STA INST INC. INCEPTI 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STA INST INC. EMERGIN 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY INSIGHT A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY INTL ADVANTAG 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY GLOBAL OPPORT 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY GLOBAL OPPORT 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
MORGAN STANLEY INSTLINTERNTL 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EVENTIDE GILEAD FD CL I 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EVENTIDE GILEAD FD CL N 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CATALYST SYSTEMATIC ALPHA FD 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EVENTIDE HEALTHCARE AND LIFE 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
EVENTIDE HEALTHCARE AND LIFE 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CATALYST MILLBURN HEDGE STRT 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.0015	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
EVENTIDE LRG CAP FOCUS FD CL 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.004	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
LOOMIS SAYLES CORE PLUS BD F 399 BOYLSTON ST 8TH FL BOSTON, MA 02116	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NEEDHAM AGGRESSIVE GROWTH 445 PARK AVE 15TH FL NEW YORK, NY 10022	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NEIMAN LRG CAP VALUE FD 6631 MAIN ST WILLIAMSVILLE, NY 14221	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS CAPT ACTIVE ALL CAP 100 SALEM ST SMITHFIELD, RI 02917	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS CAPT TACTICAL FX IN 100 SALEM ST SMITHFIELD, RI 02917	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS CAPT SM MID CAP INV 100 SALEM ST SMITHFIELD, RI 02917	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ADVISORS CAPT US DIVIDEND FD 100 SALEM ST SMITHFIELD, RI 02917	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NEUBERGER BERMAN LRG CAP VAL 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NEUBERGER BERMAN CORE BOND I 1290 AVE OF THE AMERICAS 22ND FL NEW YORK, NY 10104	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN NEW ECONOMYCL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN NEW PERSPECTIVE CL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	18

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN NEW PERSPECTIVE CL 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN NEW WORLD CL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NICHOLAS FD 411 E WISCONSIN AVE MILWAUKEE, WI 53202	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NORTHERN INC EQUITY 801 SOUTH CANAL C5S CHICAGO, IL 60675	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NORTHERN SM CAP VALUE 801 SOUTH CANAL C5S CHICAGO, IL 60675	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NORTHERN SM CAP CORE 801 SOUTH CANAL C5S CHICAGO, IL 60675	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SIERRA TACTICAL ALL ASSET FD 3420 OCEAN PARK BLVD SANTA MONICA, CA 90405	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NAVIGATOR TACTICAL FIXED INC 1650 MARKET ST 53RD FL PHILADELPHIA, PA 19103	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NORTH STAR SM CAP VALUE FD I 20 N WACKER DR 1416 CHICAGO, IL 60606	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HCM INC PLUS FD INVT 1145 HEMBREE ROAD ROSWELL, GA 30076	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ABSOLUTE CAPT ASSET ALLOCATO 101 PENNSYLVANIA BLVD PITTSBURGH, PA 15228	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HCM DIVIDEND SECTOR PLUS FD 1145 HEMBREE ROAD ROSWELL, GA 30076	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HCM TACTICAL GROWTH FD INVT 1145 HEMBREE ROAD ROSWELL, GA 30076	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG US EQUITY INDEX STRATEGY 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG GLOBAL EQUITY INDEX STRA 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SIERRA TACTICAL BOND FD INVT 3420 OCEAN PARK BLVD SANTA MONICA, CA 90405	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG MFS AGGRESSIVE GROWTH ST 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG JP MORGAN TACTICAGGRESSI 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG BNY MELLON DIVERSIFIER S 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG MEEDER TACTICAL STRATEGY 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG JP MORGAN TACTICMODERATE 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG ACTIVE CORE BOND STRATEG 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG INVESCO EQ FACTRROTATION 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG JANUS HENDERSON BALANCED 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG FIDELITY INST AMCORE PLU 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG TACTICAL INC STRATEGY CL 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG EQUITY INDEX FOCUSED STR 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG SECTOR EQUITY BUS CYCLE 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG BR TRGT ALLOCAT EQ STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG AMERICAN FDS GROWTH STRA 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PFG AMERICAN FDS CONS INC ST 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RED OAK TECHNOLOGY SELECT 225 PICTORIA DR STE 450 CINCINNATI, OH 45246	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BLACK OAK EMERGING TECHNOLOG 225 PICTORIA DR STE 450 CINCINNATI, OH 45246	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
OBERWEIS MICRO CAP FD 3333 WARRENVILLE RD STE 500 LISLE, IL 60532	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
OBERWEIS MICRO CAP FD INSTL 3333 WARRENVILLE RD STE 500 LISLE, IL 60532	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
OBERWEIS SM CAP OPPORTUNITIE 3333 WARRENVILLE RD STE 500 LISLE, IL 60532	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO LONG TERM US GOV T CL 1633 BROADWAY NEW YORK, NY 10019	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO INTL BD FD U SDOLLAR H 1633 BROADWAY NEW YORK, NY 10019	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PARADIGM SELECT FD 9 ELK ST ALBANY, NY 12207	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PARNASSUS VALUE EQUITY INVT 1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PARNASSUS CORE EQUITY INVT 1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
PARNASSUS CORE EQUITY INSTL 1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.001	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
IMPAX GLOBAL OPPORT FD INSTL 1290 BROADWAY STE 1100 DENVER, CO 80203	0.0012	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
IMPAX SM CAP FD INVT CL 1290 BROADWAY STE 1100 DENVER, CO 80203	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
PERMANENT PORTFOLIO 600 MONTGOMERY ST STE 4100 SAN FRANCISCO, CA 94111	0.0038	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CONQUER RISK DEFENSIVE BULL 777 BRICKELL AVE STE 500 MIAMI, FL 33131	0.0015	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
CONQUER RISK TACTICAL OPP FD 777 BRICKELL AVE STE 500 MIAMI, FL 33131	0.0015	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CONQUER RISK TACTICAL ROTATI 777 BRICKELL AVE STE 500 MIAMI, FL 33131	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
CONQUER RISK MANAGEDVOLATILI 777 BRICKELL AVE STE 500 MIAMI, FL 33131	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO REAL ESTATE REAL RETUR 1633 BROADWAY NEW YORK, NY 10019	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO DIVERSIFIED INC FD CL 1633 BROADWAY NEW YORK, NY 10019	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO INC FD CL A 1633 BROADWAY NEW YORK, NY 10019	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO GLOBAL ADVT STRATEGY B 1633 BROADWAY NEW YORK, NY 10019	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO INTL BD U.S. DOLLAR HE 1633 BROADWAY NEW YORK, NY 10019	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIMCO RAE US SM FD A 1633 BROADWAY NEW YORK, NY 10019	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIONEER FD CL Y 60 STATE ST 17TH FL BOSTON, MA 02109	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIONEER FDAMENTAL GROWTH FD 60 STATE ST 17TH FL BOSTON, MA 02109	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PIONEER SELECT MID CAP GROWT 60 STATE ST 17TH FL BOSTON, MA 02109	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE COMM & TECHNOLO 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GROWTH STOCK 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE HEALTH SCIENCES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE HIGH YIELD BOND 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GLOBAL TECHNOLO 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GLBL MULTI SECT 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE RET 2030 FD 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE RETIREMENT BALA 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE RETIREMENT 2035 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE RETIREMENT 2015 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PRIMECAP ODYSSEY STO CK FD 2020 E FINANCIAL WAY STE 100 GLEN DORA, CA 91741	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PRINCIPAL HIGH YIELDCL A 620 COOLIDGE DR STE 300 FOLSOM, CA 95630	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PRINCIPAL MULTI STRATEGY INS 620 COOLIDGE DR STE 300 FOLSOM, CA 95630	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AKRE FOCUS FD RETAIL 777 E WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AKRE FOCUS FD INSTL 777 E WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SEMICONDUCTOR ULT SECTOR PRO 7501 WISCONSIN AVE STE 1000 E TOWE BETHESDA, MD 20814	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ULT NASDAQ 100 PRO FD INVT 7501 WISCONSIN AVE STE 1000 E TOWNE BETHESDA, MD 20814	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM JEN INTL OPPORTUNITIES 655 BROAD ST NEWARK, NJ 07102	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM JEN INTL OPPORTUNITIES 655 BROAD ST NEWARK, NJ 07102	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM TOTAL RETURN BOND CL A 655 BROAD ST NEWARK, NJ 07102	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM STRATEGIC BOND CL A 655 BROAD ST NEWARK, NJ 07102	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM HIGH YIELD CL A 655 BROAD ST NEWARK, NJ 07102	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM HIGH YIELD CL Z 655 BROAD ST NEWARK, NJ 07102	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PGIM SHRT DUR HGH YLD INC FD 655 BROAD ST NEWARK, NJ 07102	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PUTNAM LRG CAP VALCL A 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PUTNAM LRG CAP VAL FD CL Y 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PUTNAM SM CAP GROWTH CL A 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PUTNAM CORE BOND FD CL Y 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PUTNAM GLOBAL TECHNOLOGY FD 1 POST OFFICE SQ MAILZONE G3C BOSTON, MA 02109	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
BOSTON PARTNERS ALL CAP VALU 223 WILMINGTON W CHESTER PIKE 216 CHADDS FORD, PA 19317	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SGI PRUDENT GROWTH FD I 620 S MAIN ST BOUNTIFUL, UT 84010	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SGI PEAK GROWTH I 620 S MAIN ST BOUNTIFUL, UT 84010	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE DIVIDEND GROWTH 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE EQUITY INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE CAP APPRECIATIO 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE FINANCIAL SERVI 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE U.S EQUITY RESE 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE BLUE CHIP GROWT 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE EQUITY INDEX 50 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE MID CAP GROWTH 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE ALL CAPOPPORTUN 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE NEW HORIZONS FD 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GLOBAL INDUSTRI 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE EMERG MRKTS COR 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GLOBAL GR STOCK 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE INT L VALUE EQU 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE GLOBAL STOCK 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE ULT SHORT TERM 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE SM CAP VALUE FD 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE MID CAP VALUE 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE DIVERSDMID CAP 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE INFLATION PROT 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE INTRTD US SM CA 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE INTG USSM & MID 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
T ROWE PRICE TAX EFFICIENT E 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RYDEX INVERSE S&P 500 2X STR 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RYDEX NASDAQ 100 INV CL 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RYDEX ELECTRONICS INV CL 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RYDEX S&P 500 2X STRATEGY CL 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RYDEX NASDAQ 100 FD CL H 9601 BLACKWELL RD STE 500 ROCKVILLE, MD 20850	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA GLOBAL FIXED INC 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA EMERGING MARKETS FD CL I 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA REAL ESTATE SEC FD CL I 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA US FIXED INC FD CL I 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA INTERNATIONAL SM COMPANY 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA INTERNATIONAL VALUE 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA US SM COMPANY FD 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SA US VALUE 10 ALMADEN BLVD 15TH FL SAN JOSE, CA 95113	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
STATE STREET S&P INDEX FD ONE LINCOLN ST BOSTON, MA 02111	0.0005

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SCHWAB CORE EQUITY 211 MAIN ST SAN FRANCISCO, CA 94105	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AVE MARIA VALUE FD 801 W ANN ARBOR TRAIL STE 244 PLYMOUTH, MI 48170	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AVE MARIA GROWTH 801 W ANN ARBOR TRAIL STE 244 PLYMOUTH, MI 48170	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AVE MARIA WORLD EQUITY FD 801 W ANN ARBOR TRAIL STE 244 PLYMOUTH, MI 48170	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SEGALL BRYANT HAMILL SML CAP 370 17TH ST STE 5000 DENVER, CO 80202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SHELTON NASDAQ 100 INDEX FD PO BOX 87 DENVER, CO 80201	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SHELTON NASDAQ 100 INDEX INV PO BOX 87 DENVER, CO 80201	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN SM CAP WORLD CL A 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	18

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SMEAD VALUE FD INVT CL SHARE 1290 BROADWAY STE 1100 DENVER, CO 80203	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
SPROTT GOLD EQUITY FD INVT 200 BAY ST STE 2600 TORONTO CA	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TCW EMERGING MARKETS INC CL 865 S FIGUERA ST 22ND FL LOS ANGELES, CA 90071	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NUVEEN REAL ESTATE SECURITIE 333 WEST WACKER DR NEW YORK, NY 10017	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NUVEEN REAL ESATE SECURITIES 333 WEST WACKER DR NEW YORK, NY 10017	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
THOMPSON BOND FD 1255 FOURIER DR STE 200 MADISON, WI 53717	0.0025

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
THORNBURG INTL GROWTH INSTIL 2300 NORTH RIDGETOP RD SANTA FE, NM 87506	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
THRIVENT SM CAP STOCK FD CL 4321 N BALLARD ROAD APPLETON, WI 54919	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
THRIVENT MID CAP STOCK FD CL 4321 N BALLARD ROAD APPLETON, WI 54919	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
NUVEEN HIGH YIELD FD R6 333 WEST WACKER DR NEW YORK, NY 10017	0.0006

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY SM CAP VALUE CL A 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN ISRAEL COMMON V 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN HIGH YIELD BOND 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN LRG MID CAP VAL 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN SM CAP VALUE CL 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN LRG MID CAP GRO 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN INTERNATIONAL C 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN SM MID CAP GROW 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN ISRAEL COMMON V 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN DEFENSIVE STRAT 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN LRG MID CAP VAL 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN HIGH YIELD BOND 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN CONSERVATIVE GR 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TIMOTHY PLAN SM MID CAP GROW 80 ARKAY DR STE 110 HAUPPAUGE, NY 11788	0.0008

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TOUCHSTONE MID CAP FD CL Z 303 BROADWAY STE 1100 CINCINNATI, OH 45202	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
TOUCHSTONE SANDS CAP SEL GRW 303 BROADWAY STE 1100 CINCINNATI, OH 45202	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
TOUCHSTONE MID CAP FD INSTL 303 BROADWAY STE 1100 CINCINNATI, OH 45202	0.0007	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
TRANSAMERICA INTL EQUITY CL 4333 EDGEWOOD RD NE CEDAR RAPIDS, IA 52499	0.0015	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0
(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.	
INFINITY Q DIVRS ALPHA INVT 888 7TH AVE STE 3800 NEW YORK, NY 10106	0.004	

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
PERFORMANCE TRUST TOTAL RETR 500 WEST MADISON STE 470 CHICAGO, IL 60661	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
HOLBROOK INC FD CL I 2933 NE 16TH ST PORTLAND, OR 97212	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
RECURRENT MLP & ENGY INFRAS 3801 KIRBY DR STE 654 HOUSTON, TX 77098	0.001

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY PRECIOUS METALS AND 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY GOVERNMENT SECURITIE 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY NASDAQ 100 INDEX FD 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY GOVERNMENT SECURITIE 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY SHORT TERM BOND FD I 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY NASDAQ 100 INDEX FD 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
JPMORGAN UNDISCOVERD MNG BEH 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
GOLD AND PRECIOUS METALS FD 3 CANAL PLAZA STE 600 PORTLAND, ME 04101	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VALUE LINE ASSET ALLOCATION 7 TIMES SQUARE STE 1606 NEW YORK, NY 10036	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VALUE LINE MID CAP FOCUSED I 7 TIMES SQUARE STE 1606 NEW YORK, NY 10036	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VALUE LINE MID CAP FOCUSED F 7 TIMES SQUARE STE 1606 NEW YORK, NY 10036	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VALUE LINE SM CAP OPPORT CL 7 TIMES SQUARE STE 1606 NEW YORK, NY 10036	0.0012

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY SYCAMORE ESTABLISHED 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY FLOATING RATE CL Y 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY RS PARTNERS FD CL A 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VICTORY RS INTERNATIONAL CL 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.0012

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS KAR MID CAP CORE FD C 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS KAR SM MID CAP CORE C 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS KAR MID CAP GROWTH FD 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS SGA EMERGING MARKETS 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS ZEVENBERGEN INNOVATIV 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VIRTUS CEREDEx LRG CAP EQUIT 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VOYA LRG CAP GROWTH CL I 7337 E DOUBLETREE RANCH RD SCOTTSDALE, AZ 85258	0.001

