

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

Part II	Basic Plan Information—enter all requested information
1a	Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN
1b	Three-digit plan number (PN) ▶ 333
1c	Effective date of plan 01/01/1998
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) COADVANTAGE CORPORATION 101 RIVERFRONT BLVD SUITE 300 BRADENTON, FL 34205
2b	Employer Identification Number (EIN) 27-3007025
2c	Plan Sponsor's telephone number 813-935-2000
2d	Business code (see instructions) 561300

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2025	ASHLEY WALKER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☐ Same as Plan Sponsor THE COADVANTAGE 401K PLAN COMMITTEE 101 RIVERFRONT BLVD SUITE 300 BRADENTON, FL 34205	3b Administrator's EIN 27-3007025																						
	3c Administrator's telephone number 407-422-8448																						
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 81703																						
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.....	<table border="1" style="width: 100%; border-collapse: collapse;"><tr><td colspan="2" style="height: 20px;"></td></tr><tr><td style="width: 15%;">6a(1)</td><td style="text-align: right;">75664</td></tr><tr><td>6a(2)</td><td style="text-align: right;">76258</td></tr><tr><td>6b</td><td style="text-align: right;">3152</td></tr><tr><td>6c</td><td style="text-align: right;">5445</td></tr><tr><td>6d</td><td style="text-align: right;">84855</td></tr><tr><td>6e</td><td style="text-align: right;">0</td></tr><tr><td>6f</td><td style="text-align: right;">84855</td></tr><tr><td>6g(1)</td><td style="text-align: right;">14850</td></tr><tr><td>6g(2)</td><td style="text-align: right;">15637</td></tr><tr><td>6h</td><td style="text-align: right;">39</td></tr></table>			6a(1)	75664	6a(2)	76258	6b	3152	6c	5445	6d	84855	6e	0	6f	84855	6g(1)	14850	6g(2)	15637	6h	39
6a(1)	75664																						
6a(2)	76258																						
6b	3152																						
6c	5445																						
6d	84855																						
6e	0																						
6f	84855																						
6g(1)	14850																						
6g(2)	15637																						
6h	39																						
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																						
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2J 2A 2F 2G 2K 3D 2S 2T																							

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

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

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☒ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ► Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ►	333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
04-1590850	65935	MR 61723	5469	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 605	(b) Total amount of fees paid 0
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
RAYMOND JAMES INSURANCE GROUP INC 333 NORTH POINT
EAST ALPHARETTA, GA 30022

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
517			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
RAYMOND JAMES INSURANCE GROUP INC 1200 EAST LAS OLAS BLVD
FORT LAUDERDALE, FL 33301

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
88			3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	51671618
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
 (3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year**7b**

60626326

c Additions: (1) Contributions deposited during the year**7c(1)**

4607101

(2) Dividends and credits.....

7c(2)

0

(3) Interest credited during the year.....

7c(3)

1706458

(4) Transferred from separate account

7c(4)

10909150

(5) Other (specify below).....

7c(5)

1383011

▶ **LOAN REPAYMENTS AND FORFEITURES**

(6) Total additions

7c(6)

18605720

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

79232046

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

13993848

(2) Administration charge made by carrier.....

7e(2)

190511

(3) Transferred to separate account

7e(3)

12489386

(4) Other (specify below).....

7e(4)

886683

▶ **ADJUSTMENT**

(5) Total deductions

7e(5)

27560428

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**).....**7f**

51671618

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☐ Yes ☒ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

EMPOWER ANNUITY INSURANCE CO

8515 EAST ORCHARD AVE
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	RECORDKEEPER	4329366	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

EMPOWER ADVISORY GROUP

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	INVESTMENT MANAGEMENT	128798	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

RAYMOND JAMES INSURANCE GROUP INC

880 INVESTMENT MANAGEMENT
ST PETERSBURG, FL 33716

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
55	BROKER/ADVISER	0	Yes ☒ No ☐	Yes ☐ No ☒	13833	Yes ☐ No ☒

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 333	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)		
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2045 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 90-6083972-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 75243473	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2055 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 27-6715091-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44890208	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2070 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 87-7039453-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1152512	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2050 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 90-6083970-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 61218644	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2040 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 90-6083974-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 78327264	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2065 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 82-6194314-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4132540	
a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2020 TRU			
b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS			
c EIN-PN 90-6083982-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 21808171	

a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2025 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083980-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 62117491
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2030 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083978-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 85586704
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2060 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 45-3799419-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29899441
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE INCM TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 87-6420194-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15906
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE 2035 TRU

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083976-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 85135569
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a Name of MTIA, CCT, PSA, or 103-12 IE: THE VANGUARD TARGET RETIRE INCM II

b Name of sponsor of entity listed in (a): VANGUARD COLLECTIVE INVESTMENT TRUST FUNDS

c EIN-PN 90-6083967-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11009678
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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)
-----------------	----------------------	---

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
-----------------	----------------------	---

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection

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

A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)		
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)	14377093	16447616
(9) Value of interest in common/collective trusts	1c(9)	0	560537600
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	962130185	602129799
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	60626326	51671618
(15) Other.....	1c(15)	2495222	2627006

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	1039628826	1233413639
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1039628826	1233413639

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)	44606804	
(B) Participants	2a(1)(B)	114692384	
(C) Others (including rollovers)	2a(1)(C)	31387949	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		190687137
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)	1203334	
(F) Other	2b(1)(F)	1609012	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2812346
(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)	28236786	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		28236786
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		118982595
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		340718864

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	129130446	
(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)		129130446
f Corrective distributions (see instructions)	2f		1001828
g Certain deemed distributions of participant loans (see instructions)	2g		1688323
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	4218555	
(3) Recordkeeping fees	2i(3)	128798	
(4) IQPA audit fees	2i(4)	1200	
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		4348553
j Total expenses. Add all expense amounts in column (b) and enter total	2j		136169150

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		204549714
l Transfers of assets:			
(1) To this plan	2l(1)		135143360
(2) From this plan	2l(2)		145908261

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: **CBIZ CPAS P.C.**

(2) EIN: **43-1947695**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
401GO	46-5737825	001
ADP RETIREMENT SERVICES	22-1467904	001
ADP TOTAL SOURCE	59-3216484	001
EMPOWER	84-1233483	001

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

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
FIDELITY	04-2647786	001
GUIDELINE	13-2670985	001

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	333
C Plan sponsor's name as shown on line 2a of Form 5500 COADVANTAGE CORPORATION	D Employer Identification Number (EIN) 27-3007025	

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

1	Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2	Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 20-3691708		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.			
3	Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

16 Information with respect to any employers who withdrew from the plan during the preceding plan year:

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

a Enter the percentage of plan assets held as:

Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%

High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:

☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation.....

Part VII IRS Compliance Questions

21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☐ No

21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 12 / 31 / 2018 (MM/DD/YYYY) and the Opinion Letter serial number Q703120A.

SCHEDULE MEP (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and Section 6058(a) of the Internal Revenue Code (the Code) ► File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	B Three-digit Plan number (PN)..... ►	333
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF THE COADVANTAGE 401K PLAN COMMITTEE	D Administrator's EIN 27-3007025	

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

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

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

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

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

Part II	Participating Employer Information.
---------	-------------------------------------

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

2a Name of Participating Employer COADVANTAGE CORPORATION	2b EIN 27-3007025	2c Percentage of Total Contributions for the Plan Year 3.02	2d Aggregate Account Balances Attributable to Participating Employer 38981223
2a Name of Participating Employer 10 GAUGE SHEET METAL, INC.	2b EIN 82-0617292	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 462

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

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1406 CONSULTING, LLC	82-1307644	0.07	258596
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1ST CLASS MECHANICAL, INC	59-1767267	0.04	469987
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
1ST FIRE & SECURITY, INC.	80-0079555	0.03	89726
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
22 HEALTH GROUP, LLC	46-5409843	0.01	121026
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
22 SMR COMPANY, LLC	83-2925567	0.01	1307500
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
30A ESCAPES, LLC	82-5368208	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
365 ENTERPRISES LLC	46-5639798	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
3G WAREHOUSE INC.	27-0837338	0.07	1753662
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
4675 INVESTMENTS, INC. DBA WES	59-3702694	0.04	215125

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
5 STAR PACKAGING, INC.	27-4533284	0.03	337246
68 VENTURES, LLC	81-3290751	0.42	3697889
8FIG, INC.	35-2688246	0.01	18725
924 PETCORAL LLC	47-4659190	0.00	3393
A AAMERICAN CONTAINER & TRAILER LEASING, INC.	59-3354575	0.07	1395626
A&M ENDEAVORS, LLC	74-3116083	0.09	1892465
A. ADVOCATES & ATTORNEYS OF KENNEDY LAW GROUP, PA	59-3607269	0.01	10414
A. D. MILLER SERVICES, LLC	84-1116527	0.09	170229
A. JAMES GLOBAL SERVICES, INC	82-3502878	0.05	196089

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
A.R. CHOICE MANAGEMENT, INC.	20-1795707	0.01	145519
A-1 24 HOUR SERVICE INC.	65-0891963	0.00	57613
A1 TELETRONICS INC	59-3112743	0.00	89
AAA T.L.C. HEALTH CARE, INC.	95-4536672	0.07	223802
AACTION RECYCLING CORPORATION	59-3345691	0.00	48954
AAP INDUSTRIAL INC. DBA AAP PUMP & MOTORWORKS	46-2224561	0.02	38371
ABC AUTO'S INC.	59-1496470	0.03	319126
ABLE FIRE PREVENTION & ABLE FIRE PREVENTION FL	13-3786371	0.03	47803
A-BRIDGE LLC	87-4278813	0.00	0

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ABUYO, INC. DBA SELECTHUB	45-3821823	0.06	302029
ABX COLLISION CENTERS, INC	46-6592410	0.00	0
ACADEMIC & CLINICAL INFECTIOUS DISEASES	59-1568228	0.04	378215
ACAI ASSOCIATES, INC.	65-0020223	0.04	1113141
ACCELLIX, INC.	27-2402415	0.25	0
ACCELUS INC	81-5135750	0.00	15575
ACCENT SIGNS	59-3286988	0.01	389016
ACCESS GLOBAL GROUP, INC.	46-1976784	0.00	0
ACE ELECTRIC SERVICE COMPANY, LLC	27-1494757	0.00	0

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACE ELECTRICAL SERVICE OF NORTH FLORIDA, INC.	20-4999192	0.03	360073
ACRY-TECH COATINGS, INC	59-2518319	0.01	287092
ACTION AIR, INC.	65-0285865	0.00	10164
ACTIVUS CONNECT LLC	83-1917754	0.00	189
ACUITYIM LLC	37-1797643	0.00	71641
ADAM AMERICA, LLC	30-0733899	0.00	0
ADAMS AUTOWORX INC	82-1666160	0.04	305932
ADDICTION PREVENTION COALITION	26-0319028	0.00	16848
ADITXT, INC.	82-3204328	0.34	2110201

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADLER FAMILY DENTAL LLC	22-3780238	0.10	3580021
ADLER GROUP	36-4886769	0.08	3152779
ADLI LAW GROUP P.C.	27-2187270	0.08	625744
ADV PEDIATRIC SURGEONS PC	45-2500613	0.09	1286410
ADVANCED CABLING SOLUTIONS INC.	59-3511800	0.08	0
ADVANCED CYBER ENGINEERING SOLUTIONS & TECHNOLOGIES	85-0638688	0.07	229318
ADVANCED REFINISH LLC	83-1936226	0.01	54840
ADVANCED TELECOM, INC.	59-3015968	0.04	1234461
ADVANCED VASCULAR SOLUTIONS, LLC	84-4744855	0.07	408881

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADVANCED VENTURES, LLC	26-2166165	0.00	0
ADVANTAGE COMMUNICATIONS GROUP, LLC	20-0441923	0.44	5740356
ADVANTAGE PROPERTY MANAGEMENT LLC	51-0418931	0.07	1241122
ADWEEK LLC	81-3456964	0.28	0
AFFORDABLE BODY SHOP, INC	02-0642647	0.05	646140
AFTERMARKET INDUSTRIES INC.	46-3285335	0.00	141278
AGGRESSIVE PLUMBING, INC.	59-3062162	0.02	81379
AGR FINANCIAL, LLC	22-3376977	0.07	561383
AIR AMERICA A/C	16-1627653	0.00	746409

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AIR STREAM CORP.	11-2550650	1.01	8803293
AIRCRAFT MAINTENANCE SPECIALIST, INC.	65-0088882	0.03	436574
AJ LOGISTICS	76-0541531	0.05	1297014
ALABAMA CHRISTIAN FOUNDATION	26-1917492	0.03	87683
ALABAMA FAMILY DENTISTRY	63-1264278	0.20	4307880
ALAN R. HEAP, D.M.D., P.A.	59-2977900	0.07	580352
ALASKA HAND REHABILITATION, INC.	26-1617527	0.07	1141982
ALIGN INSURANCE GROUP, LLC	83-2444025	0.00	2912
ALIQUNTUM INTERNATIONAL INC	27-3006907	0.09	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALL STATE PACKAGING, LLC	83-4295372	0.02	16909
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLIANCE COACH, INC.	27-0777094	0.00	55944
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLIANCE RETAIL CONSTRUCTION, INC.	32-0266470	0.17	3503928
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLIANT LTC PHARMACY	83-1356072	0.03	164471
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLIED BUSINESS SYSTEMS, LLC	33-1010352	0.12	879493
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLISON CONTRACTOR SOLUTIONS, INC.	82-1405935	0.02	39547
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALL-PRO TITLE GROUP, LLC	06-1715740	0.00	389742
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLSOUTH APPLIANCE GROUP, INC	72-1353380	0.26	1923683
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALLSTATE STOREFRONT SYSTEMS, INC.	75-2696794	0.00	61391

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALPFA INC	32-0178401	0.01	0
ALPHA MACHINE LLC	82-3824013	0.00	0
ALS NETWORK	95-4163338	0.19	1997856
ALTO NEUROSCIENCE, INC.	83-4210124	0.79	3921633
AM ARCHITECTURE AND INTERIOR DESIGN GROUP, LLC	47-3242111	0.06	336394
AM SOFT-GROUP LLC	46-1567466	0.01	291101
AMBER RIDGE APARTMENTS	52-1737346	0.00	30502
AMENITY HEALTH, INC.	16-1783404	0.12	666025
AMERICA SUNSHINE LLC	65-6525725	0.05	1096334

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMERICAN ACADEMY OF NURSE PRAC	52-2216259	0.17	1163188
AMERICAN ACADEMY OF PEDIATRICS	58-1164164	0.02	651507
AMERICAN DATABANK, LLC	84-1502813	0.18	2447329
AMERICAN MEDICAL DEPOT	59-2337158	0.00	1539430
AMERICAN POLYLITE INC	82-0814494	0.02	160265
AMERICAN RESTORATION LLC	85-2193210	0.03	138052
AMERICAN SOLAR ENERGY SOCIETY, INC.	59-1768923	0.00	7268
AMERICARE APPLIANCE REPAIR LLC	27-2507782	0.08	278416
AMERITAPE, INC.	59-3018988	0.00	866434

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AMHERST CONSULTING COMPANY LLC	45-3656202	0.00	87699
AMNET ESOP CORPORATION	83-3280015	0.00	45992
AMR AT PENSACOLA, INC	59-2940706	0.00	2899
AMR ELECTRICAL CONTRACTING CORP	20-1071163	0.05	344913
AMZ ATLAS, LLC	85-1389235	0.08	0
ANCHOR PARDUE INSURANCE, INC.	63-1035461	0.00	25839
ANCOR HOLDINGS, LP	75-2516108	0.00	0
ANDERSON & ASSOCIATES INSURANCE GROUP, LLC	02-0659451	0.02	125573
ANDERSON CONTRACT ENG INC. DBA ANDERSON CONNECTIVITY	20-2438015	0.01	507608

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ANDORHEALTH, LLC	83-1558230	0.23	0
2a Name of Participating Employer ANDREA USA OESTE, LLC	33-0957425	0.01	31256
2a Name of Participating Employer ANGEL EMMANUEL RODRIGUEZ PENA, DDS, INC	92-2580374	0.01	28551
2a Name of Participating Employer A-NIKS LLC	20-1316688	0.06	486438
2a Name of Participating Employer ANTHEM EXECUTIVE LLC	85-1062103	0.00	14377
2a Name of Participating Employer APARTMENT ASSOCIATION OF METRO DENVER	84-0592187	0.10	2018490
2a Name of Participating Employer APARTMENT CONCEPTS UNLIMITED	20-8040843	0.04	563900
2a Name of Participating Employer APARTMENT OWNERS ASSOCIATION OF CALIFORNIA, INC.	27-0931856	0.12	1990083
2a Name of Participating Employer APOGEE SCIENTIFIC, INC.	84-1284844	0.00	151657

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APOLLIDON, LLC	26-2052103	0.21	1820906
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APPERSON EDUCATION PRODUCTS, INC.	99-2414095	0.00	95132
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APPERSON PRINT RESOURCES LLC	99-1879034	0.00	2157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APRIL USA ASSISTANCE INC	65-0564647	0.01	858515
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APS ENERGY INC	84-3190697	0.00	51189
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
APSCO PROFESSIONAL SERVICE COMPANY, INC	73-1609138	0.05	594577
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AQUA CHECK LLC	47-3330835	0.02	77057
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AQUA CULTURE TECHNOLOGIES, INC.	23-3189319	0.00	91653
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AQUASPY, INC	68-0461115	0.16	2967327

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Part II Participating Employer Information (Continued).

