

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

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 [X] a DFE (specify) C
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. []
D Check box if filing under: [] Form 5558 [] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: T. ROWE PRICE RETIREMENT BLEND SELECT TRUST 2025
1b Three-digit plan number (PN): 737
1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan): GREAT GRAY TRUST COMPANY, LLC
2b Employer Identification Number (EIN): 38-7271343
2c Plan Sponsor's telephone number: 866-427-6885
2d Business code (see instructions)

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

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

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

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

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

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

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

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

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

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan <u>T. ROWE PRICE RETIREMENT BLEND SELECT TRUST 2025</u>	B Three-digit plan number (PN) ▶	<u>737</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	D Employer Identification Number (EIN) <u>38-7271343</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE DYNAMIC CREDIT TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>93-2020168-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>4031281</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE DYNAMIC GLOBAL BOND</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>37-6652415-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>11966075</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>TRP EMERGING MARKETS BOND TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>38-7011723-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>10161976</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE EQUITY INDEX TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>52-6559833-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14741672</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE FLOATING RATE TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>38-4044370-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3365845</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE GROWTH STOCK TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>52-6559833-013</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>19737206</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE HEDGED EQUITY TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>92-2748860-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>20019402</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE HIGH YIELD TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-2425740-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9619042
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE INTL BOND TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 30-6304154-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18030043
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE INTL EQUITY IND TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 61-6591055-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26431971
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE INTL GROWTH EQ TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-6942416-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7100948
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE INTL VALUE EQ TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-2425742-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8277224
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE NEW HORIZONS TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 52-6559833-014	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2451724
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE REAL ASSETS TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-6785642-017	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 13421868
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE U.S. BOND INDEX TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 36-4882015-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49617037
a Name of MTIA, CCT, PSA, or 103-12 IE: T. ROWE PRICE U.S. VALUE EQUITY TRU		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 38-7010951-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 20136466
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP EMERGING MARKETS EQUITY TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 52-1309931-006	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4733477

a Name of MTIA, CCT, PSA, or 103-12 IE: TRP EMERGING MKT DISCOV STOCK TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 84-3612736-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5328791
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP U.S. 1-5 YEAR TIPS INDEX TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 32-6493592-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 34840770
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP U.S. MID-CAP INDEX TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 61-6555368-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6982100
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP U.S. MID-CAP VALUE EQUITY TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-6941663-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3399681
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP U.S. SMALL CAP INDEX TRUST FUND		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-7124469-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5490564
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP US MID-CAP GROWTH EQUITY TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 35-2425738-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4035908
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP US SMALL CAP VALUE EQUITY TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 37-6495449-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3448628
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP US TREASURY LONG-TERM IND TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 61-6593158-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11808350
a Name of MTIA, CCT, PSA, or 103-12 IE: TRP US TREASURY MONEY MARKET TRUST		
b Name of sponsor of entity listed in (a): T. ROWE PRICE TRUST COMPANY		
c EIN-PN 52-6559833-004	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7665578
a Name of MTIA, CCT, PSA, or 103-12 IE: U.S. LARGE CAP STRUCTURED INDEX TRU		
b Name of sponsor of entity listed in (a): GREAT GRAY TRUST COMPANY, LLC		
c EIN-PN 38-7264567-732	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 45431977