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
VOYA TARGET RETIREMENT 2060 7337 E DOUBLETREE RANCH RD SCOTTSDALE, AZ 85258	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH CORE GROWTH 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH HOISINGTON US TREASU 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.0025

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH ULT GROWTH 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH MICROCAP 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH CORE GROWTH INSTITUT 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH EMERGING INDIA FD 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WASATCH GLOBAL OPPORTUNITIES 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
AMERICAN WASHINGTON MUTUAL I 3500 WISEMAN BLVD SAN ANTONIO, TX 78251	0.0037

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WEITZ CORE PLUS INC FD INV 1125 SOUTH 103RD ST OMAHA, NE 68124	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
WEITZ CORE PLUS INC FD INSTL 1125 SOUTH 103RD ST OMAHA, NE 68124	0.0015

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING CORE BOND FD A 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING DIVRSFD CAP BUILDE 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING UTILITY & TELECOMM 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING PRECIOUS METALS FD 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING SPECIAL MID CAP VL 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.0015

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
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING SPECIAL MID CAP VL 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INST. OPS. CO.	60	0

(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.
ALLSPRING LRG COMPNYVALUE FD 525 MARKET ST MAC A0103 122 SAN FRANCISCO, CA 94105	0.004

(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
(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
(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

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 D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
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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 L3HARRIS RETIREMENT SAVINGS PLAN MASTER TRUST	B Three-digit plan number (PN) ▶ 101	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 L3HARRIS TECHNOLOGIES, INC.	D Employer Identification Number (EIN) 22-3566412	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)		
(Complete as many entries as needed to report all interests in DFEs)			
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2025 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020456-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2030 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020542-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 999205783	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2035 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020637-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 741784413	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2040 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020715-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 620430824	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2045 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020794-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 653087249	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2050 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 26-4020887-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 519251517	
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2055 NL F			
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N			
c EIN-PN 27-1620812-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 321356581	

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2060 NL F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N		
c EIN-PN 47-2022883-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 217378623
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX 2065 NL F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N		
c EIN-PN 84-1915237-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 74849402
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFEPATH INDEX NL F		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST CO. N		
c EIN-PN 26-4019464-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1626580837
a Name of MTIA, CCT, PSA, or 103-12 IE: DIVERSIFIED INTERNATIONAL EQUITY FD		
b Name of sponsor of entity listed in (a): PRINCIPAL GLOBAL INVESTORS TRUST CO		
c EIN-PN 26-6746540-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 131020544
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COL. EXT. EQUITY MARKET INDEX NL		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-100	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COL. GOVT. STIF		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-068	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36796658
a Name of MTIA, CCT, PSA, or 103-12 IE: WF/BLACKROCK SHORT TERM INVESTMENT		
b Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.A.		
c EIN-PN 41-6292499-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49766551
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE AGGR BOND IDX FD LEND		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-029	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 173703939
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE S&P500 INDEX FUND L		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2549096548
a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE EXT EQTY MKT IDX FD L		
b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.		
c EIN-PN 45-6138589-052	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 659034591

a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE ALL COUNTRY WORLD EX-**b** Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.

c EIN-PN 45-6138589-039	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 86385289
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II**Information on Participating Plans (to be completed by DFEs, other than DCGs)**

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name L3HARRIS RETIREMENT SAVINGS PLAN**b** Name of plan sponsor L3HARRIS TECHNOLOGIES, INC.**c** EIN-PN 34-0276860-015**a** Plan name AVIATION COMMUNICATIONS & SURVEILLANCE SYSTEMS 401(K) PLAN**b** Name of plan sponsor AVIATION COMM. & SURVEILLANCE SYS.,**c** EIN-PN 86-1027973-002**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN

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 L3HARRIS RETIREMENT SAVINGS PLAN MASTER TRUST	B Three-digit plan number (PN) ▶	101
C Plan sponsor's name as shown on line 2a of Form 5500 L3HARRIS TECHNOLOGIES, INC.	D Employer Identification Number (EIN) 22-3566412	

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)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	7095146	6292829
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)	86413639	159393280
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	388673	324685
(B) All other	1c(3)(B)	74911738	92210654
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	8242653	7902067
(B) Common	1c(4)(B)	2220212077	2327172651
(5) Partnership/joint venture interests	1c(5)	32994140	35322897
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	7991230420	9459729349
(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)	107516524	554361626
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	2013326072	2231913389

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	1525759503	1351011991
(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	14068090585	16225635418
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	1856792	1280997
k Total liabilities (add all amounts in lines 1g through 1j)	1k	1856792	1280997
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	14066233793	16224354421

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	8441682	
(B) U.S. Government securities	2b(1)(B)	5713768	
(C) Corporate debt instruments	2b(1)(C)	4912448	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	681015	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		19748913
(2) Dividends: (A) Preferred stock	2b(2)(A)	612394	
(B) Common stock	2b(2)(B)	64391200	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	18114674	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		83118268
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	2313689900	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	2159106156	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		154583744
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	343496264	
(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)		1229724906
(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)		178243715
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		2008915810

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	459822	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	75000	
(5) Investment advisory and investment management fees	2i(5)	11476538	
(6) Bank or trust company trustee/custodial fees	2i(6)	246830	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)	9448	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	62908	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		12330546
j Total expenses. Add all expense amounts in column (b) and enter total	2j		12330546

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1996585264
l Transfers of assets:			
(1) To this plan	2l(1)		9795320954
(2) From this plan	2l(2)		9633785590

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) ☐ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) ☐ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name:

(2) EIN:

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☒ This form is filed for a CCT, PSA, DCG or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

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.)

	Yes	No	Amount
4a			

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.)

4b		X	
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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.)

4c		X	
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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.)

4d		X	
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e Was this plan covered by a fidelity bond?

4e			
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f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?

4f			
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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?

4g			
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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?

4h			
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i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)

4i	X		
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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.)

4j	X		
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k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?

4k			
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l Has the plan failed to provide any benefit when due under the plan?

4l			
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m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)

4m			
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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.

4n			
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5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? ☐ Yes ☐ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

L3Harris Retirement Savings Plan Master Trust
Schedule H, line 4i – Schedule of Assets (Held at End of Year)
December 31, 2024

EIN: 22-3566412
Plan No.: 101

Schedule H, Part IV, Line 4i

Description	Share/Par Value	Base Cost Value	Market Value
UNITED STATES OF AMER TREAS NOTES 4.0% 10-31-2031	2,500,000	2,485,352	2,446,875
UNITED STATES OF AMER TREAS BONDS 2.875% 05-15-2052	2,135,000	1,964,556	1,495,668
UNITED STATES TREAS BDS DTD 00305 4.75% 05-15-2054	2,300,000	2,340,879	2,238,547
UNITED STATES OF AMER TREAS BONDS 4.5% 02-15-2044	2,704,000	2,674,252	2,583,588
UNITED STATES OF AMER TREAS NOTES 4.375% 05-15-2034	2,500,000	2,499,512	2,462,109
UNITED STATES TREAS BDS 4.625% 11-15-2044	6,247,000	6,285,524	6,063,494
UNITED STATES OF AMER TREAS BONDS 3.625%02-15-2053	875,000	834,531	712,134
UNITED STATES OF AMER TREAS BONDS 3% DUE08-15-2052	1,374,000	1,196,464	987,509
US TREASURY N/B 4.25% 08-15-2054	1,400,000	1,447,688	1,280,781
UNITED STATES TREAS BDS DTD 11/15/2023 4.75% 11-15-2043	2,750,000	2,906,606	2,718,096
UNITED STATES OF AMER TREAS BONDS DTD 4.125% 08-15-2053	3,955,000	3,678,774	3,528,447
UNITED STATES TREAS BDS DTD 00300 4.75% 11-15-2053	4,100,000	4,525,027	4,062,844
US TREASURY N/B 3.875% 08-15-2034	1,392,000	1,368,999	1,316,528
WI TREASURY SEC 3.75% TNOTE 08-31-2031	7,736,000	7,784,048	7,411,148
I/O FEDERAL HOME LN MTG CORP SER K-1511 CL X1 FLTG DUE 03-25-2034 REG	503,513	41,788	24,242
FEDERAL NATL MTG ASSN GTD MTG POOL #AL5863 4.5% 06-01-2041 BEO	123,518	134,692	119,312
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL5862 4.5% 07-01-2030	48,901	51,856	48,473
GNMA REMIC SER 2018-H09 CL FC FLTG 06-20-2068	51,279	50,387	51,211
I/O FHLMC MULTICLASS TRANCHE 00251 06-25-2027	1,025,835	49,688	14,990
FEDERAL HOME LN MTG CORP POOL #QE2104 3.5% 05-01-2052 BEO	1,012,701	962,382	898,615
FNMA POOL #MA2121 4% 12-01-2034 BEO	54,080	57,803	52,398
GNMA SR 23-H13 CL FJ FLTG 02-20-2073	1,025,924	1,004,626	1,042,109
FNMA POOL #MA0816 4.5% 08-01-2031 BEO	39,041	42,173	38,681
FEDERAL HOME LN MTG CORP 2019-K101 VAR 10-25-2029	569,064	42,244	18,873
I/O FEDERAL HOME LN MTG CORP FLTG DUE 05-25-2029 REG	647,216	49,123	21,526
FEDERAL HOME LN MTG CORP POOL #840286 ADJ RATE DUE 05-01-2046	43,632	44,539	44,815
FEDERAL NATL MTG ASSN GTD MTG POOL #AL9407 4.5% 09-01-2042 BEO	37,609	41,035	36,079
FHLMC POOL #G07942 ADJ RT 07-01-2044	106,326	115,382	102,265
FEDERAL NATL MTG ASSN GTD MTG POOL #AL5958 4% 03-01-2032 BEO	31,477	33,633	30,770
FEDERAL NATL MTG ASSN GTD MTG POOL #AH6790 4.5% 03-01-2041 BEO	79,276	86,537	76,833
FNMA POOL #BM6921 2.281% 05-01-2052 BEO	1,717,721	1,602,848	1,530,544
FNMA POOL #MA1890 4% 05-01-2034 BEO	50,470	53,947	49,042
FEDERAL NATL MTG ASSN GTD MTG POOL #AL7384 4.5% 09-01-2045 BEO	84,068	91,765	81,372
I/O FHLMC MULTICLASS FEDERAL HOME LN MTG CORP SR K094 CL X1 FLTG 06-25-2029	921,986	66,113	30,372
FNMA POOL #MA1858 4% 04-01-2034 BEO	43,103	46,073	41,904
FNMA POOL #AS8700 4.5% 01-01-2047 BEO	24,611	26,211	23,613
FNMA POOL #BF0107 4.5% 06-01-2056 BEO	76,556	84,007	72,676
I/O FEDERAL HOME LN MTG CORP SER K065 CLS X1VAR RT 04-25-2027 REG	1,286,918	56,221	17,187
FEDERAL HOME LN MTG CORP V83157 4.5% BNDS 04-01-2047	31,475	33,556	30,014
GNMA 2018-H07 REMIC PASS THRU 4.71502% 05-20-2068	57,117	55,688	56,750
GNMA 2018-H03 REMIC PASSTHRU 4.97754% 02-20-2068	106,367	103,761	105,715
FNMA POOL #BM5704 5% 12-01-2048 BEO	58,512	62,689	57,575
I/O FEDERAL HOME LN MTG CORP FRN BNDS 03-25-2026	303,691	21,712	3,992
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL9840 4% 03-01-2037	87,173	92,885	83,575
FNMA POOL #CA6925 2.0% 09-01-2050	5,469,731	5,685,529	4,305,610
GNMA SR 17-H20 CL BF FLTG 10-20-2067	212,201	208,096	211,979
GOVERNMENT NATIONAL MORTGAGE ASSOC 5.08344% 11-20-2069	59,500	57,952	59,581
FNMA POOL #CA6398 2.5% 07-01-2050	1,185,518	1,245,674	981,434
GNMA REMIC TRUST SER 22-H11 CL AF FLTG RT DUE 05-20-2072 REG	4,336,610	4,351,741	4,335,920
FHLMC MULTICLASS TRANCHE 00750 07-25-2029	704,172	63,166	29,070
FEDERAL HOME LN MTG CORP POOL #G08699 4%03-01-2046 BEO	40,426	43,055	37,577
GNMA 2019-H15 REMIC PASSTHRU 5.03344% 09-20-2069	56,491	54,515	56,020
FNMA POOL #MA2079 4% 11-01-2034 BEO	53,326	56,996	51,762
I/O FEDERAL HOME LN MTG CORP K069 CL X1 FRN 09-25-2027	263,302	6,844	2,209
FNMA POOL #MA1983 4% 08-01-2034 BEO	82,079	87,474	79,726
FANNIE MAE POOL FN BV9913 3.50% 3.5% 06-01-2052	261,971	239,498	232,102
GNMA 2018-H02 REMIC PASSTHRU 4.95754% 01-20-2068	53,527	52,695	53,383
FNMA POOL #BM6221 2.662% 01-01-2050 BEO	591,036	604,657	567,205
FNMA POOL #BM1357 4.5% 01-01-2043 BEO	53,023	57,811	50,889
FEDERAL HOME LN MTG CORP FHLMC #G3-0804 4% 01-01-2035	169,917	181,710	165,287
GNMA 2017-H20 REMIC CL FG FLTG DUE 10-20-2067	103,094	100,930	102,979
GNMA 2018-H10 REMIC PASSTHRU CTF 6.1671%07-20-2068	54,248	53,349	54,383
GNMA 2017-H20 REMIC PASSTHRU CTF 5.18281% 10-20-2067	61,684	61,015	61,641
GNMA 2018-H06 REMIC PASS THRU 4.89185% 03-20-2068	54,133	53,228	54,049
FNMA POOL #MA4520 2% 01-01-2042 BEO	918,765	780,268	763,122

