

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

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

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

9a Plan funding arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
--	--

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 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 <u>MID CAP VALUE FUND II</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREAT GRAY TRUST COMPANY, LLC</u>	D Employer Identification Number (EIN) <u>38-7312964</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>ALLSPRING SPECIAL MID CAP VALUE CIT</u>		
b Name of sponsor of entity listed in (a): <u>SEI TRUST COMPANY</u>		
c EIN-PN <u>84-6615098-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>140833499</u>
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)
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)
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)
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)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		

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)

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)

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)

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)

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 401(K) PLAN AND EMPLOYEES TRUST OF ONCOLOGY HEMATOLOGY WEST, P.C.	
b	Name of plan sponsor ONCOLOGY HEMATOLOGY WEST, P.C.	c EIN-PN 47-0754790-001
a	Plan name 7G DISTRIBUTING, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor 7G DISTRIBUTING, LLC	c EIN-PN 27-2050486-001
a	Plan name AAOS RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN ACADEMY OF ORTHOPAEDIC SURGEONS	c EIN-PN 36-2110592-002
a	Plan name ABO 401K PLAN	
b	Name of plan sponsor AMERICAS BACK OFFICE INC	c EIN-PN 47-4975107-001
a	Plan name ACCESS CLINICAL PARTNERS, LLC 401(K) PLAN	
b	Name of plan sponsor ACCESS CLINICAL PARTNERS, LLC	c EIN-PN 35-2411513-001
a	Plan name ACCUTRANS LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor ACCUTRANS, LLC	c EIN-PN 72-1414046-002
a	Plan name ACME INDUSTRIES, INC. EMPLOYEE 401(K) INCENTIVE PLAN	
b	Name of plan sponsor ACME INDUSTRIES, INC.	c EIN-PN 36-4225640-002
a	Plan name ADARE PHARMACEUTICALS, INC. 401(K) PLAN	
b	Name of plan sponsor ADARE PHARMACEUTICALS, INC.	c EIN-PN 31-0988732-003
a	Plan name ADVANCED DOOR SYSTEMS, INC. 401K PLAN	
b	Name of plan sponsor ADVANCED DOOR SYSTEMS, INC.	c EIN-PN 57-0771580-001
a	Plan name ADVANTEDGE TECHNOLOGY 401(K) PLAN	
b	Name of plan sponsor ADVANTEDGE TECHNOLOGY, INC.	c EIN-PN 20-0586920-001
a	Plan name AGILEX FRAGRANCE DIVISION 401(K) PLAN	
b	Name of plan sponsor AROMATIC TECHNOLOGIES, D/B/A AGILEX	c EIN-PN 36-4289343-001
a	Plan name AICURIS INC. 401K PLAN	
b	Name of plan sponsor AICURIS INC	c EIN-PN 92-2980109-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name AJAY GLASS & MIRROR CO., INC. EMPLOYEES PROFIT SHARING PLAN	
b	Name of plan sponsor AJAY GLASS & MIRROR CO., INC.	c EIN-PN 16-1129213-001
a	Plan name AKVELON, INC. EMPLOYEES SAVINGS TRUST	
b	Name of plan sponsor AKVELON, INC.	c EIN-PN 20-8435414-001
a	Plan name ALABAMA CENTRAL CREDIT UNION	
b	Name of plan sponsor ALABAMA CENTRAL CREDIT UNION	c EIN-PN 63-0002236-003
a	Plan name ALAN STEVENS ASSOCIATES, INC. EMPLOYEES' 401(K) PLAN	
b	Name of plan sponsor ALAN STEVENS ASSOCIATES, INC.	c EIN-PN 42-1391230-001
a	Plan name ALERA GROUP, INC. SAVINGS PLAN	
b	Name of plan sponsor ALERA GROUP, INC.	c EIN-PN 81-4473358-001
a	Plan name ALLEN STOVALL NEUMAN & ASHTON LLP	
b	Name of plan sponsor ALLEN KUEHNLE STOVALL NEUMAN LLP RE	c EIN-PN 20-0108058-001
a	Plan name ALLIES FOR HEALTH + WELLBEING	