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	401(K) PROFIT-SHARING PLAN FOR EMPLOYEES OF RED ROCK CENTER FOR INDEPENDENCE	
b	Name of plan sponsor	401(K) PROFIT-SHARING PLAN FOR EMPLOYEES	c EIN-PN 84-1419008-001
a	Plan name	48FORTY SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	48FORTY SOLUTIONS, LLC	c EIN-PN 59-3593261-001
a	Plan name	5 STAR FLOORING, INC. 401(K) PLAN	
b	Name of plan sponsor	5 STAR FLOORING, INC.	c EIN-PN 20-4029028-001
a	Plan name	A4 ACCESS 401(K) PLAN	
b	Name of plan sponsor	A4 ACCESS, LLC	c EIN-PN 46-3513988-001
a	Plan name	AAMIR STATIONS 401(K) PLAN	
b	Name of plan sponsor	AAMIR STATIONS, LLC	c EIN-PN 20-3455540-001
a	Plan name	ABL WHOLESALE DISTRIBUTORS, INC. COLLECTIVE BARGAINING EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor	ABL WHOLESALE DISTRIBUTORS, INC.	c EIN-PN 34-1439398-001
a	Plan name	ABL WHOLESALE DISTRIBUTORS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ABL WHOLESALE DISTRIBUTORS, INC	c EIN-PN 34-1439398-002
a	Plan name	ACCION LABS US 401(K) PLAN	
b	Name of plan sponsor	ACCION LABS US, INC.	c EIN-PN 27-4827982-001
a	Plan name	ACCUMETRICS LIMITED 401(K) PLAN	
b	Name of plan sponsor	ACCUMETRICS LIMITED AND SUBSIDIARY	c EIN-PN 23-2147951-001
a	Plan name	AEGIS 401(K) PLAN	
b	Name of plan sponsor	AEGIS CHEMICAL SOLUTIONS, LLC	c EIN-PN 36-4753666-001
a	Plan name	AIAC INTERNATIONAL PHARMA RET PLAN	
b	Name of plan sponsor	AIAC INTERNATIONAL PHARMA LLC	c EIN-PN 66-0839778-001
a	Plan name	AINSWORTH GAME TECHNOLOGY INC. RETIREMENT PLAN & TRUST	
b	Name of plan sponsor	AINSWORTH GAME TECHNOLOGY INC.	c EIN-PN 86-1131097-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name ALBERT & MACKENZIE, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALBERT & MACKENZIE, LLP	c EIN-PN 82-1962454-001
a	Plan name ALCON INC INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor ALCON INDUSTRIES, INC.	c EIN-PN 34-1242260-001
a	Plan name ALDRICH & ELLIOTT PC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ALDRICH & ELLIOTT PC	c EIN-PN 03-0348593-001
a	Plan name ALEXANDRIA NICOLE CELLARS 401(K) PLAN	
b	Name of plan sponsor ALEXANDRIA NICOLE CELLARS	c EIN-PN 75-3021651-001
a	Plan name ALL SERVICE PAINTING 401(K) PLAN	
b	Name of plan sponsor ALL SERVICE PAINTING, INC.	c EIN-PN 93-1146202-001
a	Plan name ALOHA NATURAL PET SUPPLY RETIREMENT PLAN	
b	Name of plan sponsor CASCADE PET SUPPLY DBA ALOHA NATURAL PET SUPPLY	c EIN-PN 92-2582927-001
a	Plan name ALPINE REST HOME 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ALPINE REST HOME	c EIN-PN 05-0365908-001
a	Plan name AMTRUST RETIREMENT PLAN	
b	Name of plan sponsor AMTRUST NORTH AMERICA INC.	c EIN-PN 04-3106389-001
a	Plan name ANDERSON, WILMARTH, VAN DER MAATEN AND FRETHEIM 401(K) PROFIT SHARING	
b	Name of plan sponsor ANDERSON, WILMARTH, VAN DER MAATEN, FRETHEIM, GIPP, EVELSIZER O	c EIN-PN 42-1221779-001
a	Plan name ANDREW J. KAPUST, DDS, P.S. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ANDREW J. KAPUST, DDS, P.S.	c EIN-PN 20-0490740-001
a	Plan name ANESTHESIA ASSOCIATES, P.S. 401(K) PLAN	
b	Name of plan sponsor ANESTHESIA ASSOCIATES, P.S.	c EIN-PN 91-0854525-004
a	Plan name AP THERAPY LLC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor A P REHAB LLC	c EIN-PN 88-3978140-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	AQUA LOGIC, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	AQUA LOGIC, INC.	c EIN-PN 41-1844724-001
a	Plan name	AQUATIC CONTROL 401(K) PLAN	
b	Name of plan sponsor	AQUATIC CONTROL INC.	c EIN-PN 35-1263215-001
a	Plan name	ARCHITECTS ORANGE 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ARCHITECTS ORANGE LLP, DBA AO	c EIN-PN 95-3428586-004
a	Plan name	ARROW SIGN COMPANY 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	ARROW SIGN COMPANY	c EIN-PN 94-1746602-003
a	Plan name	AVALON TEST EQUIPMENT 401(K) PLAN	
b	Name of plan sponsor	AVALON TEST EQUIPMENT	c EIN-PN 33-0788090-001
a	Plan name	AXIOM SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	AXIOM SYSTEMS, INC.	c EIN-PN 23-2841822-001
a	Plan name	B.H. 401(K) PLAN	
b	Name of plan sponsor	B.H. MULTI COM CORP	c EIN-PN 13-3010860-001
a	Plan name	B.H. MULTI COLOR CORP 401(K) PLAN	
b	Name of plan sponsor	B.H. MULTI COLOR CORP	c EIN-PN 13-3744251-001
a	Plan name	BALANCE OF NATURE MEP	
b	Name of plan sponsor	BALANCE OF NATURE, INC.	c EIN-PN 27-1011855-001
a	Plan name	BEACHES ORAL AND MAXILLOFACIAL SURGERY 401(K) PLAN	
b	Name of plan sponsor	BEACHES ORAL AND MAXILLOFACIAL SURGERY	c EIN-PN 99-1844731-001
a	Plan name	BELLOWS PLUMBING, HEATING AND AIR INC. BAY AREA 401K PLAN	
b	Name of plan sponsor	BELLOWS PLUMBING, HEATING, AND AIR	c EIN-PN 95-3922199-002
a	Plan name	BELLOWS PLUMBING, HEATING AND AIR INC. SANTA CRUZ 401K PLAN	
b	Name of plan sponsor	BELLOWS PLUMBING, HEATING, AND AIR	c EIN-PN 95-3922199-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name BENMIT 401(K) PLAN	
b	Name of plan sponsor US TUBULAR PRODUCTS/BENMIT DIVISION	c EIN-PN 22-2363633-001
a	Plan name BENSON HILL HOLDINGS, INC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor BENSON HILL HOLDINGS, INC	c EIN-PN 45-5483749-001
a	Plan name BILL MELENDEZ PRODUCTIONS INC. 401(K) PLAN	
b	Name of plan sponsor BILL MELENDEZ PRODUCTIONS INC.	c EIN-PN 95-2319431-001
a	Plan name BLACHFORD GROUP SAVINGS & RETIREMENT PLAN & TRUST	
b	Name of plan sponsor BLACHFORD, INC.	c EIN-PN 36-3658961-003
a	Plan name BOTSFORD AND GOODFELLOW, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor BOTSFORD & GOODFELLOW, INC.	c EIN-PN 93-0550578-001
a	Plan name BRAD YOUNG & ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor BRAD YOUNG & ASSOCIATES, INC.	c EIN-PN 83-0379897-001
a	Plan name BRAFMAN FAMILY DENTISTRY, P.A. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRAFMAN FAMILY DENTISTRY, P.A.	c EIN-PN 51-0413028-001
a	Plan name BRANSON BUILDERS AND CONTRACTORS 401K PLAN	
b	Name of plan sponsor BRANSON BUILDERS AND CONTRACTORS	c EIN-PN 41-1847428-001
a	Plan name BREAKTHRU BEVERAGE	
b	Name of plan sponsor BREAKTHRU BEVERAGE CALIFORNIA	c EIN-PN 95-2460478-001
a	Plan name BROADDUS & ASSOCIATES, INC. 401(K) PLAN BROADDUS & ASSOCIATES, INC.	
b	Name of plan sponsor BROADDUS & ASSOCIATES, INC.	c EIN-PN 74-2985884-001
a	Plan name BUDDHIST CHURCHES OF AMERICA 403(B) PLAN	
b	Name of plan sponsor BUDDHIST CHURCHES OF AMERICA	c EIN-PN 94-1498382-001
a	Plan name BUDROVICH CONTRACTING CO., INC. EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor BUDROVICH CONTRACTING CO.	c EIN-PN 43-0916784-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	BUNN-O-MATIC CORPORATION 401(K) SAVINGS PLAN AND TRUST	
b	Name of plan sponsor	BUNN-O-MATIC CORPORATION	c EIN-PN 37-0840805-002
a	Plan name	BURROW GLOBAL 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BURROW GLOBAL, LLC	c EIN-PN 37-1619755-001
a	Plan name	C & S SWEEPING SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	C & S SWEEPING SERVICES, INC.	c EIN-PN 86-0747568-001
a	Plan name	CACHEAUX, CAVAZOS & NEWTON LLP 401(K) PLAN	
b	Name of plan sponsor	CACHEAUX, CAVAZOS & NEWTON, LLP	c EIN-PN 74-2720417-001
a	Plan name	CAL-TEX LUMBER CO., INC. 401(K) PLAN	
b	Name of plan sponsor	CAL-TEX LUMBER CO., INC.	c EIN-PN 74-2466148-001
a	Plan name	CAREONSITE MANAGEMENT, INC. EMPLOYEES' 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	CAREONSITE MANAGEMENT, INC.	c EIN-PN 88-1146270-002
a	Plan name	CCFI COMPANIES LLC 401(K) PLAN	
b	Name of plan sponsor	CCFI COMPANIES LLC	c EIN-PN 87-2161861-001
