

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 <h1 style="text-align: center;">2024</h1> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) C

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

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

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

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

special extension (enter description)

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

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>T. ROWE PRICE RETIREMENT BLEND SELECT TRUST 2050</u>	1b Three-digit plan number (PN) ▶ <u>742</u> 1c Effective date of plan
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>GREAT GRAY TRUST COMPANY, LLC</u> <u>6725 VIA AUSTI PARKWAY, SUITE 260</u> <u>LAS VEGAS, NV 89119</u>	2b Employer Identification Number (EIN) <u>38-7271348</u> 2c Plan Sponsor's telephone number <u>866-427-6885</u> 2d Business code (see instructions)

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

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

SIGN HERE		Date	
	Signature of plan administrator		Enter name of individual signing as plan administrator
SIGN HERE		Date	
	Signature of employer/plan sponsor		Enter name of individual signing as employer or plan sponsor
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/13/2025</u>	<u>MATT FALCIANI</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 6a(2) 6b 6c 6d 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 2050</u>	B Three-digit plan number (PN) ▶	<u>742</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>38-7271348</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 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>321912</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>27377595</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>35507922</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE INTL BOND TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>30-6304154-001</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>520393</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE INTL EQUITY IND TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>61-6591055-001</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>48782660</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE INTL GROWTH EQ TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-6942416-001</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>12903465</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>T. ROWE PRICE INTL VALUE EQ TRUST</u>		
b Name of sponsor of entity listed in (a): <u>T. ROWE PRICE TRUST COMPANY</u>		
c EIN-PN <u>35-2425742-001</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>14899623</u>

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) 4117443
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) 21633740
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) 1654568
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) 37306909
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) 8703752
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) 9759290
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) 30791
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) 12956179
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) 5934959
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) 10096377

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) 6922192
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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) 5795950
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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) 1037758
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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) 3107922
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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) 85652273
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a Name of MTIA, CCT, PSA, or 103-12 IE: NT COLLECTIVE GOVERNMENT STIF

b Name of sponsor of entity listed in (a): NORTHERN TRUST INVESTMENTS, INC.

c EIN-PN 45-6138589-058	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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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)	
<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	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	ACE ENTITIES, LLC 401(K) PLAN	
b	Name of plan sponsor	ACE ENTITIES, LLC	c EIN-PN 27-2393539-001
a	Plan name	ACORN ENGINEERING COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	ACORN ENGINEERING COMPANY, INC.	c EIN-PN 95-1864304-002
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	AGC, LAS VEGAS CHAPTER 401(K) PLAN	
b	Name of plan sponsor	ASSOCIATED GENERAL CONTRACTORS, INC., LAS VEGAS CHAPTER	c EIN-PN 88-0173225-001

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 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
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 ALDO'S FROZEN FOODS INC. 401(K) PLAN	
b	Name of plan sponsor ALDOS FROZEN FOODS INC.	c EIN-PN 25-1262393-001
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 ALEX PARIS CONTRACTING COMPANY INC. SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALEX E. PARIS CONTRACTING COMPANY	c EIN-PN 25-0934300-003
a	Plan name ALEXANDER BRAO, DDS, PA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ALEXANDER BRAO, DDS, PA	c EIN-PN 84-3308578-001
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 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

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 ANDERSON, MIKOS EMPLOYEES' 401(K) SAVINGS PLAN	
b	Name of plan sponsor ANDERSON, MIKOS ARCHITECTS, LTD.	c EIN-PN 36-3367188-001
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
a	Plan name APOLLON WEALTH MANAGEMENT, LLC 401(K) PLAN	
b	Name of plan sponsor APOLLON WEALTH MANAGEMENT, LLC	c EIN-PN 82-3706323-001
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 ATLANTIS POOLS 401(K) & PSP	
b	Name of plan sponsor ATLANTIS POOLS, INC.	c EIN-PN 20-2059861-001
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 AVM CARES, INC. DBA ADVANCED VETERINARY CARE CENTER EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor AVM CARES, INC. D/B/A ADVANCED VETERINARY CARE CENTER	c EIN-PN 47-4748628-001

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 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 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
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 BETHEL HEIGHTS VINEYARD, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BETHEL HEIGHTS VINEYARD, INC.	c EIN-PN 93-0719624-001
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 BLUE OX ENTERPRISES LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor BLUE OX ENTERPRISES LLC	c EIN-PN 20-2296476-001
a	Plan name BONFIRE FUNDS INC 401(K) PLAN	
b	Name of plan sponsor BONFIRE FUNDS INC	c EIN-PN 46-2315572-001