b	Name of plan sponsor CARRIE REIGHARD	c EIN-PN 25-1537128-007
a	Plan name AMANO USA 401K RETIREMENT PLAN	
b	Name of plan sponsor AMANO USA HOLDINGS INC	c EIN-PN 22-3037940-001
a	Plan name AMSTAR GROUP, LLC SAVINGS PLAN	
b	Name of plan sponsor M SHARED SERVICES, LLC	c EIN-PN 82-3594161-001
a	Plan name ANDREW G. GILFILLAN, DDS, PLLC 401(K) PLAN	
b	Name of plan sponsor ANDREW G. GILFILLAN, DDS, PLLC	c EIN-PN 46-1589818-001
a	Plan name ANDREW TOOL & MACHINING COMPANY, INC. EMPLOYEES' TAX SAVINGS PLAN	
b	Name of plan sponsor ANDREW TOOL & MACHINING COMPANY, INC.	c EIN-PN 41-1468061-001
a	Plan name ANTHOLOGY SENIOR LIVING 401(K) PLAN	
b	Name of plan sponsor CA SENIOR MANAGEMENT, LLC	c EIN-PN 83-1894236-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	APIXIO HOLDINGS, LLC 401K PLAN	
b	Name of plan sponsor	APIXIO HOLDINGS, LLC	c EIN-PN 46-0788940-001
a	Plan name	APTUS INNOVATIONS, LLC 401(K) PLAN AND TRUST	
b	Name of plan sponsor	APTUS INNOVATIONS, LLC	c EIN-PN 27-3781435-001
a	Plan name	ARCH HEALTH PARTNERS 401(K) PLAN	
b	Name of plan sponsor	ARCH HEALTH PARTNERS	c EIN-PN 27-1332228-001
a	Plan name	ARDURRA RETIREMENT PLAN	
b	Name of plan sponsor	ARDURRA GROUP, INC.	c EIN-PN 59-1782900-002
a	Plan name	AREA TEMPS INC 401K SAVINGS PLAN	
b	Name of plan sponsor	AREA TEMPS INC	c EIN-PN 34-1529684-001
a	Plan name	ARIZONA CUSTOM BLENDS MANUFACTURING LLC	
b	Name of plan sponsor	ARIZONA CUSTOM BLENDS MANUFACTURING LLC	c EIN-PN 81-1875210-001
a	Plan name	AROL NORTH AMERICA 401(K) PLAN	
b	Name of plan sponsor	AROL NORTH AMERICA, INC.	c EIN-PN 27-3562064-001
a	Plan name	ASHEVILLE TRANSIT EMPLOYEES MONEY PURCHASE PENSION PLAN	
b	Name of plan sponsor	ASHEVILLE TRANSIT MANAGEMENT, LLC	c EIN-PN 82-2344007-010
a	Plan name	ASHLEY'S BUSINESS SOLUTIONS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	ASHLEYS BUSINESS SOLUTIONS, INC.	c EIN-PN 58-1929194-001
a	Plan name	ASIAN HUMAN SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	ASIAN HUMAN SERVICES, INC.	c EIN-PN 36-3005889-001
a	Plan name	ASPEN HOMES OF COLORADO INC. 401K PLAN	
b	Name of plan sponsor	ASPEN HOMES OF COLORADO INC	c EIN-PN 84-1567057-001
a	Plan name	ASPIRE GENERAL INSUR	
b	Name of plan sponsor	ASPIRE GENERAL INSURANCE SERVICES LLC	c EIN-PN 45-4697629-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name ASSOCIATION OF THE UNITED STATES ARMY	
b	Name of plan sponsor ASSOCIATION OF THE UNITED STATES ARMY IN	c EIN-PN 53-0193361-002
a	Plan name ASTRO SHAPES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor ASTRO SHAPES LLC	c EIN-PN 34-1082339-001
a	Plan name ASTRO SHAPES LLC UNION EMPLOYEES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor ASTRO SHAPES LLC	c EIN-PN 34-1082339-002
a	Plan name AUSTIN ASSOCIATES 401K PROFIT SHARING PL	
b	Name of plan sponsor AUSTIN ASSOCIATES PA	c EIN-PN 01-0371550-001
a	Plan name AVESTA HOUSING DEVELOPMENT CORP. 401(K) PLAN	
b	Name of plan sponsor AVESTA HOUSING DEVELOPMENT CORP.	c EIN-PN 01-0315296-001
a	Plan name AVOXI 401 (K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor AVOXI, INC.	c EIN-PN 58-2602927-001
a	Plan name AXIOM MEMORY SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor AXIOM MEMORY SOLUTIONS, INC.	c EIN-PN 33-0869859-001
a	Plan name AXON UNDERWRITING SERVICES, LLC	
b	Name of plan sponsor AXON UNDERWRITING SERVICES, LLC	c EIN-PN 46-3847782-001
a	Plan name B & B THEATRES OPERATING COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor B & B THEATRES OPERATING COMPANY, INC.	c EIN-PN 43-1870501-001
a	Plan name BABYLIST 401(K) PLAN	
b	Name of plan sponsor BABYLIST, INC.	c EIN-PN 45-3767218-001
a	Plan name BAIRD, HAMPTON & BROWN SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor BAIRD, HAMPTON & BROWN, INC.	c EIN-PN 75-2426876-001