a	Plan name	CCINTEGRATION, INC. 401(K) PLAN	
b	Name of plan sponsor	CCINTEGRATION INC.	c EIN-PN 77-0197130-001
a	Plan name	CEDARCREEK COMMUNITY CHURCH 401(K) PLAN	
b	Name of plan sponsor	CEDARCREEK CHURCH	c EIN-PN 34-1789315-001
a	Plan name	CENTRAL VERMONT SOLID WASTE MANAGEMENT DISTRICT 457B	
b	Name of plan sponsor	CENTRAL VERMONT SOLID WASTE MANAGEMENT DISTRICT	c EIN-PN 03-0318150-001
a	Plan name	CENTURY GROUP 401(K) PLAN	
b	Name of plan sponsor	CENTURY GROUP INTERNATIONAL, INC. DBA THE CENTURY GROUP	c EIN-PN 93-1022773-001
a	Plan name	CITY OF MUSTANG RIDGE 457(B)	
b	Name of plan sponsor	CITY OF MUSTANG RIDGE	c EIN-PN 74-2422418-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name CLEARFIELD, INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor CLEARFIELD, INC.	c EIN-PN 41-1347235-001
a	Plan name CLEVELAND HARDWARE & FORGING CO. SALARIED 401(K) PLAN	
b	Name of plan sponsor CLEVELAND HARDWARE & FORGING CO.	c EIN-PN 34-1028784-005
a	Plan name CLIFTON LAURITZEN, D.M.D., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CLIFTON LAURITZEN, D.M.D., INC.	c EIN-PN 20-5114233-001
a	Plan name CMC TIRE, LLC 401(K) PLAN	
b	Name of plan sponsor CMC TIRE LLC	c EIN-PN 47-1350018-001
a	Plan name CMD AGENCY RETIREMENT PLAN	
b	Name of plan sponsor CREATIVE MEDIA DEVELOPMENT, INC.	c EIN-PN 93-1199469-001
a	Plan name COKEBUSTERS USA 401(K) PLAN	
b	Name of plan sponsor COKEBUSTERS USA INC.	c EIN-PN 99-0380800-001
a	Plan name COLLECTION B. INC. 401(K) PLAN	
b	Name of plan sponsor COLLECTION B. INC.	c EIN-PN 90-0130436-001
a	Plan name COLUMBUS FAMILY DENTAL 401(K) PLAN	
b	Name of plan sponsor COLUMBUS FAMILY DENTAL, INC.	c EIN-PN 20-4884633-001
a	Plan name CONFECTIONS OPERATIONS, LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor CONFECTIONS OPERATIONS LLC	c EIN-PN 85-3034963-001
a	Plan name CONKLIN METAL INDUSTRIES INC. 401(K) EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor CONKLIN METAL INDUSTRIES INC	c EIN-PN 58-0203580-001
a	Plan name CONTROL SOUTHERN INC. PROFIT SHARING PLAN	
b	Name of plan sponsor CONTROL SOUTHERN INC.	c EIN-PN 58-0807099-001
a	Plan name COREL INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor COREL INC.	c EIN-PN 87-0557105-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	CREEDE-BLYTH LAW, APC 401(K) PLAN	
b	Name of plan sponsor	CREEDE-BLYTH LAW APC	c EIN-PN 93-4297278-001
a	Plan name	CURTIS + GINSBERG ARCHITECTS LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CURTIS + GINSBERG ARCHITECTS LLP	c EIN-PN 06-1305071-001
a	Plan name	DAAR ENGINEERING, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	DAAR ENGINEERING, INC.	c EIN-PN 39-2031716-002
a	Plan name	DAC, INC. 401(K) PLAN	
b	Name of plan sponsor	DIGITAL AIR CONTROL, INC. DBA DAC, INC.	c EIN-PN 76-0403380-001
a	Plan name	DAVID E. HARVEY BUILDERS, INC. EMPLOYEE SAVINGS PLAN	
b	Name of plan sponsor	DAVID E. HARVEY BUILDERS, INC.	c EIN-PN 76-0236902-001
a	Plan name	DEDEKIAN, GEORGE, SMALL & MARKARIAN ACCOUNTANCY CORPORATION EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	DEDEKIAN, GEORGE, SMALL & MARKARIAN ACCOUNTANCY CORPORATION	c EIN-PN 77-0000369-001
a	Plan name	DEERPOINT GROUP, INC. 401K RETIREMENT PLAN	
b	Name of plan sponsor	DEERPOINT GROUP, INC.	c EIN-PN 36-3902451-001
a	Plan name	DENIZEN, INC 401(K) PLAN	
b	Name of plan sponsor	DENIZEN, INC	c EIN-PN 42-1309369-002
a	Plan name	DERING PIERSON GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	DERING PIERSON GROUP, LLC	c EIN-PN 80-0696128-001
a	Plan name	DERMATOLOGY SPECIALISTS, P.A. RETIREMENT PLAN	
b	Name of plan sponsor	DERMATOLOGY SPECIALISTS, P.A.	c EIN-PN 41-1264423-001
a	Plan name	DETROIT EDGE TOOL COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	DETROIT EDGE TOOL COMPANY	c EIN-PN 38-1292818-001
a	Plan name	DEXTON ENTERPRISES, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	DEXTON ENTERPRISES, INC.	c EIN-PN 36-3002798-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DIVERSIFIED CHEMICAL PRODUCTS 401(K) PLAN	
b	Name of plan sponsor	DIVERSIFIED CHEMICAL PRODUCTS	c EIN-PN 52-2085916-001
a	Plan name	DON E. BOWER, INC. 401(K) PLAN	
b	Name of plan sponsor	DON E. BOWER INC.	c EIN-PN 23-2132575-001
a	Plan name	DORSO REALTY GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	DORSO REALTY GROUP, INC.	c EIN-PN 22-1862306-002
a	Plan name	DOSWELL OPERATING GROUP 401(K) PLAN	
b	Name of plan sponsor	WOODFIN HEATING, INC.	c EIN-PN 54-1061638-002
a	Plan name	DOXO, INC. RETIREMENT TRUST	
b	Name of plan sponsor	DOXO, INC.	c EIN-PN 26-3272091-001
a	Plan name	DUFFY BROS. MANAGEMENT COMPANY 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DUFFY BROS. MANAGEMENT CO., INC.	c EIN-PN 04-3107203-001
a	Plan name	DUNAWAY BROTHERS INC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	DUNAWAY BROTHERS, INC	c EIN-PN 59-3833415-001
a	Plan name	EARLY LEARNING INDIANA, INC. 401(K) PLAN	
b	Name of plan sponsor	EARLY LEARNING INDIANA INC.	c EIN-PN 35-0888763-002
a	Plan name	ELECTRONIC POWER SYSTEMS INC 401K PROFIT SHARING PLAN TRUST	
b	Name of plan sponsor	ELECTRONIC POWER SYSTEMS, INC.	c EIN-PN 47-0881349-001
a	Plan name	ELITE MECHANICAL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ELITE MECHANICAL, INC.	c EIN-PN 99-0320681-001
a	Plan name	EMERGENCY PHYSICIANS OF NORTHWEST OHIO, INC.	
b	Name of plan sponsor	EMERGENCY PHYSICIANS OF NORTHWEST OHIO, INC.	c EIN-PN 81-0547599-003
a	Plan name	EMPLOYEE BENEFIT PLAN OF WESTBAY COMMUNITY ACTION, INC.	
b	Name of plan sponsor	WESTBAY COMMUNITY ACTION, INC.	c EIN-PN 05-0311985-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name EMPLOYEES' PROFIT SHARING PLAN AND TRUST OF BOCH ENTERPRISES	
b	Name of plan sponsor BOCH ENTERPRISES	c EIN-PN 04-2050016-001
a	Plan name EMPLOYSHARE, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EMPLOYSHARE, INC.	c EIN-PN 34-1832544-002
a	Plan name EMPLOYSHARE, INC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor THE FINWAY GROUP	c EIN-PN 42-1468222-010
a	Plan name EMPOWERME WELLNESS, LLC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor EMPOWERME WELLNESS, LLC	c EIN-PN 82-1906428-002
a	Plan name END2END SOLUTION, LLC 401(K) PLAN	
b	Name of plan sponsor END2END SOLUTION, LLC	c EIN-PN 82-2049495-001
a	Plan name ESCAPE LODGING, LLC 401(K) PLAN	
b	Name of plan sponsor ESCAPE LODGING, LLC	c EIN-PN 93-1328932-001
a	Plan name EVERTRUE, INC. 401(K) PLAN	
b	Name of plan sponsor EVERTRUE INC.	c EIN-PN 90-0810465-002
a	Plan name EXCEPTIONAL PARENTS UNLIMITED PROFIT SHARING PLAN	
b	Name of plan sponsor EXCEPTIONAL PARENTS UNLIMITED	c EIN-PN 77-0263702-001
a	Plan name FARTHER FINANCE, INC. 401(K) PLAN	
b	Name of plan sponsor FARTHER FINANCE, INC	c EIN-PN 83-4348882-001
a	Plan name FIRST METHODIST MONROE 403(B)9 PLAN	
b	Name of plan sponsor FIRST METHODIST MONROE	c EIN-PN 92-1406666-001
a	Plan name FIRST NATIONAL BANK OF SYCAMORE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor FIRST NATIONAL BANK OF SYCAMORE	c EIN-PN 34-4370555-002
a	Plan name FLUIDMASTER, INC. SAVINGS PLAN	
b	Name of plan sponsor FLUIDMASTER, INC.	c EIN-PN 95-1942465-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	FLUXX LABS, INC. 401(K) PLAN	
b	Name of plan sponsor	FLUXX LABS, INC.	c EIN-PN 47-3953732-001
a	Plan name	FOCKE & CO., INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	FOCKE & CO., INC.	c EIN-PN 22-2288745-001
a	Plan name	FORWARD IN FAITH, LLC.	