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 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 BRISTOL ID TECHNOLOGIES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRISTOL GRAPHICS, INC. DBA BRISTOL ID TECHNOLOGIES, INC.	c EIN-PN 16-1423296-001
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
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 CALLIGO (US) INC. 401(K) PLAN AND T	
b	Name of plan sponsor CALLIGO (US) INC.	c EIN-PN 61-1868354-001

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	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	CATALYST MARKETING GROUP, LLC RETIREMENT PLAN	
b	Name of plan sponsor	CATALYST MARKETING GROUP, LLC	c EIN-PN 47-4160345-001
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	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	CHARLOTTESVILLE DENTAL HEALTH PARTNERS, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CHARLOTTESVILLE DENTAL HEALTH PARTNERS, INC.	c EIN-PN 54-1301231-001
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. HOURLY 401(K) PLAN	
b	Name of plan sponsor	CLEVELAND HARDWARE & FORGING CO.	c EIN-PN 34-1028784-006
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

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	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	COASTAL HORIZONS CENTER, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	COASTAL HORIZONS CENTER, INC.	c EIN-PN 56-0950370-001
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	COLLINS SANITARY, LLC 401(K) PLAN	
b	Name of plan sponsor	COLLINS SANITARY, LLC	c EIN-PN 39-1962633-001
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	COMFORT DENTAL OF ANDERSON PC 401(K) PLAN	
b	Name of plan sponsor	COMFORT DENTAL OF ANDERSON PC	c EIN-PN 35-2086990-001
a	Plan name	COMPANION ASSOCIATES INC. 401(K) P/S PLAN	
b	Name of plan sponsor	COMPANION ASSOCIATES INC.	c EIN-PN 58-2351307-001
a	Plan name	COMPANY NURSE, LLC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	COMPANY NURSE LLC	c EIN-PN 86-0888412-001
a	Plan name	CONDUCTIVE GROUP 40(K) PLAN	
b	Name of plan sponsor	CONDUCTIVE GROUP LLC	c EIN-PN 87-0512065-001
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

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	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
a	Plan name	CORRELATION MANAGEMENT, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CORRELATION MANAGEMENT, LLC	c EIN-PN 20-4584639-001
a	Plan name	CRESCENT REAL ESTATE LLC 401(K) PLAN	
b	Name of plan sponsor	CRESCENT REAL ESTATE LLC	c EIN-PN 75-2752117-001
a	Plan name	CREW BUILDERS, INC. 401(K) PLAN	
b	Name of plan sponsor	CREW BUILDERS INC	c EIN-PN 20-5499129-001
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	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

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 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 DIDA HOME, LLC 401(K) PLAN	
b	Name of plan sponsor DIDA HOME, LLC	c EIN-PN 45-3770725-001
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 DRS. HERMAN & MACK, P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor DRS. HERMAN & MACK P.C.	c EIN-PN 45-0375803-001
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 E.J. MILITELLO CONCRETE 401(K) PLAN	
b	Name of plan sponsor E.J. MILITELLO CONCRETE INC.	c EIN-PN 16-1499372-001

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 EAP INDUSTRIES INC. SAFE HARBOR 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor EAP INDUSTRIES, INC	c EIN-PN 25-1249511-002
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 ELDER DEMO LLC EMPLOYEE'S PROFIT SHARING 401K PLAN	
b	Name of plan sponsor ELDER DEMO LLC	c EIN-PN 92-1190284-002
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 DOWNTOWN WOMEN'S CENTER	
b	Name of plan sponsor DOWNTOWN WOMENS CENTER	c EIN-PN 31-1597223-001
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
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 ENTREPRENEUR MEDIA, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ENTREPRENEUR MEDIA, INC.	c EIN-PN 33-0197877-001

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	EPL 401(K) PLAN	
b	Name of plan sponsor	ENERGY PERFORMANCE LIGHTING	c EIN-PN 86-1054818-001
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	FARMERS & MERCHANTS BANK 401(K) PLAN	
b	Name of plan sponsor	FARMERS & MERCHANTS BANK	c EIN-PN 39-0273347-001
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	FETZER ELECTRIC, LLC 401(K) PLAN	
b	Name of plan sponsor	FETZER ELECTRIC, LLC	c EIN-PN 45-4144319-001
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
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