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AQUILINE MANAGEMENT HOLDINGS LP	20-3575656	0.52	7348593
2a Name of Participating Employer ARBORETA HEALTHCARE, INC.	82-1884480	0.23	0
2a Name of Participating Employer ARBOUR VALLEY MANAGEMENT, LLC	84-1693540	0.11	792705
2a Name of Participating Employer ARCADIA CONSUMER HEALTHCARE, INC.	82-5378086	0.51	3825906
2a Name of Participating Employer AR-CE INC.	95-4718889	0.00	41638
2a Name of Participating Employer ARCHIMEDEAN ACADEMY	02-0607904	0.20	3777562
2a Name of Participating Employer ARCHWAY ACADEMY	20-0120322	0.02	35954
2a Name of Participating Employer ARCO MARINE, INC.	83-4659854	0.11	1433764
2a Name of Participating Employer ARCO STEEL COMPANY	22-0740657	0.01	528765

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ARCON GC LLC	85-3953955	0.03	42755
ARCTURUS GROUP LLC	26-0351320	0.02	0
ARDANIS, INC.	81-1190731	0.00	29082
ARES MATERIALS INC	47-4095035	0.05	299964
ARMSTRONG COMMERCIAL SERVICES LLC	16-1742963	0.05	56638
ARNOLD ELECTRIC INC	73-1579765	0.08	560514
ASCENT SURGICAL PARTNERS, LLC	39-1964361	0.00	331127
ASCO CARBON DIOXIDE, INC.	81-3107116	0.00	1607
ASK MENO	87-2338674	0.02	11502

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ASPEN GROVE APARTMENTS	38-3201874	0.00	16909
2a Name of Participating Employer ASPENBLUFF, LLC DBA ASPEN COU	82-3987019	0.00	11177
2a Name of Participating Employer ASSET TV INC.	99-0375835	0.06	391732
2a Name of Participating Employer AT HOME IN KEY WEST, INC.	65-0951798	0.00	326154
2a Name of Participating Employer AT SPORTS, INC.	45-4748189	0.03	273921
2a Name of Participating Employer ATCO PEST CONTROL, INC.	51-0510458	0.00	0
2a Name of Participating Employer ATLANTA COMMUNITY FOOD BANK, INC.	58-1376648	1.19	11684435
2a Name of Participating Employer ATLANTIC CUSTOM WOODCRAFT CORPORATION	59-3318044	0.02	304733
2a Name of Participating Employer ATLANTIC DRILLING SUPPLY INC.	59-2841332	0.07	137550

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ATLANTIS MANAGEMENT SERVICES L	65-1063729	0.00	0
ATLAS SPINE, INC.	33-1131445	0.00	236538
ATN CONSULTING	38-3324809	0.04	407826
A-TOWN/HI-TECH LP	27-0037408	0.04	117689
ATS AEROSPACE TECHNICAL SERVICES AUSTIN INC.	92-2532209	0.01	24942
AUDIO VIDEO COMMUNICATIONS, LLC	59-3396318	0.07	460763
AUTO BODY EXCELLENCE, INC	33-0704012	0.00	0
AUTO SWEDEN, LLC	46-5487666	0.08	456882
AUTOMOTIVE DEVELOPMENT GROUP, INC.	13-4309924	0.19	2327332

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AVALON HEATING AND AIR LLC	46-2321929	0.15	1358766
AVL SYSTEMS, INC.	59-2612461	0.07	710414
AVO T&L, LLC	47-3438612	0.00	7680
AVON CABINET CORPORATION	59-2041419	0.01	198233
AVSI GROUP, LLC	27-3587088	0.00	126649
AXIVA HEALTH SOLUTIONS, INC.	45-3988879	0.01	40193
AXIVA INFUSION CENTERS-HT, LLC	83-3811616	0.01	78278
AXIVARX OF KANSAS, LLC	82-4262188	0.01	68454
AZIMUTH CORPORATION	31-1785180	0.89	8756497

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BABYSPARKS	46-1892580	0.02	82820
2a Name of Participating Employer BACIA SARDENGA, D.V.M., PL	27-1247598	0.05	416217
2a Name of Participating Employer BACKWOODS RETAIL INC.	37-1650080	0.00	542608
2a Name of Participating Employer BAILEY COWAN HECKAMAN PLLC	20-3021331	0.12	2548714
2a Name of Participating Employer BAILEY TAX AND ACCOUNTING, INC.	59-2980126	0.05	868360
2a Name of Participating Employer BALLENISLES COMMUNITY ASSOCIATION, INC.	65-0151050	0.08	1107508
2a Name of Participating Employer BANKRUPTCY GLOBAL HOLDINGS LLC	47-2328009	0.00	150256
2a Name of Participating Employer BANVILLE & JONES WINE MERCHANTS	04-3134908	0.26	1462849
2a Name of Participating Employer BARCLAY INVESTMENTS LLC	82-0822761	0.00	116923

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BARKER & CHRISTOL, LLC	45-3038299	0.00	3622
BARKING LABS CORP	82-0620257	0.18	0
BARLOP, INC.	59-2288364	0.09	1975718
BARNETT FINANCIAL GROUP	30-0138933	0.08	309969
BASHAM AND LUCAS DESIGN GROUP, INC.	59-3532257	0.13	1440080
BAVELLONI AMERICA INC.	82-1010240	0.06	738035
BAY MOTOR WINDING, INC.	64-0674340	0.18	1795887
BAYWOOD TECHNOLOGIES, INC.	59-2751509	0.00	241585
BBD USA LLC	38-4016359	0.08	634363

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BE SOFTWARE INTERNATIONAL INC	35-2741872	0.00	567
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEACH BLUFF APARTMENTS	68-0488011	0.00	12877
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEAM4D ENTERPRISES, LLC	20-2643578	0.09	1337976
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEAUCHAMP HOLDINGS, LLC	88-2939829	0.00	3273
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BECK-FORD CONSTRUCTION, LLC	76-0226117	0.00	101864
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BEDS EXPRESS, LLC	82-4238235	0.02	1272730
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BELL LLC	20-8969098	0.03	170348
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BELLATOR REAL ESTATE, LLC	99-0905059	0.06	888254
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BENDCARE, LLC	47-1871534	0.46	3880768

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BENT BROOK GOLF COURSE	63-1089704	0.02	1077118
BENT PINE GOLF CLUB	51-0198590	0.07	2066349
BERKLEY PRIMARY CARE, PLC	14-1839021	0.02	218458
BERMAN PURCHASING INC	20-1631272	0.00	0
BEST WESTERN ON THE BAY SHUCKE	47-5314988	0.00	0
BEST WESTERN PLUS SIESTA KEY	46-0543005	0.00	4378
BETA SQUARED LITHOGRAPHY. INC.	06-1560046	0.01	1213183
BIC ELECTRIC LLC	81-2073069	0.13	354374
BIG DAN'S CAR WASH, LLC	85-3848284	0.00	0

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BIG DAN'S CAR WASH, LLC	85-3848284	0.10	301089
BIG TREE, INC.	84-1339265	0.00	1349480
BILLER REINHART ENGINEERING GROUP INC.	22-3851104	0.17	3059285
BIRCH ISLAND VETERINARY CENTER PA	82-4856301	0.03	336331
BIRDSALL MARINE DESIGN INC	65-0996449	0.00	541845
BIRMINGHAM AUDUBON SOCIETY	51-0198925	0.03	217511
BIRMINGHAM INFECTIOUS DISEASES, P.C.	45-5399027	0.01	327033
BLACK DRAGON CAPITAL INVESTMENT MANAGEMENT LLC	83-4030129	0.06	1128554
BLACK SALMON CAPITAL HOLDINGS LLC	88-0987386	0.06	173000

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BLACK SALMON CAPITAL, LLC	82-1239430	0.00	111957
BLACKRIDGE TECHNOLOGY	27-2460725	0.00	149468
BLACKSTONE AMERICA	65-0576903	0.00	105008
B-LINE CARRIERS, INC.	59-3690511	0.00	67092
BLISS FINANCIAL CORP.	92-3976871	0.00	0
BLUE NOTE TITLE, LLC	93-4549919	0.01	9132
BLUE STAR GLASS, INC.	11-3827090	0.25	622073
BLUE TEES ENTERPRISES LLC	84-3543029	0.09	248272
BLUE TREAD LLC	47-1053255	0.00	91217

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUEBERRY SYSTEMS, LLC	01-0828967	0.00	142254
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUEBONNET SCHOOL OF CEDAR PARK, LP.	74-2963012	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUEGRASS INDUSTRIES	65-0704572	0.00	11657
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BLUESWITCH LLC	81-4949875	0.07	117432
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOATWRIGHT LAND SURVEYORS, INC	59-2301998	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOB HILL INC	59-0661820	0.03	684296
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOCA BAY MASTER ASSOCIATION, INC.	62-1342782	0.13	1890717
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BONITA BAY COMMUNITY ASSOCIATION	59-2497446	0.15	2593086
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BONITA SPRINGS-ESTERO REALTORS	59-1708371	0.01	112331

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BOOMERANG PACKAGING INC.	76-0439261	0.01	266390
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BOSTON BARRICADE COMPANY, INC.	02-0472117	0.42	3306527
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRAND 44, LLC	20-1562120	0.00	51029
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRASFIELD, FREEMAN, GOLDIS & CASH PA	59-1709234	0.08	771598
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRAWCO, INC.	63-0966796	0.08	834736
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BREATHE EASY MEDICAL, INC.	20-1560238	0.07	1045157
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRES, INC.	20-8124576	0.00	18041
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRICK MARKERS U.S.A., INC.	65-0783070	0.03	300284
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
BRIGHT BEGINNINGS	84-1382420	0.00	21263

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BRIGHTON ANIMAL CLINIC	81-1565037	0.02	259702
BROADLEAF IT, LLC	82-3854230	0.17	1732023
BRODELL PLUMBING SUPPLY, INC.	59-2743259	0.05	572625
BROOKLYN REBAR LLC	26-2375722	0.04	341885
BROOKS, ROCHA, COLBY & RICE, PLLC	84-3929499	0.04	617101
BROOKSIDE PROPERTIES, INC.	62-1365487	1.15	13404924
BROTHERS EXCAVATING LLC	83-4065270	0.00	27292
BROWNSVILLE FAMILY PHARMACY, INC.	26-3118559	0.05	2204051
BRUCE ROSSMEYER'S DAYTONA HARL	59-3205613	0.00	1146488

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BRUCE ROSSMEYER'S NEW SMYRNA B	20-2178089	0.00	212655
BRUCE WILLIAMS BENCHMARK HOMES, LLC	02-0794906	0.04	529186
BRUCKNER KRASNOFF LEDERER MARSHALL SEVRAN CHAN INC.	87-4028057	0.09	755135
BTE MID-WESTERN, LLC	27-3293525	0.01	254366
BULBRITE INDUSTRIES, INC.	13-2701380	0.19	6013010
BURRUEZO & BURRUEZO PLLC	26-1959997	0.06	1003607
BUSK & ASSOCIATES, INC	65-0010642	0.03	103926
BYKOWSKI EQUIPMENT CO	95-2817380	0.13	3723281
BYTE CONSULTING, INC.	52-2286553	0.01	182485

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BYZLOAN TAMPA, LLC	83-1487052	0.14	676185
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
C & P AUTOMATION, INC.	54-2062984	0.07	385664
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
C.J. HENLEY, D.M.D., P.A.	47-4550082	0.03	270532
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
C1 PARTNERS	27-5110354	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
C4 ADVANCED TACTICAL SYSTEMS, LLC	87-0736523	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
C4 ARCHITECTURE, LLC	20-3485443	0.24	2050803
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CABINET ESSENTIAL OF CHICAGO	20-5334463	0.00	112651
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CALIFORNIA PIPELINE INSPECTION CORP.	47-3211297	0.16	1267386
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CALL KS, LLC	85-3988156	0.00	0

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CALL MANAGEMENT PRODUCTS, INC.	84-1088445	0.00	1758327
CALVERT HOLDINGS, LLC	27-2229716	0.03	0
CAMBERWELL APARTMENTS	52-1660946	0.01	47914
CAMBIA INFORMATION GROUP LLC	90-0147959	0.03	2073267
CAMEO, WEALTH & CREATIVE MANAGEMENT, INC.	20-8031671	0.00	86539
CANTIUM MANAGEMENT, LLC	81-5200854	3.35	36924492
CANYON ASSOCIATES	22-3730377	0.04	658974
CAP MANAGEMENT GROUP LLC	87-4690127	0.00	0
CAPITAL CLAIMS MANAGEMENT, LLC	46-4161533	0.03	477694

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CAPITAL REALTY ADVISORS, INC.	65-0192168	0.04	1391719
CAPRI ISLES GOLF, INC	59-1380785	0.00	434376
CAPTEC ENGINEERING, INC.	65-0709247	0.07	1452390
CAPTION FIRST INCORPORATED	36-3665353	0.10	2210802
CARDAX PHARMA, INC.	46-2790734	0.00	0
CAREFREE DESIGN CENTER LLC	65-0246448	0.01	188902
CAREWAVE, INC	56-2349464	0.02	344357
CARING HEARTS FAMILY MEDICAL CENTERS LLC	46-5174398	0.00	1204
CARLETON ENERGY CONSULTING	46-0589300	0.10	0

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CARLISLE PROPERTY MANAGEMENT, INC.	65-0712618	0.01	217291
CARLYLE JUPITER ISLAND	65-0840198	0.02	0
CARNEGIE HILL PROPERTIES, LLC	74-3214548	0.00	377068
CARNIE P. BRAGG FUNERAL HOMES,	22-1971690	0.01	41194
CARRAS SERVICES, LLC	27-2188539	0.01	98365
CARTS OF COLORADO, INC.	84-0970915	0.28	7877792
CASUAL LIVING LTD	75-2467445	0.00	2217
CATTLE DOG COFFEE ROASTERS, INC.	26-1542839	0.02	151701
CBS IFOAM LLC	87-1423145	0.09	300386

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CCDI, INC	59-3661949	0.08	397040
2a Name of Participating Employer CEDARLANE NATURAL FOODS, INC.	95-4458950	0.02	47278
2a Name of Participating Employer CENTER FOR INDEPENDENT LIVING	59-2288751	0.02	156353
2a Name of Participating Employer CENTRAL COMMUNICATIONS NETWORK, INC.	59-3087065	0.00	171933
2a Name of Participating Employer CENTRAL ENGINEERING SUPPLY CO., INC.	75-0181620	0.00	399675
2a Name of Participating Employer CENTRAL FLORIDA COPY CENTERS, INC. DBA XEROGRAPHIC	65-0972848	0.03	4305158
2a Name of Participating Employer CENTRAL FLORIDA WINDOW & DOOR, LLC	45-4220189	0.10	919212
2a Name of Participating Employer CENTRALINK CORP. DBA CENTRALIN	95-4873856	0.02	552571
2a Name of Participating Employer CENTURION EVEN MIAMI LLC	85-0621823	0.00	2661

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CENTURY CHERRY LAWN PHARMACY, INC	13-4060815	0.00	459967
CERTIFIED COLLISION OF NYC LLC	47-4965332	0.07	554345
CERTUS PSYCHIATRY AND INTEGRATED CARE PLLC	81-4615670	0.15	1300177
CF LEADS	43-1645180	0.04	60708
CFT ENTERPRISES INC	74-3136474	0.01	494849
CH3 RIVERWOOD GOLF CLUB LLC	46-1708460	0.00	10319
CH6- ROSEDALE LLC	47-3816029	0.00	2508
CHAPMAN SMIDT HARDWARE	74-1912977	0.00	71617
CHARLES E. BROWN, III, DDS, PLLC	20-1272605	0.00	20343

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CHARLOTTE SHEET METAL, LLC	86-3043052	0.00	56538
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHARTER SOFTWARE, INC.	84-1361133	0.00	85850
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEMPACK & ENVIRONMENTAL LLC	20-5690147	0.00	535
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHEMSTATION OF LOUISIANA	86-1554781	0.05	203705
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHESTER'S INTERNATIONAL LLC	33-1024268	0.08	403593
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHRISTIE'S LIGHTING GALLERY LLC	26-0308147	0.02	122612
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CHROME CAPITAL GROUP LLC.	46-3217646	0.00	21849
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CIRCLE PROPERTY MANAGEMENT	65-1062623	0.07	956046
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CIRCLE SQUARE FOUNDATION	83-6900931	0.01	79984

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CITIZENS BANK OF FLORIDA	59-0557762	0.00	135017
CITY FIELDS	82-1125482	0.00	63303
CIVICA ACQUISITIONS, LLC	46-2362881	0.04	270708
CJ HORAK ENTERPRISES, INC.	46-0735275	0.00	14020
CJ'S SALES AND SERVICE OF OCALA, INC.	59-2488285	0.00	11536
CLARKE CONSTRUCTION GROUP, INC	84-1709113	0.00	572869
CLEAN AIR TECHNOLOGIES - HVACR, INC	65-0506464	0.01	113377
CLEAN ENERGY SOLUTIONS, INC.	20-5409816	0.07	733278
CLEANFUEL USA, INC.	81-4054197	0.00	84599

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CLEANSTART CLEANING SERVICES, INC.	86-1427570	0.00	8598
CLEARLY AGILE, LLC	83-3562722	0.11	1737392
CLIFFORD B. NEWTON (NEWTON & NEWTON)	59-3548888	0.00	128123
CLIMATE SYSTEMS, LLC	85-4430034	0.34	2053277
CLUBSIDE APARTMENT HOMES	52-1873897	0.00	33424
CLUBSPECIALISTS INTERNATIONAL, LLC	26-4384651	0.05	380138
CN INFUSION RESOURCES, INC.	26-2589064	0.01	72434
CN MOTOR COMPANY, LLC	61-1917684	0.03	617787
COASTAL CURRENT ELECTRIC LLC	46-1458242	0.02	31512

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Part II Participating Employer Information (Continued).