b	Name of plan sponsor	FORWARD IN FAITH, LLC.	c EIN-PN 85-4400903-001
a	Plan name	FRONTIER ELECTRIC OF WASHINGTON, INC. 401(K) PLAN	
b	Name of plan sponsor	FRONTIER ELECTRIC OF WASHINGTON, INC.	c EIN-PN 91-1456222-001
a	Plan name	FSI, INC. 401(K) PLAN	
b	Name of plan sponsor	FSI, INC	c EIN-PN 62-1552567-101
a	Plan name	G&J TRUCK SALES, INC. 401(K) PLAN	
b	Name of plan sponsor	G & J TRUCK SALES, INC	c EIN-PN 77-0394472-001
a	Plan name	GALLOWAY & COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	GALLOWAY & COMPANY, INC.	c EIN-PN 84-1072642-001
a	Plan name	GARDNER 401(K) PLAN FOR AFSCME LOCAL 101 REPRESENTED EMPLOYEES	
b	Name of plan sponsor	GARDNER FAMILY HEALTH NETWORK, INC	c EIN-PN 94-1743078-005
a	Plan name	GARDNER 401(K) PLAN FOR NON-UNION EMPLOYEES	
b	Name of plan sponsor	GARDNER FAMILY HEALTH NETWORK, INC	c EIN-PN 94-1743078-004
a	Plan name	GB MACHINE 401(K) PLAN	
b	Name of plan sponsor	GB MACHINE, LLC	c EIN-PN 93-4227565-001
a	Plan name	GEO OWL LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	GEO OWL LLC	c EIN-PN 46-2832568-001
a	Plan name	GEO. M. MARTIN COMPANY SECTION 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	GEO. M. MARTIN COMPANY	c EIN-PN 94-1379226-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name GFHN UNION UAPD 401(K) PLAN	
b	Name of plan sponsor GARDNER FAMILY HEALTH NETWORK	c EIN-PN 94-1743078-007
a	Plan name GILL FAMILY MEDICINE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GILL FAMILY MEDICINE, PC	c EIN-PN 63-0968329-001
a	Plan name GLOBALED SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor GLOBALED SOLUTIONS INC. / PBC	c EIN-PN 45-2042705-001
a	Plan name GMI COMPANIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GMI COMPANIES, INC.	c EIN-PN 31-0895928-001
a	Plan name GODBERSEN-SMITH CONSTRUCTION CO. 401(K) PS PL	
b	Name of plan sponsor GOMACO CORP	c EIN-PN 42-0823217-001
a	Plan name GRATITUDE WITH AN ATTITUDE 401(K) PLAN	
b	Name of plan sponsor BENEFIT PLANS PLUS, LLC	c EIN-PN 43-1829594-001
a	Plan name GREAT LAKES NEUROSURGICAL ASSOCIATES, P.C. PROFIT SHARING AND RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor GREAT LAKES NEUROSURGICAL ASSOCIATES, P.C.	c EIN-PN 38-2702183-001
a	Plan name GREENEVILLE OIL & PETROLEUM, INC.	
b	Name of plan sponsor GREENEVILLE OIL & PETROLEUM, INC.	c EIN-PN 62-1552776-002
a	Plan name HAGOOD HOMES INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor HAGOOD HOMES INC.	c EIN-PN 56-1965580-001
a	Plan name HAMILTON SAFE GROUP 401(K) PLAN	
b	Name of plan sponsor HAMILTON SAFE CO.	c EIN-PN 31-0729027-002
a	Plan name HANFORD SAND & GRAVEL, INC. 401(K) PLAN	
b	Name of plan sponsor HANFORD SAND & GRAVEL, INC.	c EIN-PN 94-2282138-001
a	Plan name HANKINS PLASTIC SURGERY 401(K) PLAN	
b	Name of plan sponsor HANKINS PLASTIC SURGERY	c EIN-PN 26-4281396-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name HAPCO, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HAPCO, INC.	c EIN-PN 34-1314175-002
a	Plan name HAWTHORNE PARTNERS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HAWTHORNE PARTNERS, INC.	c EIN-PN 25-1850557-001
a	Plan name HELLERMANNTYTON CORPORATION 401(K) RETIREMENT AND PROFIT SHARING PLAN	
b	Name of plan sponsor HELLERMANNTYTON CORPORATION	c EIN-PN 39-1154824-001
a	Plan name HIGGINBOTHAM PEP	
b	Name of plan sponsor THE FINWAY GROUP	c EIN-PN 42-1468222-011
a	Plan name HM LOPES, LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor HM LOPES	c EIN-PN 82-5253361-001
a	Plan name HOLZ & HENRY, INC. 401(K) PLAN	
b	Name of plan sponsor HOLZ & HENRY, INC.	c EIN-PN 23-1738342-001
a	Plan name HOPEWELL FUND 401(K) PLAN	
b	Name of plan sponsor HOPEWELL FUND	c EIN-PN 47-3681860-001
a	Plan name HUGHES USA, INC. 401(K) PLAN	
b	Name of plan sponsor HUGHES USA INC.	c EIN-PN 83-1084513-001
a	Plan name IDEA AUTO GROUP 401(K) PLAN	
b	Name of plan sponsor IDEA AUTO GROUP, LLC	c EIN-PN 92-1263510-001
a	Plan name IMS RETIREMENT PLAN	
b	Name of plan sponsor INTERNAL MEDICINE SPECIALISTS MEDICAL GROUP, INC	c EIN-PN 37-1712330-001
a	Plan name INFORMATION TODAY, INC. & ITS AFFILIATES 401(K) PLAN	
b	Name of plan sponsor INFORMATION TODAY, INC.	c EIN-PN 22-2327396-001
a	Plan name INNOVATIVE MEDICAL SYSTEMS, INC.	
b	Name of plan sponsor INNOVATIVE MEDICAL SYSTEMS, INC.	c EIN-PN 86-0907769-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	INSPIRED RESULTS, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	INSPIRED RESULTS, INC.	c EIN-PN 93-0756550-001
a	Plan name	ITV US HOLDINGS INC. 401(K) PLAN & TRUST	
b	Name of plan sponsor	ITV US HOLDINGS, INC.	c EIN-PN 43-2115900-001
a	Plan name	IVY REALTY SERVICES, LLC 401(K) PS PLAN	
b	Name of plan sponsor	IVY REALTY SERVICES, LLC	c EIN-PN 20-1826316-001
a	Plan name	JAIN AMERICA HOLDINGS, INC. 401(K) PLAN	
b	Name of plan sponsor	JAIN AMERICA HOLDINGS LLC	c EIN-PN 81-1519531-001
a	Plan name	JARRETT ENTERPRISES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	BILL JARRETT FORD, INC.	c EIN-PN 59-1637589-001
a	Plan name	JMG SECURITY SYSTEMS, INC. EMPLOYEES' 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	JMG SECURITY SYSTEMS, INC.	c EIN-PN 33-0298100-001
a	Plan name	JR MERIT ADMINISTRATION 401(K) PLAN	
b	Name of plan sponsor	JR MERIT, INC.	c EIN-PN 91-1803313-002
a	Plan name	JUAN A. MANTILLA, M.D., P.A. 401(K) PLAN	
b	Name of plan sponsor	JUAN A. MANTILLA, M.D., P.A.	c EIN-PN 04-3721515-001
a	Plan name	KEANE & BEANE, P.C. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	KEANE & BEANE, P.C.	c EIN-PN 13-3026461-001
a	Plan name	KEYSTONE CONVEYOR CORPORATION 401(K) P/S PLAN	
b	Name of plan sponsor	KEYSTONE CONVEYOR CORPORATION	c EIN-PN 41-1755855-001
a	Plan name	KEYWORDS US HOLDINGS, INC. 401(K) P/S PLAN	
b	Name of plan sponsor	KEYWORDS US HOLDINGS, INC.	c EIN-PN 61-1859078-001
a	Plan name	KINNEY MANUFACTURING 401(K) PLAN	
b	Name of plan sponsor	KINNEY MANUFACTURING, LLC	c EIN-PN 45-2976898-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	KUPFERLE, LLC 401(K) PLAN	
b	Name of plan sponsor	KUPFERLE, LLC	c EIN-PN 92-1245064-001
a	Plan name	LAC DU FLAMBEAU CHIPPEWA HOUSING AUTHORITY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	LAC DU FLAMBEAU CHIPPEWA HOUSING AUTHORITY	c EIN-PN 39-1051019-001
a	Plan name	LANDSCAPE DESIGN SERVICES, INC. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	LANDSCAPE DESIGN SERVICES, INC.	c EIN-PN 38-2056069-001
a	Plan name	LCM ARCHITECTS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	LCM ARCHITECTS, LLC	c EIN-PN 36-4078383-001
a	Plan name	LEWIS & ROBERTS, PLLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LEWIS & ROBERTS, PLLC	c EIN-PN 56-2022568-001
a	Plan name	LINTERN CORPORATION 401(K) SAVINGS PLAN	
b	Name of plan sponsor	LINTERN CORPORATION	c EIN-PN 34-0361330-003
a	Plan name	LODGE MANUFACTURING COMPANY DEFERRED PROFIT SHARING PLAN	
b	Name of plan sponsor	LODGE MANUFACTURING COMPANY	c EIN-PN 62-0273720-002
a	Plan name	LUDMAN INDUSTRIES 401(K) PLAN	
b	Name of plan sponsor	LUDMAN INDUSTRIES	c EIN-PN 80-0695276-001
a	Plan name	LYDIG CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor	LYDIG CONSTRUCTION, INC.	c EIN-PN 91-0672331-001
a	Plan name	LYRIC FOUNDATION, INC. RETIREMENT PLAN	
b	Name of plan sponsor	LYRIC FOUNDATION, INC.	c EIN-PN 52-6080460-001
a	Plan name	MARK AUTO GROUP 401(K) PLAN	
b	Name of plan sponsor	MARK ENTERPRISES CAR COMPANY, II LLC	c EIN-PN 86-0967171-001
a	Plan name	MARY'S TACK & FEED 401K PLAN	
b	Name of plan sponsor	RANCHO TRADE, INC	c EIN-PN 95-3414522-002