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 FORMATION BIO 401(K) PLAN	
b	Name of plan sponsor TRIALSPARK INC. DBA FORMATION BIO	c EIN-PN 47-1134239-001
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 FOUNDATION DEFENSE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor FOUNDATION DEFENSE SERVICES, INC.	c EIN-PN 92-1861395-001
a	Plan name FRANK WOOD & SON 401K PLAN	
b	Name of plan sponsor FRANK WOOD & SON PLUMBING & ELECTRICAL LLC	c EIN-PN 83-0929533-001
a	Plan name FREEDOM ARC 401K POOLED PLAN	
b	Name of plan sponsor 401(K) FREEDOM INC.	c EIN-PN 45-4454161-011
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 FURTHERED INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor FURTHERED INC	c EIN-PN 37-1535185-001
a	Plan name FUSION MEDIA SYSTEMS 401(K) PLAN	
b	Name of plan sponsor FUSION MEDIA SYSTEMS, LLC	c EIN-PN 26-3187064-001
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

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	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	GARDNER 401(K) PLAN FOR SEIU REPRESENTED EMPLOYEES	
b	Name of plan sponsor	GARDNER FAMILY HEALTH NETWORK	c EIN-PN 94-1743078-006
a	Plan name	GASTON TREE DEBRIS RECYCLING, LLC RETIREMENT PLAN & TRUST.	
b	Name of plan sponsor	GASTON TREE SERVICE	c EIN-PN 59-3691567-001
a	Plan name	GATTI, KELTNER, BIENVENU & MONTESI 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	GATTI, KELTNER, BIENVENU & MONTESI	c EIN-PN 62-1224687-001
a	Plan name	GCOMMERCE SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor	GCOMMERCE SOLUTIONS, LLC	c EIN-PN 20-4731551-001
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
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	GIBBS & FUERST RETIREMENT PLAN	
b	Name of plan sponsor	GIBBS & FUERST LLP	c EIN-PN 33-0873092-001
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	GLOBAL IMMIGRATION PARTNERS, INC. 401(K) PLAN	
b	Name of plan sponsor	GLOBAL IMMIGRATION PARTNERS, INC.	c EIN-PN 26-4750036-001
a	Plan name	GLOBALED SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	GLOBALED SOLUTIONS INC. / PBC	c EIN-PN 45-2042705-001

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 GLT COMPANIES 2 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor SPEEDLINE CORPORATION	c EIN-PN 34-1771775-001
a	Plan name GLT COMPANIES 4 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor BRADLEY STONE INDUSTRIES, LTD.	c EIN-PN 45-2122356-001
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 EQUIPMENT COMPANY 401(K) PS PLAN	
b	Name of plan sponsor GODBERSEN EQUIPMENT COMPANY	c EIN-PN 42-1485959-001
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 GREAT OAKS 401(K) PLAN	
b	Name of plan sponsor GREAT OAKS LANDSCAPE ASSOCIATES, INC.	c EIN-PN 38-2402712-001
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 MATERIALS WASHINGTON 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor HAMILTON MATERIALS WASHINGTON	c EIN-PN 91-1851623-002
a	Plan name HAMILTON SAFE GROUP 401(K) PLAN	
b	Name of plan sponsor HAMILTON SAFE CO.	c EIN-PN 31-0729027-002

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	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
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	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	HIRSCHBACH COMPANIES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HIRSCHBACH MOTOR LINES, INC.	c EIN-PN 42-0883252-001
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	HOMAGE, LLC 401(K) PLAN	
b	Name of plan sponsor	HOMAGE HOLDINGS, INC	c EIN-PN 20-8826851-002
a	Plan name	HOPEWELL FUND 401(K) PLAN	
b	Name of plan sponsor	HOPEWELL FUND	c EIN-PN 47-3681860-001
a	Plan name	HOUNDER LLC 401(K) PLAN	
b	Name of plan sponsor	HOUNDER LLC	c EIN-PN 45-2390948-001
a	Plan name	HOWARD FISCHER ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HOWARD FISCHER ASSOCIATES, INC.	c EIN-PN 23-2044665-001