a	Plan name BARKBOX, INC. 401(K)	
b	Name of plan sponsor BARKBOX	c EIN-PN 45-3720765-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	BARNETT COMPANIES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BARNETT COMPANIES	c EIN-PN 41-0853814-001
a	Plan name	BCB COMMUNITY BANK 401(K) PLAN	
b	Name of plan sponsor	BCB COMMUNITY BANK	c EIN-PN 22-3760320-001
a	Plan name	BEEMOK CAPITAL LLC PLAN	
b	Name of plan sponsor	BEEMOK CAPITAL LLC	c EIN-PN 82-4578874-001
a	Plan name	BELL PARTNERS INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BELL PARTNERS INC.	c EIN-PN 56-1148631-001
a	Plan name	BETHESDA ACADEMY 401(K) PLAN	
b	Name of plan sponsor	BETHESDA-UNION SOCIETY OF SAVANNAH, INC.	c EIN-PN 58-0637013-001
a	Plan name	BICO AKRON, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	BICO AKRON, INC.	c EIN-PN 34-1596224-006
a	Plan name	BLAIR AND COMPANY 401(K) PLAN	
b	Name of plan sponsor	BLAIR AND COMPANY	c EIN-PN 90-0007224-001
a	Plan name	BLUESTAR USA, INC. 401(K) PLAN	
b	Name of plan sponsor	BLUESTAR USA, INC.	c EIN-PN 82-2570565-001
a	Plan name	BOEN & ASSOCIATES, INC. 401K PLAN	
b	Name of plan sponsor	BOEN & ASSOCIATES, INC.	c EIN-PN 46-0308304-001
a	Plan name	BRENNAN HEATING AND COOLING, INC. 401(K) PLAN	
b	Name of plan sponsor	BRENNAN HEATING AND COOLING, INC.	c EIN-PN 34-1230950-002
a	Plan name	BRIDGEWAY CAPITAL, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	BRIDGEWAY CAPITAL, INC.	c EIN-PN 25-1635121-001
a	Plan name	BRILLECT, LLC 401(K) PLAN	
b	Name of plan sponsor	BRILLECT, LLC	c EIN-PN 86-2435512-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name BROOKS BORG SKILES ARCHITECTURE ENGINEERING RETIREMENT PLAN	
b	Name of plan sponsor BROOKS BORG SKILES ARCHITECTURE ENGINEERING LLP	c EIN-PN 42-0477630-001
a	Plan name BROOKWOOD INTERNISTS	
b	Name of plan sponsor BROOKWOOD INTERNISTS, P.C.	c EIN-PN 63-1266801-001
a	Plan name BROS. MUSIC & GAMES, INC. 401(K) PLAN AND TRUST	
b	Name of plan sponsor BROS. MUSIC & GAMES, INC.	c EIN-PN 41-1666149-001
a	Plan name BUIST BYARS & TAYLOR LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor BUIST BYARS & TAYLOR LLC	c EIN-PN 57-1074683-001
a	Plan name BUNDY ASSOCIATES RETIREMENT PLAN	
b	Name of plan sponsor RUSSELL T. BUNDY ASSOCIATES, INC.	c EIN-PN 23-1670915-001
a	Plan name BURGER IRON COMPANY NON-UNION 401(K) PLAN	
b	Name of plan sponsor BURGER IRON MANAGEMENT COMPANY	c EIN-PN 34-1596224-001
a	Plan name BURGHARDT METAL FABRICATING INC. 401K	
b	Name of plan sponsor BURGHARDT METAL FABRICATING INC	c EIN-PN 87-3925687-001
a	Plan name BURRUS & MATTHEWS, INC. EMPLOYEES P/S PLAN	
b	Name of plan sponsor BURRUS & MATTHEWS, INC	c EIN-PN 74-1720472-001
a	Plan name C & H TECHNOLOGY INC. 401K PLAN	
b	Name of plan sponsor C H TECHNOLOGY INC	c EIN-PN 22-2294576-002
a	Plan name CAL WEST UNDERGROUND, INC. 401(K) PLAN	
b	Name of plan sponsor CAL WEST UNDERGROUND, INC.	c EIN-PN 33-0857833-001
a	Plan name CALEDONIA IMPLEMENT COMPANY INC SAFE HARBOR 401(K) PLAN	
b	Name of plan sponsor CALEDONIA IMPLEMENT COMPANY	c EIN-PN 41-0630941-001
a	Plan name CAMPBELL COUNTY BANK 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor CAMPBELL COUNTY BANK	c EIN-PN 46-0209678-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	CANFOR SOUTHERN PINE INC. 401K PLAN
b	Name of plan sponsor	CANFOR SOUTHERN PINE INC
c	EIN-PN	57-1128614-002
a	Plan name	CANVAS WORLDWIDE LLC RETIREMENT PLAN
b	Name of plan sponsor	CANVAS WORLDWIDE LLC
c	EIN-PN	38-3975313-001
a	Plan name	CAPSTONE REAL ESTATE INVESTMENTS, LLC 401(K) SAVINGS PLAN
b	Name of plan sponsor	CAPSTONE REAL ESTATE INVESTMENTS, LLC
c	EIN-PN	80-0762981-001
a	Plan name	CCRI 401(K) RETIREMENT PLAN
b	Name of plan sponsor	CCRI, INC.