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	MAYFRAN INTERNATIONAL, INC. RETIREMENT SAVINGS PLAN
b	Name of plan sponsor	MAYFRAN INTERNATIONAL, INC.
c	EIN-PN	48-0959871-001
a	Plan name	MCR LABS 401(K) PLAN
b	Name of plan sponsor	MCR LABS LLC
c	EIN-PN	46-3124709-001
a	Plan name	MERCY MULTIPLIED 401(K) PLAN
b	Name of plan sponsor	MERCY MULTIPLIED AMERICA, INC.
c	EIN-PN	72-0973419-001
a	Plan name	MERUELO GROUP 401(K) PLAN AND TRUST
b	Name of plan sponsor	MERUELO GROUP LLC
c	EIN-PN	90-1017707-001
a	Plan name	MORRIS COUPLING COMPANY PROFIT SHARING PLAN
b	Name of plan sponsor	MORRIS COUPLING COMPANY
c	EIN-PN	25-0901157-001
a	Plan name	MORTIMER LUMBER 401(K) PLAN
b	Name of plan sponsor	MORTIMER & SON LUMBER CO., INC.
c	EIN-PN	38-1736310-001
a	Plan name	MYCOMPLIANCEOFFICE, INC. 401(K) PLAN 2
b	Name of plan sponsor	MYCOMPLIANCEOFFICE TECHNOLOGIES INC.
c	EIN-PN	68-0609697-001
a	Plan name	MYERS CARPET COMPANY, INC. 401(K) PLAN
b	Name of plan sponsor	MYERS CARPET CO., INC
c	EIN-PN	58-0941550-001
a	Plan name	NAMRED, LLC EMPLOYEES PROFIT SHARING 401(K) PLAN
b	Name of plan sponsor	NAMRED, LLC
c	EIN-PN	03-0462594-001
a	Plan name	NATIONAL AUTOMOBILE DEALERS ASSN 401(K) PLAN
b	Name of plan sponsor	NATIONAL AUTOMOBILE DEALERS ASSOCIATION
c	EIN-PN	53-0114725-001
a	Plan name	NATIONAL OIL AND GAS, INC. EMPLOYEES' SAVINGS PLAN
b	Name of plan sponsor	NATIONAL OIL & GAS INC.
c	EIN-PN	35-0540872-002
a	Plan name	NEPHROLOGY CONSULTANTS, P.A. 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	NEPHROLOGY CONSULTANTS, P.A.
c	EIN-PN	20-2122858-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	NEW VENTURE FUND 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	NEW VENTURE FUND	c EIN-PN 20-5806345-001
a	Plan name	NORCAL RENTAL GROUP 401(K) PLAN	
b	Name of plan sponsor	NORCAL RENTAL GROUP	c EIN-PN 94-3263537-001
a	Plan name	NORMAN PAPER AND FOAM 401(K) PLAN	
b	Name of plan sponsor	NORMAN PAPER AND FOAM COMPANY, INC.	c EIN-PN 95-3502638-001
a	Plan name	NORTH SHORE BANK 401(K) PLAN	
b	Name of plan sponsor	NORTH SHORE BANK OF COMMERCE	c EIN-PN 41-0138390-002
a	Plan name	OEG 401(K) PLAN	
b	Name of plan sponsor	OEG, LLC	c EIN-PN 30-0466047-001
a	Plan name	OEP 401(K) PLAN	
b	Name of plan sponsor	ORAZEN EXTRUDED POLYMERS	c EIN-PN 45-0830121-001
a	Plan name	ONE PLANET GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	ONE PLANET GROUP, LLC	c EIN-PN 85-1221674-001
a	Plan name	ONEDIGITAL POOLED EMPLOYER PLAN	
b	Name of plan sponsor	PLAN COMPLIANCE SERVICES, INC.	c EIN-PN 59-3708427-003
a	Plan name	ORANGE COVE - SANGER CITRUS ASS. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	KLINK ORANGE COVE CITRUS	c EIN-PN 94-2215652-001
a	Plan name	OXBOW MANAGEMENT LLC 401(K) PLAN	
b	Name of plan sponsor	OXBOW MANAGEMENT LLC	c EIN-PN 88-3361305-001
a	Plan name	PEI DOWNEAST TOYOTA 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DOWNEAST TOYOTA	c EIN-PN 01-0420117-001
a	Plan name	PERSPECTUS ACHITECTURE, LLC 401(K) PLAN	
b	Name of plan sponsor	PERSPECTUS ARCHITECTURE, LLC	c EIN-PN 03-0484121-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name PETVET CARE CENTERS MANAGEMENT, LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PETVET CARE CENTERS MANAGEMENT, LLC	c EIN-PN 45-4459242-001
a	Plan name PHALEN STEEL CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor PHALEN STEEL CONSTRUCTION COMPANY	c EIN-PN 36-2478301-001
a	Plan name PLEASANT RIVER LUMBER COMPANY 401(K)	
b	Name of plan sponsor PLEASANT RIVER LUMBER COMPANY	c EIN-PN 01-0465420-001
a	Plan name POWER 401K PLAN	
b	Name of plan sponsor PA ORGANIZATION FOR WOMEN IN EARLY RECOVERY	c EIN-PN 25-1643651-002
a	Plan name POWER PARTS INTERNATIONAL, INC. 401(K) PLAN	
b	Name of plan sponsor POWER PARTS INTERNATIONAL INC	c EIN-PN 39-1612713-001
a	Plan name PRECISION ASSOCIATES, INC. 401(K) PLAN	
b	Name of plan sponsor PRECISION ASSOCIATES, INC.	c EIN-PN 41-0763581-001
a	Plan name PREFERRED BUSINESS SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor PREFERRED BUSINESS SYSTEMS, INC.	c EIN-PN 22-3511726-001
a	Plan name PRIORITY DESIGNS 401K PROFIT SHARING PLAN	
b	Name of plan sponsor PRIORITY DESIGNS	c EIN-PN 31-1345997-001
a	Plan name PRO EM OPERATIONS, LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor PRO EM OPERATIONS, LLC	c EIN-PN 30-0950767-001
a	Plan name PROFESSIONAL PRINT & MAIL, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PROFESSIONAL PRINT AND MAIL, INC.	c EIN-PN 77-0365808-001
a	Plan name PTH & AB STAFFING 401(K) PLAN	
b	Name of plan sponsor PRIME TIME HEALTHCARE, LLC	c EIN-PN 45-4687406-001
a	Plan name QSC, LLC 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor QSC, LLC	c EIN-PN 95-3412527-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	R RANCH MARKET, INC. 401(K) PLAN	
b	Name of plan sponsor	R RANCH MARKET, INC.	c EIN-PN 95-3372605-002
a	Plan name	R.L. LIPTON DISTRIBUTING COMPANY COLLECTIVE BARGAINING 401(K) PLAN	
b	Name of plan sponsor	R. L. LIPTON DISTRIBUTING COMPANY	c EIN-PN 34-0978334-002
a	Plan name	R.L. LIPTON DISTRIBUTING COMPANY EMPLOYEES PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	R. L. LIPTON DISTRIBUTING COMPANY	c EIN-PN 34-0978334-001
a	Plan name	R.W. GRIFFIN FEED SEED & FERTILIZER 401(K) PLAN	
b	Name of plan sponsor	R.W. GRIFFIN FEED SEED & FERTILIZER, INC.	c EIN-PN 58-1095836-001
a	Plan name	READY ELECTRIC CO., INC. PST	
b	Name of plan sponsor	READY ELECTRIC COMPANY, INC.	c EIN-PN 61-0517797-001
a	Plan name	READY MADE TRUSSES AND BUILDERS' SUPPLY, LLC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	READY MADE TRUSSES AND BUILDERS SUPPLY, LLC	c EIN-PN 88-3727869-001
a	Plan name	REDDING DERMATOLOGY MEDICAL GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	REDDING DERMATOLOGY MEDICAL GROUP, INC.	c EIN-PN 33-0735011-001
a	Plan name	REGENCY INVESTMENT ADVISORS RETIREMENT PLAN	
b	Name of plan sponsor	REGENCY INVESTMENT ADVISORS	c EIN-PN 77-0344391-001
a	Plan name	REVIVA INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	REVIVA, INC.	c EIN-PN 41-0840959-002
a	Plan name	RICHARD HEATH & ASSOCIATES, INC. 401(K) PSP	
b	Name of plan sponsor	RICHARD HEATH & ASSOCIATES, INC.	c EIN-PN 94-2625839-001
a	Plan name	RITCHIE LAKELAND OIL RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	RITCHIE LAKELAND OIL CO. INC.	c EIN-PN 39-1512513-001
a	Plan name	RIVERMONT COLLEGIATE 401(K) PLAN	
b	Name of plan sponsor	RIVERMONT COLLEGIATE	c EIN-PN 42-0703279-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name RIVERSIDE DENTAL GROUP AND DENTAL ASSOCIATE OFFICES 401(K) PLAN	