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

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COASTAL FAMILY DENTISTRY, PA	83-0438037	0.06	370650
COASTAL HVAC SUPPLY	26-2634002	0.21	2597553
COASTAL NEUROLOGY, INC.	59-3609982	0.14	1350229
COASTAL PROTECTION, INC.	47-3607836	0.00	39837
COCHRAN CONSULTING, INC	75-2118274	0.00	716972
COCO EYE SURGERY CONSULTING PLLC	47-4000800	0.01	11372
CODEFI SOLUTIONS LLC	47-4306322	0.02	704693
COGNITIVE SPACE, INC.	82-4395610	0.00	0
COIL PROCESSORS LLC	83-3337332	0.02	171591

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COLE HARDWARE	94-2490288	0.09	4548549
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLLEGE & MILITARY MARKETING GROUP	99-2072158	0.02	107929
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLLIN COUNTY UROLOGY	75-1531693	0.00	11944
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLOR TECHNOLOGIES, INC.	58-2262790	0.06	498671
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLORADO AUTO, INC.	84-1609937	0.00	6597
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLORADO GULF PACKAGING, INC.	74-2779972	0.00	413335
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COLORON PLASTICS CORPORATION	22-2270194	0.03	1798813
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMERCIAL CONSTRUCTION & MAINTENANCE, INC.	47-0935496	0.07	564275
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMERCIAL PROPERTY SOUTHWEST FLORIDA, LLC	26-4245433	0.00	19504

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNICATION CONSTRUCTION SERVICES, INC.	65-0767680	0.06	1422098
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITIES IN SCHOOLS OF NOVA INC.	46-3063331	0.02	244550
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY ASSET MANAGEMENT, INC.	76-0348337	0.00	17951
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY FOUNDATION OF COLLIER COUNTY	59-2396243	0.20	2566488
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY FOUNDATION OF NORTHEAST ALABAMA	63-0308398	0.09	836579
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMMUNITY MARKETS DBA HITCHCOCK'S MARKET	83-3176869	0.02	909653
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPENSATION RESOURCES, INC.	52-1668892	0.00	2044065
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPLETE CLEANING LLC (DBA THE ORGANIC MAIDS)	92-1836228	0.03	168316
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COMPLETE COMMUNICATIONS SERVICES LLC	35-2560783	0.08	725217

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COMPLETE DENTAL ARTS, P.C.	26-1347922	0.03	156537
COMPLETE URGENT HEALTHCARE, LLC	45-1600063	0.00	22699
COMPUTER CUT COMPONENTS, LLC	20-4476497	0.01	85816
CONCRETE PRECAST PRODUCTS, INC.	27-5549047	0.01	15210
CONCURRENT, INC.	26-2636279	0.00	70635
CO-NEXUS	37-1450529	0.00	23657
CONGRESS AVENUE SERVICES, INC	74-2898113	0.01	17074
CONNECTIONS FOR BUSINESS	65-0024224	0.09	1043672
CONNECTIVITY, LLC	56-2172131	0.07	744645

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONSOLIDATED FREIGHT LINE LLC	83-3059181	0.02	72162
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONSTRUCTION SOLUTIONS, INC	59-3333568	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONTEMPORARY DESIGN COMPANY, LLC	83-2042033	0.00	12850
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONTEMPORARY PLASTIC SURGERY	43-2011710	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONTROL COMMUNICATIONS, INC.	65-0602414	0.00	175
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONTROL SYSTEMS, INC.	63-1236215	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COOKIES UNITED LLC	46-5467994	0.21	4187169
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COPPERWOOD ASSET MANAGEMENT LP	36-4735414	0.00	320595
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORA BETT THOMAS REALTY CO.	58-2220442	0.00	8887

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORAL HOSPITALITY GA, LLC	55-0869731	0.04	975543
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORE REALTY HOLDINGS MANAGEMENT, INC.	20-3213310	0.06	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORINTH BAPTIST CHURCH INC	58-1429719	0.01	45922
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORNETT PUBLISHING COMPANY INC.	63-1173007	0.03	1376658
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORPORATE REALTY MANAGEMENT	72-1399538	0.17	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CORPORATE TRAVEL CONSULTANTS II LLC	26-0002670	0.09	1010905
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COUGAR OIL, INC.	63-0596053	0.01	443918
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COULTON CREEK CAPITAL LLC	61-1582378	0.08	576155
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
COUNCIL FOR QUALITY GROWTH	58-1664710	0.04	638818

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COUNTER FITTERS LLC	58-2226972	0.07	139043
COUNTRY LEISURE INC	73-1280366	0.00	6101
COX STATIONERS & PRINTERS	22-2428262	0.06	1356779
C-PACE ALLIANCE, INC.	88-2492060	0.03	143445
CPC MARKETING, INC.	87-2496766	0.23	721447
CQ FLUENCY, INC	32-0102982	0.33	2475220
CRAFT ELECTRIC, INC	37-2042000	0.00	52004
CRAFTSMAN COLLISION (USA) CORP.	47-1908444	0.01	83793
CREATIVE ENVIRONMENTAL SOLUTIONS, INC	59-3226613	0.05	0

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CREATIVE ILLUMINATION, INC.	84-0523931	0.00	811310
CREATIVE LEARNING SYSTEMS, LLC	81-5084073	0.34	2820741
CREDIT BUREAU OF NAPA COUNTY,	94-1284710	0.01	1022521
CREETA RESOURCES, LLC	82-2855029	0.00	361640
CREST BUILDERS, INC.	37-1753278	0.03	376056
CREST ORTHOPEDIC IMPLANTS, LLC	84-3149321	0.00	255580
CRM COMMERCIAL LLC	20-2503449	0.02	149543
CRONUS PHARMA LLC	45-4138004	0.04	470821
CROOMS FLEET SERVICES, INC.	46-4545555	0.00	277241

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CROP CREATIVE MEDIA LLC	45-4067894	0.01	10156
CROSS KEYS CAPITAL, LLC	30-0395843	0.07	537078
CROSSROADS INSTITUTE FOR PSYCHOTHERAPY & ASSESSMENT	46-2368629	0.08	727392
CROSSVILLE BNRV SALES LLC	75-3254202	0.07	185368
CRV SURVEILLANCE LLC	46-0825081	0.01	81546
CRYSTAL PLAZA GROUP, INC.	22-2034755	0.00	1197
CSF AQUATICS, LLC	84-4039957	0.01	25871
CUDDLE BARN, INC. DBA CUDDLE B	45-3835604	0.10	1012315
CUDJOE SALES	65-0899731	0.02	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CURBCO, INC.	65-0073113	0.00	215900
2a Name of Participating Employer CUSTOM DESIGNED SECURITY SYSTEMS, INC.	59-2128804	0.01	114528
2a Name of Participating Employer CUSTOM FOAM FABRICATORS, INC.	20-1281226	0.00	0
2a Name of Participating Employer CYLOGY, INC.	75-3009593	0.00	0
2a Name of Participating Employer CYPRESS PARTNERS LLC	65-1049847	0.18	5997858
2a Name of Participating Employer D. GROVER, INC.	20-1594165	0.00	449708
2a Name of Participating Employer D. MARTIN PLUMBING, INC	65-0268567	0.00	78698
2a Name of Participating Employer D.C. POWER ENGINEERING INC	26-1235477	0.01	53905
2a Name of Participating Employer DAGOSTINO GEOSPATIAL, INC.	59-3528150	0.00	0

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DALLAS AFTERSCHOOL	76-0838983	0.05	514609
DALLAS TRAILER REPAIR CO. INC.	75-1554958	0.10	1333858
DALLAS WHITE ROCK MARATHON	75-1562942	0.02	152148
DALMATIAN FIRE EQUIPMENT	88-3245472	0.04	283574
DALMATIAN FIRE EQUIPMENT, INC	26-0316399	0.00	438579
DANFORD F&B, LLC	83-3373056	0.00	720471
DANIEL C. BUSH, DDS PLLC	74-1963414	0.00	0
DATANET, INC.	84-1533562	0.03	396722
DAVID A. KINSER & ASSOCIATES, INC.	59-3050614	0.01	373344

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DAVIDSON MEDIA GROUP, LLC	01-0803559	0.00	25691
DAVIS GROUP PA	27-3509345	0.06	165759
DAWNING FAMILY SERVICES INC.	59-2655523	0.02	148077
DAWSON'S ELECTRIC INC	41-2246271	0.00	0
DAY FARMS, INC.	58-2069467	0.00	40038
DBE MANAGEMENT, INC.	20-1331070	0.29	1601910
DDJF, INC	82-2099795	0.03	227532
DEAVER INDUSTRIES, INC.	63-0936142	0.06	1821480
DECATUR HARDWARE SUPPLY, INC.	58-1911284	0.05	690883

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DEL VALLE BRANDS, INC	65-0259259	0.04	0
DELAPLANE PLUMBING INC	02-0757328	0.03	743285
DELICIOUS HOSPITALITY LLC	81-3328364	0.01	32532
DELTA G-CONSULTING ENGINEERS INC	65-0361739	0.01	2216779
DELTA LIGHT (USA) LLC	56-2516720	0.08	990483
DELWIN REALTY LLC	51-2246622	0.00	53616
DENNIE MILLER PLUMBING, INC.	65-0667969	0.00	477
DENNIS CRAIG FITCH, DDS	30-7482314	0.01	22830
DERRICK KINNEY	45-7654730	0.00	110861

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DEVIN HODO, LLC	99-2275116	0.00	158
DGI LOGISTICS LLC	84-1897596	0.00	22292
DHL ANALYTICAL, INC.	74-3868852	0.01	282842
DIGITAL BOARDWALK, INC.	26-4639955	0.09	1341196
DIGITAL FUSION LLC	27-0474198	0.00	68665
DIRECT SERVICE BENEFITS LLC	46-4733857	0.03	63192
DISCOUNT TWO WAY RADIO CORPORATION	95-4890200	0.00	0
DIVERSE CHARTER SCHOOLS COALITION, INC.	45-2849094	0.03	753953
DIVIDENDS INC	46-3953631	0.04	497521

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DME SHOPPE-FORT MYERS, INC.	36-3500976	0.00	257267
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOBLER CONSULTING SERVICES LLC	45-2894247	0.02	248291
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DODD DELCOLLO LLP	46-4134991	0.11	2192244
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DODD ENTERPRISES	59-2242307	0.01	384808
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DORSEY TRAILER, INC.	58-1820450	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOUBLE ACE CARGO, INC	65-0884189	0.00	8076
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DOVETAIL-WOOD TRADITIONS, INC	20-1563175	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DR. MEG SUTTON LLC	83-4526829	0.02	45413
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DREAM HOME FRISCO, INC.	45-4127702	0.03	578621

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DREXEL HAMILTON LLC	20-8032934	0.01	13352
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DRINK RECESS, INC.	83-1822233	0.08	744616
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DRUG FREE AMERICA FOUNDATION, INC.	59-1662427	0.01	237968
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DUE NORTH CONSULTING INC	63-1281576	0.04	141701
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
DUNE ENTERTAINMENT PARTNERS LLC	46-3754540	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
E&W TOOL AND SUPPLY, INC.	83-0524495	0.12	1775588
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EAGLE FIRE PROTECTION	59-2621955	0.00	265179
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EAGLE FIRE PROTECTION	59-2621955	0.04	111602
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
EATING DISORDER SOLUTIONS OF TEXAS LLC	83-2139457	0.00	13094

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EB ACADEMIC CAMPS, LLC	47-1263889	0.05	300864
ECCOLO LTD.	11-3585705	0.33	3349164
ECIFM SOLUTIONS, INC	94-3372989	0.16	0
ED SCHLITT L C	65-0881989	0.00	5604
EDGEWATER BEACH RESORT MANAGEMENT LLC	59-2369578	0.03	0
EDUCATION FOUNDATION OF SARASOTA COUNTY, INC.	59-2320858	0.07	176719
EDWARDS & MIMS INSURANCE AGENCY	57-0407578	0.01	241428
EDWARDS INTERIORS	58-2523927	0.76	8125565
EECON INC	20-8863518	0.08	715690

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EG STAFFING LLC	83-2911906	0.20	985437
EGH PRINTING, LLC	82-4967816	0.05	579938
EHS INTERNATIONAL INC.	27-3972378	0.00	254
EL CAPITAN SPORTS CENTER, INC.	59-1526084	0.03	365006
ELEGRAN LLC	26-1876585	0.04	340461
ELEMENT22 LLC	27-1086057	0.19	1445740
ELEVATED INDUSTRIAL SOLUTIONS LLC	88-1272984	0.42	3983800
ELITE MANAGEMENT GROUP LLC	35-2614867	0.01	0
ELITE PROPERTY RESEARCH LLC	46-4454878	0.10	870583

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ELITE SAVANNAH TRAVEL, LLC.	58-1512590	0.03	177074
ELIXINOL, LLC	47-2510704	0.00	355058
EMINENT MEDICAL CENTER OPERATING, LLC	81-2054664	0.03	0
EMMA JEWEL CHARTER SCHOOL, INC	27-4427509	0.05	573757
EMPLOYEE BENEFIT ADVISORS, INC.	57-1187527	0.00	15520
EMS CONSULTING GROUP LLC	99-0867654	0.02	107804
ENDORPHIN FARMS, INC.	59-3500748	0.03	563768
ENGINEERED FABRICATION, INC.	58-1672608	0.08	1186045
ENVIRO-AG ENGINEERING, INC.	75-2489308	0.17	4398526

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ENVIRONMENTAL BIOTECH INTERNATIONAL, LLC	20-8233871	0.01	192727
ENVIRONMENTAL RISK MANAGEMENT, LLC	65-0922629	0.00	0
EPC ENERGY SERVICES, LLC	46-3208960	0.00	564210
EPISTA INC	99-0726961	0.02	134233
EPOCH PROPERTIES	59-1308295	0.14	2269650
ERGOTRONIX, INC.	81-0885973	0.02	493155
ERICSONS BICYCLES INC.	75-1796806	0.00	2285453
ESCALERA RESOURCES CO	83-0214692	0.00	210764
ESQUIRE MANUFACTURING GROUP LLC	99-2741130	0.00	865

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ESTATES MANAGEMENT COMPANY	56-2014392	0.01	1392812
ETAIL PET INC	82-4670560	0.00	1392
ETHOSOFT, INC.	20-2913165	0.06	1089511
EUROPEAN PAINT & BODY I, INC.	65-0134507	0.02	43228
EUROPEAN PAINT & BODY II, INC.	65-0809928	0.07	1047884
EVENTPOWER	54-1813925	0.26	3973429
EVERLIGHT SOLAR, LLC	83-1745884	0.03	92766
EVERYDAYPLUMBER.COM LLC	45-4612448	0.07	409679
EVERYTHING FOR OFFICES	84-1087408	0.00	0

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EVOLUTION PARKING & GUEST SERVICES, LLC.	83-3146613	0.07	615820
EXCENTIUM, INC.	20-5872493	0.20	2651224
EXCLUSIVE FURNITURE MANAGEMENT CORP	85-4295854	0.19	903551
EXPRESS MEDICAL MANAGEMENT LLC	84-2363795	0.00	5729
EYE CARE CENTER OF NORTHERN COLORADO, P.C.	84-1355429	0.64	7656252
F & J SPECIALTY PRODUCTS, INC.	59-1937255	0.08	1779190
FABWORX SOLUTIONS, INC.	43-1972448	0.11	3037344
FACTOR HEALTH MARKETING, LLC	86-3174248	0.01	19133
FACTOR MEDICAL SUPPLY, LLC	87-0817203	0.00	9256

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FAITH ACADEMICS, LLC	87-0851401	0.02	59811
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FALKNER WINERY INC	33-0906291	0.00	3534
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FAMILY HOME CARE OF CENTRAL FLORIDA, LLC	85-3474531	0.01	39575
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FAST FURNITURE REPAIR LLC	46-2210880	0.01	71242
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FATHER AND SON PEST AND LAWN S	26-4088857	0.03	152771
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FEAR OF GOD ATHLETICS, LLC	85-4218550	0.00	260007
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FEAR OF GOD, LLC	45-2945293	0.10	1548948
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FEDERAL ENGINEERING & TESTING, INC.	80-0831583	0.08	1050769
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FEER, INC.	59-3391964	0.05	911084

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FERN INSULATORS INC.	59-3421276	0.12	965549
FILAN & CONNER PLUMBING, LLC	20-0945551	0.03	272593
FIMAC SOLUTION LLC	20-2102782	0.00	0
FINARD PROPERTIES LLC	20-5863203	0.08	0
FIRSTFOUR STAFFING	85-3928302	0.01	59009
FISCHER HARDWARE INC	76-0291076	0.00	976
FIVE STAR LUMBER, INC.	63-1237880	0.03	1920176
FIVESKY LLC	46-1098542	0.15	1005689
FIXNATION, INC.	83-0452460	0.00	1404

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FLAGG INC.	47-5292573	0.01	258135
2a Name of Participating Employer FLEET LEASE DISPOSAL, INC.	59-1951844	0.14	0
2a Name of Participating Employer FLEXXRAY, LLC	90-0282287	0.15	1727797
2a Name of Participating Employer FLICKERBOX, INC.	94-3327853	0.04	1979613
2a Name of Participating Employer FLORIDA ARTHRITIS AND RHEUMATOLOGY ASSOCIATES, LLC	46-2817349	2.82	31241570
2a Name of Participating Employer FLORIDA BREAKER	65-0402243	0.00	695047
2a Name of Participating Employer FLORIDA COMMUNICATION CONTRACTORS	82-2795003	0.00	862
2a Name of Participating Employer FLORIDA GULF COAST VACATION HOMES, LLC	45-1257505	0.00	393979
2a Name of Participating Employer FLORIDA INTERNATIONAL BANK ASSOCIATION (FIBA), INC	59-1921450	0.05	932172

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FLORIDA IS FOR VETERANS, INC.	47-2327385	0.04	265048
FLORIDA TRANSPORT SERVICE, INC.	59-1551645	0.00	0
FLOURISH PSYCHOLOGY LLC	26-4371459	0.02	144289
FLOWER MOUND DERMATOLOGY	11-3691473	0.00	58607
FLYUSA, INC.	84-4457660	0.00	0
FOG ESSENTIALS, LLC	85-3819889	0.00	139007
FOOD SALES EAST, LLC	47-4175292	0.01	0
FORCE BRANDS LLC	26-0843445	0.21	5219112
FOREST LAKE ESTATES CO-OP, INC.	59-3172338	0.00	102284

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FORMA-KOOL MANUFACTURING, INC.	38-2324437	0.01	442587
FORMOSO PAIN SPECIALISTS PA	85-1148402	0.03	291065
FORTE INTERACTIVE, INC.	65-0947453	0.00	377557
FOSSIL CREEK DENTAL PARTNERS, LLP	20-0468655	0.00	5582
FR VEHICLE SOLUTIONS LLC	81-5370993	0.05	543729
FRANCIS R. MORSE, PA	59-2682160	0.00	35102
FREEMAN ORTHODONTICS, P.A.	55-0881045	0.00	1133266
FRIENDLY FRANKIES BOTTLE SHOP INC	65-0273253	0.01	44982
FROMJON-PRICE LLC	26-1458192	0.02	753090