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	HUGHES USA, INC. 401(K) PLAN	
b	Name of plan sponsor	HUGHES USA INC.	c EIN-PN 83-1084513-001
a	Plan name	HUSTEADS AUTO BODY 401(K) PLAN	
b	Name of plan sponsor	HUSTEADS COLLISION CENTER, INC.	c EIN-PN 38-3676002-001
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	INNOVATIVE MEDICAL SYSTEMS, INC.	
b	Name of plan sponsor	INNOVATIVE MEDICAL SYSTEMS, INC.	c EIN-PN 86-0907769-002
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	INSURANCE MANAGEMENT COMPANY PROFIT SHARING PLAN	
b	Name of plan sponsor	INSURANCE MANAGEMENT COMPANY	c EIN-PN 25-1142710-001
a	Plan name	IOWA COVER CROP 401(K) PLAN	
b	Name of plan sponsor	IA COVER CROP DBA IOWA COVER CROP	c EIN-PN 88-2844542-001
a	Plan name	ITS 401(K) PLAN	
b	Name of plan sponsor	INDUSTRIAL TENT SYSTEMS, LLC	c EIN-PN 81-1286596-001
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

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	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	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	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
a	Plan name	KUPFERLE, LLC 401(K) PLAN	
b	Name of plan sponsor	KUPFERLE, LLC	c EIN-PN 92-1245064-001
a	Plan name	KYLE HOUSE GROUP 401(K) PLAN	
b	Name of plan sponsor	KYLE HOUSE GROUP, LLC	c EIN-PN 27-4229663-001
a	Plan name	LAKE AND POND SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	LAKE AND POND SOLUTIONS, LLC	c EIN-PN 87-2631355-001
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	LEATHERMAN TOOL GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	LEATHERMAN TOOL GROUP, INC.	c EIN-PN 93-0841712-001

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	LEWIS & ROBERTS, PLLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	LEWIS & ROBERTS, PLLC	c EIN-PN 56-2022568-001
a	Plan name	LIL' BLOOMERS 401(K) PLAN	
b	Name of plan sponsor	LIL BLOOMERS CHILD CARE & PRESCHOOL, INC.	c EIN-PN 26-1607158-001
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	MARSHALL CARPET & TILE CO., INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	MARSHALL CARPET & TILE CO. INC.	c EIN-PN 34-1476597-001
a	Plan name	MARY'S TACK & FEED 401K PLAN	
b	Name of plan sponsor	RANCHO TRADE, INC	c EIN-PN 95-3414522-002
a	Plan name	MATALON MANAGEMENT GROUP, LLC 401(K) PLAN	
b	Name of plan sponsor	MATALON MANAGEMENT GROUP, LLC	c EIN-PN 93-2965488-001
a	Plan name	MAYFRAN INTERNATIONAL, INC. RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	MAYFRAN INTERNATIONAL, INC.	c EIN-PN 48-0959871-001

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 MBC HOLDINGS OF OHIO INC. 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor MBC HOLDINGS OF OHIO INC.	c EIN-PN 34-4456871-002
a	Plan name MCCRITE MILLING PROFIT SHARING PLAN	
b	Name of plan sponsor MCCRITE MILLING & CONSTRUCTION CO., INC.	c EIN-PN 35-2009351-001
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 MIDWEST WELLNESS & RECOVERY, INC. 401(K) PLAN	
b	Name of plan sponsor MIDWEST WELLNESS & RECOVERY	c EIN-PN 93-3554359-001
a	Plan name MILLER BROS. CONST., INC. UNION SUPERVISORS PLAN	
b	Name of plan sponsor MILLER BROS. CONST., INC.	c EIN-PN 34-4456871-003
a	Plan name MONORAIL ESPRESSO 401(K) PLAN	
b	Name of plan sponsor MONORAIL COFFEE LLC	c EIN-PN 46-0868204-001
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

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 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
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 NEWVUE PLASTIC SURGERY, PC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NEWVUE PLASTIC SURGERY, PC	c EIN-PN 26-3374369-001
a	Plan name NO WASTE GRINDINGS 401(K) PLAN	
b	Name of plan sponsor NO WASTE GRINDINGS, LLC	c EIN-PN 32-0218051-001
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 NORTHBOUND 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor NORTHBOUND LLC	c EIN-PN 90-0896068-001
a	Plan name O&H DANISH BAKERY, INC. 401(K) PLAN	
b	Name of plan sponsor O & H DANISH BAKERY, INC.	c EIN-PN 39-1258596-001