b	Name of plan sponsor ELIAS, ELLIOTT, LAMPASI, FEHN, HARRIS, AND NGUYEN A DENTAL PRATICE, I	c EIN-PN 33-0874160-001
a	Plan name ROBERT L. LIPTON, INC. DBA LIPTON TOYOTA EMPLOYEES PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor ROBERT L. LIPTON, INC. DBA LIPTON TOYOTA	c EIN-PN 65-0131357-001
a	Plan name ROCKSIDE EQUIPMENT COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ROCKSIDE EQUIPMENT COMPANY, INC.	c EIN-PN 34-1055492-001
a	Plan name RODELCO ELECTRONICS CORP. 401K SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor RODELCO ELECTRONICS CORP.	c EIN-PN 11-2297295-001
a	Plan name ROGERS DRUG STORES, INC. NEW COMPARABILITY PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor ROGERS DRUG STORES, INC.	c EIN-PN 20-8201738-002
a	Plan name ROLLER DERBY SKATE CORP. SAVINGS PLAN	
b	Name of plan sponsor ROLLER DERBY SKATE CORP.	c EIN-PN 37-0676319-001
a	Plan name SAATVA RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor WHITESTONE HOME FURNISHINGS, LLC	c EIN-PN 32-0526953-001
a	Plan name SAFETY VISION LLC 401(K) PLAN	
b	Name of plan sponsor SAFETY VISION LLC	c EIN-PN 76-0390640-001
a	Plan name SAN FRANCISCO BALLET ASSOCIATION RETIREMENT PLAN	
b	Name of plan sponsor SAN FRANCISCO BALLET ASSOCIATION	c EIN-PN 94-1415298-002
a	Plan name SARGENT METAL FABRICATORS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SARGENT METAL	c EIN-PN 57-0632244-001
a	Plan name SCELZI ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCELZI ENTERPRISES, INC.	c EIN-PN 77-0195640-001
a	Plan name SCHIRM USA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SCHIRM USA, INC.	c EIN-PN 75-2595474-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name SCHUMANN PRINTERS, INC. RETIREMENT PROGRAM	
b	Name of plan sponsor SCHUMANN PRINTERS, INC.	c EIN-PN 39-1078568-001
a	Plan name SCHWAB-EATON, PA 401(K) PLAN	
b	Name of plan sponsor SCHWAB-EATON, P.A.	c EIN-PN 48-0880169-001
a	Plan name SEIDEL TANNING CORPORATION SAVINGS AND RETIREMENT PLAN	
b	Name of plan sponsor SEIDEL TANNING CORPORATION	c EIN-PN 39-0744143-002
a	Plan name SERENITY LIVING CENTER, INC. 401(K) PLAN	
b	Name of plan sponsor SERENITY LIVING CENTER	c EIN-PN 46-1128000-001
a	Plan name SHARKSKIN FINISHINGS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SHARKSKIN FINISHINGS	c EIN-PN 16-1645059-001
a	Plan name SHELCO, LLC 401(K) PLAN	
b	Name of plan sponsor SHELCO, LLC	c EIN-PN 56-1190111-001
a	Plan name SHORT AND PAULK SUPPLY COMPANY 401(K) PLAN	
b	Name of plan sponsor SHORT AND PAULK SUPPLY COMPANY	c EIN-PN 58-0627731-001
a	Plan name SLEEPY HOLLOW AUTO GROUP 401(K) PLAN	
b	Name of plan sponsor SLEEPY HOLLOW CHEVROLET BUICK GMC INC.	c EIN-PN 39-1930264-001
a	Plan name SMITH INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor SMITH INDUSTRIES, INC.	c EIN-PN 27-2803061-001
a	Plan name SOLTIS EZ 401K	
b	Name of plan sponsor MOMENTA, INC.	c EIN-PN 85-4166502-001
a	Plan name SORREN 401(K) PLAN	
b	Name of plan sponsor SORREN, INC.	c EIN-PN 45-2904270-001
a	Plan name SOUTHERN CHAMPION TRAY LP 401K PLAN	
b	Name of plan sponsor SOUTHERN CHAMPION TRAY L P	c EIN-PN 62-0452437-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SOUTHWEST IDAHO ENT & SURGERY CENTER EMPLOYEE 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTHWEST IDAHO ENT & SOUTHWEST IDAHO SURGERY CENTER, INC.	c EIN-PN 84-1394139-002
a	Plan name SOUTHWEST STEEL CASTING CO. 401(K) PLAN	
b	Name of plan sponsor SOUTHWEST STEEL CASTING CO.	c EIN-PN 75-2940613-001
a	Plan name SPENCER ENTERPRISES, INC. 401(K) PLAN	
b	Name of plan sponsor SPENCER ENTERPRISES, INC.	c EIN-PN 94-2396533-001
a	Plan name SPERBER LANDSCAPE COMPANIES AND SUBSIDIARIES 401(K) PLAN	
b	Name of plan sponsor SPERBER LANDSCAPE COMPANIES, LLC	c EIN-PN 82-4405778-001
a	Plan name ST. ANDREW'S SCHOOL INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ST. ANDREWS SCHOOL, INC.	c EIN-PN 94-1523245-001
a	Plan name STAR FURNITURE 401(K) PLAN	
b	Name of plan sponsor STAR FURNITURE COMPANY	c EIN-PN 74-0920070-001
a	Plan name STATE INDUSTRIAL PRODUCTS SAVINGS AND INVESTMENT PLAN AND TRUST	
b	Name of plan sponsor STATE INDUSTRIAL PRODUCTS	c EIN-PN 34-0552740-001
a	Plan name STINGRAY BOAT COMPANY 401(K) PLAN	
b	Name of plan sponsor PFC, INC. D/B/A STINGRAY BOAT COMPANY	c EIN-PN 57-0682030-001
a	Plan name SUBURBAN HEMATOLOGY-ONCOLOGY ASSOCIATES, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor SUBURBAN HEMATOLOGY-ONCOLOGY ASSOCIATES, P.C.	c EIN-PN 58-2590501-001
a	Plan name SUMMER HILL 401(K) SAVINGS PLAN	
b	Name of plan sponsor SUMMER HILL, INC.	c EIN-PN 31-1185783-001
a	Plan name SUN AMERICA LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SUN AMERICA LLC	c EIN-PN 47-2960116-002
a	Plan name SUN GRO HOLDINGS, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SUN GRO HOLDINGS INC.	c EIN-PN 02-0550339-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name T&T ELECTRIC 401(K) PLAN	
b	Name of plan sponsor T&T ELECTRIC CO. INC.	c EIN-PN 84-0719869-001
a	Plan name TAKE2 CONSULTING, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor TAKE2 CONSULTING, LLC	c EIN-PN 47-2507011-001
a	Plan name TENNESSE TUBEBENDING PRODUCTS PROFIT SHARING PLAN	
b	Name of plan sponsor TENNESSEE TUBEBENDING PRODUCTS	c EIN-PN 25-1841598-004
a	Plan name THE BEACON LIGHT & SUPPLY CO., INC. 401(K) PLAN	
b	Name of plan sponsor THE BEACON LIGHT & SUPPLY COMPANY, INC.	c EIN-PN 06-0691805-002
a	Plan name THE CAVENDER EMPLOYEE CAPITAL ACCUMULATION PLAN	
b	Name of plan sponsor CAVENDER OLDSMOBILE CO., INC.	c EIN-PN 74-1619391-001
a	Plan name THE DDC 401(K) PLAN	
b	Name of plan sponsor DONORA DOCK COMPANY	c EIN-PN 47-1865902-001
a	Plan name THE KIECKER CORPORATION 401(K) PLAN	
b	Name of plan sponsor THE KIECKER CORPORATION	c EIN-PN 45-5580045-001
a	Plan name THE LIBERTY COMPANY 401(K) PLAN	
b	Name of plan sponsor THE LIBERTY COMPANY INSURANCE BROKERS, INC.	c EIN-PN 27-0063026-001
a	Plan name THE OBSTETRICAL ASSOCIATES 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor OBSTETRICAL ASSOCIATES, INC.	c EIN-PN 04-2438726-001
a	Plan name THE OPRW 401(K) PLAN	
b	Name of plan sponsor PROFORMANCE ASSOCIATES, INC.	c EIN-PN 68-0007693-003
a	Plan name THE PIEDMONT GROUP 401(K) PLAN	
b	Name of plan sponsor THE PIEDMONT GROUP OF ATLANTA, LLC	c EIN-PN 46-0782308-001
a	Plan name THE PRAIRIE PLANS RETIREMENT PEP	
b	Name of plan sponsor THE FINWAY GROUP	c EIN-PN 42-1468222-027