FNMA FNMA # BM1647 4.5% 05-01-2047	33,410	35,539	32,007
FNMA POOL #FS1453 3.5% 04-01-2052 BEO	3,255,255	3,127,079	2,901,854
FHLMC POOL #RA7654 3.5% DUE 07-01-2052 REG	4,968,362	4,800,486	4,427,885
GNMA 2018-H05 REMIC SER 2018-H05 CLS FE FLTG 02-20-2068	71,267	68,272	71,062
FNMA POOL #CA6247 2.5% 07-01-2050	862,487	906,083	714,011
I/O FHLMC MULTICLASS TRANCHE 00548 05-25-2026	100,467	6,844	1,359
FNMA POOL #AS8833 4.5% 02-01-2047 BEO	63,591	67,802	61,026
FNMA POOL #FS7754 4% 07-01-2053 BEO	736,042	669,569	673,206
FNMA POOL #CA2057 4.5% DUE 07-01-2048 REG	112	119	107
GNMA 2019-H17 REMIC PASSTHRU CTF 5.08344% 11-20-2069	183,751	183,421	182,523
FEDERAL NATIONAL MORTGAGE ASSOC 2% 01-01-2051	1,412,383	1,470,644	1,115,989
FNMA POOL #MA1764 4% 01-01-2034 BEO	60,494	64,665	58,739
FNMA POOL #MA4237 2% DUE 01-01-2051 BEO	1,387,834	1,111,243	1,082,531
FEDERAL HOME LOAN MORTGAGE CORP 4.5% 12-01-2052	428,235	412,645	403,164
I/O FHLMC MULTICLASS SER 00K092 CL X1 VAR 04-25-2029 REG	1,392,600	81,612	35,915
FHLMC POOL #SD-8221 3.5% 05-01-2052	1,596,578	1,464,985	1,414,285
GNMA SR 2018-H05 CL BF FLTG 02-20-2068	71,528	70,156	71,295
FNMA POOL #FM8768 2.5% 02-01-2051 BEO	182,333	190,538	150,378
GNMA SER 17-H03 CL F FLTG 01-20-2067	110,931	109,796	110,974
I/O FEDERAL HOME LN MTG CORP TRANCHE VAR 03-25-2027 REG	1,062,962	40,774	11,556
FNMA POOL #MA2923 3.5% 03-01-2037 BEO	151,747	158,349	144,705
FEDERAL NATL MTG ASSN GTD MTG POOL #AL5441 4.5% 09-01-2041 BEO	37,107	40,654	35,597
FNMA POOL #BM3363 4.0% DUE 09-01-2046	26,959	28,575	24,882
FEDERAL HOME LN MTG CORP POOL #G60914 4.5% 07-01-2042 BEO	39,680	43,290	38,509
GNMA 2016-H23 REMIC PASSTHRU CTF CL F FLTG RT 10-20-2066	52,046	52,245	52,080
FEDERAL NATIONAL MORTGAGE ASSOC 2% 12-01-2050	3,476,018	3,625,242	2,746,663
FEDERAL NATL MTG ASSN GTD MTG POOL #AL9098 ADJ RT DUE 03-01-2045 BEO	50,476	51,557	51,849
FNMA FNMA # AL8830 4% 10-01-2034	52,775	56,912	51,588
FEDERAL HOME LN MTG CORP FHLMC #G6-1169 4.5% 10-01-2047	48,978	52,648	47,106
I/O FHLMC MULTICLASS SER 00K091 CL X1 03-25-2029	739,851	34,693	15,533
FNMA POOL #RA3053 2.0% DUE 07-01-2050	639,838	657,434	504,938
FEDERAL NATIONAL MORTGAGE ASSOC 2% 12-01-2050	1,508,337	1,568,611	1,192,138
FNMA POOL #FM7599 3.5% 01-01-2051 BEO	4,059,367	3,993,878	3,630,346
GNMA REMIC SER-2018-H02 CL-FM FLTG 02-20-2068	68,301	65,759	67,998
FEDERAL NATIONAL MORTGAGE ASSOC 3.5% 05-01-2052	10,022,668	8,921,349	8,879,440
FNMA POOL #CB3841 3.5% 06-01-2052 BEO	2,005,545	1,918,116	1,788,515
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL9579 4.5% 07-01-2044	48,090	52,439	46,608
FNMA POOL #BM6115 FLTG RT DUE 09-01-2049	23,459	24,355	22,333
I/O FEDERAL HOME LN MTG CORP SER K062 CL X1 VAR 12-25-2026	843,647	16,824	4,230
FNMA POOL #MA1773 4% 02-01-2034 BEO	55,926	59,763	54,295
FNMA POOL #BF0118 4.5% 06-01-2056 BEO	69,583	76,355	66,057
GNMA SER 21-H19 CL FM FLTG RT DUE 12-20-2071	977,850	980,298	973,044
GNMA 2018-H19 REMIC PASS THRU 4.83304% 11-20-2068	46,434	46,053	46,308
FNMA #SD0513 2.0% 11-01-2050	1,920,999	1,993,937	1,515,991
FEDERAL HOME LOAN MORTGAGE CORP 2% 04-01-2051	1,253,461	975,545	982,062
FEDERAL HOME LN MTG CORP POOL #G60887 4.5% 07-01-2045 BEO	53,531	58,392	51,951
FNMA POOL #BM6102 0% 08-01-2049 BEO	16,371	17,037	16,516
FNMA POOL #MA2055 4% DUE 09-01-2034 REG	59,411	63,501	57,681
GNMA 2016-H27 REMIC PASSTHRU 5.18617% 12-20-2066	32,702	32,478	32,691
FHLMC GOLD Q48372 4.5% 06-01-2047	63,024	67,107	60,498
FHLMC UMBS 30Y FIXED 2.5% 01-01-2052	743,729	642,861	612,806
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL6148 4% 07-01-2034	30,197	32,307	29,231
FREDDIE MAC SEASONED CR RISK SER 17-4 CL M45T 4.5% 06-25-2057	1,687,069	1,631,580	1,608,617
FNMA POOL #MA4654 3.5% 07-01-2052 BEO	1,007,854	886,124	892,894
FANNIE MAE POOL # BW0490 4.0% 06-01-2052	945,202	865,229	864,898
FEDERAL HOME LN MTG CORP SER 00K089 CL X1 .68586% 01-25-2029	1,477,908	65,604	28,499
GNMA FLTG RT SER 23-H04 CL FC DUE 01-20-2073	1,189,241	1,178,315	1,184,362
I/O FHLMC MULTICLASS TRANCHE 01-25-2031	113,421	9,070	4,796
GNMA 2017-H22 REMIC PASSTHRU CTF 4.75304% 11-20-2067	188,152	183,093	187,364
I/O FHLMC MULTICLASS SR K070 CL X1 VAR RT 11-25-2027	551,934	13,215	4,542
FNMA POOL #MA4626 4% 06-01-2052 BEO	1,321,368	1,208,742	1,210,149
GNMA 2017-H02 REMIC PASSTHRU CTF 5.25943% 01-20-2067	42,900	42,660	42,923
FNMA FNMA # BM1176 4.5% 08-01-2044	32,541	35,469	31,539
FHLMC UMBS 30Y FIXED 2% 09-01-2050	415,439	433,111	327,000
FNMA POOL #FM9958 3.5% 11-01-2051 BEO	1,824,688	1,650,630	1,618,824
FNMA POOL #MA4625 3.5% 06-01-2052 BEO	7,618,063	7,132,412	6,746,103
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL4160 4.5% 08-01-2031	66,603	71,686	65,973
FNMA POOL #BM4804 4.0% DUE 11-01-2033	285,740	307,114	276,334
FNMA POOL #CA6388 2.0% 07-01-2050	3,698,464	3,822,420	2,911,319
GNMA SERIES 19-H17 CLASS FA 2.50% FLTG RT 11-20-2069	87,801	86,675	88,064
GNMA 2017-H12 REMIC PASSTHRU CTF 4.87502% 05-20-2067	50,040	49,546	50,096
FEDERAL HOME LN MTG CORP POOL #G60153 4.5% 10-01-2044 BEO	31,794	34,523	30,519
GNMA 2018-H06 REMIC PASS THRU 4.89185% 04-20-2068	56,543	55,213	56,173

FEDERAL HOME LN MTG CORP POOL #G60920 4.5% 04-01-2046 BEO	36,353	39,435	34,964
FEDERAL HOME LN MTG CORP 3.5% 03-01-2052	1,663,785	1,447,818	1,481,052
FHLMC SUPER 30Y FIXED 4% 10-01-2052	1,950,514	1,808,021	1,784,869
FEDERAL HOME LN MTG CORP SER 004283 CL DW 4.5% 12-15-2043	51,131	56,131	49,990
FNMA POOL #AE3049 4.5% 09-01-2040 BEO	50,025	53,752	48,483
FNMA POOL #FS3427 4% 10-01-2052 BEO	389,812	368,007	358,034
FEDERAL HOME LN MTG CORP POOL #SD8244 4%DUE 09-01-2052 BEO	5,390,404	5,050,556	4,935,864
FNMA POOL #MA1662 4% 11-01-2033 BEO	66,572	71,162	64,670
FNMA POOL #BF0199 4.5% 02-01-2041 BEO	49,513	53,937	47,563
FNMA FNMA # BM6117 4.045% 09-01-2049	37,058	38,339	37,798
GNMA 2018-H02 REMIC PASSTHRU 4.93754% 01-20-2068	138,856	136,288	138,396
FEDERAL NATL MTG ASSN GTD MTG POOL #AL6932 4% 06-01-2035 BEO	56,948	60,868	55,030
FEDERAL HOME LOAN MORTGAGE CORP 3.5% 05-01-2052	10,269,996	9,392,232	9,097,227
FNMA FNMA # AS8983 4.5% 03-01-2047	87,263	93,046	83,635
I/O FHLMC MULTICLASS TRANCHE 00201 09-01-2029	1,472,485	107,630	50,284
GNMA 2018-H06 REMIC PASS THRU 4.89185% 04-20-2068	59,911	58,513	59,501
FEDERAL NATL MTG ASSN GTD MTG POOL #AL5856 4% 09-01-2034 BEO	62,837	67,165	60,781
FEDERAL NATIONAL MORTGAGE ASSOC 2% 04-01-2051	1,416,343	1,169,147	1,110,029
FEDERAL NATL MTG ASSN GTD MTG FNMA # AL6138 4% 08-01-2032	33,190	35,499	32,411
FNMA POOL #FS1865 3.5% 05-01-2052 BEO	1,653,205	1,617,041	1,469,384
FEDERAL HOME LN MTG CORP FHLMC #G6-1185 4.5% 09-01-2047	62,787	67,184	60,335
FEDERAL HOME LN MTG CORP POOL #999999 FLTGT RT .4076% 11-25-2027 BEO	712,056	17,749	4,570
FNMA POOL #MA2019 4% 09-01-2034 BEO	44,519	47,583	43,233
FEDERAL HOME LN MTG CORP POOL #SD8194 2.5% 02-01-2052 BEO	707,914	599,183	578,623
GNMA 2017-H02 REMIC PASSTHRU CTF 5.24943% 01-20-2067	100,528	99,912	100,568
GNMA SER 2018-H17 CL DF FLTGT 10-20-2068	94,110	90,713	93,640
FNMA POOL #BM5117 4.5% 11-01-2048 BEO	22,259	23,606	21,241
FNMA POOL #BU8931 3.5% 04-01-2052 BEO	447,967	400,405	396,869
FEDERAL NATL MTG ASSN GTD MTG POOL #AL5548 7.018% DUE 05-01-2038 BEO	63,670	66,764	66,065
FNMA POOL #BM3836 FLTGT 05-01-2048	30,830	31,760	31,884
FEDERAL NATIONAL MORTGAGE ASSOC 3.5% 08-01-2052	3,329,945	2,990,187	2,962,659
FNMA POOL #BJ9262 4.5% 06-01-2048 BEO	86,016	91,100	82,067
FNMA POOL #FM4714 2.5% 10-01-2050 BEO	3,623,934	3,837,973	3,000,087
FNMA POOL #MA1814 4% 03-01-2034 BEO	70,683	75,552	68,716
GNMA 2017-H17 REMIC PASS THRU CTF CL FQ FLTGT RT 09-20-2067 REG	88,572	87,794	88,728
FNMA POOL #MA1689 4% 12-01-2033 BEO	37,673	40,270	36,588
FEDERAL NATL MTG ASSN GTD MTG POOL #AL9128 4.5% 02-01-2046 BEO	55,674	60,756	53,770
FNMA POOL #BM6112 ADJ RT DUE 08-01-2049 REG	7,611	7,895	7,761
FNMA FNMA # AS5842 4% 09-01-2045	47,359	50,469	43,962
FHLMC GOLD POOL#V83204 4.5% 05-01-2047	67,573	71,893	64,385
GNMA REMIC SER 2018-H02 CLS GF FLTGT DUE 12-20-2067	75,760	74,056	75,469
FEDERAL HOME LN MTG CORP FHLMC #G6-1290 4% 01-01-2046	53,123	56,641	49,380
FEDERAL HOME LN MTG CORP TRANCHE 00025 DUE 07-25-2029 REG	1,563,731	150,044	65,161
FNMA FNMA # AS5841 4% 09-01-2045	46,420	49,470	43,090
FEDERAL HOME LOAN MORTGAGE CORP 4% 02-01-2053	11,885,287	10,909,393	10,870,626
FEDERAL HOME LN MTG CORP POOL #G61289 4%12-01-2046 BEO	47,220	50,208	43,897
FNMA #CA7241 2.5% 10-01-2050	2,053,853	2,176,764	1,700,270
FNMA FNMA # BM6108 3.631% 08-01-2049	30,109	31,337	29,006
FEDERAL NATL MTG ASSN GTD MTG POOL #AL7147 4.5% 02-01-2045 BEO	73,964	80,737	71,003
I/O FHLMC MULTICLASS SER K067 CL X1 VAR RT 07-25-2027	1,313,980	51,291	15,858
FHLMC POOL #849327 ADJ RT 05-01-2044	42,553	43,607	43,652
FEDERAL HOME LN MTG CORP POOL #G61220 4%11-01-2047 BEO	23,374	24,892	21,767
I/O FHLMC MULTICLASS TRANCHE 00180 08-25-2029	1,356,197	126,651	59,138
GNMA 2018-H04 CL FJ FLTGT RT DUE 03-20-2068	106,472	104,459	106,100
FEDERAL HOME LOAN BANKS 2.5% 11-01-2050	2,910,745	3,090,606	2,409,656
FEDERAL HOME LN MTG CORP TRANCHE 00115 .42633% 11-25-2032	1,037,743	32,115	16,812
FNMA POOL #BM3386 4% DUE 02-01-2047 BEO	130,783	139,271	121,404
FNMA #ZT1817 4.5% 12-01-2048	1,510,320	1,601,647	1,439,913
GNMA SERIES 17-H13 CLASS FQ FLT 06-20-2067	120,992	119,815	121,313
FEDERAL HOME LN MTG CORP SR 4281 CL BC 15 VAR RT 12-15-2043	88,546	96,149	86,473
FEDERAL HOME LN MTG CORP POOL #C91853 3.5% 10-01-2035 BEO	37,096	38,922	35,224
UNITED STATES TREAS BDS 2.125% 02-15-2054	278,000	283,603	264,799
UNITED STATES OF AMER TREAS BONDS 1.5% 02-15-2053	1,097,000	983,678	933,291
U.S. Government Securities Total			159,393,280
PVTPL NAVIENT STUDENT LN TR 2017-2 STUDENT LN SER 17-2A CLS A 144A VAR 12-27-66	323,340	322,483	324,685
Corporate Debt Instruments - Preferred Total			324,685
PVTPL CEMEX S A B DE C V 5.2% DUE 09-17-2030 BEO	1,100,000	1,119,563	1,052,739
ELEVANCE HEALTH INC 4.75% 02-15-2030	350,000	348,376	345,881
FORD MOTOR CREDIT CO LLC 5.8% 03-05-2027	500,000	499,575	504,757
KINDER MORGAN 6.5% DUE 02-01-2037	145,000	184,053	151,591
FORD MOTOR CREDIT CO LLC 6.8% DUE 05-12-2028	375,000	388,264	387,527