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	OCEAN GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	OCEAN GROUP INC	c EIN-PN 35-2183963-001
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	OSTEOPATHIC PHYSICIANS & SURGEONS OF CALIFORNIA 401(K) PLAN	
b	Name of plan sponsor	OSTEOPATHIC PHYSICIANS & SURGEONS OF CALIFORNIA	c EIN-PN 95-2117017-002
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	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	PILOT VENTURES 401(K) PLAN	
b	Name of plan sponsor	PILOT VENTURES LLC	c EIN-PN 81-3657022-001
a	Plan name	PINAL COUNTY FEDERAL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor	PINAL COUNTY FEDERAL CREDIT UNION	c EIN-PN 86-0134699-002

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 PIONEER ELECTRICAL SERVICES LLC 401(K) PLAN	
b	Name of plan sponsor PIONEER ELECTRICAL SERVICES LL	c EIN-PN 82-2584275-001
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 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 PRODUCT HUNT 401(K)	
b	Name of plan sponsor PRODUCT HUNT INC.	c EIN-PN 46-5540176-001
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
a	Plan name QUALITYHUB, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor QUALITYHUB, INC.	c EIN-PN 20-0561319-001

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.J. LANG SALES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	R. J. LANG SALES, INC.	c EIN-PN 34-1115891-004
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.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	RADIAN GROUP 401(K) PLAN	
b	Name of plan sponsor	RADIAN GROUP, INC.	c EIN-PN 58-2395300-001
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	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	REV 401(K) PLAN	
b	Name of plan sponsor	REV ROBOTICS LLC	c EIN-PN 26-1138709-001
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 ROBERT R. MCGILL AIR CONDITIONING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ROBERT R. MCGILL AIR CONDITIONING, INC.	c EIN-PN 59-1923208-001
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 SBOPCO, LLC EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor SBOPCO, LLC	c EIN-PN 84-4188080-001
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

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	SCHIRM USA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHIRM USA, INC.	c EIN-PN 75-2595474-001
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	SENIORS IN SERVICE 401(K) PLAN	
b	Name of plan sponsor	SENIORS IN SERVICE	c EIN-PN 94-2344734-001
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	SHEPARD & WALTON LIFE INSURANCE AGENCY, INC. DBA SHEPARD & WALTON EMPLOYEE BENEFITS 401(K) PLAN	
b	Name of plan sponsor	SHEPARD & WALTON EMPLOYEE BENEFITS	c EIN-PN 74-1672472-001
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	SIXTEEN THIRTY FUND 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SIXTEEN THIRTY FUND	c EIN-PN 26-4486735-001
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

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	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
a	Plan name	SOUTHERN CONCRETE CONSTRUCTION COMPANY, INC. EMPLOYEES' INCENTIVE SAVINGS PLAN	
b	Name of plan sponsor	SOUTHERN CONCRETE CONSTRUCTION COMPANY, INC.	c EIN-PN 58-0827830-002
a	Plan name	SOUTHSHORE ORTHODONTICS, PA PROFIT SHARING PLAN	
b	Name of plan sponsor	SOUTHSHORE ORTHODONTICS	c EIN-PN 47-1100536-001
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	SPECTRUMVOIP, INC. 401(K) PLAN	
b	Name of plan sponsor	SPECTRUMVOIP, INC.	c EIN-PN 26-4657666-001
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	SPINPLAY GAMES INC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SPINPLAY GAMES INC.	c EIN-PN 83-2475407-001

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 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 ST. FRANCIS ANIMAL AND BIRD HOSPITAL, INC. 401(K) PLAN	
b	Name of plan sponsor ST. FRANCIS ANIMAL AND BIRD HOSPITAL	c EIN-PN 41-1719710-001
a	Plan name STACEY BOEHMAN 401(K) PLAN	
b	Name of plan sponsor STACEY SMITH COACHING LLC	c EIN-PN 82-1295271-001
a	Plan name STANTON PUBLIC RELATIONS & MARKETING, LLC 401(K) PLAN	
b	Name of plan sponsor STANTON PUBLIC RELATIONS & MARKETING, LLC	c EIN-PN 26-4745720-001
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 STEPHENS MFG. CO., INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor STEPHENS MFG. CO., INC.	c EIN-PN 61-1083572-001
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 STROMQUIST & COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor STROMQUIST & COMPANY, INC.	c EIN-PN 58-0684488-001
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 SUMMER RRH 401(K) PLAN	
b	Name of plan sponsor SUMMER RRH DBA RIVER RIDGE HARDWARE & PETERS HARDWARE	c EIN-PN 81-5002881-002