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE REESE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	THE REESE GROUP, INC.	c EIN-PN 62-1077825-001
a	Plan name	THE WELD TRUST 401(K) PLAN	
b	Name of plan sponsor	THE WELD TRUST 401(K) PLAN	c EIN-PN 74-2358522-002
a	Plan name	THOMAS PLASTIC MACHINERY, INC. 401(K) PLAN	
b	Name of plan sponsor	THOMAS PLASTIC MACHINERY INC	c EIN-PN 35-1925080-001
a	Plan name	THRIVEMORE ADVISORS, LLC 401(K) PLAN	
b	Name of plan sponsor	THRIVEMORE ADVISORS,LLC	c EIN-PN 87-2418174-001
a	Plan name	TOBY SEXTON TIRE COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	TOBY SEXTON TIRE COMPANY, INC.	c EIN-PN 58-1030407-001
a	Plan name	TRADEMARK PLASTICS RETIREMENT PLAN	
b	Name of plan sponsor	TRADEMARK PLASTICS, INC.	c EIN-PN 47-3688260-003
a	Plan name	TRANER SMITH & COMPANY 401(K) PLAN	
b	Name of plan sponsor	TRANER SMITH & CO, PLLC	c EIN-PN 91-1657150-001
a	Plan name	TRI 3, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	TRI 3, INC.	c EIN-PN 48-1097531-001
a	Plan name	TRICAL GROUP 401(K) SAVINGS PLAN	
b	Name of plan sponsor	TSS CORPORATE SERVICES, LLC	c EIN-PN 83-3977647-001
a	Plan name	TSC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	TSC 401K	c EIN-PN 41-0955056-001
a	Plan name	TSE INDUSTRIES INC. PROFIT SHARING/401K PLAN	
b	Name of plan sponsor	TSE INDUSTRIES, INC.	c EIN-PN 59-1089552-001
a	Plan name	TWIN CITIES HABITAT FOR HUMANITY, INC. 401(K) PLAN	
b	Name of plan sponsor	TWIN CITIES HABITAT FOR HUMANITY, INC.	c EIN-PN 36-3363171-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	TY, INC. EMPLOYEES 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	TY, INC.	c EIN-PN 58-1666131-001
a	Plan name	UHA 401K PLAN	
b	Name of plan sponsor	UNIVERSITY HEALTH ALLIANCE	c EIN-PN 99-0263440-001
a	Plan name	ULTRA GRO, LLC 401(K) PLAN	
b	Name of plan sponsor	ULTRA GRO, LLC	c EIN-PN 26-1819803-002
a	Plan name	UNITED FIRE PROTECTION CORPORATION 401(K) PLAN A	
b	Name of plan sponsor	UNITED FIRE PROTECTION CORPORATION	c EIN-PN 22-2882889-001
a	Plan name	UNITED FIRE PROTECTION CORPORATION 401(K) PLAN B	
b	Name of plan sponsor	UNITED FIRE PROTECTION CORPORATION	c EIN-PN 22-2882889-002
a	Plan name	USA ROLLER CHAIN & SPROCKETS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SCREAMN EXPRESS METAL WORKS, INC. USA ROLLER CHAIN & SPROCKETS	c EIN-PN 26-3954867-001
a	Plan name	UTAH COUNTY PUBLIC DEFENDERS ASSOCIATION 401(K) PLAN	
b	Name of plan sponsor	UTAH COUNTY PUBLIC DEFENDERS ASSOCIATION	c EIN-PN 87-0511100-001
a	Plan name	VALLEY TIRE RETIREMENT PLAN	
b	Name of plan sponsor	VALLEY TIRE COMPANY, INC.	c EIN-PN 25-1370485-001
a	Plan name	VERNIS & BOWLING, P.A. 401K PLAN	
b	Name of plan sponsor	VERNIS & BOWLING, P.A.	c EIN-PN 65-0299372-001
a	Plan name	VETCELERATOR LLC 401(K) PLAN	
b	Name of plan sponsor	VETCELERATOR LLC	c EIN-PN 88-2041264-001
a	Plan name	VFC 401(K) PLAN	
b	Name of plan sponsor	LIGHTNING PROTECTION SERVICES, LLC DBA VFC	c EIN-PN 20-5533182-001
a	Plan name	VICTORY CDJR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VICTORY AUTOMOTIVE GROUP	c EIN-PN 46-5336631-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	VIRTUS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VIRTUS 401(K) PROFIT SHARING PLAN	c EIN-PN 46-3745376-001
a	Plan name	VISION 401(K) PLAN	
b	Name of plan sponsor	401(K) ADMINISTRATION MANAGEMENT PROGRAM, INC.	c EIN-PN 85-4019239-003
a	Plan name	VISTA BANCSHARES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VISTA BANCSHARES, INC.	c EIN-PN 75-1940062-001
a	Plan name	VVG RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	VVG RETIREMENT SAVINGS PLAN	c EIN-PN 86-3119853-001
a	Plan name	WALKER ELLIOTT 401(K) PLAN	
b	Name of plan sponsor	WALKER ELLIOTT, LP	c EIN-PN 26-3925998-001
a	Plan name	WARREN - HANKS CONSTRUCTION COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	WARREN - HANKS CONSTRUCTION COMPANY	c EIN-PN 58-2129491-001
a	Plan name	WATERTOWN PIGGLY WIGGLY RETIREMENT PLAN	
b	Name of plan sponsor	CHRISTIAN BROTHERS OF WATERTOWN, LLC	c EIN-PN 20-8387018-001
a	Plan name	WENSPOK COMPANIES 401(K) PLAN	
b	Name of plan sponsor	WENSPOK RESOURCES LLC	c EIN-PN 46-1396496-001
a	Plan name	WEST VIRGINIA SPINE CENTER 401K RETIREMENT PLAN	
b	Name of plan sponsor	WEST VIRGINIA SPINE CENTER PLLC	c EIN-PN 87-2562107-001
a	Plan name	WINDWARD FUND 401(K) PLAN	
b	Name of plan sponsor	WINDWARD FUND	c EIN-PN 47-3522162-001
a	Plan name	WORCESTER COUNTY 401(A) PLAN	
b	Name of plan sponsor	WORCESTER COUNTY GOVERNMENT	c EIN-PN 52-6001064-001
a	Plan name	WORCESTER COUNTY DEFERRED COMPENSATION PLAN 457	
b	Name of plan sponsor	WORCESTER COUNTY GOVERNMENT	c EIN-PN 52-6001064-002