B A T CAP CORP 2.259% DUE 03-25-2028	175,000	175,000	160,779
BSTN PPTYS LTD 3.4% DUE 06-21-2029	325,000	290,732	298,178
PVTPL FIBERCO SPA 7.721% 06-04-2038	323,000	415,414	339,544
MYRIAD INTL HLDGS 4.85% DUE 07-06-2027	755,000	838,813	740,392
PHILIP MORRIS INTL INC 5.625% DUE 11-17-2029 BEO	85,000	84,927	87,578
BANK ONE CORP FIXED 8.75% DUE 09-01-2030	235,000	349,389	275,602
IMPERIAL TOB FIN 4.25% DUE 07-21-2025	1,680,000	1,801,492	1,671,362
SOUTHERN CO 2.7% 08-01-2027	500,000	502,265	504,151
BSTN PPTYS LTD 2.75% DUE 10-01-2026	200,000	175,832	192,466
DELL INTL L L C/EMC CORP 6.02% DUE 06-15-2026	75,000	80,915	76,082
CHARTER FIXED 5.75% DUE 04-01-2048	1,115,000	1,299,451	954,025
HCA INC 4.125% 06-15-2029	350,000	333,242	333,865
PHILIP MORRIS INTL INC 5.125% 02-13-2031	100,000	98,557	100,063
DILLARD DEPT STORES INC 7.75 DEBDUE 05-15-2027 BEO	35,000	41,243	36,651
FORD MTR CR CO LLC 5.125% DUE 06-16-2025	550,000	602,250	549,662
PVTPL IMPERIAL BRANDS FIN PLC GTD SR NT 144A 6.125 DUE 07-27-2027/07-27-2022 BEO	675,000	686,381	693,179
PVTPL BNP PARIBAS SUB MED TERM NT PROGRAM 2.588% DUE 08-12-2035	900,000	736,671	753,730
BSTN PPTYS LTD 3.25% DUE 01-30-2031	525,000	481,104	461,790
JPMORGAN CHASE & CO. 2.956% 05-13-2031	425,000	426,809	380,185
BANK AMER CORP 2.496% 02-13-2031	875,000	804,147	769,277
SCHWAB CHARLES CORP NEW 5.643% 05-19-2029	500,000	502,889	510,163
LLOYDS BKG GROUP 4.582% DUE 12-10-2025	450,000	455,085	447,980
PVTPL COX COMMUNICATIONS INC NEW NT 144A 3.35% DUE 09-15-2026/09-13-2016 BEO	405,000	424,536	395,305
B A T CAP CORP 2.726% DUE 03-25-2031	450,000	450,000	388,538
BAYER US FIN II 4.375% DUE 12-15-2028	250,000	235,643	240,397
NATWEST GROUP PLC 6.016% DUE 03-02-2034	200,000	206,580	204,910
DILLARDS INC 7.75% DUE 07-15-2026	60,000	69,206	62,204
JPMORGAN CHASE & CO 5.04% 01-23-2028	375,000	375,000	376,363
PHILIP MORRIS INTL INC 5.375% 02-15-2033	225,000	224,534	225,489
HSBC HLDGS PLC 2.357% DUE 08-18-2031 REG	550,000	503,670	468,487
BAT CAPITAL CORPORATION 6.343% DUE 08-02-2030	225,000	225,000	236,683
PVTPL RIO OIL FIN TR 8.2% DUE 04-06-2028	499,840	566,748	511,412
BANK AMER CORP 3.419% 12-20-2028	400,000	376,532	383,360
HSBC HLDGS PLC 6.5% DUE 09-15-2037	615,000	853,819	632,038
CVS HEALTH CORP 3.75% DUE 04-01-2030	675,000	685,562	618,132
PVTPL IMPERIAL BRANDS FIN PLC 3.5% 07-26-2026	225,000	232,112	220,170
PVTPL BNP PARIBAS 4.625% 03-13-2027	980,000	1,109,230	964,362
DILLARDS INC 7% DUE 12-01-2028	80,000	92,131	83,146
BSTN PPTYS LTD 3.2% DUE 01-15-2025	135,000	141,973	134,891
RTX CORP 6.0% 03-15-2031	150,000	149,900	157,458
BOSTON PPTYS LTD PARTNERSHIP 4.5% DUE 12-01-2028	325,000	346,616	316,304
PHILIP MORRIS INTL FIXED 5.75% DUE 11-17-2032	100,000	99,910	102,961
PVTPL MACYS RETAIL HLDGS LLC 6.7% DUE 07-15-2034 BEO	225,000	259,789	194,364
FORD MTR CR CO LLC 4.134% DUE 08-04-2025	300,000	320,625	298,143
NATWEST GROUP PLC 1.642% 06-14-2027	975,000	966,696	930,315
T-MOBILE USA INC 3.375% 04-15-2029	350,000	353,500	326,676
JPMORGAN CHASE & CO 4.25% 10-01-2027	360,000	403,070	357,307
JPMORGAN CHASE & CO 4.493% 03-24-2031	1,125,000	1,136,745	1,096,393
CHARLES SCHWAB CORP 6.196% 11-17-2029	525,000	532,380	547,132
FORD MTR CR CO LLC 3.375% DUE 11-13-2025 BEO	375,000	375,000	369,123
HSBC HLDGS PLC 6.254% 03-09-2034	300,000	298,608	311,458
BANK AMER CORP 3.846% 03-08-2037	700,000	680,470	620,173
PVTPL COX COMMUNICATIONS INC NEW NT 3.5% 08-15-2027	540,000	547,738	522,051
VODAFONE GROUP PLC 7% DUE 04-04-2079	780,000	876,055	798,775
PROSUS N V 4.193% 01-19-2032	200,000	200,000	178,241
CHARLES SCHWAB CORP 5.853% 05-19-2034	75,000	75,000	77,271
WELLS FARGO & COMPANY 5.198% 01-23-2030	375,000	375,000	375,833
CITIGROUP INC 4.412% 03-31-2031	450,000	456,751	432,545
TRANSCANADA TR FLTGT RT 5.3% DUE 03-15-2077	815,000	853,713	782,191
CAPITAL ONE FINL CORP 7.624% 10-30-2031	300,000	320,176	331,299
PVTPL BAYER US FINANCE LLC 6.375% 11-21-2030	575,000	580,038	591,660
PVTPL UBS GROUP AG 6.537% 08-12-2033	500,000	528,093	530,430
T-MOBILE USA INC 2.25% DUE 02-15-2026	200,000	200,500	194,256
B A T CAP CORP 4.742% DUE 03-16-2032	500,000	497,913	481,072
PVTPL BNP PARIBAS 4.375% 09-28-2025	505,000	536,574	501,424
PROSUS N V NT 144A 3.061% 07-13-2031	1,525,000	1,477,645	1,280,447
PVTPL UBS GROUP AG 6.301% 09-22-2034	200,000	200,000	209,234
SOUTHERN CO 4.0% DUE 01-15-2051	1,225,000	1,220,000	1,200,430
KINDER MORGAN 6.5% DUE 09-01-2039	435,000	536,801	455,021
PVTPL BAYER US FIN II LLC 4.25% 12-15-2025	245,000	269,067	243,352
T-MOBILE USA INC 3.5% DUE 04-15-2031 REG	650,000	633,907	590,003
PVTPL ENEL FIN INTL N V 5% DUE 06-15-2032 BEO	575,000	498,468	560,381
T-MOBILE USA INC FIXED 4.375% DUE 04-15-2040	175,000	171,544	151,807

CAP 1 FINL CORP 4.2% DUE 10-29-2025	350,000	380,080	347,713
BOSTON PPTYS LTD PARTNERSHIP 6.5% 01-15-2034	275,000	274,167	288,241
CIGNA CORP NEW CORP 4.375% 10-15-2028	295,000	337,254	289,091
RIO OIL FIN TR 9.75% 01-06-2027	243,662	288,434	251,988
COX COMMUNICATIONS INC NEW 5.7% 06-15-2033	400,000	410,876	397,594
CHARTER COMMUNICATIONS OPER LLC/CHARTER 4.8% DUE 03-01-2050	825,000	626,493	621,030
BARCLAYS PLC 5.088% 06-20-2030	700,000	666,532	681,725
NATWEST GROUP PLC 5.808% DUE 09-13-2029	1,125,000	1,139,822	1,147,080
CCO HOLDINGS LLC 4.5% 06-01-2033	825,000	775,445	694,145
UNICREDIT SPA 7.296% DUE 04-02-2034	1,120,000	1,276,313	1,169,880
HSBC HLDGS PLC 5.21% DUE 08-11-2028	350,000	346,084	351,408
KINDER MORGAN 6.95% DUE 01-15-2038	200,000	230,748	216,894
WELLS FARGO & CO 2.879% 10-30-2030	250,000	222,018	225,604
BAT CAPITAL CORPORATION 6.421% DUE 08-02-2023 BEO	625,000	631,585	660,646
T-MOBILE USA INC 3.875% 04-15-2030	800,000	777,067	752,686
LLOYDS BANKING GROUP PLC 5.721% 06-05-2030	525,000	525,000	534,043
NEXTERA ENERGY CAP 4.625% DUE 07-15-2027	275,000	274,893	274,611
SCHWAB CHARLES CORP NEW 6.136% 08-24-2034	125,000	125,000	131,326
ULTRAPAR INTL S A 5.25% DUE 10-06-2026	665,000	688,967	655,583
BARCLAYS PLC 4.836% 05-09-2028	300,000	300,864	294,680
LLOYDS BKG GROUP FIXED 7.953% DUE 11-15-2033	550,000	584,749	614,084
BARCLAYS PLC FLTG RT 6.49% DUE 09-13-2029	325,000	325,000	338,138
PVTPPL UBS GROUP AG 5.959% 01-12-2034	1,000,000	999,148	1,022,709
TIME WARNER CABLE 6.75% DUE 06-15-2039	325,000	425,605	318,748
JPMORGAN CHASE & CO 2.522% 04-22-2031	1,075,000	1,040,671	946,556
AT&T INC 2.75% DUE 06-01-2031	200,000	187,598	174,000
GE HEALTHCARE TECHNOLOGIES INC 4.8% 08-14-2029	225,000	224,732	222,915
BSTN PPTYS LTD 3.65% DUE 02-01-2026	330,000	344,964	325,238
HSBC HLDGS PLC 7.399% 11-13-2034	625,000	677,249	679,406
WELLS FARGO & CO NEW MEDIUM TERM SR NTS TRANCHE # TR 00155 4.3% DUE 07-22-2027	460,000	513,549	453,522
BANK AMER CORP 2.572% DUE 10-20-2032 BEO	225,000	183,704	189,983
PHILIP MORRIS INTL INC 4.875% 02-13-2029	200,000	198,140	199,731
TRANSCANADA TR SUB TR NT SER 2015-A DUE 05-20-2075/08-20-2025 REG	1,265,000	1,302,956	1,254,849
WELLS FARGO & CO 2.393% 06-02-2028	375,000	336,236	353,185
SOUTHERN CO 4.85% 06-15-2028	425,000	433,755	425,644
PVTPPL COX COMMUNICATIONS INC NEW NT 3.85% DUE 02-01-2025 BEO	345,000	368,590	344,637
NEXTERA ENERGY CAP HLDGS INC 5.749% 09-01-2025	125,000	124,975	125,766
CHARTER 6.484% DUE 10-23-2045	780,000	964,798	737,687
NATWEST GROUP PLC 6.475% 06-01-2034	250,000	250,000	256,582
CVS HEALTH CORP 7.0% 03-10-2055	650,000	657,013	652,181
WELLS FARGO & CO 4.1% DUE 06-03-2026	300,000	327,317	296,777
BARCLAYS PLC 5.2% DUE 05-12-2026	200,000	208,342	200,222
BARCLAYS PLC 5.501% DUE 08-09-2028	200,000	200,000	202,125
CHARTER 5.375% 05-01-2047	300,000	226,758	246,502
CCO HLDGS LLC/CCO HLDGS CAP CORP 4.5% 05-01-2032	250,000	226,250	215,041
PVTPPL BNP PARIBAS SUB NT 144A 4.375% DUE 05-12-2026 BEO	295,000	319,702	291,725
JPMORGAN CHASE & CO. 2.739% 10-15-2030	425,000	377,443	382,830
PVTPPL BAYER US FIN LLC 6.5% 11-21-2033	325,000	324,152	330,588
WELLS FARGO & COMPANY 5.389% 04-24-2034	200,000	200,000	197,822
BANK AMER CORP 4.25% DUE 10-22-2026	535,000	592,441	530,825
ELANCO ANIMAL HEALTH INC CORP 4.9% 08-28-2028	510,000	576,605	516,942
TRANSCANADA TR FLTG RT 5.5% DUE 09-15-2079	1,175,000	1,166,854	1,129,142
AMERICAN ELEC PWR 5.699% 08-15-2025	225,000	223,992	225,975
NEXTERA ENERGY CAPITAL HOLDINGS INC 6.051% DUE 03-01-2025	200,000	200,500	200,355
PVTPPL BNSF RY CO 2015-1 PASS THRU TR PASSTHRU CTF 3.442% DUE 06-16-2028	170,309	183,581	161,875
HSBC HLDGS PLC 2.848% 06-04-2031	245,000	251,533	215,081
FORD MOTOR CREDIT CO LLC 2.7% 08-10-2026	625,000	613,634	600,200
WELLS FARGO & CO MEDIUM TERM SR NTS BOOKENTRY 3.35% 03-02-2033	225,000	193,973	197,290
PROVIDENT COS INC 7.25% DUE 03-15-2028	55,000	69,887	57,965
CITIGROUP INC 6.174% DUE 05-25-2034	375,000	386,895	382,334
PVTPPL CEMEX SAB DE CV 3.875% DUE 07-11-2031 BEO	325,000	325,000	283,502
CCO HLDGS LLC / CCO HLDGS CAP CORP SR NT144A 4.25% 01-15-2034	1,025,000	839,781	831,572
NORDSTROM INC 6.95% DUE 03-15-2028	60,000	73,291	61,505
CVS HEALTH CORP 4.125% DUE 04-01-2040 REG	43,000	42,275	33,728
LLOYDS BKG GROUP 4.65% DUE 03-24-2026	275,000	281,309	273,373
TELECOM ITALIA CAP 7.721% DUE 06-04-2038	157,000	201,919	162,175
WELLS FARGO & CO 2.572% 02-11-2031	475,000	409,688	418,923
GOLDMAN SACHS GROUP INC NT FXD/FLTG 3.615% 03-15-2028	1,175,000	1,164,283	1,142,821
PROSUS N V 4.987% 01-19-2052	725,000	721,602	565,529
PVTPPL UNICREDIT SPA 5.459% DUE 06-30-2035/06-30-2030 BEO	750,000	754,922	724,450
NEXTERA ENERGY CAP HLDGS INC 4.9% 03-15-2029	800,000	798,263	797,557
FORD MTR CR CO LLC 4.542% DUE 08-01-2026	750,000	730,268	741,272
RTX CORPORATION 6.1% 03-15-2034	150,000	149,718	157,989