c	EIN-PN	41-1294489-001
a	Plan name	CEC 401(K) RETIREMENT PLAN
b	Name of plan sponsor	CEC ELECTRICAL, INC.
c	EIN-PN	27-0387107-001
a	Plan name	CENTER FOR ADVANCED ORTHOPEDICS AND SPORTS MEDICINE 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	CENTER FOR ADVANCED ORTHOPEDICS AND SPORTS MEDICIN
c	EIN-PN	38-2222250-001
a	Plan name	CENTER OFFICE SYSTEMS, INC. 401(K) PLAN
b	Name of plan sponsor	NATIONAL OFFICE SYSTEMS, INC.
c	EIN-PN	58-1983192-001
a	Plan name	CENTRAL DISTRIBUTING COMPANY PROFIT SHARING PLAN AND TRUST
b	Name of plan sponsor	CENTRAL DISTRIBUTING COMPANY
c	EIN-PN	47-0402383-002
a	Plan name	CERTIFIED TRANSMISSION REBUILDERS INC. EMPLOYEE 401-K PS PL AND TR
b	Name of plan sponsor	CERTIFIED TRANSMISSION REBUILDERS
c	EIN-PN	47-0658621-001
a	Plan name	CG SCHMIDT INC. DEFINED CONTRIBUTION PL
b	Name of plan sponsor	CG SCHMIDT INC
c	EIN-PN	39-0755565-501
a	Plan name	CHAMPION FIRE PROTECTION, INC. 401(K) PLAN
b	Name of plan sponsor	CHAMPION FIRE PROTECTION, INC.
c	EIN-PN	82-2935392-001
a	Plan name	CHARTIS CONSULTING CORPORATION 401 K PROFIT SHARING PLAN TRUST
b	Name of plan sponsor	CHARTIS CONSULTING CORPORATION
c	EIN-PN	90-0343829-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	CHATHAM ORTHOPAEDIC ASSOCIATES, P.A. RETIREMENT PLAN	
b	Name of plan sponsor	CHATHAM ORTHOPAEDIC ASSOCIATES, P.A.	c EIN-PN 58-1132546-001
a	Plan name	CHEM-PLATE INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	CHEM-PLATE INDUSTRIES, INC.	c EIN-PN 36-2886942-001
a	Plan name	CHESTER COUNTY FUEL INC. 401K	
b	Name of plan sponsor	CHESTER COUNTY FUEL INC	c EIN-PN 82-2368166-001
a	Plan name	CHOWBUS 401(K) PLAN	
b	Name of plan sponsor	CHOWBUS, INC.	c EIN-PN 47-4055685-001
a	Plan name	CHUY'S OPCO, INC. 401(K) PLAN	
b	Name of plan sponsor	CHUYS OPCO, INC.	c EIN-PN 20-5718448-001
a	Plan name	CINCINNATI PLAYHOUSE IN THE PARK 401K RETIREMENT PLAN	
b	Name of plan sponsor	CINCINNATI PLAYHOUSE IN THE PARK	c EIN-PN 31-0624790-001
a	Plan name	CITY GAS/MASTER GAS 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	CITY GAS COMPANY	c EIN-PN 39-0211120-002
a	Plan name	CITY OF ROSEVILLE DEFINED CONTRIBUTION PLAN	
b	Name of plan sponsor	CITY OF ROSEVILLE	c EIN-PN 38-6007202-401
a	Plan name	CLICKSTOP, INC. 401(K) PLAN	
b	Name of plan sponsor	CLICKSTOP, INC.	c EIN-PN 20-3095658-001
a	Plan name	CMI GROUP 401(K)PLAN	
b	Name of plan sponsor	CASSAVANT MACHINING, INC.	c EIN-PN 86-0905169-002
a	Plan name	COAST SIGN, INC. 401K PLAN	
b	Name of plan sponsor	COAST SIGN, INC.	c EIN-PN 33-0147771-001
a	Plan name	COASTAL ALLERGY & ASTHMA, P. C. 401(K) PLAN	
b	Name of plan sponsor	COASTAL ALLERGY & ASTHMA, P.C.	c EIN-PN 58-2437579-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	COASTHILLS CREDIT UNION 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	COASTHILLS CREDIT UNION	c EIN-PN 95-2015359-003
a	Plan name	CODE FOR AMERICA 401(K) PLAN	
b	Name of plan sponsor	CODE FOR AMERICA LABS, INC.	c EIN-PN 27-1067272-001
a	Plan name	COGENCY GLOBAL, INC. 401(K) PLAN	
b	Name of plan sponsor	COGENCY GLOBAL, INC	c EIN-PN 13-3246732-003
a	Plan name	COMMUNITY BANK OF TRENTON EMPLOYEES	
b	Name of plan sponsor	COMMUNITY BANK OF TRENTON	c EIN-PN 37-0817404-001