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FS GROUP, LLC	20-4082856	0.16	4113037
FSB ASSOCIATES, LLC	22-3720302	0.00	738239
FUERST DAY LAWSON, INC.	98-0379592	0.00	114624
FULL CIRCLE INSIGHTS, INC.	36-4795746	0.00	348960
FULL THROTTLE DIRECT MAIL, LLC	81-4106845	0.00	6149
FULTON CONSULTING ENGINEERS, INC.	83-4466074	0.00	0
FUNDERBURK ELECTRICAL SERVICES, LLC	26-4489977	0.00	0
FUNDSTRAT GLOBAL ADVISORS LLC	46-5324205	0.15	1333225
FUSE SPECIALTY APPLIANCES, LLC	83-2852680	0.48	3712646

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FUTURUM, INC	74-2783501	0.06	1305202
2a Name of Participating Employer G & G FITNESS EQUIPMENT LLC	2b EIN 16-1365573	2c Percentage of Total Contributions for the Plan Year 0.06	2d Aggregate Account Balances Attributable to Participating Employer 4476052
2a Name of Participating Employer G & S SALES, INC.	2b EIN 75-2197738	2c Percentage of Total Contributions for the Plan Year 0.08	2d Aggregate Account Balances Attributable to Participating Employer 1438763
2a Name of Participating Employer G5 TEK SOLUTIONS LLC	2b EIN 26-3951647	2c Percentage of Total Contributions for the Plan Year 0.25	2d Aggregate Account Balances Attributable to Participating Employer 2599061
2a Name of Participating Employer GAB ENDOSCOPY CENTER, LTD.	2b EIN 54-2095652	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 159031
2a Name of Participating Employer GALBRAITH WEATHERBIE LAW PLLC	2b EIN 82-3295947	2c Percentage of Total Contributions for the Plan Year 0.11	2d Aggregate Account Balances Attributable to Participating Employer 1126023
2a Name of Participating Employer GA-MA & ASSOCIATES, INC.	2b EIN 59-1636454	2c Percentage of Total Contributions for the Plan Year 0.03	2d Aggregate Account Balances Attributable to Participating Employer 463038
2a Name of Participating Employer GARY'S PLUMBING AND FIRE, INC.	2b EIN 65-0335861	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 37535
2a Name of Participating Employer GASLIGHT GROUP LLC	2b EIN 27-5374632	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 35681

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GATESOURCE HR, LLC	92-2242803	0.00	1598
GATOR AV, LLC	87-1004075	0.07	152483
GATORLAND KUBOTA EQUIPMENT COMPANY, INC.	47-1805614	0.03	213345
GEIER'S CHOICE MEATS	59-2130086	0.01	573725
GELTRUDE & COMPANY, LLC	22-3363665	0.32	4199962
GENE LOVE CONTRACTING, INC.	57-1043571	0.00	0
GENERAL ENERGY SERVICES, INC.	88-2874326	0.00	0
GENEVA WORLDWIDE, INC	13-3897160	0.04	343028
GENTRY VASQUEZ ELECTRIC, INC.	82-4456574	0.02	97428

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GEORGE BEDDIE	55-6528633	0.01	122975
GEORGE KOSTAKIS, P.A.	59-2916508	0.01	214527
GF - CALUSA LLC	92-1690029	0.01	28826
GF - CAPRI LLC	92-1655294	0.01	27338
GF - WATERFORD LLC	92-1712983	0.01	24647
GILDENSON REAL ESTATE, LLC	83-2592655	0.02	263999
GILL LOGISTICS SERVICES, LLC	92-1402189	0.01	8926
GILMORE MOVING & STORAGE, INC.	59-0948405	0.08	1690189
GIULIANO-PAGANO CORPORATION	95-2659237	0.01	20622

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GIULIANTE MACHINE TOOL INC	13-3057079	0.02	25634
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GLOBAL FUELING SYSTEMS, INC	84-3203225	0.09	3069710
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GLOBAL GENES	26-3331487	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GLOBAL STREET, LLC	45-4995998	0.00	50426
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GNJ ASSOCIATES, INC. DBA PROFO	20-3603113	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GO FLORIDA INVESTMENTS, INC.	26-1761622	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLD MEDAL WINE CLUB LLC	87-4248815	0.05	203215
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLDEN STATE COMMUNICATIONS INC.	77-0387530	0.12	1513235
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLF BRADSHAW LLC	83-2958299	0.07	159883

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLF DEBARY LLC	85-2509379	0.02	34681
GOLFTEC BOULDER	45-3267473	0.03	226565
GONZER ADMINISTRATIVE, LLC	20-8073865	0.01	1167615
GOOD PEOPLE BREWING CO LLC	20-5029632	0.00	36027
GOODING'S SUPERMARKET, INC	59-1292169	0.00	843559
GOTCHOSEN, INC.	45-2386858	0.00	0
GRACE DIGITAL INC	26-0790604	0.19	4493924
GRANADA	27-1629955	0.01	46581
GRANITE MANAGEMENT GROUP, INC.	82-0716535	0.00	38477

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GRAPEVINE RELIEF AND COMMUNITY EXCHANGE	75-2195702	0.09	1424267
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GRAPHIX SOLUTIONS OF AMERICA, INC.	11-3657567	0.00	88283
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GRAVES FABRICATING, INC.	63-1266493	0.02	171560
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREAT JOB SPOT, INC.	59-3714664	0.02	224692
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREATER BLUFFTON CHAMBER & CONVENTION VISITORS BUREAU	35-2434545	0.00	8343
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREATER ERIE SURGERY CENTER, LLC	20-8251988	0.00	115681
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREEN EARTH REALTY, LLC	20-8934001	0.03	146463
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREEN GUARD SERVICES, INC	46-2843587	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREENBERG, WALDEN & GROSSMAN, LLC	22-1890508	0.00	60340

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GREYSTONE GOLF CLUB, INC.	63-1032330	0.25	4032327
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GROUND UP INTERNATIONAL LLC	81-2003049	0.15	578847
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GTG AUTOMATION	20-8397990	0.00	51031
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GTMN PARTNERS, LLC	20-2955144	0.00	108939
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDIAN ANGELS MEDICAL SERVICE DOGS, INC	27-2667123	0.06	262397
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GUARDIAN HEATING & AIR INC	83-3387822	0.04	176902
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULF COAST PLUMBING PARTNERS, INC.	84-1771191	0.02	95344
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULF SOUTH FOREST PRODUCTS, INC	65-0002925	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GULFTECH FIRE PROTECTION INC	46-0817329	0.01	40672

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GWELLA RHEUMATOLOGY, LLC	87-1494149	0.01	12429
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
H & T GLOBAL CIRCUIT FACTORY LLC DBA HT GLOBAL	59-3743461	0.02	473493
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
H.K. METALCRAFT MANUFACTURING COMPANY	13-1805127	0.07	4015399
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HABITAT FOR HUMANITY OF COLLIN COUNTY	75-2443511	0.03	418336
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAMPTON INN - CITY CENTER	59-3639110	0.00	15120
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAPPY VALLEY DAY FACILITY LLC	90-0427729	0.00	3651
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HARVEST SENSATIONS, LLC	06-1612238	0.14	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HATCH COLLECTION LLC	45-2518636	0.19	642473
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HAUK CUSTOM POOLS, LLC	75-2964632	0.02	460792

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HAWK ISLAND LEASING, LLC DBA T	26-2353794	0.00	161342
HAWORTH, BARBER & GERSTMAN, LLC	27-2346719	0.08	1991232
HEAFEY BENTLEY MGT	86-1112261	0.02	313254
HEALTHCARE2U LLC	46-4721499	0.09	575536
HEALTHTECH, INC.	27-1526464	0.00	0
HEARTCARE CONSULTANTS, LLC	26-3807662	0.04	469744
HELICON CHEMICAL COMPANY LLC	45-5627444	0.06	369140
HELIOS DATA, INC.	82-3673278	0.01	569220
HERITAGE GREENS GOLF ENTERPRISES LLC	59-3448966	0.00	41

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HERNANDEZ & VALOIS P.A.	82-1399123	0.02	33658
HERON CREEK ASSOCIATES, LTD	65-0870275	0.03	377258
HERTOG FOUNDATION, INC.	26-2002295	0.05	1255309
HFH SILVER SANDS, LLC	88-4103835	0.00	128
HH VENTURES GROUP, LLC	82-4108561	0.00	542
HIGHLAND COMMERCIAL MORTGAGE, LLC	27-1161830	0.18	3308768
HIGHLANDS ACCOUNTING GROUP, INC.	82-3217974	0.05	329451
HIGHLINE HOSPITALITY PARTNERS, LLC	84-3044346	0.12	1453018
HIGHLINE REAL ESTATE PARTNERS, LLC	84-3044272	0.03	352880

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
HIGHLINE STORAGE PARTNERS, LLC	84-3049297	0.29	1701236
HILDEBRAND LAW FIRM, LLC	27-0489997	0.08	134150
HISTORICAL SOCIETY OF MARTIN COUNTY, INC.	59-0913326	0.03	295215
HOLD THYSSEN INC.	59-3077038	0.04	511401
HOLDEN FOOD MART, INC	63-1151748	0.00	55858
HOLE IN THE WALL DRYWALL REPAIR, LLC	46-5137416	0.03	203218
HOLIDAY INN CRESTVIEW	22-1727665	0.00	266516
HOLLIDAY KARATINOS LAW FIRM, PLLC	87-0778702	0.04	1326220
HOME PRO TITLE, INC.	35-2668913	0.00	7930

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HOMEOWNERS OF PORT CHARLOTTE VILLAGE	59-2283369	0.01	35236
HONOR CAPITAL CORPORATION	59-2611508	0.11	1512651
HOPEWELL BEVERAGE, INC.	84-4366862	0.00	15051
HORIZON ITALIAN TILE	75-2633490	0.00	17853
HORTICULTURAL ARTS & PARK INSTITUTE INC.	59-3378866	0.01	38922
HOSPITAL & HEALTHCARE COMPENSATION SERVICE, INC.	22-2326784	0.01	257548
HOSS BOOT COMPANY INC.	82-4800634	0.02	158242
HOSTED AMERICA LLC	90-0835482	0.00	8614
HOUNDS TOWN USA LLC	87-4817009	0.08	406168

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HRH RACING INC	46-3756763	0.01	17191
HSBLOX, INC.	83-0671439	0.01	1477129
HSD USA, INC.	52-2299080	0.04	0
HTLC VENTURES INC.	59-3731484	0.08	829676
HTM-MBS, LLC	82-4435302	0.01	8679
HUDCO INDUSTRIAL PRODUCTS INC	63-0720210	0.03	229571
HUMANE SOCIETY OF MANATEE COUNTY, INC	59-1819652	0.02	610365
HUMANTOLD PSYCHOTHERAPY LCSW	27-1620688	0.05	0
HURLEY CORP. DBA H & E AIR CAR	51-0425920	0.00	39957

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HYDRAMASTER, LLC	83-1763443	0.00	37411
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ICAN BENEFIT GROUP LLC	20-2395888	0.00	43021
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ICO DEVELOPMENT, LLC	36-4543626	0.01	102602
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ICORECONNECT INC	13-4182867	0.08	252339
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IDATIX CORPORATION	59-3641278	0.00	156118
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IFB AMERICAS, INC	20-4746772	0.00	881945
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
I-LOG, LLC	20-3683553	0.02	187597
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IMAGE 360 ARLINGTON	75-2674909	0.02	354912
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
IMAGE ONE CORPORATION	59-3281176	0.00	0

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IMAGETECH SYSTEMS, LLC	87-3882264	0.04	369869
IMPERIAL FIRE PROTECTION, INC.	13-4228875	0.02	174055
IMPRESSIONS IN WOOD, INC.	76-0356904	0.04	1647092
IMS-MERITUS, LLC	85-3923847	0.00	4531
INA A. COLEN ACADEMY	85-3353649	0.12	321161
INDIAN RIVER COUNTY HEALTHY START COALITION INC	65-0363222	0.02	179891
INDITAL US LIMITED	76-0440628	0.06	0
INFRASTRUCTURE EQUIPMENT GROUP LLC	82-0709946	0.01	11391
INFUSION TREATMENT CENTERS	84-1287146	0.05	666015

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IN-HOUSE PUBLIC RELATIONS, LLC DBA IHPR	26-2786021	0.00	0
INLAND EMPIRE CONTAINER, LLC	86-2224131	0.01	18446
INNOVATIVE MARKETING & DISTRIB	65-0865124	0.07	756133
INSIDE & OUT MAINTENANCE, LLC	47-4386247	0.00	30309
INSIDE STORIES LLC	47-5344623	0.08	777605
INSIGHT NEWS & FEATURES, INC.	81-0567662	0.00	0
INSULA APARTMENT MANAGEMENT, LLC	46-4392403	0.00	133346
INTEGRA REALTY RESOURCES HOLDINGS LLC	46-4986806	0.00	178909
INTEGRATED FRESH SOLUTIONS, LLC	20-4351996	0.29	3770351

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INTEGRATED PREMISE TECHNOLOGY	59-3341649	0.03	342106
INTEGRATED SUPPORT SERVICES	54-2117810	0.33	3882530
INTERMARK MANAGEMENT CORP	57-0836340	0.14	2457655
INTERNATIONAL MEDICAL MANAGEME	45-4786965	0.00	8032
INTRUST PARTNERS	83-4700689	0.04	504108
INVICTUS VENTURES, INC.	45-2383360	0.00	708
ISCHEBECK USA, INC.	27-0864068	0.06	466265
ISERVE RESIDENTIAL LENDING LLC	26-4193875	0.20	6331528
ISLAND REAL ESTATE ASSOCIATES, INC.	65-0521356	0.00	78981

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J R FAMILY OFFICE MANAGEMENT INC.	99-0405571	0.00	5994
J&J MISSION CRITICAL LLC	82-3297991	0.06	641176
J. CAULEY & ASSOCIATES, LLC	45-1662045	0.00	1284
J. MEYERS CUSTOM BUILDER INC.	59-3524628	0.01	123487
JAEGER SPINDLES NORTH AMERICA, CORP	36-4796417	0.00	50386
JAF COMMUNICATIONS INC	88-1791206	0.14	849745
JAMES E. LANG, MD, PA	65-0642257	0.04	688287
JANET H. & C. HARRY KNOWLES FOUNDATION, INC.	01-0485964	0.19	4918041
JAPAKU ENTERPRISES LLC DBA KITCHEN GUARD OF NW	88-1484405	0.00	1707

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JASON POZNER, M.D., P.A.	65-0964784	0.03	0
JAX ELECTRICAL CONTRACTING, INC.	04-3836433	0.01	59679
JC WINDOW FASHIONS INC	45-4030484	0.00	2032
JC'S BRITISH & 4X4, INC	20-2171226	0.04	398777
JDETIPS, LNC.	81-4630165	0.01	88019
JEFF MONTGOMERY ASSOCIATES	59-2366512	0.03	516656
JEFFREY D. RETTIG, D.O., P.A.	74-2505637	0.00	57128
JESSICA V. SHELLARD, CPA, LLC	26-1227430	0.01	328478
JILL V. HICKEY, DPM, PA	59-3678720	0.00	37127

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JIMCO SALES & MANUFACTURING, INC.	75-1292034	0.11	1969146
JMDG ARCHITECTURE, INC.	83-1572620	0.00	11665
JOBS FOR FLORIDA'S GRADUATES	59-3580979	0.01	271722
JOHN A. TUCKER, M.D., P.A.	63-0994137	0.00	12540
JOHN ATENCIO GOLDSMITH, LTD.	84-0793672	0.02	780518
JOHN CANNON HOMES, INC.	65-0773295	0.18	3906181
JOHN WITT ENTERPRISES, INC.	42-1689161	0.00	0
JORDAN AIR, INC.	58-2033764	0.03	39184
JOSEPH GIANNONE PLUMBING, HEATING & AIR CONDITIONING	26-2338402	0.00	31555

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JOUFFRE, INC.	52-2325032	0.07	0
JOURNEYS IN COMMUNITY LIVING	62-0980251	0.02	71996
JOYCE HOMES, INC.	84-1150610	0.00	32583
JR INVESTMENT PROPERTIES, LLC	86-1975227	0.00	15347
JUICE BEAUTY, INC.	94-3380263	0.11	0
JUNIPER RESIDENTIAL MANAGEMENT GROUP, LLC	45-1349594	0.13	1847691
JUVENTIO, LLC	80-0883342	0.00	203090
K2 VENTURE CAPITAL LLC	85-1763748	0.10	487337
KAHN PROPERTIES, INC.	57-0871207	0.01	1054752

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KALAJU TRANS LLC	83-3819644	0.02	87994
KAPP MORRISON, LLP	81-2894063	0.07	0
KARATS & CARATS OF MAITLAND, INC.	59-2694065	0.01	1077283
KARHL HOLDINGS, LLC	27-5043888	0.05	207348
KARLVILLE DEVELOPMENT, LLC	65-0989770	0.02	0
KAS PET LLC	46-5344118	0.05	408198
KATZ HOUSE OF COLOR, INC	82-3583056	0.00	10253
KENNEDY INVESTMENTS, INC.	59-2731447	0.05	242285
KEY 7 SOFTWARE LLC	45-4668677	0.00	10562

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KEY HOTEL GROUP, LLC	46-1409914	0.08	1571365
2a Name of Participating Employer KEYS INSURANCE SERVICES, INC. (ROSIER INSURANCE)	13-4259726	0.06	780506
2a Name of Participating Employer KEYS-CALDWELL, INC.	59-1863831	0.00	29250
2a Name of Participating Employer KIDDS QUALITY CLEANING	20-1942423	0.00	117
2a Name of Participating Employer KIDS HOUSE OF SEMINOLE, INC.	59-3415005	0.01	225062
2a Name of Participating Employer KILBOURNE HEATING & AIR CONDITIONING INC	59-2842891	0.02	266257
2a Name of Participating Employer KILIAN ENGINEERING, INC.	72-1523384	0.15	599497
2a Name of Participating Employer KIMBLE ELECTRIC COMPANY, LLC	65-1162629	0.00	36430
2a Name of Participating Employer KIMBROUGH FIRE EXTINGUISHER CO. INC.	75-2018729	0.00	821838

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KINCAID PLASTICS INC.	27-2243377	0.01	129566
KINETIC IMAGE CORPORATION	27-3091157	0.00	234847
KINGSTON-MIAMI TRADING COMPANY	59-2233518	0.01	22293
KINSER CONSTRUCTION COMPANY	73-0732015	0.00	75655
KLAPPRODT POOLS I LTD	56-2613200	0.00	577672
KLEEN PRODUCTS, INC.	73-0744170	0.00	205570
KNACK GLOBAL, LLC	26-1875057	0.00	239045
KNOX-ADDLEY ART + DESIGN SERVICES, LLC	45-3582970	0.01	288984
KPK HOSPITALITY LLC	82-2027851	0.00	0

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
KPS ALARMS, INC.	01-0580133	0.10	481976
KPS FIRE SPRINKLERS, INC	27-3402016	0.03	202053
KR AESTHETICS LLC	84-2880491	0.08	290496
KRAZY KAT SPORTSWEAR, LLC	22-3480562	0.00	446131
KRISTIN M. JACKSON, LLC	83-1677882	0.02	175837
KROMATID, INC.	26-0431248	0.25	1407340
L & L CONTRACTORS LLC	80-0964359	0.00	1674
L&H CPAS AND ADVISORS LLC	82-2968572	0.15	748623
LACY AND BARRETT LLC	47-4191964	0.00	67504

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Part II Participating Employer Information (Continued).