PVTPL IMPERIAL BRANDS FIN PLC GTD SR NT 3.875% 07-26-2029	890,000	943,670	840,963
TRANSCANADA TR FLTG RT 5.875% DUE 08-15-2076	470,000	420,453	463,736
CAPITAL ONE FINANCIAL CORP 6.312% 06-08-2029	700,000	715,024	722,953
GE HEALTHCARE HLDG LLC GTD SR NT 5.905% 11-22-2032	425,000	425,000	442,241
CIGNA CORP NEW 7.87% DUE 05-15-2027	75,000	98,491	79,643
PVTPL PROSUS N V 3.68% DUE 01-21-2030	1,350,000	1,308,625	1,218,530
BARCLAYS PLC FIXED 5.829% 05-09-2027	400,000	400,000	404,296
PVTPL FIBERCO SPA 7.2% 07-18-2036	200,000	232,500	204,144
SOUTHERN CO SER 2021A JR SUB NT FXD FXD 3.75% 09-15-2051	375,000	379,688	359,107
CAPITAL ONE FINL CORP 2.636% 03-03-2026	550,000	526,044	547,679
CAP 1 FINL CORP 3.2% DUE 02-05-2025	135,000	140,679	134,973
PVTPL IMPERIAL BRANDS FIN PLC 5.5% 02-01-2030	200,000	199,378	202,166
HCA INC SR SECD NT 4.625% 03-15-2052	225,000	166,748	175,311
HSBC HLDGS PLC 6.5% DUE 05-02-2036	630,000	874,046	654,849
FORD CREDIT AUTO OWNER TRUST SER 24-B CLS A3 5.1% 04-15-2029	637,000	636,994	644,397
NAVIENT STUD LN TR FLTG RT 5.61817% DUE 03-25-2066	401,732	401,854	404,667
HONDA AUTO RECEIVABLES SR 24-4 CL A3 4.33% 05-15-2029	695,000	694,902	691,601
PVTPL SMB PRIVATE EDUCATION LOAN TRUST SR 24-A CL A1A 03-15-2056	1,066,070	1,065,700	1,062,360
PVTPL NAVIENT STUDENT LN TR 2017-4 FLTG VAR RT DUE 09-27-2066 BEO	234,870	232,876	234,934
PVTPL SLM STUD LN TR 2004-8 STUD LN BKD NT CL 144A A-6 VAR RT DUE 01-25-2040 BEO	179,179	175,753	177,577
TOYOTA AUTO RECEIVABLES OWNER TR SER 24-C CLS A3 5.45% 05-15-2029	635,000	635,000	639,362
PVTPL NAVIENT STUDENT LOAN TRUST SER 18-3A CL A3 FLTG 03-25-2067	400,795	395,591	399,375
PVTPL NAVIENT STUDENT LN TR FLTG RT SER 19-2A CL A2 02-27-2068 REG	2,026,960	2,024,468	2,024,464
SMB PRIVATE ED LN TR 2021-A PVT ED LN BKD NT 144A CL 1.07% 01-15-2053	350,656	350,632	311,051
PVTPL NAVIENT STUDENT LOAN TRUST SER 16-6A CL A3 03-25-2066	324,982	329,416	328,965
HYUNDAI AUTO RECEIVABLES TRUST SER 24-C CL A3 4.41% 05-15-2029	792,000	791,942	789,433
PVTPL NAVIENT STUDENT LOAN TRUST SER 17-3A CLS A3 FLT 07-26-2066 BEO	1,949,917	1,931,123	1,960,297
PVTPL SMB PRIVATE ED LN TR 2023-B SRS 23-B CL A1A 4.99% 10-16-2056	565,875	565,798	559,851
PVTPL NAVIENT STUDENT LN TR 2018-4A LN BACKED NT CL A-2 FLTG RT 06-27-2067	332,363	328,590	329,618
PVTPL SMB PRIVATE ED LN TR SER 18-B CL A2A 3.6% 01-15-2037	40,034	41,658	39,386
PVTPL NAVIENT STUDENT LN SER 17-5 CL A FLTG 07-26-2066	428,821	424,018	425,050
PVTPL ECMC GROUP STUDENT LOAN TRUST SR 24-1A CL A FLTG RT11-27-2073	5,451,787	5,451,787	5,456,269
PVTPL NAVIENT STUDENT LN TR 2017-1A CL A-3 FLTG RT 07-25-2066	389,084	392,300	392,551
PVPTL NAVIENT STUDENT LN TR SER 2018-1 CL A-3 FLTG RATE 03-25-2067	197,327	194,342	195,454
SLM STUDENT LN TR 2005-9 STUDENT LN-BKD NT CL A-7A 01-25-2041 REG	154,714	150,879	154,723
PVTPL NAVIENT STUDENT LN TR 2016-5 NT CLA FLTG 144A VAR RT DUE 06-25-2065 BEO	488,262	490,147	492,645
PVTPL SMB PRIVATE ED LN TR SER 2018-A CL A-2A 144A 3.5% 02-15-2036	30,250	31,825	29,752
I/O CMO FEDERAL HOME LN MTG CORP VAR I/O RT 06-25-2029	640,476	47,915	22,360
PVTPL NAVIENT STUDENT LN TR 2016-1 CL A 144A FLTG RATE VAR RT DUE 02-25-2070 BEO	277,539	274,010	275,930
NAVIENT STUDENT LN TR 2021-1 5.06817% 12-26-2069	281,899	281,899	279,834
Corporate Debt Instruments - Other Total			92,210,654
NEXTERA ENERGY INC CORPORATE UNIT 09-01-2025	17,252	841,035	705,952
BOEING CO	33,159	1,657,950	2,019,052
VOLKSWAGEN AG NON VTG PRF NPV	18,816	3,175,159	1,734,853
HENKEL AG & CO KGAA NON-VTG PRF NPV	8,800	704,607	771,820
CITIGROUP CAP XIII 7.875% TR PFD SECS FIXED/FLTG	57,200	1,593,485	1,714,284
DR. ING. H.C. F. NON-VTG PRF NPV	15,805	1,287,390	956,106
Corporate Stocks - Preferred Total			7,902,067
SANOFI EUR2	27,908	2,741,373	2,708,967
BRIGHTSPRING HEALTH SVCS INC COM	54,312	704,078	924,933
MASTEC INC COM	8,685	575,598	1,182,376
HERITAGE FINL CORP WASH COM	63,921	1,141,252	1,566,065
NOMAD FOODS LIMITED COMMON STOCK	107,472	1,869,676	1,803,380
FIRST BANCORP N C COM	34,790	1,426,987	1,529,716
#REORG/PREMIER MERGER PREMIER 2912916 03-03-2025	32,738	515,236	837,111
ABM INDS INC COM	31,896	1,402,079	1,632,437
#REORG/PACTIV MERGER 04-01-2025	51,831	596,884	905,488
NICOLET BANKSHARES INC COM	14,828	1,137,588	1,555,605
NORTHERN OIL & GAS INC COM NEW	45,216	1,630,822	1,680,227
WINNEBAGO INDS INC COM	29,817	1,936,629	1,424,656
BANK MARIN BANCORP COM STK	27,195	506,385	646,425
NCR ATLEOS CORPORATION COM USD0.01 WI	55,450	1,279,139	1,880,864
TECNOGLASS INC COMMON STOCK	9,611	491,087	762,345
FABRINET COM USD0.01	7,375	1,285,992	1,621,615
ONESTREAM INC CL A CL A	46,510	1,291,868	1,326,465
CONSTRUCTION PARTNERS INC CL A CL A	22,296	1,238,410	1,972,304
AKERO THERAPEUTICS INC COM	18,059	665,203	502,401
FTI CONSULTING INC COM	5,913	1,156,625	1,130,152
CHAMPION HOMES INC	18,115	1,190,828	1,595,932
#REORG/INTRA-CELLULAR MERGER 04-02-2025	7,942	487,145	663,316
ALKAMI TECHNOLOGY INC COM	49,935	1,863,633	1,831,616

MACOM TECHNOLOGY SOLUTIONS HOLDINGS INC COM STK	13,159	930,665	1,709,486
MONDAY COM LTD COM NPV	5,010	921,586	1,179,554
BLUEPRINT MEDICINES CORP COM	11,830	746,452	1,031,813
SPS COMM INC COM	10,620	1,768,742	1,953,974
VIRIDIAN THERAPEUTICS INC COM	34,320	734,345	657,914
AEROVIRONMENT INC COM	7,803	1,384,700	1,200,804
ARMSTRONG WORLD INDS INC NEW COM STK	11,588	1,483,794	1,637,732
PIPER SANDLER COMPANIES COM USD0.01	6,398	1,685,805	1,919,080
DUTCH BROS INC CL A CL A	33,474	1,378,439	1,753,368
INSMED INC COM PAR \$.01	22,663	605,248	1,564,654
ADR ASCENDIS PHARMA A/S SPONSORED ADR	4,614	474,161	635,209
ELEMENT SOLUTION INC COM	35,758	745,704	909,326
ADT INC DEL COM	206,787	1,445,171	1,428,898
TOPGOLF CALLAWAY BRANDS CORP	98,100	1,063,272	771,066
CALIX NETWORKS INC COMMON STOCK	27,996	1,116,663	976,221
MILLERKNOLL INC COM STK USD0.20	66,776	1,939,534	1,508,470
KB HOME COM	11,581	560,323	761,103
PENGUIN SOLUTIONS INC	89,016	1,828,392	1,708,217
GREAT LAKES DREDGE & DOCK CORP NEW COM	131,251	993,390	1,481,824
PORTLAND GENERAL ELECTRIC CO COM NEW COMNEW	12,873	606,147	561,520
PEOPLES BANCORP INC COM STK	21,748	583,399	689,194
AMKOR TECHNOLOGY INC COM	42,395	1,173,887	1,089,128
GROUP 1 AUTOMOTIVE INC COM	4,714	1,734,185	1,986,857
BANKUNITED INC	42,650	1,123,391	1,627,951
DONNELLEY FINL SOLUTIONS INC COM	25,301	1,351,373	1,587,132
CHOICE HOTELS INTL INC COM	15,940	1,812,058	2,263,161
EPLUS INC COM	22,875	1,232,226	1,690,005
MCGRATH RENTCORP COM	16,653	1,485,115	1,862,138
WINMARK CORP COM	3,044	1,060,339	1,196,505
EXPONENT INC COM STK	9,980	918,659	889,218
ARTISAN PARTNERS ASSET MGMT INC CL A CL A	35,112	1,129,202	1,511,572
SILGAN HLDGS INC COM	45,453	2,005,112	2,365,829
UFP TECHNOLOGIES INC COM	2,557	430,544	625,212
OMNICELL INC COM	6,524	479,282	290,448
CENTRAL GARDEN & PET CO COM	21,252	638,986	824,578
AAON INC COM PAR \$.004 COM PAR \$.004	5,234	305,910	615,937
SIMULATIONS PLUS INC COM	20,454	792,443	570,462
#REORG/BEACON ROOFING SUPPLY INC COM MERGER 04-29-2025	50,123	3,409,971	5,091,494
FTI CONSULTING INC COM	3,945	750,089	754,008
LANDSTAR SYS INC COM	9,722	1,745,488	1,670,823
INTEGRA LIFESCIENCES HLDG CORP COM DESP	37,430	1,438,061	848,912
SPS COMM INC COM	6,788	1,365,781	1,248,924
FULLER H B CO COM	17,540	1,110,633	1,183,599
COLUMBIA SPORTSWEAR CO COM	24,894	1,831,452	2,089,353
MERIT MED SYS INC COM	22,551	1,870,521	2,181,133
SIMPSON MFG INC COM	4,425	532,106	733,798
DORMAN PRODS INC COM	26,931	2,228,002	3,488,911
SOUTHSTATE CORP COM	8,723	551,730	867,764
LANCASTER COLONY CORP COM	5,035	971,111	871,760
CBIZ INC COM	62,667	3,411,811	5,128,041
#REORG/ PATTERSON COS INC CASH MERGER 04-17-2025	22,725	596,986	701,294
KADANT INC COM	1,962	611,835	676,870
BLACKBAUD INC COM	43,559	3,172,040	3,219,881
PLEXUS CORP COM	6,411	590,719	1,003,193
ENVISTA HLDGS CORP COM	21,490	499,476	414,542
INTERPARFUMS INC	41,583	5,338,958	5,468,580
SELECTIVE INS GROUP INC COM	40,154	3,892,712	3,755,202
PRESTIGE CONSUMER HEALTHCARE INC COM	21,054	1,539,271	1,644,107
MOOG INC CL A	18,356	1,920,880	3,613,195
J & J SNACK FOODS CORP COM STK NPV	11,434	1,761,351	1,773,756
PINNACLE FINL PARTNERS INC COM	5,763	290,513	659,230
ACI WORLDWIDE INC COM STK	44,690	1,016,251	2,319,858
PJT PARTNERS INC COM CL A COM CL A	10,767	1,118,990	1,699,140
OCCIDENTAL PETROLEUM CORP	218,800	7,478,762	10,810,908
BOOKING HLDGS INC COM	1,830	3,883,898	9,092,209
METLIFE INC COM STK USD0.01	181,300	8,531,669	14,844,844
ECHOSTAR CORPORATION	42,105	4,166,378	964,205
DOMINION ENERGY INC COM STK NPV	73,800	3,908,739	3,974,868
ADR ROCHE HLDG LTD SPONSORED ADR ISIN #US771195104	104,900	4,317,621	3,658,912
STATE STR CORP COM	29,500	1,919,475	2,895,425
FISERV INC COM	100,000	10,557,426	20,542,000
ADR GSK PLC	232,040	9,312,379	7,847,593
BIOMARIN PHARMACEUTICAL INC COM ISIN CH0008107010	42,300	3,251,641	2,780,379

LPL FINL HLDGS INC COM	1,100	262,951	359,161
GILEAD SCIENCES INC	111,700	7,413,051	10,317,729
INCYTE CORP COM	44,300	3,657,994	3,059,801
HALEON PLC ADR	594,676	4,455,831	5,673,209
BAKER HUGHES CO	151,500	4,102,095	6,214,530
JOHNSON CTLS INTL PLC COM USD0.01	208,100	9,934,911	16,425,333
THE CIGNA GROUP	26,800	5,644,391	7,400,552
GE AEROSPACE	47,900	2,394,381	7,989,241
ALPHABET INC CAPITAL STOCK USD0.001 CL A	44,400	4,233,321	8,404,920
BANK NEW YORK MELLON CORP COM STK	145,700	6,579,790	11,194,131
WESTAMERICA BANCORPORATION COM	15,336	595,037	804,527
BLACKLINE INC COM	19,131	1,226,189	1,162,400
KIRBY CORP COM	16,129	1,185,564	1,706,448
MESA LABS INC COM	8,635	1,107,266	1,138,697
ALAMO GROUP INC COM	7,821	1,309,001	1,454,002
QUALYS INC COM USD0.001	20,219	2,839,420	2,835,108
INTEGER HLDGS CORP COM	7,077	919,794	937,844
SALLY BEAUTY HLDGS INC COM STK USD0.01	45,942	519,604	480,094
VERRA MOBILITY CORP	54,553	1,467,295	1,319,092
ICU MED INC COM	13,010	2,330,351	2,018,762
BALCHEM CORP COM	7,989	1,001,581	1,302,167
COMMVAULT SYS INC COM STK	16,433	1,144,887	2,479,904
POWER INTEGRATIONS INC COM	20,432	1,815,179	1,260,654
ALARM COM HLDGS INC COM	24,771	1,537,942	1,506,077
UNIFIRST CORP MASS COM	6,402	1,080,914	1,095,318
JPMORGAN CHASE & CO COM	33,744	3,642,473	8,088,774
STATE STR CORP COM	5,400	497,683	530,010
DOMINION ENERGY INC COM STK NPV	81,405	5,261,108	4,384,473
JOHNSON & JOHNSON COM USD1	26,410	3,550,138	3,819,414
METLIFE INC COM STK USD0.01	126,855	6,447,079	10,386,887
ATMOS ENERGY CORP COM	7,165	968,997	997,870
CHEVRON CORP COM	12,374	1,694,802	1,792,250
WALT DISNEY CO	52,014	5,849,732	5,791,759
CONAGRA BRANDS INC COM USD5	113,598	3,610,508	3,152,345
SIEMENS AG NPV(REGD)	27,415	4,041,374	5,352,885
TOTALENERGIES SE	127,638	5,928,774	7,053,868
CTS EVENTIM AG & C NPV	3,400	294,575	287,465
FINNING INTL INC COM NPV	21,100	571,789	558,823
WHITEHAVEN COAL NPV	131,400	581,321	504,409
SANTOS LIMITED NPV	307,300	1,504,872	1,270,969
SONIC HEALTHCARE NPV	54,900	1,116,025	918,106
MACQUARIE GP LTD NPV	9,000	1,052,501	1,235,111
BHP GROUP LIMITED	8,700	248,816	213,040
BICARA THERAPEUTICS INC COM	13,611	296,164	237,104
EUROFINS SCIENTIFI EUR0.01	21,000	1,243,588	1,072,271
PRYSMIAN SPA EUR0.10	5,300	206,074	338,399
PLUXEE NV EUR0.01	23,600	575,263	457,378
BASF - ORD SHS COMSTK	13,300	663,755	584,766
CIE DE ST-GOBAIN EUR4	13,200	835,372	1,171,399
ZALANDO SE NPV	33,100	870,694	1,110,169
SOCIETE GENERALE EUR1.25	52,100	1,324,571	1,465,270
AIB GROUP PLC ORD EUR0.625	245,400	1,019,906	1,354,415
ACCOR SA EUR3	36,700	1,364,368	1,787,654
TENARIS S.A. COMMON STOCK	38,400	632,894	718,521
K + S AG -REG.SHS- SHS	22,200	346,612	240,456
CAPGEMINI EUR8	9,200	1,593,882	1,506,632
TOTALENERGIES SE	22,500	1,392,270	1,243,454
ING GROEP N.V. EUR0.01	65,600	860,750	1,027,763
TELEPERFORMANCE SOCIETE EUROPEENNE	7,200	972,937	619,710
ASML HOLDING NV EUR0.09	2,300	1,560,774	1,616,426
KBC GROEP NV NPV	13,500	877,427	1,042,013
MERCK KGAA NPV	5,800	860,417	840,225
DEUTSCHE POST AG NPV(REGD)	30,600	1,380,728	1,076,701
VEOLIA ENVIRONNEME EUR5	69,300	2,021,698	1,945,418
NOVO NORDISK A/S SER'B'DKK0.1	4,000	378,984	346,701
NOVARTIS AG CHF0.49 (REGD)	14,300	1,386,274	1,399,625
JULIUS BAER GRUPPE CHF0.02 (REGD)	15,500	918,436	1,003,288
ROCHE HLDGS AG GENUSSSCHEINE NPV	8,900	2,745,820	2,509,186
COMP.FIN.RICHEMONT CHF1 (REGD)	8,900	1,330,906	1,354,273
CCL INDUSTRIES INC CLASS'B'NON VTG COM NPV	21,500	1,020,236	1,105,496
CDN NATL RAILWAYS COM NPV	10,200	1,171,594	1,035,248
SUNCOR ENERGY INC COM NPV 'NEW'	24,100	714,787	859,805
FAIRFAX FINL HLDGS SUB-VTG COM NPV	1,200	879,963	1,668,753