a	Plan name	COMMUNITY HERITAGE FINANCIAL 401(K) PLAN	
b	Name of plan sponsor	COMMUNITY HERITAGE FINANCIAL	c EIN-PN 83-1950225-001
a	Plan name	COMMUNITY LINK 401(K) PLAN	
b	Name of plan sponsor	COMMUNITY LINK, INC.	c EIN-PN 37-0955971-002
a	Plan name	COMTEC MFG., LLC	
b	Name of plan sponsor	DONNA WENDEL	c EIN-PN 88-2927458-007
a	Plan name	CONTRACTOR SERVICE & FABRICATION, INC. 401(K) PLAN	
b	Name of plan sponsor	CONTRACTOR SERVICE & FABRICATION, INC.	c EIN-PN 63-1108047-001
a	Plan name	COOK'S PEST CONTROL INC EMPLOYEE	
b	Name of plan sponsor	COOKS PEST CONTROL INC	c EIN-PN 63-0476716-001
a	Plan name	COPART, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	COPART, INC.	c EIN-PN 94-2867490-001
a	Plan name	COPELAND ENTERPRISES, INC. 401(K) AND PROFIT SHARING PLAN	
b	Name of plan sponsor	COPELAND ENTERPRISES, INC.	c EIN-PN 04-2469226-001
a	Plan name	CORE SERVICES GROUP 401(K) PLAN	
b	Name of plan sponsor	CORE SERVICE GROUP	c EIN-PN 38-3585019-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	CORNERTURN LLC 401K PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	CORNERTURN LLC	c EIN-PN 84-1635707-001
a	Plan name	CRESCENT CAPITAL GROUP LP 401(K) PLAN	
b	Name of plan sponsor	CRESCENT CAPITAL GROUP LP	c EIN-PN 27-2698206-001
a	Plan name	CROSSWAY 401(K) PLAN	
b	Name of plan sponsor	CASSENA CARE, LLC	c EIN-PN 27-3296874-001
a	Plan name	CROWN ADVISORS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	CROWN ADVISORS, LLC	c EIN-PN 92-0976607-001
a	Plan name	D. L. EVANS BANK 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	D. L. EVANS BANK	c EIN-PN 82-0117415-003
a	Plan name	D.J. POWERS COMPANY, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	D.J. POWERS COMPANY, INC.	c EIN-PN 58-1107435-002
a	Plan name	DABBERT CUSTOM HOMES, LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	DABBERT CUSTOM HOMES, LLC	c EIN-PN 27-1859213-001
a	Plan name	DAKOTA STEEL & TRIM 401(K) PLAN	
b	Name of plan sponsor	D. L. C., INC.	c EIN-PN 46-0418384-001
a	Plan name	DALLAS BASKETBALL	
b	Name of plan sponsor	DALLAS BASKETBALL LIMITED D.B.A. DALLAS	c EIN-PN 75-1703069-001
a	Plan name	DANIEL DEFENSE, LLC EMPLOYEES SAVINGS PLAN	
b	Name of plan sponsor	DANIEL DEFENSE, LLC	c EIN-PN 58-2663175-001
a	Plan name	DANNY'S CONSTRUCTION COMPANY, LLC. 401(K) PLAN	
b	Name of plan sponsor	DANNYS CONSTRUCTION COMPANY, LLC	c EIN-PN 41-0960593-001
a	Plan name	DBC REM 401(K) PLAN	
b	Name of plan sponsor	DBC REAL ESTATE MANAGEMENT LLC	c EIN-PN 26-1908438-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DELTA C, LP 401(K) PLAN	
b	Name of plan sponsor	DELTA C, LP	c EIN-PN 84-1689482-001
a	Plan name	DEN-COL SUPPLY CO. 401(K) PLAN	
b	Name of plan sponsor	DEN-COL SUPPLY COMPANY/D-C ORNAMENTAL SUPPLY	c EIN-PN 84-0529526-003
a	Plan name	DENSO TEN AMERICA LIMITED 401(K) SHARED SAVINGS PLAN	
b	Name of plan sponsor	DENSO TEN AMERICA LIMITED	c EIN-PN 95-3047171-001
a	Plan name	DEPATIE FLUID POWER COMPANY EMPLOYEE 401(K) PLAN	
b	Name of plan sponsor	DEPATIE FLUID POWER COMPANY	c EIN-PN 30-0036481-002
a	Plan name	DEUTSCH KERRIGAN L.L.P. 401(K) PROFIT SHARE PLAN	