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name	WRIGHT CHILDCARE SOLUTIONS LLC 401(K) PROFIT SHARING PLAN	
b Name of plan sponsor	WRIGHT CHILDCARE SOLUTIONS LLC	c EIN-PN 46-2902442-001

a Plan name		
b Name of plan sponsor		c EIN-PN

a Plan name		
b Name of plan sponsor		c EIN-PN

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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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan T. ROWE PRICE RETIREMENT BLEND SELECT TRUST 2025	B Three-digit plan number (PN) ▶ 737
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 38-7271343

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

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)	344476
		971660
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	
(2) U.S. Government securities	1c(2)	
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	118474658
(10) Value of interest in pooled separate accounts	1c(10)	372275604
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	
(15) Other	1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	118819134	373247264
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	189451
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	392964	943125
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	392964	1132576
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	118426170	372114688

Part II Income and Expense Statement

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

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

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	18871343
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	
c Other income	2c	
d Total income. Add all income amounts in column (b) and enter total	2d	18871343

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	
(2) To insurance carriers for the provision of benefits	2e(2)	
(3) Other	2e(3)	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	0
f Corrective distributions (see instructions)	2f	
g Certain deemed distributions of participant loans (see instructions)	2g	
h Interest expense	2h	
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	
(2) Contract administrator fees	2i(2)	
(3) Recordkeeping fees	2i(3)	
(4) IQPA audit fees	2i(4)	11553
(5) Investment advisory and investment management fees	2i(5)	397601
(6) Bank or trust company trustee/custodial fees	2i(6)	101133
(7) Actuarial fees	2i(7)	
(8) Legal fees	2i(8)	
(9) Valuation/appraisal fees	2i(9)	
(10) Other trustee fees and expenses	2i(10)	
(11) Other expenses	2i(11)	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	510287
j Total expenses. Add all expense amounts in column (b) and enter total	2j	510287

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	18361056
l Transfers of assets:		
(1) To this plan	2l(1)	332015708
(2) From this plan	2l(2)	96688246

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name:

(2) EIN:

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) This form is filed for a CCT, PSA, DCG or MTIA. (2) It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
e Was this plan covered by a fidelity bond?			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
l Has the plan failed to provide any benefit when due under the plan?			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? Yes No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.