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LAFAYETTE RE MANAGEMENT LLC	45-3670172	0.48	3015369
LAKE WORTH CHRISTIAN SCHOOL SOCIETY INC	59-0855397	0.23	2075821
LAKES OF DELRAY, INC	59-2596584	0.01	612278
LAKESIDE FAMILY DENTISTRY	20-8243635	0.08	1136314
LAMOTTE BUILDERS	57-0724098	0.00	31446
LAN LNFOTECH, LLC	80-0392071	0.07	1107860
LANDMARK CONTRACTING, INC.	59-2282672	0.07	415345
LANDRETH LIGHTING, INC	26-3850392	0.20	2404626
LANDSAW EYECARE	02-0561487	0.00	2644

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LANE ELECTRONICS AND ALARM SYSTEMS, INC.	59-2907302	0.03	195852
LANIER EDUCATION AND RESEARCH NETWORK	75-2076531	0.00	13292
LANPHEAR TOOLS WORKS INC	05-0548400	0.03	85612
LARTA INSTITUTE	95-4609347	0.12	2842712
LASER LENS TEK INC	65-1142095	0.03	493505
LASER PEGS VENTURES LLC	27-3356323	0.00	59492
LASER SCIENTIFIC, LLC	83-0389053	0.03	0
LAURA DEVINE ATTORNEYS LLC	26-0213205	0.03	531997
LAW OFFICES OF LANGLEY & CHANG	46-5365600	0.00	62018

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LAW OFFICES OF NOLAN & LANGE	20-1894028	0.00	274443
LAWN PRO MAINTENANCE INC	59-3648783	0.00	0
LAWRENCE LOWY ASSOCIATES	13-3779161	0.15	4320422
LE CENTRE DENTISTRY PLLC	93-2716102	0.04	568846
LEE ARCHITECTS/INTERIOR DESIGNERS PC	84-0795654	0.06	2058613
LEE COUNTY HOUSING DEVELOPMENT CORP	65-0295038	0.02	111148
LEGACY RECORDS NYC LLC	81-5212636	0.01	6677
LEGEND ASSET MANAGEMENT II LLC	26-4482560	0.00	9834
LEGION HEALTHCARE PARTNERS, LLC	84-1943139	0.03	857494

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LEISURE INTERACTIVE, LLC	56-2509136	0.01	0
LENDER LEGAL PLLC	46-1030201	0.15	2213107
LEVEL FOUR ORTHOTICS & PROSTHETICS, INC.	83-0359603	0.00	350657
LEVINE PROPERTIES INC.	56-1509116	0.04	827449
LIBERTY RENT, LLC	86-2149683	0.03	0
LIDOCHEM LLC	99-2217282	0.12	2075231
LIFE CARE ASSOCIATES INC.	65-0702800	0.01	19456
LIFE IS LIFE LLC	45-4963532	0.00	8000
LIFE'S ABUNDANCE, INC.	46-5246499	0.05	521315

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LIFETIME SMILES LLC	80-0427436	0.06	659747
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIGHTHOUSE JEWELRY UTC, LLC	61-1741765	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIGHTING RESOURCES LLC	25-1905692	0.16	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LILLY & VAN NESS, LLP	84-3390070	0.03	51031
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LIMITLESS HOMES, LLC	84-1815910	0.05	404994
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINGO, INC.	59-3233818	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINKSTERS MANAGEMENT, LLC	26-1403283	0.37	5458091
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINRENE FURNITURE, INC.	56-1898671	0.00	69372
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINT OUT OF SW FL INC	47-4561333	0.01	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LINZER PRODUCTS CORP	13-5211020	0.21	8347579
LITTLE HAWK INVESTMENTS, LLC	47-4636607	0.05	467143
LITTLE SMILES OF MONTAGUE LLC	87-3645147	0.00	19
LITTLESTONE MANAGEMENT	51-0630065	0.05	423241
LIVE BUILDING SYSTEMS, LLC	81-1970661	0.03	216994
LIVING WELL BALANCED NYC MEDICAL PLLC	87-4542228	0.00	19327
LM FUNDING LLC	26-2319938	0.12	350991
LOAN SCIENCE, LLC	26-3696826	0.00	5195
LOCAL AD FACE, LLC	47-4088705	0.01	32031

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LOCAL CUTS MEAT COMPANY, LLC	85-3761443	0.01	15774
LOCKLEAR & ASSOCIATES PROFESSIONAL CORPORATION	45-5224708	0.00	95057
LONE STAR PEDIATRICS	54-2115447	0.00	57010
LONESTAR EMS, LLC	86-2639935	0.12	793499
LONG BEACH ICE, INC	26-4424095	0.01	40243
LONG ISLAND ANIMAL EMERGENCY, PLLC	47-3101386	0.06	347457
LONGHORN TUBE, LLC	20-3363405	0.00	2925
LOS ANGELES PRODUCE DISTRIBUTORS, LLC	81-3740880	0.02	22881
LOS ANGELES PRODUCE FRESH	82-3415567	0.10	579462

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LOTUS HEALING CENTERS, INC	85-0597330	0.01	15462
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LOUISIANA COMMUNITY HEALTH CENTER, INC.	35-2681604	0.00	18294
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LQPMC SERVICES LLC	87-1696311	0.03	160453
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LUCKIE & COMPANY, LLC	63-1160366	0.58	8895629
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LUMINA EMPLOYMENT CORP.	82-3897534	0.00	50623
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LUX-ART SILKS INTERNATIONAL, INC.	65-0950055	0.00	518952
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
M & J PLUMBING CONTRACTORS, INC.	58-1999558	0.00	79104
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
M & S STEEL, INC.	58-1705022	0.02	458819
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
M.C. MILLER CO., INC.	22-1777475	0.08	1349853

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MACCIO ENTERPRISES, LLC DBA TH	82-1199589	0.07	754158
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MACH INDUSTRIES INC.	92-0850019	0.01	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MACKEL ARTHUR CARTER ENTERPRIS	27-2045135	0.07	289474
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MACROCAP LABORATORIES, LLC	92-3639207	0.22	1524603
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAIN MECHANICAL SERVICE, INC.	59-2327199	0.02	87686
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAJOR AIR SERVICES CORP	11-2007668	0.04	193521
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MALIN-DIAZ IRRIGATION	59-3646033	0.01	106820
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MANGO BOTTLING, INC.	59-3132873	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAPLE HOLISTICS, LLC	47-1293498	0.01	215406

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MAR MEDICAL CONSULTANTS PA	65-1132238	0.07	786025
MARINE MAMMAL CARE CENTER LOS ANGELES	47-5249182	0.00	0
MARIO ALMEIDA, M.D. P.A.	65-0310039	0.04	824193
MARK BOND & COMPANY, INC.	75-2174264	0.01	0
MARK L MEYER MD PLLC	55-0869609	0.01	506800
MARTIN INGRAM ENTERPRISES, INC.	75-1230528	0.05	1138534
MASTER THE POSSIBILITIES, INC.	46-2693153	0.02	89413
MASTERPIECE DESIGN GROUP, LLC	20-1837863	0.02	30101
MASTERWORD SERVICES, INC	76-0393601	0.07	1958029

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MATTHEWS DESIGN GROUP	92-0592519	0.00	0
MAUI WOWI	41-2040884	0.00	20268
MAY SANDS MONTESSORI SCHOOL, INC.	27-3007025	0.00	0
MAY SANDS MONTESSORI SCHOOL, INC.	65-0798013	0.00	165137
MAYACOO LAKES II CLUB INC.	27-0501192	0.00	7067
MB FLORIDA LIMITED, LLC	65-0443290	0.03	0
MB&R ENGINEERING, INC.	58-2486929	0.01	242433
MCHENRY CONSULTING INC.	81-0563681	0.09	3138054
MCKILLOP LAW FIRM PL	26-2627754	0.09	768575

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MCKINNEY CAPITAL	26-4202626	0.01	216530
MCMULLIN LEGAL SERVICES LLC	45-5289265	0.01	50745
MEALEY GROUP, INC.	65-1043421	1.12	10436350
MEASURING USABILITY, LLC	59-3827627	0.22	1065971
MEBROM LLC	84-4635270	0.05	573123
MEDICAL LABORATORY DIAGNOSTICS, INC.	22-2768584	0.00	192792
MEDPLEX OUTPATIENT SURGERY CENTER, LTD.	76-0353620	0.09	1090966
MEDWORKS MANAGEMENT, LLC	27-2243293	0.11	1892637
MELISSA SHOES	26-1830997	0.00	307882

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MELONE LAW, P.C.	47-1534202	0.11	688190
MERITUS CORP	20-5355432	0.00	7584
MERLIN IT SUPPORT, INC.	20-1250191	0.00	169382
METRO CINEMA LLC	87-3396945	0.05	83574
METROPICA DEVELOPMENT, LLC	32-0417365	0.00	13680
MGC SYSTEMS CORP	98-0374347	0.09	208502
MGL PARTNERS, INC. DBA GOOD'S HOME FURNISHINGS	26-4543486	0.17	1658277
MH VERTICAL, LLC	87-1596948	0.04	125889
MIAMI TRANSFORMERS CORP.	65-0647554	0.00	23336

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MIAMI TRANSFORMERS SERVICE AND REPAIR CORP.	35-2301322	0.00	15286
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MICHAEL HYATT & COMPANY LLC, DBA FULL FOCUS	45-5327778	0.01	292247
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MID-FLORIDA PRIMARY CARE, P.A.	03-0374583	0.08	2757505
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MILANO BROTHERS INTERNATIONAL CORPORATION	13-1044608	0.00	28873
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MILLENIA KIDZ INC	83-4443681	0.00	542
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MILLENNIUM DENTAL	85-2099466	0.01	14045
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MINDFUL CARE, INC	83-3361300	0.57	1905794
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MISSISSIPPI EYE ASSOCIATES	64-0790748	0.02	63939
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MNJ ENTERPRISES	32-0469202	0.00	128

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MNSK HOTELS, LLC	87-4641079	0.02	33423
MOBILE COMM, LLC DBA LEADERSHI	20-0045473	0.00	213007
MOCZULSKI & MOCZULSKI PROPERTIES, INC.	76-0633161	0.10	2080402
MODCLOTH HOLDINGS, LLC	84-3488131	0.00	467853
MODERN AIR SOLUTIONS, LLC	46-1813227	0.04	381610
MOHRMANN PHARMACIES	74-1727322	0.00	29117
MOMENTUM SOLAR	27-1242539	0.64	4270377
MONROE LAW P.A.	93-2357969	0.03	166932
MONTESSORI SCHOOL OF DOWNTOWN CLEARLAKE LLC	26-4033568	0.01	71251

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MONTESSORI SCHOOL OF PEARLAND LP	45-3623814	0.00	574
MONUMENT HEALTH, LLC	85-0850460	0.00	8361
MORTGAGE CONSULTANTS, LTD.	75-2104203	0.00	29980
MOSSLAND FARMS, INC.	58-2013632	0.01	579466
MOTOR PARTS OF OCALA LLC; DBA TITAN ENGINES	59-1691123	0.01	66467
MOUTAINVIEW CHEM DRY	20-0620135	0.02	320059
MPP MANAGEMENT, INC.	43-1765083	0.07	2033127
MSA ANNUITY, LLC	51-0503284	0.02	610906
MSC MANAGEMENT, INC.	30-0806717	0.05	581607

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MST DENTAL, P.C.	63-0847718	0.00	1454658
MUELLER LAW, PLLC	27-4651001	0.00	189805
MULTIPOINT COMMUNICATIONS, INC.	59-3633815	0.03	421872
MURATORE TECHNOLOGY GROUP, INC.	13-4152787	0.00	157950
MURPHY, MILLER & BAGLIERI, LLP	20-1689274	0.29	7757569
MURRELL, INC.	59-2193650	0.02	305015
MYLAN PARK FOUNDATION INC.	55-0765182	0.01	24486
NANO BANC	42-1728855	0.04	0
NASSAU ELECTRICAL CONTRACTORS INC.	82-3043100	0.01	10596

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NATIONAL ENVY EMPLOYEE LEASING, LLC.	81-3577240	0.00	297
NATIONAL EXEMPTION SERVICE LLC	59-2908281	0.08	1883656
NATIONAL FINANCIAL COMPANIES, LLC	30-0623129	0.01	54279
NAVARRE BEACH LAUNDRY DBA LGG HOLDINGS LLC	46-4301668	0.00	44124
NAVARRE LUMBER & SUPPLY, INC	59-2982397	0.00	34001
NBE NATIONAL BANK EQUIPMENT, INC.	01-0625789	0.05	476720
NESEVO US, INC.	81-3537366	0.00	96
NETWORK REPUBLIC, INC.	27-0680164	0.01	81659
NEW DEAL MERCANTILE, INC.	74-1757175	0.00	193938

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW MILLENIUM SMILES DBA SAVAN	58-2531858	0.04	853206
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEW WIDE INDUSTRIAL (USA) CO., LTD	27-0865711	0.02	714227
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEWCO WARRANTY SERVICES, INC.	65-0898491	0.03	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NEXCOR FOOD SAFETY TECHNOLOGIES, INC.	47-2383225	0.06	247922
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NFN8 CAPITAL LLC	93-3214533	0.00	8107
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NGUYEN DENTAL PL	26-0222419	0.02	490089
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NICKEL PLATE PROPERTIES & MANAGEMENT	26-2646032	0.06	705205
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NIPPON CONCEPT AMERICA, LLC	99-0373678	0.01	6855
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NIROC CONSULTANTS, INC.	27-3237191	0.02	658990

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NLTG, INC DBA THE ONE TO ONE G	04-3147676	0.00	898
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NOAH'S ARK ANIMAL HOSPITAL	01-0759863	0.04	519615
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NOMAD FIELD SERVICES, LLC	46-2296152	0.00	14094
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORM'S RV, INC.	33-0783544	0.00	6110
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH AMERICAN DIRECTORY SERVICES, LLC	85-3979810	0.01	77426
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH ATLANTIC PAINTING COMPANY, INC.	81-0678821	0.01	63666
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH COUNTY CHARTER SCHOOL, INC.	65-0865183	0.06	711568
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH COUNTY FITNESS & PERFORMANCE, INC	87-4329969	0.00	126
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
NORTH GEORGIA AUTISM CENTER LLC	82-5484002	0.12	657815

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NORTH TEXAS URGENT CARE, P.A.	61-1643282	0.06	451391
NORTH YORK RESIDENTIAL LLC	93-3651015	0.01	12401
NORTHWEST SEAFOOD, INC.	59-3077199	0.01	127995
NOVATIO SOLUTIONS, LLC DBA NOVATIO	36-3990452	0.00	1758
NPZ LAW GROUP, P. C.	22-3241533	0.12	2779841
OAKBROOK APARTMENTS	52-1737346	0.00	0
OBSESSED GARAGE, LLC	81-2546411	0.14	1173820
OBVIYO, INC.	87-1566357	0.00	0
OCEAN STUDIES CHARTER SCHOOL	27-0677326	0.05	167923

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OFFICE FURNITURE NOW INC.	81-1857489	0.00	11687
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OFFICE INTERIORS GROUP, INC.	80-0302523	0.09	218335
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OKLAHOMA CITY INNOVATION DISTRICT INC.	73-0756329	0.01	91760
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OM ENGINEERING SERVICES, INC	42-1677099	0.06	1382540
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ON TRACK SCHOOL INC.	86-1257815	0.01	158060
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONC NEWARK CLUB, LLC DBA THE N	20-5612517	0.00	14070
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONE SPIRIT LEARNING ALLIANCE, LTD.	27-0027902	0.01	24158
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONE WORLD INC.	58-2402938	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ONEILL INDUSTRIES INTERNATIONAL, INC.	82-3032891	0.05	310904

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ONEONTA DENTAL CENTER	72-1380930	0.03	1793383
ONEVISION RESOURCES, INC.	81-4673303	0.08	771001
OPEN EDUCATION LLC	27-4450263	0.17	4301461
OPTICAT LLC	26-4731828	0.07	265270
OPTIONS INFORMATION TECHNOLOGY LLC	20-3855394	0.47	7166691
ORAZUL ENERGIA MANAGEMENT LLC	81-4706450	0.00	396181
OREST M KRAJNYK MD PA	47-5431125	0.01	230748
ORION PAYMENT SYSTEMS, INC.	76-0629546	0.00	89216
ORLANDO PEDIATRIC PULMONARY AND SLEEP ASSOCIATES PA	32-0017907	0.24	5651950

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ORLANDO RENTCO LLC	82-5504514	0.01	88685
ORSAK MEDICAL ASSOCIATION	76-0607323	0.02	29906
ORTHOPEDIC SURGERY CENTER OF CLEARWATER	59-3594816	0.00	210264
OUT OF HOME AMERICA, INC	06-1487435	0.03	345181
OUTPATIENT SURGERY CENTER OF ST. AUGUSTINE, LLC	20-2047704	0.00	325944
OUTRIGGER ENERGY II, LLC	82-3529662	0.16	2882229
OVERBROOK ASSET MANAGEMENT LLC	86-1758201	0.00	1582
OVERTURE RESURFACING INC.DBA OVERTURE ORTHO	85-2263128	0.03	83282
OWA USA CORP	38-4078129	0.01	58537