b	Name of plan sponsor	DEUTSCH KERRIGAN L.L.P.	c EIN-PN 72-0929299-004
a	Plan name	DHALIWAL LABS 401(K) PLAN	
b	Name of plan sponsor	DHALIWAL LABORATORIES, LLC	c EIN-PN 26-1861084-001
a	Plan name	DIGESTIVE HEALTH SPECIALISTS P.A. 401K	
b	Name of plan sponsor	TODD PITTMAN	c EIN-PN 56-1242980-002
a	Plan name	DIGITAL CHECK CORP. 401(K) PLAN	
b	Name of plan sponsor	DIGITAL CHECK CORP.	c EIN-PN 36-2445991-001
a	Plan name	DIRTT ENVIRONMENTAL SOLUTIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	DIRTT ENVIRONMENTAL SOLUTIONS, INC.	c EIN-PN 98-0443904-001
a	Plan name	DONLAR CONSTRUCTION COMPANY 401(K) PLAN	
b	Name of plan sponsor	DONLAR CONSTRUCTION COMPANY	c EIN-PN 41-0991753-003
a	Plan name	DOOLEY'S PETROLEUM, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DOOLEYS PETROLEUM, INC.	c EIN-PN 41-1525242-001
a	Plan name	DSI 401(K) PLAN	
b	Name of plan sponsor	DOTHAN SECURITY INC.	c EIN-PN 63-0748641-002

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	DULANY INDUSTRIES, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DULANY INDUSTRIES, INC.	c EIN-PN 58-2552462-001
a	Plan name	DULTMEIER SALES LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	DULTMEIER SALES LLC	c EIN-PN 47-0430008-001
a	Plan name	DUNCAN-PARNELL INC. 401K PLAN AND	
b	Name of plan sponsor	DUNCAN PARNELL INC	c EIN-PN 56-0561956-002
a	Plan name	DYNAMIC MANUFACTURING, INC. 401(K) SAVINGS PLAN	
b	Name of plan sponsor	DYNAMIC MANUFACTURING, INC.	c EIN-PN 36-3989759-001
a	Plan name	EDUCATIONAL DATA SYSTEMS, INC. 401K PLAN	
b	Name of plan sponsor	EDUCATIONAL DATA SYSTEMS, INC.	c EIN-PN 38-2272565-001
a	Plan name	EDWARD R. KUSEK, DDS RETIREMENT PLAN	
b	Name of plan sponsor	EDWARD R. KUSEK, DDS	c EIN-PN 46-0443496-001
a	Plan name	EICH MOTOR COMPANY, INC. 401(K) PLAN	
b	Name of plan sponsor	EICH MOTOR COMPANY, INC.	c EIN-PN 41-0838247-002
a	Plan name	ELCO MANUFACTURING 401(K) P/S PLAN	
b	Name of plan sponsor	ELCO MANUFACTURING	c EIN-PN 83-2116385-001
a	Plan name	EMBR RETIREMENT PLAN	
b	Name of plan sponsor	EMERGENCY MEDICINE OF BLUE RIDGE INC	c EIN-PN 93-4782537-001
a	Plan name	EMC ENGINEERING SERVICES, INC. 401(K) / PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	EMC ENGINEERING SERVICES, INC.	c EIN-PN 58-1339313-001
a	Plan name	EMPLOYEES SAVINGS PLAN OF BONSET AMERICA CORPORATION	
b	Name of plan sponsor	BONSET AMERICA CORPORATION	c EIN-PN 56-1645992-001
a	Plan name	ENCO UTILITY SERVICES LLC 401K PLAN	
b	Name of plan sponsor	ENCO UTILITY SERVICES LLC	c EIN-PN 81-0559110-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	ENDURANCE POLY 401(K) PLAN & TRUST	
b	Name of plan sponsor	ENDURANCE POLY PRODUCERS, LLC	c EIN-PN 85-2848700-001
a	Plan name	ENVISION MOTORS 401(K) PLAN	
b	Name of plan sponsor	ENVISION MOTORS MANAGEMENT, LLC	c EIN-PN 82-4787118-001
a	Plan name	EVOLENT HEALTH 401K PLAN	
b	Name of plan sponsor	EVOLENT	c EIN-PN 45-3084136-002
a	Plan name	EVOLUTION'S RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	EVOLUTION US, LLC	c EIN-PN 42-1776073-001
a	Plan name	EXCELSIOR MINING 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	EXCELSIOR MINING ARIZONA, INC.	c EIN-PN 90-0618661-001
a	Plan name	EXO-S US, LLC 401(K) PLAN	