NESTLE SA CHF0.10(REGD)	26,900	3,072,003	2,222,645
ELEMENT SOLUTION INC COM	55,347	1,113,754	1,407,474
RLI CORP COM	8,181	1,064,082	1,348,474
ITT INC COM	11,588	1,215,409	1,655,693
HOULIHAN LOKEY INC CL A CL A	8,343	774,681	1,448,845
CSW INDUSTRIALS INC COM	5,650	1,539,989	1,993,320
UPSTREAM BIO INC COM	19,342	348,784	317,982
STIFEL FINL CORP COM	15,944	957,060	1,691,340
DENALI THERAPEUTICS INC COM	33,831	742,640	689,476
TEMPUS AI INC COM USD0.0001 CL A	15,653	605,655	528,445
CYTOKINETICS INC COMMON STOCK	14,045	1,149,314	660,677
AZEK CO INC CL A CL A	30,157	1,068,101	1,431,553
TEXAS ROADHOUSE INC COMMON STOCK	6,857	794,086	1,237,209
KIRBY CORP COM	12,891	1,548,986	1,363,868
SERVICETITAN INC CL A CL A	2,626	201,141	270,137
#REORG/ ALTAIR ENGR INC CASH MERGER 03-26-2025	11,623	908,942	1,268,186
GLAUKOS CORP COM	8,314	1,234,884	1,246,601
KINDERCARE LEARNING COS INC COM	47,791	1,136,594	850,680
NOVANTA INC NOVANTA INC	9,983	1,693,701	1,525,103
PRIMORIS SVCS CORP COM	23,724	1,681,829	1,812,514
ADR CRITEO S A SPONSORED ADS	33,265	1,120,581	1,315,963
ARCBEST CORP COM USD0.01	14,059	1,455,035	1,311,986
BUILD-A-BEAR WORKSHOP INC COM STK	37,180	1,098,724	1,711,767
AVIENT CORPORATION	29,970	1,284,734	1,224,574
CACTUS INC CL A CL A	25,443	988,077	1,484,853
SILGAN HLDGS INC COM	21,946	918,945	1,142,289
TTM TECHNOLOGIES INC COM	60,929	865,208	1,507,993
BLUE BIRD CORP COM	35,597	957,381	1,375,112
ADIENT PLC ADIENT PLC LTD COM	62,050	1,994,479	1,069,122
GATES INDL CORP PL COM USD0.01	63,690	888,912	1,310,103
AMN HEALTHCARE SVCS INC COM	15,017	1,373,991	359,207
PEDIATRIX MEDICAL GROUP INC	131,765	1,500,018	1,728,757
ICHOR HOLDINGS LTD COM USD0.0001	27,568	909,089	888,241
TEXAS CAP BANCSHARES INC DEL COM	21,736	1,117,919	1,699,755
METHANEX CORP COM STK	31,547	1,385,453	1,575,457
ECOVYST INC COM USD0.01	197,813	1,794,642	1,511,291
BERKSHIRE HILLS BANCORP INC COM	45,461	966,082	1,292,456
FIRST BANCORP P R COM NEW COM NEW	79,635	1,052,489	1,480,415
HARBORONE NORTHEAST BANCORP INC COM	25,818	224,530	305,427
INTEGRA LIFESCIENCES HLDG CORP COM DESP	31,108	1,254,113	705,529
HAYWARD HLDGS INC COM	87,645	1,123,132	1,340,092
FIRST HAWAIIAN INC COM	50,330	1,374,718	1,306,064
JBT MAREL CORPORATION	14,656	1,417,926	1,862,778
HANESBRANDS INC COM STK	222,200	1,535,212	1,808,708
TAYLOR MORRISON HOME CORP COM USD0.00001	17,445	798,589	1,067,808
1ST SOURCE CORP COM	21,704	983,783	1,267,080
EXTREME NETWORKS INC COM	89,489	1,202,785	1,498,046
REV GROUP INC COM	48,954	825,447	1,560,164
TRICO BANCSHARES COM STK	31,308	1,127,283	1,368,160
ACI WORLDWIDE INC COM STK	12,283	303,734	637,611
GRID DYNAMICS HOLDINGS INC COM USD0.0001CL A	70,188	848,087	1,560,981
IDACORP INC COM	14,477	1,458,853	1,582,047
CSW INDUSTRIALS INC COM	5,020	812,635	1,771,056
INSIGHT ENTERPRISES INC COM	21,183	2,964,822	3,221,934
HURON CONSULTING GROUP INC COM STK	20,602	1,732,437	2,560,005
ENOVIS CORPORATION COM USD0.001	28,154	1,567,047	1,235,398
FRONTDOOR INC COM	25,708	809,545	1,405,456
STEPAN CO COM	12,771	1,182,722	826,284
NATIONAL RESH CORP COM NEW CL A	42,302	1,800,126	746,207
BRIGHTVIEW HLDGS INC COM	95,800	1,120,217	1,531,842
NEXSTAR MEDIA GROUP INC COMMON STOCK	8,980	1,412,163	1,418,571
CARTER BANKSHARES INC COM	9,837	135,492	173,033
RLI CORP COM	13,162	1,659,095	2,169,492
AFFILIATED MANAGERS GROUP INC COM STK	8,563	1,477,496	1,583,470
HAMILTON LANE INC CL A CL A	15,558	1,087,504	2,303,362
DIANTHUS THERAPEUTICS INC COM	17,019	488,892	371,014
FRESHPET INC COM	10,624	728,832	1,573,521
IMPINJ INC COM	7,633	1,202,683	1,108,770
EVERUS CONSTR GROUP INC COM	14,395	992,916	946,471
CURTISS WRIGHT CORP COM	4,310	793,772	1,529,490
CHEFS' WAREHOUSE HOLDINGS IN	37,163	1,121,473	1,832,879
VAXCYTE INC COM	18,246	1,162,450	1,493,618
MOONLAKE IMMUNOTHERAPEUTICS COM	10,642	392,326	576,264

CREDO TECHNOLOGY GROUP HOLDING LTD	25,488	1,071,081	1,713,048
QUANTERIX CORP COM	43,369	975,597	461,012
LOAR HOLDINGS INC COM	10,801	521,850	798,302
ACV AUCTIONS INC CL A CL A	102,760	1,773,857	2,219,616
LUMENTUM HLDGS INC COM	1,457	134,256	122,315
RAPPORT THERAPEUTICS INC COM	18,880	329,342	334,931
TWFG INC CL A COM CL A COM	19,002	379,241	585,262
ADR LEGEND BIOTECH CORP SPON ADS EACH REP 2 ORD SHS	15,432	865,747	502,157
TETRA TECH INC NEW COM	29,277	891,860	1,166,396
RH COM	3,373	1,393,670	1,327,579
SHIFT4 PMTS INC CL A CL A	14,292	943,228	1,483,224
HALOZYME THERAPEUTICS INC COM	22,146	901,690	1,058,800
ADR RYANAIR HLDGS PLC SPONSORED ADR NEW	12,650	581,694	551,414
LINDE PLC	2,900	1,078,463	1,214,143
CNH INDUSTRIAL NV COM STK	88,700	1,175,471	1,004,971
ASSOCTD BANC-CORP COM	69,956	1,260,860	1,671,948
O-I GLASS INC COM	112,019	1,627,207	1,214,286
MATADOR RES CO COM	31,109	1,787,094	1,750,192
AUTONATION INC COM	8,942	1,429,915	1,518,709
COMERICA INC COM	16,007	761,283	990,033
WSFS FINANCIAL CORP COM	31,272	1,181,103	1,661,481
BORG WARNER INC COM	43,756	1,408,815	1,391,003
MAGNOLIA OIL & GAS CORP CL A CL A	64,469	1,271,209	1,507,285
PAC PREMIER BANCORP COM	58,784	1,291,206	1,464,897
SYNAPTICS INC COM	5,011	499,831	382,440
NEXGEN ENERGY LTD COMSTK	155,324	1,089,621	1,025,138
GENESCO INC COM	41,364	1,053,757	1,768,311
HARMONIC INC COM	99,674	1,122,694	1,318,687
WALKER & DUNLOP INC COM .	14,380	1,467,051	1,397,880
BELDEN INC COM	5,969	509,633	672,169
TXNM ENERGY INC COM NPV	25,604	1,244,353	1,258,949
FEDERATED HERMES INC COM NPV CLASS B	37,889	1,338,009	1,557,617
DINE BRANDS GLOBAL INC	18,417	1,039,543	554,352
FLUOR CORP NEW COM	23,844	758,261	1,175,986
HANOVER INS GROUP INC COM	8,772	1,151,502	1,356,678
FORMFACTOR INC COM STK	36,568	1,512,420	1,608,992
HILLMAN SOLUTIONS CORP COM USD0.0001 CL A	116,939	1,009,664	1,138,986
FRANKLIN COVEY CO COM	30,358	1,177,742	1,140,854
ADVANSIX INC COM	47,352	1,413,890	1,349,058
SCHWAB CHARLES CORP COM NEW	276,600	13,667,722	20,471,166
ADR NOVARTIS AG	42,600	3,726,680	4,145,406
BRIGHTHOUSE FINL INC COM	24,900	974,347	1,196,196
CVS HEALTH CORP COM	206,100	13,668,028	9,251,829
INTL FLAVORS & FRAGRANCES INC COM	71,200	5,427,324	6,019,960
CISCO SYSTEMS INC	80,900	3,622,837	4,789,280
CHARTER COMMUNICATIONS INC NEW CL A CL A	34,000	14,793,971	11,654,180
CONOCOPHILLIPS COM	36,800	1,712,957	3,649,456
CARRIER GLOBAL CORPORATION COM USD0.01 WI	48,400	1,166,931	3,303,784
COMCAST CORP NEW-CL A	227,900	10,380,868	8,553,087
FEDEX CORP COM	42,100	7,813,869	11,843,993
MOLSON COORS BEVERAGE COMPANY COM USD0.01 CLASS B	51,100	2,572,950	2,929,052
SANOFI SPONSORED ADR	261,650	12,796,598	12,619,380
NEUROCRINE BIOSCIENCES INC COM	8,651	1,102,736	1,180,862
T-MOBILE US INC COM	32,700	3,720,834	7,217,871
BAXTER INTL INC COM	156,800	5,622,313	4,572,288
MEDTRONIC PLC COMMON STOCK STOCK	23,000	2,010,942	1,837,240
AIR PROD & CHEM INC COM	21,000	5,394,424	6,090,840
META PLATFORMS INC COM USD0.000006 CL 'A'	11,800	3,032,279	6,909,018
HUMANA INC COM	30,300	9,274,616	7,687,413
UBS GROUP AG COMMON STOCK	75,900	1,325,706	2,301,288
AMAZON COM INC COM	52,300	5,968,133	11,474,097
ADVANCED MICRO DEVICES INC COM	12,138	1,721,073	1,466,149
CHUBB LTD ORD CHF24.15	32,755	4,640,935	9,050,207
3M CO COM	13,142	1,562,287	1,696,501
CUMMINS INC	9,619	2,196,532	3,353,183
BRISTOL MYERS SQUIBB CO COM	50,450	2,337,548	2,853,452
NEWS CORP COM CL B	11,975	218,046	364,399
UNITEDHEALTH GROUP INC COM	12,688	6,353,602	6,418,352
SCHLUMBERGER LTD COM COM	65,722	2,778,754	2,519,781
TJX COS INC COM NEW	14,924	974,888	1,802,968
DOLLAR GEN CORP NEW COM	19,993	2,458,143	1,515,869
QUALCOMM INC COM	59,586	5,388,296	9,153,601
LAS VEGAS SANDS CORP COM STK	109,070	5,361,234	5,601,835

SOUTHERN CO COM STK	116,249	6,495,713	9,569,618
GE AEROSPACE	52,618	2,693,475	8,776,156
THERMO FISHER SCIENTIFIC INC COM USD1	5,145	3,021,837	2,676,583
EQT CORP COM	84,836	3,118,938	3,911,788
AT&T INC COM	25,426	569,886	578,950
MERCK & CO INC NEW COM	9,551	917,757	950,133
TEXAS INSTRUMENTS INC COM	24,329	2,668,767	4,561,931
THE CIGNA GROUP	15,092	3,572,592	4,167,505
SEMPRA COM	49,770	3,240,593	4,365,824
BAKER HUGHES CO	16,220	528,219	665,344
FISERV INC COM	30,329	3,135,106	6,230,183
NEWS CORP COM CL A	284,983	4,550,900	7,848,432
ELEVANCE HEALTH INC	23,383	6,707,847	8,625,989
GE HEALTHCARE TECHNOLOGIES INC COM	9,637	490,302	753,421
AMERICAN INTERNATIONAL GROUP INC COM	120,819	5,341,946	8,795,623
CARDINAL HLTH INC	6,306	345,330	745,811
KEURIG DR PEPPER INC COM	17,900	588,855	574,948
VIATRIS INC	315,994	3,231,668	3,934,125
ADR ANHEUSER BUSCH INBEV SA/NV SPONSOREDADR	136,400	7,686,960	6,829,548
ELANCO ANIMAL HEALTH INC COM	258,900	5,833,125	3,135,279
AVANTOR INC COM	304,800	6,216,308	6,422,136
UNITEDHEALTH GROUP INC COM	12,600	4,248,237	6,373,836
CELANESE CORP DEL COM STK	41,800	4,150,978	2,892,978
BRISTOL MYERS SQUIBB CO COM	54,800	3,345,918	3,099,488
FOX CORP CL B CL B	42,500	1,374,904	1,943,950
HP INC COM	116,100	2,434,279	3,788,343
COGNIZANT TECH SOLUTIONS CORP CL A	65,800	4,294,716	5,060,020
FOX CORP CL A CL A	72,478	2,443,213	3,520,981
WILLIAMS CO INC COM	121,576	2,419,813	6,579,693
MICROSOFT CORP COM	27,200	5,091,928	11,464,800
REGENERON PHARMACEUTICALS INC COM	6,400	3,898,284	4,558,912
ZIMMER BIOMET HLDGS INC COM	57,000	6,591,416	6,020,910
COHERENT CORP COM	30,176	1,754,403	2,858,572
AEGON LTD AMER REGD CERT	426,100	1,955,405	2,509,729
FORTIVE CORP COM MON STOCK	27,600	2,079,451	2,070,000
RTX CORPORATION COMSTK	152,100	11,483,510	17,601,012
ALNYLAM PHARMACEUTICALS INC COM	10,400	1,265,600	2,447,224
AMER ELEC PWR CO INC COM	33,800	2,843,180	3,117,374
FIDELITY NATL INFORMATION SVCS INC COM STK	104,200	7,651,827	8,416,234
CAPITAL ONE FINL CORP COM	56,700	5,259,801	10,110,744
GE HEALTHCARE TECHNOLOGIES INC COM	49,500	2,957,889	3,869,910
NEWS CORP COM CL A	32,000	462,234	881,280
ALPHABET INC CAP STK USD0.001 CL C	43,900	3,016,306	8,360,316
BANK OF AMERICA CORP	102,500	3,248,299	4,504,875
GAP INC COM	101,100	1,764,029	2,388,993
V F CORP COM	132,600	2,233,739	2,845,596
GOLDMAN SACHS GROUP INC COM	12,700	2,876,573	7,272,274
ADR HONDA MTR LTD ADR REPRESENTING 1 ORDSHS	74,516	2,230,024	2,127,432
WELLS FARGO & CO NEW COM STK	235,000	9,290,639	16,506,400
NORFOLK SOUTHN CORP COM	38,400	8,240,160	9,012,480
LYONDELLBASELL IND N V COM USD0.01 CL 'A'	51,300	3,906,621	3,810,051
TE CONNECTIVITY PLC COM USD0.01	36,800	3,570,847	5,261,296
SERVICENOW INC COM USD0.001	16,014	5,448,762	16,976,762
BOOKING HLDGS INC COM	2,946	5,482,562	14,636,965
ATLASSIAN CORP CL A	31,632	7,464,001	7,698,596
NATERA INC COM	20,000	2,570,848	3,166,000
ELI LILLY & CO COM	24,157	8,712,488	18,649,204
FISERV INC COM	131,654	13,472,796	27,044,365
TRADEWEB MKTS INC CL A CL A	28,803	2,043,042	3,770,889
MASTERCARD INCORPORATED COM USD0.0001 CLASS A	60,457	22,302,698	31,834,842
PENUMBRA INC COM	63	16,775	14,961
STRYKER CORP	34,897	6,648,170	12,564,665
HUBSPOT INC COM	11,008	5,770,079	7,670,044
&&&MAGIC LEAP INC CLASS A COM STK TROWE PRICE ONLY	756	367,928	-
BOEING CO COM	34,639	5,772,947	6,131,103
LULULEMON ATHLETICA INC COM	11,723	3,742,847	4,482,992
CHIPOTLE MEXICAN GRILL INC COM STK	108,997	2,428,963	6,572,519
INTUITIVE SURGICAL INC COM NEW STK	37,608	6,512,964	19,629,872
ADR SONOVA HLDG AG UNSP ADR	84,367	5,982,732	5,487,230
NETFLIX INC COM STK	17,372	5,348,472	15,484,011
BECTON DICKINSON & CO COM	25,509	5,972,458	5,787,227
MICROSOFT CORP COM	253,975	47,374,954	107,050,463
ENTEGRIS INC COM	61,600	6,467,576	6,102,096