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 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
a	Plan name SYSTEC LIMITED OF WISCONS IN INC. 401(K) PLAN	
b	Name of plan sponsor SYSTEC LIMITED OF WISCONSIN INC.	c EIN-PN 39-1408613-001
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 TEREMANA 401(K) PLAN	
b	Name of plan sponsor SIETE BUCKS SPIRITS, LLC	c EIN-PN 84-3948373-002
a	Plan name TERMINAL-ANDRAE 401(K) PLAN	
b	Name of plan sponsor T-A ACQUISTION COMPANY LLC DBA TERMINAL-ANDRAE	c EIN-PN 85-4187924-001
a	Plan name THALNER ELECTRONIC LABORATORIES 401(K) PLAN	
b	Name of plan sponsor THALNER ELECTRONIC LABORATORIES, INC.	c EIN-PN 38-1794617-003
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 HEALING HAVEN, LLC 401(K) PLAN	
b	Name of plan sponsor THE HEALING HAVEN, LLC	c EIN-PN 27-3412587-001
a	Plan name THE JUICE PLUS 401(K) PLAN	
b	Name of plan sponsor THE JUICE PLUS	c EIN-PN 20-4819292-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	THE 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 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
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 SYNERGY COMPANY OF UTAH RETIREMENT PLAN	
b	Name of plan sponsor	THE SYNERGY COMPANY OF UTAH, LLC	c EIN-PN 87-0497272-001
a	Plan name	THIRTY MADISON 401(K) PLAN	
b	Name of plan sponsor	THIRTY MADISON INC.	c EIN-PN 81-3709209-001
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	TIVOLI MIDSTREAM CB1 401(K) PLAN	
b	Name of plan sponsor	TIVOLI MIDSTREAM CB1 LLC	c EIN-PN 99-2247290-001
a	Plan name	TIVOLI SERVICES 401(K) PLAN	
b	Name of plan sponsor	TIVOLI SERVICES LLC	c EIN-PN 93-2492280-001
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

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	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	TRANSCENDENT BRANDS 401(K) PLAN	
b	Name of plan sponsor	TRANSCENDENT BRANDS, LLC	c EIN-PN 86-3522576-001
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	TRUE TERPENES 401(K) PLAN	
b	Name of plan sponsor	BULK NATURAL LLC	c EIN-PN 81-1034149-001
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
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

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	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	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	VASCULAR SURGERY ASSOCIATES EMPLOYEE'S 401(K) PLAN	
b	Name of plan sponsor	VASCULAR SURGERY ASSOCIATES MEDICAL GROUP, APC	c EIN-PN 92-1249712-001
a	Plan name	VERITY JET GROUP, LLC PROFIT SHARING/401(K) PLAN AND TRUST	
b	Name of plan sponsor	VERITY JET GROUP, LLC	c EIN-PN 83-3277809-001
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
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

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	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	WASTE RESOURCE RECOVERY 401(K) PLAN	
b	Name of plan sponsor	WASTE RESOURCE RECOVERY, INC.	c EIN-PN 98-4883890-001
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	WEALTHNEST PLANNERS 401(K) PLAN	
b	Name of plan sponsor	WEALTHNEST PLANNERS LLC	c EIN-PN 26-3868233-001
a	Plan name	WELL PHARMA MEDICAL RESEARCH CORP. 401(K) PLAN	
b	Name of plan sponsor	WELL PHARMA MEDICAL RESEARCH CORP.	c EIN-PN 20-8725496-001
a	Plan name	WELLSPRING DENTAL OF BEDFORD 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WELLSPRING DENTAL OF BEDFORD, LLC	c EIN-PN 46-5631337-001
a	Plan name	WELLVANA 401(K) PLAN	
b	Name of plan sponsor	WELLVANA HEALTH	c EIN-PN 86-3069354-001
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

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 2050	B Three-digit plan number (PN) ▶ 742
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 38-7271348

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)	1208569
		3132196
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)	114980544
(10) Value of interest in pooled separate accounts	1c(10)	355023673
(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	116189113	358155869
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	187030
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	1283186	3123171
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	1283186	3310201
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	114905927	354845668

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)		25168487
(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		25168487

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)	11537	
(5) Investment advisory and investment management fees	2i(5)	399896	
(6) Bank or trust company trustee/custodial fees	2i(6)	101950	
(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)		513383
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		513383

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		24655104
l Transfers of assets:			
(1) To this plan.....	2l(1)		274402352
(2) From this plan	2l(2)		59117715

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 _____.