b	Name of plan sponsor	EXO-S US, LLC	c EIN-PN 20-2683580-002
a	Plan name	EXPEDITION TECHNOLOGY, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	EXPEDITION TECHNOLOGY, INC.	c EIN-PN 46-4016188-001
a	Plan name	FAIRFAX NEONATAL ASSOCIATES, P.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FAIRFAX NEONATAL ASSOCIATES, P.C.	c EIN-PN 54-1110106-001
a	Plan name	FANTA EQUIPMENT COMPANY EMPLOYEES 401K	
b	Name of plan sponsor	FANTA EQUIPMENT COMPANY	c EIN-PN 34-1246893-001
a	Plan name	FARMER BROS. CO. 401(K) PLAN	
b	Name of plan sponsor	FARMER BROS. CO.	c EIN-PN 95-0725980-003
a	Plan name	FEIEREISEN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	FEIEREISEN, INC.	c EIN-PN 42-0984579-001
a	Plan name	FELDER & ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	BRIAN FELDER AND ASSOCIATES, LLC	c EIN-PN 46-1315321-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a Plan name	FIFTY/50 401(K) PLAN	
b Name of plan sponsor	FIFTY/50 MANAGEMENT GROUP, INC.	c EIN-PN 45-4106772-001
a Plan name	FIREPLACE STONE & PATIO 401K PLAN	
b Name of plan sponsor	FIREPLACE STONE & PATIO	c EIN-PN 47-0226995-001
a Plan name	FIRST IMPRESSION IRON WORKS, INC.	
b Name of plan sponsor	FIRST IMPRESSION IRON WORKS, INC.	c EIN-PN 82-1958555-001
a Plan name	FIRST MAINSTREET INSURANCE, L.C. 401(K) PLAN	
b Name of plan sponsor	FIRST MAINSTREET INSURANCE, L.C.	c EIN-PN 82-3143872-001
a Plan name	FIRST SECURITY TRUST & SAVINGS BANK 401K SAVINGS PLAN	
b Name of plan sponsor	FIRST SECURITY TRUST & SAVINGS BANK	c EIN-PN 36-2246177-001
a Plan name	FISCHER USA, INC. 401(K) RETIREMENT PLAN	
b Name of plan sponsor	FISCHER USA, INC.	c EIN-PN 25-1266480-003
a Plan name	FISHTECH GROUP 401(K) PLAN	
b Name of plan sponsor	FISHTECH GROUP, LLC	c EIN-PN 47-4959203-001
a Plan name	FLYWHEEL ENERGY RETIREMENT PLAN	
b Name of plan sponsor	FLYWHEEL ENERGY MANAGEMENT, LLC	c EIN-PN 36-4863019-001
a Plan name	FOOTBRIDGE CONSULTING, LLC 401(K) PLAN	
b Name of plan sponsor	FOOTBRIDGE CONSULTING, LLC	c EIN-PN 81-4767851-002
a Plan name	FORMANT INC 401(K) PLAN	
b Name of plan sponsor	FORMANT INC	c EIN-PN 82-1479341-001
a Plan name	FORNEL ENTERTAINMENT, INC. PROFIT SHARING PLAN	
b Name of plan sponsor	FORNEL ENTERTAINMENT, INC.	c EIN-PN 04-0489518-001
a Plan name	FOSSIL INDUSTRIES LLC	
b Name of plan sponsor	LYNN ROSE	c EIN-PN 85-2626889-007

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	FOURTH ENTERPRISES LLC 401K PLAN	
b	Name of plan sponsor	FOURTH ENTERPRISES LLC	c EIN-PN 80-0841558-001
a	Plan name	FREEMAN'S/HINDMAN	
b	Name of plan sponsor	INTERNATIONAL AUCTION GROUP INC.	c EIN-PN 93-4837069-001
a	Plan name	FREIGHTLINER OF SAVANNAH, INC. 401(K) PLAN	
b	Name of plan sponsor	FREIGHTLINER OF SAVANNAH, INC	c EIN-PN 58-1921635-001
a	Plan name	FRONTAPP, INC 401(K) PLAN	
b	Name of plan sponsor	FRONTAPP, INC	c EIN-PN 46-5234686-001
a	Plan name	FRONTLINE ROAD SAFETY 401(K) PLAN	
b	Name of plan sponsor	FRONTLINE ROAD SAFETY LLC	c EIN-PN 86-3333948-002
a	Plan name	FUTURAMIC TOOL & ENGINEERING COMPANY	
b	Name of plan sponsor	FUTURAMIC TOOL AND ENGINEERING COMPANY	c EIN-PN 38-1528262-002
a	Plan name	GAVEN INDUSTRIES INC.	