FAIR ISAAC CORPORATION COM	3,158	2,793,351	6,287,357
AURORA INNOVATION INC CL A COM	247,918	734,554	1,561,883
SCHWAB CHARLES CORP COM NEW	73,233	4,792,656	5,419,974
THE CIGNA GROUP	42,639	8,873,521	11,774,333
AFFIRM HLDGS INC CL A CL A	16,797	511,223	1,022,937
AMPHENOL CORP NEW CL A	218,592	8,884,256	15,181,214
ALPHABET INC CAPITAL STOCK USD0.001 CL A	356,196	33,255,945	67,427,903
EQUIFAX INC COM	29,002	7,472,853	7,391,160
INTUIT COM	45,795	15,803,491	28,782,158
INGERSOLL RAND INC COM	77,470	2,444,446	7,007,936
SCHLUMBERGER LTD COM COM	110,643	6,166,276	4,242,053
ROSS STORES INC COM	53,181	4,818,088	8,044,690
UNITEDHEALTH GROUP INC COM	43,957	15,981,339	22,236,088
COUPANG INC	327,066	7,276,264	7,188,911
DYNATRACE INC COM	72,409	3,108,205	3,935,429
ADVANCED MICRO DEVICES INC COM	32,042	4,217,176	3,870,353
ADR LEGEND BIOTECH CORP SPON ADS EACH REP 2 ORD SHS	55,505	3,313,401	1,806,133
DANAHER CORP COM	26,302	6,299,760	6,037,624
AMAZON COM INC COM	370,925	37,502,253	81,377,236
ADR ASML HLDG NV NY REG 2012 (POST REV SPLIT)	7,793	2,568,974	5,401,172
ADR ARGENX SE SPONSORED ADS	11,325	4,588,288	6,964,875
NVIDIA CORP COM	647,327	21,956,412	86,929,543
ADOBE INC COM	14,786	7,213,905	6,575,038
APPLE INC COM STK	350,667	41,387,895	87,814,030
VISA INC COM CL A STK	67,016	10,129,878	21,179,737
META PLATFORMS INC COM USD0.000006 CL 'A'	82,089	18,553,433	48,063,930
HOWMET AEROSPACE INC COM USD1.00 WI	66,808	3,655,091	7,306,791
WALMART INC COM	72,675	2,906,523	6,566,186
HUMANA INC COM	2,836	1,099,951	719,522
VERIZON COMMUNICATIONS COM	35,205	1,324,816	1,407,848
EQUITABLE HLDGS INC COM	157,899	3,761,866	7,448,096
ADR TOTALENERGIES SE SPONSORED ADR	17,332	775,061	944,594
INTEL CORP COM	72,446	2,684,616	1,452,542
MEDTRONIC PLC COMMON STOCK STOCK	55,758	4,948,545	4,453,949
KIMBERLY-CLARK CORP COM	59,296	7,551,961	7,770,148
CSX CORP COM STK	102,526	3,496,406	3,308,514
GE VERNOVA LLC COM	6,015	317,036	1,978,514
STANLEY BLACK & DECKER INC COM	77,464	6,793,922	6,219,585
SANOFI SPONSORED ADR	43,545	2,258,425	2,100,175
ADOBE INC COM	3,566	1,684,368	1,585,729
ROCKWELL AUTOMATION	9,171	2,526,864	2,620,980
COMCAST CORP NEW-CL A	77,443	2,899,570	2,906,436
MORGAN STANLEY COM STK USD0.01	11,128	426,685	1,399,012
KOHL'S CORP COM	75,924	2,393,660	1,065,973
EXPAND ENERGY CORP	10,300	755,877	1,025,365
MICROSOFT CORP COM	16,657	1,819,904	7,020,926
BECTON DICKINSON & CO COM	36,782	8,495,956	8,344,732
BIOGEN INC COMMON STOCK	7,499	1,889,423	1,146,747
NISOURCE INC COM	23,848	587,468	876,652
LOEWS CORP COM	63,003	2,626,725	5,335,724
CITIGROUP INC COM NEW COM NEW	101,916	6,017,821	7,173,867
WILLIAMS CO INC COM	58,898	2,048,482	3,187,560
KENVUE INC COM	379,258	7,392,639	8,097,158
EXXON MOBIL CORP COM	68,872	4,991,448	7,408,561
HONEYWELL INTL INC COM STK	2,286	442,556	516,385
EOG RESOURCES INC COM	23,995	1,272,053	2,941,307
TC ENERGY CORPORATION COM NPV	41,686	1,835,111	1,939,650
TE CONNECTIVITY PLC COM USD0.01	15,381	1,674,564	2,199,022
PHILLIPS 66 COM	2,100	234,213	239,253
AMEREN CORP COM	63,059	4,693,285	5,621,079
SCHWAB CHARLES CORP COM NEW	116,690	6,349,859	8,636,227
ENBRIDGE INC COM	38,076	1,432,770	1,615,565
5TH 3RD BANCORP COM	111,614	2,978,358	4,719,040
TYSON FOODS INC CL A COM (DELAWARE)	67,178	4,302,862	3,858,704
FORTIVE CORP COM MON STOCK	14,700	1,149,980	1,102,500
SOUTH BOW CORPORATION COM NPV	8,337	179,323	196,503
HUNTINGTON BANCSHARES INC COM	399,952	5,698,633	6,507,219
NXP SEMICONDUCTORS N V COM STK	15,336	2,959,543	3,187,588
S.W. AIRL CO COM	144,615	5,320,753	4,861,956
US BANCORP	92,487	3,503,725	4,423,653
ABBVIE INC COM USD0.01	6,032	498,948	1,071,886
PG& E CORP COM	39,217	505,205	791,399
ZIMMER BIOMET HLDGS INC COM	69,873	8,170,164	7,380,685

ACCENTURE PLC CLS A	11,934	3,531,422	4,198,262
THE HARTFORD INSURANCE GROUP INC COM USD0.01	59,248	4,052,614	6,481,731
UNITED PARCEL SVC INC CL B	38,960	4,830,749	4,912,856
CF INDS HLDGS INC COM	85,948	3,402,936	7,333,083
INTL PAPER CO COM	151,203	5,784,959	8,137,745
BOEING CO COM	31,610	5,319,626	5,594,970
NEXTERA ENERGY INC COM	49,272	3,381,011	3,532,310
SUNCOR ENERGY INC NEW COM STK	54,400	1,657,754	1,940,992
NORFOLK SOUTHN CORP COM	12,000	2,496,590	2,816,400
APOLLO GLOBAL MANAGEMENT INC COM USD0.00001	10,602	547,734	1,751,026
WELLS FARGO & CO NEW COM STK	157,310	6,383,303	11,049,454
AGCO CORP COM	15,793	1,474,704	1,476,330
BANK OF AMERICA CORP	115,254	4,236,859	5,065,413
CENTENE CORP DEL COM	11,894	811,703	720,539
HOME DEPOT INC COM	2,125	826,813	826,604
CONOCOPHILLIPS COM	50,445	5,636,097	5,002,631
ADR ASTRAZENECA PLC SPONSORED ADR UNITEDKINGDOM	60,201	3,565,507	3,944,370
SALESFORCE INC COM USD0.001	4,025	986,071	1,345,678
NORTHROP GRUMMAN CORP COM	18,308	7,340,615	8,591,761
MATTEL INC COM STOCK 1.00 PAR	128,316	2,282,573	2,275,043
CVS HEALTH CORP COM	93,178	6,209,367	4,182,760
PHILIP MORRIS INTL COM STK NPV	67,483	6,010,303	8,121,579
APPLIED MATERIALS INC COM	19,272	823,414	3,134,205
PFIZER INC COM	83,130	2,642,416	2,205,439
COLGATE-PALMOLIVE CO COM	31,981	2,451,878	2,907,393
CISCO SYSTEMS INC	26,757	1,115,379	1,584,014
REPLIGEN CORP COM STK USD0.01	9,020	1,445,437	1,298,339
LEONARDO DRS INC COM	55,390	1,140,952	1,789,651
MODINE MFG CO COM STK	16,395	1,456,338	1,900,672
TECHNIPFMC PLC COM USD1	23,506	446,530	680,264
BELLRING BRANDS INC COM USD0.01	21,896	1,200,748	1,649,645
MASIMO CORP COM STK	8,851	1,223,828	1,463,070
UNIVERSAL DISPLAY CORP COM	821	128,103	120,030
KLAVIYO INC COM SER A COM SER A	41,530	1,095,046	1,712,697
PERMIAN RES CORP CL A	5,030	60,773	72,331
MERUS B V MERUS N V	11,755	571,403	494,298
WINGSTOP INC COM	4,810	1,515,678	1,367,002
BOOT BARN HLDGS INC COM	14,753	1,452,533	2,239,800
ARS PHARMACEUTICALS INC COM	39,690	600,179	418,730
APOGEE THERAPEUTICS INC COM	14,060	760,795	636,918
CLEARWATER ANALYTICS HLDGS INC CL A CL A	76,104	1,541,179	2,094,382
MERITAGE HOMES CORP COM	5,853	770,187	900,308
RUBRIK INC COM USD0.000025 CL A	26,008	869,613	1,699,883
ULTRAGENYX PHARMACEUTICAL INC COM	10,724	517,939	451,159
VIKING THERAPEUTICS INC COM	8,004	166,374	322,081
FIVE BELOW INC COM USD0.01	8,627	936,962	905,490
ATRICURE INC COM STK	39,145	1,566,755	1,196,271
CULLINAN THERAPEUTICS INC	28,406	660,477	345,985
SEMTECH CORP COM	34,063	1,184,329	2,106,797
KNIFE RIV HLDG CO COM	17,759	1,872,896	1,805,025
KORRO BIO INC COM	10,723	621,157	408,225
PROCEPT BIOROBOTICS CORP COM	18,387	604,135	1,480,521
OLLIES BARGAIN OUTLET HLDGS INC COM	16,141	1,508,281	1,771,152
SPX TECHNOLOGIES INC COM	12,343	1,259,679	1,796,153
STEPSTONE GROUP INC CL A CL A	31,842	902,356	1,843,015
ONTO INNOVATION INC	2,697	304,891	449,509
BRAZE INC CL A CL A	32,167	1,252,717	1,347,154
CG ONCOLOGY INC COM	19,759	470,532	566,688
XENON PHARMACEUTICALS INC COMMON STOCK	14,060	509,743	551,152
STANDARD AERO INC. COM USD0.01	31,498	880,254	779,890
NCR ATLEOS CORPORATION COM USD0.01 WI	49,670	1,599,054	1,684,806
ARCBEST CORP COM USD0.01	15,435	2,002,651	1,440,394
SHARKNINJA COM USD0.0001	16,223	965,126	1,579,471
NEWAMSTERDAM PHARMA CO NV ORD	19,460	459,249	500,122
INTAPP INC COM	30,106	1,192,947	1,929,494
ESAB CORPORATION COM USD0.001 WI	13,336	1,209,529	1,599,520
BRIDGEBIO PHARMA INC COM	28,227	868,837	774,549
CHECK PT SOFTWARE TECHNOLOGIES ORDILS.01	7,000	898,362	1,306,900
SMURFIT WESTROCK LTD	25,200	934,050	1,357,272
AERCAP HOLDINGS N.V. EUR0.01	20,600	1,210,695	1,971,420
LIBERTY GLOBAL LTD. COM USD0.01 CLASS C	36,200	337,757	475,668
SHOPIFY INC CL A SUB VTG SHS SHOPIFY INC	9,300	579,422	988,869
DBS GROUP HLDGS NPV	64,900	1,385,420	2,079,921

BOLIDEN AB NPV	22,900	729,957	643,523
ESSITY AB SER'B'NPV	50,900	1,342,208	1,362,186
HUSQVARNA AB SER'B'NPV	15,700	128,013	82,043
SKAND ENSKILDA BKN SER'A'NPV	74,700	844,101	1,023,899
NINTENDO CO LTD NPV	16,400	729,008	966,719
HITACHI NPV	103,400	1,257,421	2,590,263
TOYOTA INDUSTRIES NPV	19,900	1,268,669	1,628,999
RENASAS ELECTRONICS CORPORATION NPV	75,300	1,251,616	980,539
SUMITOMO MITSUI FINANCIAL GROUP NPV	96,300	1,346,263	2,306,396
CK ASSET HOLDINGS LTD	104,500	560,909	429,142
CK HUTCHISON HLDGS HKD1	257,000	1,568,362	1,373,013
AIA GROUP LTD NPV	170,100	1,210,673	1,232,839
SHELL PLC ORD EURO.07	47,200	1,451,249	1,463,645
GSK PLC ORD GBP0.3125	61,200	1,091,077	1,032,050
LEGAL & GENERAL GP ORD GBP0.025	460,600	1,339,777	1,325,614
DOWLAIS GROUP PLC ORD	234,100	289,704	197,755
DCC ORD EURO.25 (CDI)	18,900	1,175,481	1,216,657
BARRATT REDROW PLC	101,200	606,510	557,795
BURBERRY GROUP ORD GBP0.0005	20,300	483,294	249,152
PERSIMMON ORD GBP0.10	30,800	471,115	462,116
ASHTAD GROUP ORD GBP0.10	17,000	1,018,613	1,057,088
LLOYDS BANKING GP ORD GBP0.1	2,159,000	1,256,580	1,481,214
SMITH & NEPHEW PLC ORD USD0.20	52,300	757,169	649,372
BP ORD USD0.25	294,000	1,760,017	1,447,048
KINGFISHER ORD GBP0.157142857	239,600	709,857	746,287
BUNZL PLC ORD GBP0.32142857	11,400	443,377	470,582
RECKITT BENCK GRP ORD GBP0.10	21,200	1,645,300	1,283,204
UNILEVER PLC ORD GBP0.031111	26,900	1,377,408	1,532,201
PEARSON ORD GBP0.25	51,400	625,543	825,267
AVIVA ORD GBP0.328947368	144,700	734,163	849,570
INFORMA PLC (GB) ORD GBP0.001	54,200	477,586	541,955
INCHCAPE ORD GBP0.10	90,400	855,679	871,205
GLENCORE PLC ORD USD0.01	245,400	1,282,672	1,086,136
WISE PLC CLS A ORD GBP0.01	16,200	210,800	216,279
TESCO ORD GBP0.0633333	318,700	1,081,443	1,470,032
AMUNDI EUR2.5	10,300	634,139	684,735
INFINEON TECHNOLOG ORD NPV (REGD)	41,000	1,488,306	1,333,103
DEUTSCHE BOERSE AG NPV(REGD)	5,600	1,036,068	1,289,653
EXOR NV EURO.01	3,700	318,167	339,266
HEIDELBERG MATERIALS AG	12,800	940,901	1,581,250
PROSUS N.V. EURO.05 (N SHARES)	28,600	1,052,695	1,135,747
KONINKLIJKE PHILIP EURO.20	10,858	205,671	274,340
ALLIANZ SE NPV(REGD)(VINKULIERT)	4,400	1,002,087	1,348,180
GPE BRUXELLES LAM NPV	6,700	525,181	458,245
ANHEUSER-BUSCH INB NPV	36,800	2,163,328	1,838,634
SAP SE	10,700	1,426,738	2,618,169
REXEL EUR5	12,500	256,955	318,416
SIEMENS AG NPV(REGD)	9,400	1,559,244	1,835,387
HEINEKEN HOLDING EUR1.6 A	13,500	1,198,268	808,700
ARCELORMITTAL NPV	41,000	1,069,302	952,277
SANOFI EUR2	16,800	1,808,508	1,630,739
SODEXHO EUR4	10,500	838,923	864,927
VOLVO AB SER'B'NPV	14,827	291,499	360,435
DNB ASA NOK	66,300	1,178,633	1,324,558
AKER BP ASA NOK1	41,183	995,707	803,909
ASTELLAS PHARMA NPV	75,200	1,206,755	734,248
RAKUTEN GROUP INC NPV	146,800	619,147	802,281
ORIX CORP NPV	89,200	1,612,581	1,934,294
CANON INC NPV	28,500	722,908	935,916
KYOCERA CORP NPV	82,900	1,141,996	831,057
SBI HLDGS INC NPV	56,600	1,154,738	1,434,088
SONY GROUP CORPORA NPV	141,000	2,632,742	3,022,582
OLYMPUS CORP NPV	87,300	1,317,809	1,316,777
FANUC CORP NPV	34,600	1,144,227	919,159
SQUARE ENIX HOLDINGS CO LTD NPV	8,900	404,734	348,106
SEVEN & I HOLDINGS NPV	135,000	2,024,106	2,136,326
FUJITSU NPV	97,000	1,290,168	1,727,867
OCCIDENTAL PETE CORP WT EXP	42,312	-	1,165,691
WEYERHAEUSER CO COM	240,031	6,372,206	6,756,872
GAMING & LEISURE PPTYS INC COM	42,520	2,030,366	2,047,763
RYMAN HOSPITALITY PPTYS INC COM	7,084	652,561	739,145
STAG INDL INC COM	25,693	916,364	868,937
RAYONIER INC REIT	111,589	3,154,102	2,912,473