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OXFORD REALTY GROUP LLC	04-3697052	0.02	128324
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
OZARE CARE, INC.	65-1092691	0.00	1310619
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
P2 SOLUTIONS	45-1571958	0.00	23183
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACA FOODS LLC	27-4334780	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACES MEDEQUIP, LLC	26-1805301	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACESETTERS, INC.	59-2387581	0.07	1282239
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACIFIC LIGHT & HOLOGRAM, INC.	82-4222191	0.34	2795230
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACIFIC TECHNOLOGIES AND SOLUTIONS, LLC	82-5098345	0.24	928744
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACKARD CAPITAL, LLC	83-3660975	0.09	758354

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PACKET360 INC	84-3099352	0.00	2429
2a Name of Participating Employer PALADIN OPERATING COMPANY, LLC	92-0293911	0.05	620678
2a Name of Participating Employer PALADIN PHYSICIANS SERVICES, P.A.	45-4024265	0.00	68110
2a Name of Participating Employer PALATKA OAKS APARTMENTS	06-1819528	0.01	74707
2a Name of Participating Employer PALMER RANCH MASTER PROPERTY OWNERS ASSOCIATION	59-2782438	0.03	301355
2a Name of Participating Employer PANHANDLE MEDICAL SERVICES, LLC	59-3194768	0.00	0
2a Name of Participating Employer PANTHEON HOLDINGS, LLC	87-1377558	0.02	71406
2a Name of Participating Employer PARAMOUNT CONSTRUCTION AND RESTORATION LLC	20-3363012	0.02	460498
2a Name of Participating Employer PARAMOUNT POWER, INC	59-3386520	0.01	33943

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PARIS PRESENTS INC.	36-2115043	0.62	10788777
PARSLEY CONSTRUCTION	59-3007984	0.00	14
PARTHENON MEDICAL CENTER	27-4083175	0.00	90836
PAS CARGO USA, INC.	42-1539006	0.03	0
PASSER INC	56-2468076	0.02	130750
PATHFINDER BUSINESS STRATEGIES, LLC	20-0635855	0.03	224148
PCE MANAGEMENT, INC	01-0713242	0.29	3903773
PEAKE, FOWLER & ASSOCIATES, PA	57-1102076	0.03	683260
PEDIATRIC CARE OF AUSTIN, P.A.	74-2809697	0.00	115101

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PEEBLES PROSTHETICS, INC.	84-1160766	0.00	0
PEGGY ADAMS ANIMAL RESCUE LEAG	59-0637811	0.10	976195
PERFECT DRIVE GOLF VILLAS	20-4914871	0.00	2922
PERFORMANCE PHYSICAL THERAPY OF NAPLES, INC.	06-1693930	0.15	3815337
PERRINE'S PRODUCE INC	77-0617269	0.04	64223
PERRY & CO	84-0614213	0.00	0
PERRY BAROMEDICAL CORPORATION	65-0314327	0.06	1207133
PERSONS AUTO PARTS, INC	59-2049137	0.02	692120
PETITT, PLLC	27-3424894	0.03	537865

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PETROS SERVICES, LLC	80-0776392	0.42	2536202
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHASE ENGINEERING, INC.	75-2502360	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHILIP A. BATES, P.A.	59-3467087	0.00	7748
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHOENIX DATA SECURITY, INC.	45-2211547	0.22	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PHONESUITE UNIFY	84-4275342	0.00	36713
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PIAULE CATSKILL OPERATIONS LLC	86-2096809	0.00	53303
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PICSOLVE, INC.	20-2191432	0.02	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PIERCE SALES COMPANY INC.	34-1200546	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PINNACLE COMPANIES	22-3693818	0.00	0

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PINNACLE HOTEL MANAGEMENT, LLC	52-2051492	0.16	2168618
PIONEER MOTOR BEARING COMPANY	62-1388933	0.32	6736211
PIRTEK JERSEY VILLAGE		0.00	17861
PITTMAN INDUSTRIAL MARKETING INC.	63-1035249	0.03	1200164
PIVOT POINT SECURITY, INC.	22-3752669	0.00	1454928
PLANET SMILE PARTNERS INC.	86-2480239	0.00	5234
PLASTICAL LLC	83-4711890	0.01	21431
PLATINUM PROPERTY MANAGEMENT SERVICES INC	75-3251801	0.06	1043407
PLAYHUT, INC.	95-4373438	0.00	9701

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PLS PRODUCTIONS	14-4407050	0.00	2313
PMD CONSULTING	83-3658871	0.00	0
POD MANAGEMENT INC	65-0276640	0.06	1323577
PORT A PIT, INC.	59-2120599	0.00	9515
PORT ORANGE PEDIATRICS PA	57-1230607	0.01	326117
PORT ORANGE SOUTH DAYTONA CHAMBER OF COMMERCE	59-2074508	0.00	67472
POWDER RIVER SURGERY CENTER LLC	84-5166436	0.14	797376
POWERVZ, LLC	88-4185799	0.00	30978
PRECISE CABLES INCORPORATED	84-1332801	0.17	1815442

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRECISION ALIGN LLC	84-4678332	0.00	2568
PRECISION BONE AND JOINT SURGERY CENTER LLC	86-1302912	0.00	5801
PRECISION GRAPHICS, INC.	04-3699405	0.02	0
PRECISION HOMECRAFTERS LLC	63-1186743	0.03	46495
PRECISION TRADING CORP	59-1938903	0.00	89054
PREFERRED COMPOSITE SERVICES, INC.	65-0665511	0.38	1466798
PREMIER CARE HOMECARE	20-4448771	0.00	10922
PREMIER FABRICATING, LLC (FOCUS METAL SOLUTIONS)	47-2484379	0.00	5274
PREMIER MEDICAL ASSOCIATES OF FLORIDA HEALTHCARE P.A.	85-3886892	0.54	4376628

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRESCHOOL PARTNERS	46-4519557	0.02	418220
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRIMARY CHARTER SCHOOLS, INC.	59-3588811	0.00	931
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRINCECO INC.	20-2014510	0.00	592352
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRINTSWELL, INC.	63-1048794	0.25	2743033
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROACTIVE TECHNOLOGIES, INC.	75-2710126	0.05	1169831
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRODEVAL CORP	87-1671638	0.05	237297
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PRODUCT SOURCE INTERNATIONAL DATACOMM, LLC	22-3749078	0.05	6756620
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROFESSIONAL ELECTRICAL SERVICES, INC	59-3453672	0.17	457301
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PROFESSIONAL FUNERAL SERVICES	20-5730672	0.02	227387

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PROFESSIONAL LAND SURVEYORS, LLC	88-1956349	0.05	381814
PROFESSIONAL MANAGEMENT, INC.	59-1725802	0.12	996058
PROFESSIONAL PAINTING & PAPERHANGING, INC.	59-3557293	0.02	32979
PROGRESSIVE METAL FINISHERS, INC.	63-1009487	0.02	737626
PROSCAPE HOLDINGS, INC.	20-2495327	0.00	203469
PSI BUSINESS COMPUTERS, INC. T	22-2821404	0.00	0
PULMONARY ASSOCIATES OF ST. AUGUSTINE, P.A.	20-1395801	0.10	2577108
PURADYN FILTER TECHNOLOGIES, INC.	65-0125129	0.00	162172
PURCHASING BY PREMIER LLC	27-1787383	0.06	3623347

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PURELY ELIZABETH LLC	82-0839763	0.34	0
2a Name of Participating Employer PVHA/SIMS - SAVANNAH COMMONS, LLC	20-8810643	0.00	67724
2a Name of Participating Employer PYA ANALYTICS, LLC	46-2482646	0.00	16940
2a Name of Participating Employer QBENCH INC	88-3695087	0.13	494508
2a Name of Participating Employer QCS ACQUISITION CORPORATION	83-3291995	0.39	3089899
2a Name of Participating Employer QP3 TRAINING SYSTEMS, INC.	59-3646862	0.01	277180
2a Name of Participating Employer QUALPATH INC.	65-1146661	0.03	336814
2a Name of Participating Employer QUANTUM MEDICAL SUPPLY INC.	58-2672225	0.04	189093
2a Name of Participating Employer QUANTUM SYSTEMS INC	35-2728202	0.25	1782023

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QUEUE SOFTWARE INC.	47-1052622	0.00	201269
QUORUM SERVICES, LLC	20-2148530	0.06	0
R&R OF PENSACOLA, LLC	81-1361197	0.00	2058
R.B. JACKSON ILL, P.C.	20-3232023	0.05	339878
R.O.C.K., RIDE ON CENTER FOR KIDS	74-2917659	0.00	0
RADIATION SHIELDING INC	20-3996016	0.00	6965
RALI SOLUTIONS, LLC	85-4131251	0.00	0
RAM EYE CARE AND RETINA CENTER, PA	30-0029956	0.04	272324
RAMAR ENTERPRISES OF BROWARD, INC	42-1568291	0.00	443312

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RATAN MANAGEMENT GROUP, LLC	45-2554946	0.02	78087
RAYMARK MECHANICAL, INC.	76-0463618	0.00	19837
RAZOM, INC.	46-4604398	0.14	288188
RDK ASSETS, INC	86-2038316	0.00	0
REACH FOR THE STARS LEARNING CENTER INC	20-3042280	0.04	143932
REALTY MOGUL CO.	45-5262135	0.24	3167948
REB TECHNOLOGIES, INC.	75-2684918	0.05	2073261
REDWAVE TECHNOLOGY GROUP, LLC	27-3948187	0.02	104555
REINFORCING SUPPLY LLC	11-3584472	0.04	444814

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REINLAND CORP.	75-2358778	0.03	764985
2a Name of Participating Employer REL ACOUSTICS AMERICA LIMITED, LLC.	47-1009146	0.00	76190
2a Name of Participating Employer RELEASE MARINE, INC.	58-1861312	0.11	364509
2a Name of Participating Employer RELIABLE BRONZE & MANUFACTURING, INC.	41-0945773	0.11	0
2a Name of Participating Employer RELIABLE SPREADER INC.	59-3003838	0.01	9569
2a Name of Participating Employer RENEE'S GARDEN INC	36-4957565	0.04	849110
2a Name of Participating Employer RENEW RX	82-4273031	0.07	499093
2a Name of Participating Employer REPAIR SPECIALISTS OF ALL HURRICANE SHUTTERS, INC.	81-3476977	0.04	68377
2a Name of Participating Employer REPLICATIONS, INC.	13-4075810	0.12	565124

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RESPIRATORY CRITICAL CARE AND	59-3385828	0.16	1065376
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RESTORATION ON LOCATION, INC.	27-0943755	0.13	643535
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REVIEWPUSH LLC	27-2113067	0.04	603448
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
REX ENTERPRISES INC	36-5089225	0.00	7612
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RHODES+ BRITO ARCHITECTS	59-3373968	0.23	5631721
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RICHARDS EQUIPMENT, LLC	63-1286732	0.00	7379
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIDGEROCK TOOLS INC.	71-0865677	0.04	2395653
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIGGS PARTNERS, INC.	57-0980003	0.09	3771377
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RISING PHARMACEUTICALS	83-3859401	0.94	5011320

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RIVER CITY REHABILITATION AND SPINE SPECIALISTS, PC	20-0490012	0.04	1009907
RIVERWOOD COMMUNITY ASSOCIATION, INC	65-0346024	0.00	20379
RIVIERA DUNES MARINA CONDOMINIUM ASSOCIATION INC	06-1700480	0.00	3792
RN BORELLI	94-2613728	0.00	385016
RNB ASSOCIATES, INC.	46-1924643	0.01	0
ROBANDA INTERNATIONAL, INC	33-0814850	0.15	1169188
ROBERT W PAYNE DDS	59-3510533	0.00	119634
ROBRADY, INC	83-2380247	0.11	2588873
ROCKAWAY GARDEN CENTER OF N.E. FLORIDA INC.	46-2499899	0.06	293027

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ROEBUCK & ASSOCIATES, INC.	59-3308136	0.10	1163209
ROEBUCK TECHNOLOGIES LLC	47-4304367	0.06	1065545
ROMA INDUSTRIES LLC	13-4108320	0.00	129232
RON STANLEY & SON PLUMBING, INC.	75-2483900	0.03	576372
RONATI INC.	81-5438890	0.02	29032
ROSEWOOD MANOR OF VERO BEACH,	54-2095156	0.00	2019
RPD LABS AND RADIOLOGY SERVICES INC	83-3221627	0.00	5696
RUBINTON & ASSOCIATES PA	45-5051199	0.00	223202
RUPERT, GIBBON & SPIDER, INC	46-3698186	0.00	2424

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RURAL URGENT CARE, LLC	47-3524701	0.63	3870056
RXMEDICAL DYNAMICS	26-0334211	0.00	67231
S&P MANAGEMENT SERVICES, INC.	20-4521989	0.02	838264
S&R FASTENER CO INC	59-1531372	0.01	1256099
SA 2010 LLC	20-4353069	0.02	197684
SABAL PALM BANK	20-5464849	0.00	1888614
SAGAMORE LLC	83-3742333	0.01	10882
SALON WEST OF LARGO INC	20-1376596	0.11	1747756
SANDBLAST BY CREATIVE CONCEPTS, INC.	63-1187568	0.03	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SANDBRIDGE VETERINARY HOSPITAL, INC.	88-3410128	0.01	8298
SANFORD RENT ALL INC	56-1331278	0.00	2533
SANTA FE APPAREL LLC	27-4026943	0.03	1780621
SARASOTA PERFORMING ARTS CENTER FOUNDATION INC.	59-2807055	0.05	523975
SARDIS LONE STAR LLC	84-2838022	0.01	0
SARITASA LLC	20-2842465	0.15	1606397
SASSY BUSINESS MANAGEMENT, INC.	27-3356253	0.07	789632
SAVANNAH BLINDS SHUTTERS & SHADES, LLC	26-1893500	0.00	13653
SAVANNAH GLOBAL SOLUTIONS, LLC	58-2517680	0.09	1680871

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SAVANNAH RIVER LOGISTICS LLC	27-1705503	0.02	38616
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCANDIA GEAR THE AMERICAS CORP	42-1777788	0.02	330222
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCENIC STAYS HOLDING COMPANY LLC	85-4123928	0.05	349673
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCIF SOLUTIONS, INC	86-1118830	0.07	597511
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCIPERIO, INC.	73-1528382	0.28	4319570
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOTT CIRCLE RESTAURANT LLC	99-4032913	0.00	2407
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOTT FISCHER ENTERPRISES LLC.	27-3903038	0.20	6723512
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCOTT, SINGLETON, FINCHER AND CO. PC	75-1830742	0.00	604146
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCW LIQUORS, LLC	46-1904446	0.00	6215

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SD3IT, LLC	47-1072876	0.17	1093717
2a Name of Participating Employer SEAMLESS RAIN GUTTERS, INC.	75-3077551	0.00	2154
2a Name of Participating Employer SEAN PATRICK ENTERPRISES, INC.	65-0740101	0.00	93565
2a Name of Participating Employer SEAVIEW INVESTMENT MANAGERS, LLC	82-2888122	0.07	388060
2a Name of Participating Employer SECURE DELIVERY SOLUTIONS	87-1145363	0.00	972
2a Name of Participating Employer SEDARA LLC	46-4123250	0.14	1107110
2a Name of Participating Employer SEEK DATA LLC	84-1957829	0.44	1815111
2a Name of Participating Employer SEIBERT AND SON, INC.	58-1293673	0.04	1029941
2a Name of Participating Employer SELECT TITLE AGENCY, INC.	22-3146755	0.00	41539

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SELEN ENTERPRISES, LLC	47-1436543	0.01	591923
SELGE HOLDINGS & VENTURES	26-3916615	0.00	483118
SENTINEL TITLE, LLC	84-3526743	0.02	101335
SERA SYSTEMS, INC.	84-1800590	0.12	0
SERVICE CONSTRUCTION SUPPLY INC	63-1260413	0.00	520932
SERVICE KEEPERS MAINTENANCE, INC	65-0044807	0.11	417053
SERVPRO OF CHAMPIONS	76-0499151	0.00	22197
SEUFFERT HOLDINGS, LLC	82-2932252	0.00	0
SHADOW WOOD COMMUNITY ASSOCIATION, INC.	65-0811616	0.06	736721

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHEAR EXPRESS, INC.	59-3025010	0.13	1484831
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHERLOCK HOMES PEST CONTROL & IRRIGATION LLC	85-1678473	0.00	1888
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHIBUMI SHADE, INC.	84-4102302	0.05	233936
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHIPRA ENTERPRISE LLC	76-0273670	0.01	339140
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SHORE/FORM SYSTEMS, INC	59-2291751	0.00	2463
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SID DANIEL LUMBER COMPANY OF SAVANNAH, INC.	58-1202297	0.00	34503
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SIIA	52-1329859	0.22	2079243
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SINCERUS PHARMACEUTICALS, INC.	81-1035487	0.26	1624297
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SISSINE'S BUSINESS SOLUTIONS OF ORLANDO, LLC	46-3694974	0.11	1283986

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SISSINE'S OFFICE SYSTEMS, INC	59-2139556	0.20	2093813
SJOGREN'S FOUNDATION, INC.	11-2779073	0.09	1447994
SKOPOS SERVICES LLC	45-4764002	0.77	9773346
SKY MANAGEMENT CORP	13-3796721	0.07	179860
SLAPPEY COMMUNICATIONS LLC DBA IT VOICE	83-4522751	0.29	2954139
SLATE PROPERTY GROUP, LLC	46-4040206	0.25	0
SLEEP DISORDER CENTER OF FT WALTON BEACH	59-3182353	0.01	111493
SMART FLOUR FOODS LLC	45-2620108	0.04	0
SMG PROPERTY MANAGEMENT, INC.	52-1653151	0.09	633308

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SMITH ELECTRICAL INC	20-3442661	0.03	284943
SNELLING PERSONNEL	22-3508520	0.00	48559
SOCAL NETWORKING, INC	20-2500965	0.03	240262
SOE SOFTWARE CORPORATION	82-0565032	0.04	1565690
SOFTLINE SOLUTIONS LLC	26-3605289	0.00	24678
SOLITUDE BEACH, INC.	58-1810133	0.02	72760
SONDER HEALTH PLANS, INC.	83-1793185	0.13	294855
SOUND PRODUCTION LLC	75-1711210	0.03	195979
SOURCETOAD	26-3364455	0.08	2178613

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SOUTH CENTRAL STEEL INC.	63-1013224	0.00	0
SOUTH FLORIDA NEUROLOGY ASSOCIATES P.A.	59-2475432	0.10	1284720
SOUTH FLORIDA STAIRS, INC.	92-2477038	0.02	335751
SOUTH GEORGIA PROPERTY MANAGEMENT, LLC	20-8255839	0.01	53858
SOUTHEASTERN MARINE POWER, LLC	93-4338337	0.03	659657
SOUTHEASTERN RHEUMATOLOGY ALLIANCE LLC	93-3460719	0.13	5572195
SOUTHERN CRESCENT PEDIATRICS	58-1487734	0.08	2059640
SOUTHERN ENERGY SYSTEMS, LLC	82-3913760	0.00	25929
SOUTHERN HOSPITALITY WHOLESALE & RETAIL INC	59-3112541	0.04	893387

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SOUTHERN LAND TITLE, LLC	63-0830564	0.00	47836
SOUTHERN MONTGOMERY COUNTY	74-1670450	0.03	405808
SOUTHLAND RESTAURANT SERVICES	45-0474580	0.00	5064
SOZO CHILDREN INTERNATIONAL	27-4552700	0.04	183807
SPDI INC	65-0574652	0.05	84501
SPECIALTY MANAGEMENT COMPANY O	59-2315139	0.11	815583
SPINA BIFIDA ASSOCIATION OF AMERICA	52-1342181	0.03	523525
SPM HOSPITALITY, LLC	81-2769938	0.00	285
SPOTLESS LOGISTICS	47-1445268	0.00	0

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2a Name of Participating Employer SPOTLIGHT MEDIA SOLUTIONS, INC.	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
		0.02	476333
2a Name of Participating Employer SPRING PLACE	2b EIN 47-3777636	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer SPRING STUDIOS NEW YORK LLC	2b EIN 27-3192017	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 450021
2a Name of Participating Employer SPRUCE CAPITAL PARTNERS LLC	2b EIN 77-0703500	2c Percentage of Total Contributions for the Plan Year 0.03	2d Aggregate Account Balances Attributable to Participating Employer 0
2a Name of Participating Employer STAKENEGGEN, LLC. DBA THE UPS STORE #3547	2b EIN 92-1476080	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 5573
2a Name of Participating Employer STANLEY TATE BUILDERS INC.	2b EIN 59-0766919	2c Percentage of Total Contributions for the Plan Year 0.00	2d Aggregate Account Balances Attributable to Participating Employer 5120
2a Name of Participating Employer STARABILITY FOUNDATION INC	2b EIN 59-2516162	2c Percentage of Total Contributions for the Plan Year 0.06	2d Aggregate Account Balances Attributable to Participating Employer 311309
2a Name of Participating Employer STARLING EYE GROUP	2b EIN 59-3526387	2c Percentage of Total Contributions for the Plan Year 0.02	2d Aggregate Account Balances Attributable to Participating Employer 169742
2a Name of Participating Employer STATESBORO MEDICAL GROUP LLC	2b EIN 84-2492416	2c Percentage of Total Contributions for the Plan Year 0.05	2d Aggregate Account Balances Attributable to Participating Employer 281708

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STAVROS ENTERPRISES, INC.	20-5238284	0.01	17214
STEALTH ENTRY	27-0212709	0.00	9122
STEELECREEK MANAGEMENT, LLC	80-1591837	0.03	686512
STEELO CLEANING LLC	80-0283533	0.01	10317
STERLING OAKS ASSOC & CLUB INC	77-0676024	0.09	1070510
STEVEN MILLER & CO. LLC	92-1202469	0.07	0
STITCH & COUTURE, INC. DBA LEL	13-3862975	0.15	1695680
STONE BOND TECHNOLOGIES	03-0413214	0.00	30218
STONE GALLERY LLC	45-0580628	0.01	9194

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STONEBROOK FAMILY MEDICINE	20-0596759	0.03	1392078
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STREET SMART YOUTH PROJECT	80-0241296	0.01	111801
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STUDIO 2H DESIGN, LLC	47-4604499	0.01	54222
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
STUDIO COMPLETIVA INC.	84-1312592	0.19	2047587
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUBSTANCE SOLUTIONS, INC.	26-1646246	0.00	111750
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUMMER GLEN APARTMENTS	74-3180113	0.00	4210
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNFRESH PRODUCE INC.	45-4350697	0.00	1288
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNSHINE CONSTRUCTION LLC DBA	20-8781325	0.06	931243
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNSHINE HORTICULTURE, LLC	20-0928662	0.03	522462

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUNSHINE STATE SALES, INC.	59-2291188	0.00	15912
SUNSTATE BANK	65-0878433	0.30	4462357
SUNTECH ELECTRICAL CONTRACTORS	20-0173128	0.00	6041
SUPER FAST ELECTRIC, LLC	82-3503072	0.01	131690
SUPER ORGANIC FOODS INC	46-5751661	0.00	77365
SUPERIOR WATERWAY SERVICES INC.	65-0955914	0.07	547634
SURGICAL CAPITAL SOLUTIONS, INC	47-2149063	0.03	278485
SURGICAL CLINIC SOLUTIONS, LLC	82-3722886	0.11	914259
SUSAN E. DOZIER M.D., P.A. DBA CUTANEOUS SURGERY	01-0690116	0.03	2664342

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SW COMMUNITY	82-4810941	0.05	285406
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SWEET NOTHING, INC	83-3240224	0.02	85703
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYMBIONT SERVICE CORPORATION	65-0186071	0.11	4307334
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNERGY ASSET MANAGEMENT, INC	59-3734160	0.01	104823
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNERGY GOLF GROUP LLC	83-2599698	0.02	462196
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SYNERGY INPATIENT SERVICES LLC	92-1753305	0.01	18096
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TABLEONE HTX LLC	93-2370307	0.00	5836
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TABLEONE MED LLC	93-2201250	0.01	8382
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TACSERV, LLC	46-2523410	0.07	313764

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TAG AGENCY OF PINELLAS, INC.	27-2995103	0.19	756401
TAG COLLISION, INC	47-1873892	0.00	0
TALO PARIS PHYSICIANS	81-3875588	0.00	37316
TAMPA BAY BATTERY	82-3282498	0.03	341380
TAMPA BAY COMMUNITY ASSOCIATION	59-3701646	0.03	73925
TAMPA'S TEAM LLC DBA BUDDY BREW COFFEE	20-2339303	0.03	223597
TAP EXPRESS TAG AND TITLE, LLC	99-2170300	0.01	14329
TAPPS' GARAGE	84-0718075	0.00	244366
TARGET GRAPHICS, INC.	65-0064589	0.01	469090

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TATE DEVELOPMENT CORPORATION	59-2649349	0.03	653726
TAXSERV, LLC	54-1792131	0.06	1041524
TAYLOR & MATHIS OF FLORIDA, LLC	86-1084942	0.00	10727
TAYLOR CPA & ASSOCIATES PC	58-2505292	0.04	271929
TCB MANAGEMENT GROUP, INC	26-2937368	0.00	3453
TE SYSTEMS, INC	47-4074599	0.00	359841
TEAM DRIVE-AWAY HOLDINGS, LLC	47-5242122	0.17	1571032
TEC SERVICES GROUP, INC	22-3949732	0.17	956948
TECHAFFINITY CONSULTING INC.	47-4535253	0.08	946358

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHBRIDGE INC.	58-2531971	0.10	964504
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHNICAL SPECIALTIES COMPANY, INC.	13-1910884	0.00	3873
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECHPEST LLC	27-2850858	0.01	96564
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TECTRADE COMPUTERS CORP.	99-0384429	0.09	672474
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TELECOMMUNICATIONS ASSET MANAGEMENT COMPANY	59-3424264	0.14	4389587
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEMPLE BUILDING SYSTEMS, INC.	36-4002440	0.03	955798
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TENGO INC	95-3400172	0.56	6995685
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TERRA-COM ENVIRONMENTAL CONSULTING, INC.	59-3604964	0.06	2284996
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TERROR TOURS LLC	46-1039102	0.01	81188

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TEXAS CUSTOM BUILDERS, LTD	20-2234747	0.01	16294
TEXAS ENDOVASCULAR ASSOCIATES PLLC	47-4517082	0.00	0
TEXAS HEALTH MANAGEMENT LLC	46-1274382	0.00	0
TEXAS PHARMACY MANAGEMENT GRP	85-1282880	0.00	11461
THE ACHIEVE AGENCY, LLC	81-3926385	0.00	108147
THE ADOBE, LTD	46-1542226	0.00	70905
THE ARBOR SCHOOL OF CENTRAL FLORIDA, INC	27-3092011	0.01	21712
THE BRENTWOOD COMPANY, INC.	59-1035928	0.08	1942022
THE CABINET CENTER, INC.	20-3755408	0.05	1283517

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE CFO SQUAD LLC	46-3121005	0.00	311123
THE CLEO INSTITUTE	27-3185735	0.02	0
THE CORAL GABLES TRUST COMPANY	03-0536836	0.18	2352310
THE CYBRIX GROUP, INC.	13-4228013	0.00	218776
THE EDUCATION FOUNDATION OF COLLIER COUNTY	65-0230582	0.09	482434
THE EXCHANGE TAVERN	42-1646458	0.00	58685
THE FILTA GROUP, INC.	98-0375567	0.02	491394
THE FOUNDRY MINISTRIES, INC.	63-0624278	0.03	425317
THE GENTNER GROUP, LLC	86-1924210	0.00	50130

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE GURU, INC.	36-4649637	0.04	121207
2a Name of Participating Employer THE HARTLINE ALARM CO., INC.	59-3169722	0.00	460095
2a Name of Participating Employer THE LEADERS RHEUM LLC	93-2398016	0.05	959168
2a Name of Participating Employer THE LIGHTHOUSE TEAM, LLC	81-2051897	0.00	0
2a Name of Participating Employer THE LINKS APARTMENTS	64-0961859	0.00	0
2a Name of Participating Employer THE MATRIX FINANCIAL GROUP, INC.	65-0679588	0.05	2191878
2a Name of Participating Employer THE ORLANDO DENTAL GROUP	20-2341885	0.00	37590
2a Name of Participating Employer THE PRACTICE OF DISTINCTION, LLC	46-2478284	0.00	190988
2a Name of Participating Employer THE QUESTCOM GROUP, INC.	59-3753150	0.18	1974153

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE RESTAURANT PEOPLE MANAGEMENT	65-0988801	0.16	1372067
THE STEEL SUPPLY COMPANY, INC.	20-4429379	0.07	549505
THE TALMADGE GROUP, INC.	58-2408467	0.01	68955
THE VILLAGES AT COUNTRY CREEK MASTER ASSOCIATION INC	65-0040526	0.00	0
THE WEILER ENGINEERING CORP.	65-0413376	0.35	3780327
THE WESTMONT MONTESSORI SCHOOL	22-1756061	0.07	772130
THE WILHELM AGENCY, INC.	11-3336839	0.04	0
THE WORRELL FIRM LLC	84-3834422	0.00	8915
THERMO KING OF THE SOUTHEAST	20-8432054	0.21	2608199

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THIGPEN HEATING AND COOLING, INC	59-2621999	0.09	295251
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THISTLE COMMUNITY HOUSING	74-2449502	0.06	1082444
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THOMAS & REED LLC	36-4546665	0.02	29040
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THOMAS MACHINERY, INC.	59-2313928	0.16	1786298
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THOMSON DENTAL, P.C.	45-2715699	0.00	84001
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THRUST TECH ACCESSORIES, INC.	82-2823959	0.08	485018
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TIERRA GROUP INTERNATIONAL, LTD	45-3766365	0.19	2961809
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TIGER VALVE COMPANY, LLC	46-1197792	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TILLMAN AND ASSOCIATES ENGINEERING LLC	20-3832004	0.04	440519

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TILLMAN LEARNING, LLC	27-4912183	0.00	0
TIMES THREE CLOTHIER LLC	20-5942879	0.08	0
TIRE ZONE OF OKEECHOBEE INC	26-0855130	0.00	0
TIRO SECURITY	45-5604173	0.01	95811
TITAN TRAILER REPAIR AND SALES, LLC	84-4317925	0.00	89187
TITANIUM BILLING SERVICES, LLC	71-0905170	0.00	4941
TM OPERATIONS LLC	93-2519090	0.00	716
TMN, LLC	54-2008588	0.09	904409
TODAY'S VISION	76-0399898	0.03	775857

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TOM SHARPE CONSTRUCTION, INC.	75-2628518	0.03	606590
TOML INCORPORATED	27-5071827	0.02	41531
TOMOE ENGINEERING USA, INC.	46-2571750	0.02	519949
TOTAL COMFORT COOLING & HEATING, INC.	71-0907996	0.05	84573
TOTAL HEALTH GUIDANCE LLC	45-2590345	0.01	13659
TOTAL OFFICE SOLUTIONS, INC.	57-0902779	0.00	30480
TOTS AND TYKES PEDIATRICS, P.A.	75-2941829	0.06	2051244
TPD PARTNERS LLC	81-1343524	0.15	562831
TRACTOR ENTERPRISES LLC	82-2255354	0.00	93597

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRANSCENDENT INVESTMENT MANAGEMENT, LLC	65-0241332	0.00	0
TRICARICO ARCHITECTURE AND DESIGN, PC	20-0533648	0.19	6960913
TRIMPA GROUP LLC	27-3045059	0.01	233693
TRISLOT USA INC.	82-2915771	0.00	18910
TRI-STATE PAIN INSTITUTE, LLC	26-1827801	0.00	160421
TROOP INC.	92-2600999	0.03	425162
TROPICAL SHORES BEACH RESORT LLC	65-0594242	0.08	907086
TROPICAL TILE & MARBLE INC	65-0305467	0.03	90986
TRUCKMAX, INC.	65-0731268	0.00	0

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TRUCKMAX, INC.	65-0731268	0.25	1662020
TRUPHARMA, LLC	46-0598266	0.00	0
TRUST DC LLC	92-2247744	0.02	551
TRUST HOSPITALITY LLC	32-0288144	0.00	808830
TSC CONSTRUCTION LLC	26-3571374	0.00	3201
TSG GROUP MIAMI, LLC	82-3405002	0.00	406093
TUSCO, INC.	63-0799869	0.19	1397523
TWENTY FIRST CENTURY HEALTH CARE CONSULTANTS	45-3637700	0.01	15847
TWO ELK INVESTMENTS, LLC DBA BILLOR	47-1925102	0.10	1599836

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TYCO ELECTRICAL SERVICES INC.	76-0496424	0.00	0
U.S. BIRCH CORPORATION	84-4753313	0.00	18589
UCF CLINICAL, LLC	87-3543687	0.08	221565
UCF CONVOCATION CORPORATION	16-1733312	0.00	160358
UFLEX USA, INC	91-1466446	0.14	1121040
UNIFY HEALTH SERVICES LLC	46-4853516	0.09	549103
UNITED REFRIGERATION INC.	59-2182393	0.14	1956464
UNITY RECOVERY CENTER	26-3163883	0.00	137998
UNIVERSAL CLEANING CONCEPTS LLC	93-2798654	0.03	37511

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
UNIVERSAL SPECIALTY PHARMACY LLC	82-1705409	0.00	10811
UNIVERSAL YUMS LLC	47-1231209	0.14	218672
UNZIPPED APPAREL SALES, INC.	02-0731076	0.18	3783206
UPSHOP LLC	59-2982835	0.92	8041317
URBAN ARTS PARTNERSHIP	13-3554734	0.14	1268291
URBAN ASSEMBLY CHARTER SCHOOL FOR COMPUTER SCIENCE	81-3663544	0.29	0
US POWER PARTNERS, LLC	83-0930872	0.44	3845507
US POWER SERVICES, LLC	20-0079717	0.00	487044
USED CARDBOARD BOXES, INC.	20-5115837	0.06	371791

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
V1MRO SOLUTIONS, LLC	88-4107193	0.02	107475
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALDOSTA COUNTRY CLUB, INC	58-0471100	0.00	25128
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALLEY VASCULAR SURGEONS, P.C.	86-0370412	0.00	1
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VALUE STORE IT MANAGEMENT, INC.	27-0719304	0.13	2041981
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VARTEK LLC	20-1678289	0.00	13383
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VECTORGLOBAL WMG, INC.	13-3699819	0.34	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VELA RESEARCH, LP	87-0655276	0.04	1670291
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENETIAN CONDOMINIUM, INC.	59-1303036	0.01	131879
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENTURA TELEPHONE LLC	20-8616584	0.06	374887

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VENTURE HOME SOLAR, LLC	47-4266827	0.39	1985778
VERADATA LLC	27-1465902	0.00	166611
VERIDATA INSIGHTS LLC	84-1869838	0.01	12144
VERSATILE DISTRIBUTORS, INC.	22-1619389	0.00	123987
VETERINARY SALES AND MARKETING, LLC	86-1010543	0.01	98922
VIA VERDE GOLF MANAGEMENT	84-2187004	0.01	273339
VIAX DENTAL TECHNOLOGIES LLC	46-1349269	0.08	1175199
VIKING FLOOR ENTERPRISES, INC.	76-0454559	0.00	115627
VILLAGE OF EXCELLENCE ACADEMY	48-1304650	0.00	0

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VILLAGE PEDIATRICS, PC	46-2423012	0.05	785946
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIP OFFICE FURNITURE AND SUPPLY INC.	58-1480813	0.06	1178780
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIP REALTY GROUP, INC.	35-1728685	0.01	146272
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIRTAMED, INC.	46-1736681	0.15	814243
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VIRTUAL CARE, LLC	81-4755406	0.00	53778
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VISAGE HAIR AND NAIL DESIGN, INC.	04-3642520	0.02	237957
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VISION DIGITAL CORPORATION	99-2741966	0.09	3454091
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VISTA INTERIORS, LLC	83-3969091	0.05	1385362
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VITACARE HOME CARE, LLC	47-2923660	0.00	451