REXFORD INDL RLTY INC COM	53,163	2,553,108	2,055,282
VORNADO RLTY TR COM	7,545	303,036	317,192
EQTY RESDNTL EFF 5/15/02	93,593	6,015,156	6,716,234
SUN COMMUNITIES INC COM	32,400	4,171,303	3,984,228
ACADIA RLTY TR COM	68,843	1,173,788	1,663,247
BROADSTONE NET LEASE INC COM USD0.00025	58,865	919,737	933,599
1ST INDL RLTY TR INC COM	23,033	1,203,343	1,154,644
NATIONAL STORAGE AFFILIATES TR COM SHS BEN INT COM SHS BEN INT	18,010	685,262	682,759
COPT DEFENSE PROPERTIES COM STK USD0.01	55,370	1,803,058	1,713,702
INDEPENDENCE RLTY TR INC COM	92,910	1,686,280	1,843,334
NETSTREIT CORP COM USD0.01	40,932	715,298	579,188
SBA COMMUNICATIONS CORP COM USD0.01 CL A	22,700	4,858,454	4,626,260
Corporate Stock - Common Total			2,327,172,651
MFO LAZARD EMERGING WORLD INVESTORS LIMITED PARTNERSHIP	300,000	30,000,000	35,322,897
Partnerships - Total			35,322,897
MFB NT COLLECTIVE S&P 500 INDEX FUND - LENDING	108,301	1,306,154,512	2,459,508,870
MFB NT COLLECTIVE ALL COUNTRY WORLD EX-US INDEX FUND-LENDING	3,942,553	80,149,157	86,385,289
MFO BLACKROCK LIFEPAATH INDEX 2050 FUND F	16,607,227	352,262,482	519,251,517
MFO BLACKROCK LIFEPAATH INDEX 2045 FUND F	17,678,719	441,446,310	653,087,249
MFO BLACKROCK LIFEPAATH INDEX 2040 FUND F	16,415,729	432,206,937	620,430,824
MFB NT COLLECTIVE S&P 500 INDEX FUND - LENDING	3,945	89,438,021	89,587,678
MFB NT COLLECTIVE EXTENDED EQUITY MARKETINDEX FUND	69,151	79,028,996	90,111,178
MFO BLACKROCK LIFEPAATH INDEX 2065 FUN D F	4,374,932	63,179,709	74,849,402
MFB NT COLLECTIVE EXTENDED EQUITY MARKETINDEX FUND	436,593	352,966,726	568,923,413
MFO BLACKROCK LIFEPAATH INDEX 2035 FUND F	22,777,390	534,726,402	741,784,413
MFO BLACKROCK LIFEPAATH INDEX 2030 FUND F	31,053,513	742,577,094	999,205,783
MFO BLACKROCK LIFEPAATH INDEX 2055 FUND F	7,839,782	234,152,747	321,356,581
MFO BLACKROCK LIFEPAATH INDEX 2060 FUND F	9,104,864	167,513,392	217,378,623
MFB NT COLLECTIVE AGGREGATE BOND INDEX FUND - LENDING - TIER H	301,580	167,995,532	173,703,939
MFO LIFEPAATH INDEX RETIREMENT FUND F	61,012,263	1,481,684,056	1,626,580,837
WF/BLACKROCK SHORT TERM INVESTMENT FUND S	49,766,551	49,766,551	49,766,551
NT COLLECTIVE GOVT SHORT TERM INVT FD	671	671	671
NT COLLECTIVE GOVT SHORT TERM INVT FD	-	-	-
NT COLLECTIVE GOVT SHORT TERM INVT FD	3,817,674	3,817,674	3,817,674
NT COLLECTIVE GOVT SHORT TERM INVT FD	197	197	197
NT COLLECTIVE GOVT SHORT TERM INVT FD	-	-	-
NT COLLECTIVE GOVT SHORT TERM INVT FD	2,497	2,497	2,497
NT COLLECTIVE GOVT SHORT TERM INVT FD	574,114	574,114	574,114
NT COLLECTIVE GOVT SHORT TERM INVT FD	-	-	-
NT COLLECTIVE GOVT SHORT TERM INVT FD	16,054	16,054	16,054
NT COLLECTIVE GOVT SHORT TERM INVT FD	337	337	337
NT COLLECTIVE GOVT SHORT TERM INVT FD	636,322	636,322	636,322
NT COLLECTIVE GOVT SHORT TERM INVT FD	161	161	161
NT COLLECTIVE GOVT SHORT TERM INVT FD	199	199	199
NT COLLECTIVE GOVT SHORT TERM INVT FD	23,559	23,559	23,559
NT COLLECTIVE GOVT SHORT TERM INVT FD	2,902,673	2,902,673	2,902,673
NT COLLECTIVE GOVT SHORT TERM INVT FD	4,180,303	4,180,303	4,180,303
NT COLLECTIVE GOVT SHORT TERM INVT FD	7,186,786	7,186,786	7,186,786
NT COLLECTIVE GOVT SHORT TERM INVT FD	1,164,515	1,164,515	1,164,515
NT COLLECTIVE GOVT SHORT TERM INVT FD	3	3	3
NT COLLECTIVE GOVT SHORT TERM INVT FD	5,652,980	5,652,980	5,652,980
NT COLLECTIVE GOVT SHORT TERM INVT FD	9,858,442	9,858,442	9,858,442
NT COLLECTIVE GOVT SHORT TERM INVT FD	779,169	779,169	779,171
MFO PRIN GL INVS COLTV INVT TR DIV INTL EQ FD 50 BP FEE CL TIER III 742538101	355,638	117,779,010	131,020,544
Common Collective Trusts Total			9,459,729,349
MFO FIDELITY GLOBAL EX US INDEX FUND	8,639,325	119,954,277	124,581,355
MFO BLACKROCK INSTL TR CO NA INV FD FOR EMP BENEFIT TRS LIFEPAATH INDEX 2070 FD F	119,081	1,191,218	1,176,868
MFO FIDELITY GROUP TR FOR EMPLOYEE BENEFIT PLAN GROWTH CO COMMINGLED POOL CL D	5,993,211	331,031,712	424,079,612
MFO RESERVE INVT FDS INC T ROWE PRICE GOVT RESERVE FD	4,523,791	4,523,791	4,523,791
Registered Investment Companies Total			554,361,626
REPUBLIC OF COLOMBIA 7.75% 11-07-2036	600,000	596,100	586,740
COLOMBIA REP 5% DUE 06-15-2045 REG	400,000	292,400	269,600
PETROLEOS MEXICANOS GTD NT 7.69% DUE 01-23-2050 REG	4,450,000	3,283,140	3,357,525
PETROLEOS MEXICANOS 6.7% 02-16-2032	1,937,000	1,753,194	1,685,101
REPUBLIC OF COLOMBIA 5.625 02-26-2044 REG	650,000	442,768	477,750
PEMEX PROJ FDG MASTER TR GTD BD 6.625% DUE 06-15-2035 REG	325,000	337,318	255,976
IL ST TAXABLE-PENSION 5.1 DUE 06-01-2033BEO TAXABLE SINKING FD 06-01-2025 N/C	1,350,588	1,429,499	1,331,532
CALIFORNIA ST 7.3% 10-01-2039 BEO TAXABLE	585,000	929,196	666,049
CALIFORNIA ST 7.625% 03-01-2040 BEO TAXABLE	160,000	267,389	188,534

NEW JERSEY ST TPK AUTH TPK REV 7.102% 01-01-2041 BEO TAXABLE	430,000	684,255	480,214
NEW JERSEY ST TPK AUTH TPK REV 7.414% 01-01-2040 BEO TAXABLE	120,000	196,048	137,472
&&&HARRIS SDA ASSET	1	-	917,574,441
MFO HARRIS CORP RETIREMENT PLAN STABLE VALUE PLAN	5,643,724	1,231,062,476	1,304,902,455
ESC GCI LIBERTY INC SR ESCROW	49,621	-	-
FUT MAR 25 10 YR T-NOTES	134	-	-
FUT MAR 25 CBT UL T-BONDS	40	-	-
Other Total			2,231,913,389
L3HARRIS TECHNOLOGIES INC COM	6,422,033	1,266,927,609	1,351,011,991
Employer Securities Total			1,351,011,991
Add: Accrued Int & Div			5,567,225
Add: Pending Sales			725,604
Less: Pending Purchases			(1,280,997)
Total Master Trust		\$	16,224,354,421

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 <u>01/01/2024</u> and ending <u>12/31/2024</u>	
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.)
B This return/report is:	☐ a single-employer plan ☒ a DFE (specify) <u>M</u> ☐ 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 L3HARRIS RETIREMENT SAVINGS PLAN MASTER TRUST	1b Three-digit plan number (PN) ▶ 101
	1c Effective date of plan 12/31/2019
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) L3HARRIS TECHNOLOGIES, INC. 1025 WEST NASA BOULEVARD MELBOURNE FL 32919-0001	2b Employer Identification Number (EIN) 22-3566412 2c Plan Sponsor's telephone number 321-724-3554 2d Business code (see instructions)

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

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

SIGN HERE			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
	<i>Andrea Hartman</i>	<i>10/12/25</i>	ANDREA HARTMAN
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)
v. 240311

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:**4b** EIN**4d** PN**a** Sponsor's name**c** Plan Name**5** Total number of participants at the beginning of the plan year**5****6** Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).**a (1)** Total number of active participants at the beginning of the plan year**6a(1)****a (2)** Total number of active participants at the end of the plan year**6a(2)****b** Retired or separated participants receiving benefits**6b****c** Other retired or separated participants entitled to future benefits**6c****d** Subtotal. Add lines 6a(2), 6b, and 6c**6d****e** Deceased participants whose beneficiaries are receiving or are entitled to receive benefits**6e****f** Total. Add lines 6d and 6e**6f****g (1)** Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)**6g(1)****(2)** Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)**6g(2)****h** Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested**6h****7** Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)**7****8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:**9a** Plan funding arrangement (check all that apply)

- (1) ☐ 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

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)

5500 Supplemental Schedules

1 JAN 24 - 31 DEC 24

Account Name HARRIS CORP. MASTER TRUST CONS
Account number V42747

Page 93 of 307

◆ 5% Report - Part A

Single Transaction in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
Value of Interest in Common/Collective Trusts									
United States - USD									
MFO BLACKROCK LIFEPATH INDEX 2025 FUND F CUSIP: 06739V478	-32,558,190.460	7 Oct 24		27.9180		0.00	684,117,616.78	908,973,103.71	224,855,486.93
MFO LIFEPATH INDEX RETIREMENT FUND F CUSIP: 06739Q818	33,571,049.880	7 Oct 24	27.0760			0.00	908,973,103.71	908,973,103.71	0.00

NOTE: TRANSACTIONS ARE BASED ON THE 2023-09-30 VALUE (INCLUDING ACCRUALS) OF 14,193,667,095.10

◆ 5% Report - Part B

Series of Non-Security Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
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THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2023-09-30 VALUE (INCLUDING ACCRUALS) OF 14,193,667,095.10

5500 Supplemental Schedules

1 JAN 24 - 31 DEC 24

Account Name HARRIS CORP. MASTER TRUST CONS Account number V42747

Page 95 of 307

◆ 5% Report - Part C Summary

Series of Transactions by Issue in Excess of 5%

Security Description / Asset ID		Number of Transactions	Transaction Aggregate Acquisition PriceDisposition Price		Lease Rental	Expenses Incurred	Cost of Asset	Current Value of Asset on Transaction
MFB NT COLLECTIVE S&P 500 INDEX FUND - L ENDING CUSIP: 658991294	Total acquisitions	132	759,349,066.17			0.00	759,349,066.17	759,349,066.17
		27				0.00	0.00	.000.00
		15				0.00	62,218.01	.000.00
	Total dispositions	424		701,004,344.62		0.00	520,351,154.65	701,004,344.62
MFO BLACKROCK LIFEPATH INDEX 2025 FUND F CUSIP: 06739V478	Total acquisitions	36	176,501,226.61			0.00	176,501,226.61	176,501,226.61
	Total dispositions	176		1,078,011,317.99		0.00	817,881,085.09	1,078,011,317.99
MFO LIFEPATH INDEX RETIREMENT FUND F CUSIP: 06739Q818	Total acquisitions	44	1,021,182,984.69			0.00	1,021,182,984.69	1,021,182,984.69
	Total dispositions	234		181,200,486.63		0.00	155,140,626.39	181,200,486.63
NT COLLECTIVE GOVT SHORT TERM INVT FD CUSIP: 66586U445	Total acquisitions	656	613,903,827.96			0.00	613,903,827.96	613,903,827.96
	Total dispositions	571		650,775,077.50		0.00	650,775,077.50	650,775,077.50
NT COLLECTIVE GOVT SHORT TERM INVT FD CUSIP: 66586U445	Total acquisitions	1,067	664,269,315.40			0.00	664,225,172.05	664,269,315.40
	Total dispositions	861		627,472,657.62		0.00	627,472,657.62	627,472,657.62

NOTE: TRANSACTIONS ARE BASED ON THE 2023-09-30 VALUE (INCLUDING ACCRUALS) OF 14,193,667,095.10

◆ 5% Report - Part D

Series of Transactions with Same Party in Excess of 5%

Security Description / Asset ID	Shares/Par Value	Date	Acquisition Price	Disposition Price	Lease Rental	Expenses Incurred	Cost	Current Value on Transaction Date	Net Gain/Loss
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THERE ARE NO REPORTABLE TRANSACTIONS

NOTE: TRANSACTIONS ARE BASED ON THE 2023-09-30 VALUE (INCLUDING ACCRUALS) OF 14,193,667,095.10