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VITROMEX USA, INC.	74-2797988	0.00	170402
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VMOX, LLC	45-4004287	0.21	1627156
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VOLTAIR CONSULTING ENGINEERS INC	20-4452969	0.26	2763598
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VOYAGES TO ANTIQUITY, LLC	42-1768667	0.00	52904
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
VPA LA INLAND EMPIRE, INC.	32-0705220	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
W.H. BARNES, INC. DBA BEST FLO	59-3481433	0.01	125228
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
W.M. HEITGRAS COMPANY	73-0773169	0.03	66638
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WALKINGSPREE USA LTD.	26-2358944	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WALLACE INDUSTRIAL, INC.	56-2216323	0.01	210794

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WANHUB LLC	86-2737090	0.18	1156719
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARM THOUGHTS COMMUNICATIONS, INC.	13-3715190	0.23	5751004
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WARREN PACKAGING INC.	46-1179050	0.07	609910
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATER CONNECTIONS, INC.	65-0797171	0.14	1669897
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WATERBLASTING, LLC	47-2876221	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WAVE TECHNOLOGIES	75-2309151	0.10	1492366
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WE DO WEB CONTENT, INC.	26-4465145	0.05	671299
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WE REK, INC.	52-1046704	0.00	76334
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WE SHIP EXPRESS LLC	86-1973497	0.29	1443980

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WELLESLEY INFORMATION SERVICES, LLC	52-2206279	0.16	1397173
WELLS PHARMA OF HOUSTON, LLC	84-2285383	0.09	362467
WELLS PHARMACY NETWORK, LLC	27-4947247	0.30	1536887
WELLS SPECIALTY PHARMACY , INC.	59-3287703	0.10	1051194
WELLTECK IT, LLC	47-2045189	0.00	0
WEM, LP DBA WESTMOORE APARTMEN	38-2986280	0.00	53351
WEN- LAKE CORP.	59-3101268	0.04	384682
WENAAS USA, INC.	74-2281832	0.00	41823
WEST BROWARD COMMUNITY MANAGEMENT	01-0626784	0.01	219938

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WESTFIELD DEVELOPMENT COMPANY, INC.	47-5628288	0.29	11914792
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WESTLAKE EYECARE, PLLC	27-5442175	0.00	59011
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WESTWATER ENERGY LLC	27-3029550	0.00	69762
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHEELLOCK STREET CAPITAL, LLC	26-2780159	0.42	9192300
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHETSTONE ENGINEERING & TESTING, INC.	65-0461695	0.03	869640
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHISPERWOOD APARTMENTS	74-3243114	0.00	42077
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WHITEFISHESCAPES.COM LLC	47-4594341	0.00	20799
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILCO HOLDINGS LLC	81-0963211	0.05	146686
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILKINS MEDIA, LLC	45-5597939	0.64	5895507

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILLOWBEND INVESTMENTS, INC.	48-1110937	0.11	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILSHIRE PROPERTIES INC.	82-2612310	0.01	21504
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WILSON ELECTRIC OF NORTH FLORIDA, INC	20-4279320	0.08	314089
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WINDHAVEN SURGERY CENTER, LLC	20-8251890	0.07	2358890
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WINGATE BY WYNDHAM-MIRAMAR	65-1099486	0.00	26185
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOLFE & TAYLOR, INC.	47-2446000	0.05	1219214
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOODSPEAR PM-MEMBER, LLC	87-4290426	0.20	1528323
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WOOF WOOF VETERINARY SERVICES, LLC	84-3692582	0.00	63098
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WORKSCAPE DESIGNS LLC	46-0670840	0.00	0

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
WORLD OF AMERICA GLOBAL PARTNERS	20-4548162	0.09	712499
WP PHARMA LABS , INC.	83-4547642	0.04	151788
WTS, LLC	30-0608746	0.00	80259
XCHANGE TELECOM LLC	41-2031570	0.12	1203428
XFIBRA, INC.	81-5199156	0.00	77889
XPEDITED SERVICES LLC	86-1173765	0.03	282464
XR STUDIOS, LLC	85-1001413	0.00	77909
YOUNG PRESIDENTS ORGANIZATION-	58-1835904	0.03	702702
YOUNG'S ELECTRICAL CONTRACTING, INC	65-1094639	0.02	1554067

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
YO-ZURI AMERICA, INC.	05-0573867	0.00	1628
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
YRA DESIGN INC	32-0534481	0.10	963814
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZARA ENVIRONMENTAL LLC	02-0697400	0.06	1088221
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZEBRA COALITION, INC	27-1645847	0.01	20355
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZION REVENUE SOLUTIONS, LLC	47-3130668	0.00	2107
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZIP CONSULTING	46-1395638	0.08	856037
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ZUMMO MEAT COMPANY, INC.	74-1478952	0.00	0
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer

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

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

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

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



**COADVANTAGE CORPORATION
RETIREMENT SAVINGS PLAN**

**Financial Statements
and Supplemental Schedule**

**December 31, 2024 and 2023
(With Independent Auditors' Report Thereon)**

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

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CBIZ CPAs P.C.

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Independent Auditors' Report

To Plan Administrator
CoAdvantage Corporation Retirement Savings Plan:

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed the audits of the financial statements of CoAdvantage Corporation Retirement Savings Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from qualified institutions as of December 31, 2024 and 2023 and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section:

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

- The information in the accompanying financial statements related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (“GAAS”). Our responsibilities under those standards are further described in the Auditors’ Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audits evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management’s election of the ERISA Section 103(a)(3)(C) audit does not affect management’s responsibility for the financial statements.

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

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

Auditors’ Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors’ report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.

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

Our audits did not extend to the certified investment information, except for obtaining and reading the certifications, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2024, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

CBIZ CPAs P.C.

October 10, 2025
St. Petersburg, Florida

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN**Statements of Net Assets Available for Benefits****December 31, 2024 and 2023**

	<u>2024</u>	<u>2023</u>
Assets:		
Investments:		
Guaranteed interest account, at contract value	\$ 51,671,618	60,626,326
Mutual funds, at fair value	602,129,799	515,364,971
Self directed brokerage account, at fair value	2,627,006	2,495,222
Common collective trusts, at fair value	<u>560,537,600</u>	<u>446,765,214</u>
Total investments	1,216,966,023	1,025,251,733
Receivables:		
Participant contributions	2,114,856	3,177,719
Employer contributions	3,643,813	2,438,908
Notes receivable from participants	<u>16,447,616</u>	<u>14,377,093</u>
Total receivables	<u>22,206,285</u>	<u>19,993,720</u>
Net assets available for benefits	<u>\$ 1,239,172,308</u>	<u>1,045,245,453</u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Statement of Changes in Net Assets Available for Benefits

For the Year Ended December 31, 2024

Additions to net assets attributed to:	
Investment income:	
Net appreciation in fair value of investments	\$ 118,982,595
Interest and dividends	<u>29,845,798</u>
Net investment income	148,828,393
Interest income on notes receivable from participants	1,203,334
Contributions:	
Participant	113,629,521
Employer	45,811,709
Rollover	<u>31,387,949</u>
	<u>190,829,179</u>
Total additions	340,860,906
Deductions from net assets attributed to:	
Benefits paid to participants	131,820,597
Administrative expenses	<u>4,348,553</u>
Total deductions	<u>136,169,150</u>
Net increase	204,691,756
Transfers out, net	(10,764,901)
Net assets available for benefits:	
Beginning of year	<u>1,045,245,453</u>
End of year	<u><u>\$ 1,239,172,308</u></u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements

December 31, 2024 and 2023

(1) **Description of the Plan**

The following description of the CoAdvantage Corporation Retirement Savings Plan (the “Plan”) provides only general information. Participants should refer to the Plan document or Summary Plan Description for a more complete description of the Plan’s provisions, which are available from the plan administrator.

(a) **General**

The Plan is a multiple employer defined contribution plan covering eligible employees of CoAdvantage Corporation (the “Principal Participating Employer”) and Adopting Employers. Employees are eligible to participate in the Plan based on elections made by the Adopting Employers. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”). The Plan’s 401k Plan Committee is responsible for oversight of the Plan, determining the appropriateness of the Plan’s investment offerings and monitoring investment performance.

(b) **Contributions**

Each year, participants may contribute an amount as pre-tax or Roth contributions of annual compensation as elected by their Adopting Employer. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (“rollover”). Participants direct the investment of their contributions into various investment options offered by the Plan. Each Adopting Employer elects the level of safe harbor, matching and/or profit-sharing contributions. Additionally, each Adopting Employer may elect to include an auto-enrollment provision for all newly eligible employees in their Plan.

For Adopting Employers electing auto-enrollment, newly eligible employees will be automatically enrolled in the Plan unless they affirmatively elect not to participate in the Plan, if elected by Adopting Employers. Automatically enrolled participants have a deferral rate set at a specific percentage of eligible compensation, determined by Adopting Employer. The automatic deferral percentages will increase each year, up to a maximum percentage of eligible compensation, if elected by Adopting Employers. Contributions are subject to certain Internal Revenue Service limitations.

(c) **Participant Investment Account Options**

The Plan may offer various mutual funds, common collective trusts, self-directed brokerage account, and a guaranteed interest account as investment options for participants. Each investment option has its own investment strategy, which can be obtained through the prospectus of the respective fund. Participants may change their investment options at any time.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(1) Description of the Plan - Continued

(d) Participant Accounts

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

(e) Vesting

Participants are immediately vested in their contributions and their Adopting Employer's Safe Harbor contributions, if applicable, plus actual earnings thereon. Vesting in the remainder of their account is based on years of continuous service. A participant generally begins to vest in year one at (20%) and increases ratably until fully vested in year five. However, vesting schedules vary based on the Adopting Employer's elections. Participants also become fully vested upon retirement age (65), death or becoming disabled.

(f) Notes Receivable From Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loan interest rate is the prime rate plus 1.00%. Principal and interest is paid ratably through regular payroll deductions. Loans must be repaid in five years unless they are for the purchase of a primary residence in which case the loan may not exceed 30 years.

(g) Payment of Benefits

Upon termination of service, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. Participants may take in-service withdrawals upon attainment of age 59 ½ or for immediate and heavy financial hardship needs, as defined in the plan document.

(h) Forfeited Accounts

At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$3,567,000 and \$3,824,000 respectively. These accounts will be used to reduce future employer contributions. For the year ended December 31, 2024, approximately \$317,000 of forfeitures were used to reduce employer contributions.

(2) Summary of Significant Accounting Policies

(a) Basis of Accounting

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

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(2) **Summary of Significant Accounting Policies - Continued**

(b) **Use of Estimates**

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

(c) **Investment Valuation and Income Recognition**

Investments are reported at fair value, except for the fully benefit responsive investment contract which is reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's 401k Plan Committee determines the Plan's valuation policies utilizing information provided by the investment advisors and insurance companies. See Note 4 for discussion of fair value measurements.

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

(d) **Contributions**

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

(e) **Payment of Benefits**

Benefits are recorded when paid.

(f) **Notes Receivable from Participants**

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2024 or 2023, respectively. Delinquent participant loans are recorded as distributions on the basis of the terms of the plan agreement.

(g) **Administrative Expenses**

Certain expenses of the Plan are paid by the Principal Participating Employer and are not included in the statement of changes in net assets available for benefits. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation of fair value of investments.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(3) **Information Certified by the Trustee**

The plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Empower Trust Company, LLC ("ETC") and Empower Life & Annuity Insurance Company of America ("ELAICA"), the trustees of the plan, have certified that the following data included in the accompanying financial statements and supplemental schedule are complete and accurate:

- Investments at fair value
- Fully benefit-responsive investment contract at contract value
- Notes receivable from participants
- Net appreciation in fair value of investments
- Interest and dividends
- Interest income from notes receivable from participants
- Schedule of assets (Held at End of Year)

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

(4) **Fair Value Measurements**

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy are described as follows:

Level 1: Inputs to the valuation methodology are quoted prices (unadjusted) in active markets for identical assets or liabilities that the Plan can access at the measurement date.

Level 2: Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- (a) Quoted prices for similar assets or liabilities in active markets;
- (b) Quoted prices for identical or similar assets or liabilities in inactive markets;
- (c) Inputs other than quoted prices that are observable for the asset or liability;
- (d) Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(4) Fair Value Measurements - Continued

Level 3: Inputs that are unobservable inputs for the asset or liability.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024, or 2023.

Mutual Funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily Net Asset Value (“NAV”) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded and are classified as Level 1.

Self-Directed Brokerage Account: Valued at the quoted market prices in active and inactive markets or quoted market prices for similar assets and are classified as Level 1 or 2.

Common Collective Trusts: Valued at the NAV of units of a collective trust. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

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

Description	Assets Measured at Fair Value at December 31, 2024	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	\$ 602,129,799	602,129,799	-	-
Self-directed brokerage account	2,627,006	2,153,046	473,960	-
	604,756,805	604,282,845	473,960	-
Investments measured at NAV practical expedient (a)	560,537,600			
Total investments	\$ 1,165,294,405			

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(4) Fair Value Measurements - Continued

Description	Assets Measured at Fair Value at December 31, 2023	Fair Value Measurements at Reporting Date Using		
		Quoted Prices in Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
Mutual funds	\$ 515,364,971	515,364,971	-	-
Self-directed brokerage account	2,495,222	2,027,509	467,713	-
	517,860,193	517,392,480	467,713	-
Investments measured at NAV practical expedient (a)	446,765,214			
Total investments	\$ 964,625,407			

(a) In accordance with Subtopic 820-10, certain investments that were measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

(5) Fully Benefit-Responsive Investment Contract

The Plan has a fully benefit-responsive guaranteed investment contract (“SAGIC”) with MassMutual, which is managed by Great West Investments. The SAGIC is a market value separate account investment option with a general investment account guarantee that provides a stated rate of return and insulates plan participant activity from daily fluctuations in the market. The SAGIC is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The average yield for the plan year ended December 31, 2024 was 2.80%.

The guaranteed investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The crediting rate is based on a formula established by the contract issuer. The crediting interest rate is reviewed on a quarterly basis for resetting. The guaranteed investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

This contract meets the fully benefit-responsive investment contract criteria and therefore is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if there were to initiate permitted transactions under the Plan. Contract value, as reported to the Plan by MassMutual, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The Plan’s ability to receive amounts due is dependent on the issuer’s ability to meet its financial obligations. The issuer’s ability to meet its contractual obligations may be affected by future economic and regulatory developments.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(5) **Fully Benefit-Responsive Investment Contract - Continued**

Certain events might limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendment to the Plan document (including complete or partial termination or merger with another plan.), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan, or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA, (5) premature termination of the contract. No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that would limit the ability of the Plan to transact at contract value with the participants.

(6) **Related Party and Party-in-Interest Transactions**

Certain Plan investments are shares of mutual funds administered within the Empower recordkeeping system. Empower is the trustee and recordkeeper for the Plan and therefore, these transactions qualify as party-in-interest transactions.

Empower provides certain administrative services to the Plan pursuant to a Master Plan Services Agreement (MAS) between the Company and Empower. Empower receives revenue from mutual fund service providers for services Empower provides to the funds. This revenue is used to offset certain amounts owed to Empower for its administrative services to the Plan.

If the revenue received by Empower from such mutual fund service providers exceeds the amount owed under the MSA, Empower remits the excess to the Plan on a quarterly basis. Such amounts may be applied to pay Plan administrative expenses or allocated to the accounts of participants. During 2024 there were no excess amounts. The Plan or Plan Sponsor may make payment to Empower for administrative expenses not covered by revenue sharing.

Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of the investments, as they are paid through revenue sharing, rather than a direct payment. The Plan made direct payments to the third party administrator, or its related entities, of approximately \$4,300,000 for the year ended December 31, 2024, which was not covered by revenue sharing. These transactions are party-in-interest transactions. The Plan Sponsor pays directly any other fees related to the Plan's operations.

(7) **Plan Termination**

Although it has not expressed any intent to do so, the Principal Participating Employer has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100% vested in the Adopting Employers' contribution portion of their account.

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(8) Tax Status

The Plan adopted the Empower Retirement LLC Non-Standardized Profit Sharing/401(k) Plan provided by Empower. Empower obtained a favorable opinion letter dated April 7, 2021. The plan administrator has adopted all plan provisions within the pre-approved plan document and believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code, and therefore, believes that the Plan is qualified, and the related trust is tax-exempt. Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

(9) Risks and Uncertainties

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market, and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

(10) Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Form 5500 as of December 31:

	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	\$ 1,239,172,308	1,045,245,453
Less contributions receivable	<u>(5,758,669)</u>	<u>(5,616,627)</u>
Net assets available for benefits per Form 5500	<u>\$ 1,233,413,639</u>	<u>1,039,628,826</u>

The following is a reconciliation of the net increase in net assets per the financial statements to net income per Form 5500 for the year ended December 31, 2024:

Net increase in net assets per the financial statements	\$ 204,691,756
Plus contributions receivable - beginning of year	5,616,627
Less contributions receivable - end of year	<u>(5,758,669)</u>
Net income per Form 5500	<u>\$ 204,549,714</u>

COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN

Notes to Financial Statements - Continued

(11) Transfers In and Out

Qualified plans sponsored by certain Adopting Employers may be merged into the Plan in conjunction with such Adopting Employers' adoption of the Plan. New participant accounts are then created for such participants in the Plan. During 2024, approximately \$135,100,000 of assets were transferred into the Plan relating to new Adopting Employers.

In addition, the account balances of participants employed by certain Adopting Employers who terminate their leasing arrangements with the Principal Participating Employer during the year may be transferred out of the Plan through mergers with, or creation of, other qualified plans. During 2024, approximately \$145,900,000 of assets were transferred out of the Plan based on termination of Adopting Employers.

(12) Subsequent Events

The Plan's management has evaluated events and transactions for potential recognition or disclosure in the financial statements through October 10, 2025, the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULE

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)
Human Interest	47-3868366	001
Insperty	76-0178498	001
John Hancock	04-3483032	001
JP Morgan	13-4043930	001
Justoworks	46-2283648	333
Lincoln Financial	35-1140070	001

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

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
Newport Group	27-2037969	001
Paychex	16-1124166	001
Principal	43-1929483	001
Slavic	01-0620969	001
Transamerica	36-6071399	001
Trinet 401(k) Plan	48-1304650	334

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

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
Vestwell	81-3062212	001
Voya Financial	52-1317217	001

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

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