b	Name of plan sponsor	DAVID HACKWORTH	c EIN-PN 25-1648515-007
a	Plan name	GEORGE V. DUELLO, DDS, PC EMPLOYEE PS PLAN	
b	Name of plan sponsor	GEORGE V. DUELLO, DDS, PC	c EIN-PN 43-1340171-333
a	Plan name	GEORGIA LOGISTICS GROUP, INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	GEORGIA LOGISTICS GROUP, INC	c EIN-PN 82-5220638-001
a	Plan name	GETMAN CORPORATION 401K SAVINGS PLAN	
b	Name of plan sponsor	GETMAN CORPORATION	c EIN-PN 38-1957870-001
a	Plan name	GLACIAL LAKE CRANBERRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	GLACIAL LAKE CRANBERRIES, INC.	c EIN-PN 39-6042154-002
a	Plan name	GLACIAL LAKES RUBBER & PLASTICS LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	GLACIAL LAKES RUBBER & PLASTICS LLC	c EIN-PN 46-4717858-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name GLADE RUN LUTHERAN SERVICES 401(K) PLAN	
b	Name of plan sponsor GLADE RUN LUTHERAN SERVICES	c EIN-PN 25-0974320-001
a	Plan name GOLDEN RULE INSPECTORS RETIREMENT PLAN	
b	Name of plan sponsor GOLDEN RULE INSPECTION & MANAGEMENT SERVICES, LLC	c EIN-PN 46-2071345-001
a	Plan name GOOD NEWS JAIL & PRISON MINISTRY EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor GOOD NEWS JAIL & PRISON MINISTRY	c EIN-PN 54-0703077-001
a	Plan name GR METROLOGY 401(K) PLAN	
b	Name of plan sponsor GRAND RAPIDS METROLOGY, INC.	c EIN-PN 38-3134332-001
a	Plan name GRAND RAPIDS FOAM TECHNOLOGIES, INC. RETIREMENT PLAN	
b	Name of plan sponsor GRAND RAPIDS FOAM TECHNOLOGIES, INC.	c EIN-PN 38-1812836-001
a	Plan name GRANITE CITY REFRIGERATION & SHEET METAL, INC. PROFIT SHARING 401K PLAN	
b	Name of plan sponsor GRANITE CITY REFRIGERATION & SHEET METAL, INC.	c EIN-PN 41-1465880-001
a	Plan name GRAY, PANNELL & WOODWARD, LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GRAY, PANNELL & WOODWARD, LLP	c EIN-PN 26-1443937-001
a	Plan name GRAYBILL MEDICAL GROUP, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor GRAYBILL MEDICAL GROUP, INC.	c EIN-PN 95-3123703-003
a	Plan name GREATER CLEVELAND PARTNERSHIP 401(K) PLAN	
b	Name of plan sponsor GREATER CLEVELAND PARTNERSHIP	c EIN-PN 34-0149250-002
a	Plan name GREENLINE ARCHITECTURE 401 (K) PLAN	
b	Name of plan sponsor GREENLINE ARCHITECTURE	c EIN-PN 20-5987622-001
a	Plan name GREGORY M. PARKER, INC. 401K PLAN	
b	Name of plan sponsor GREGORY M. PARKER, INC.	c EIN-PN 58-1808864-001
a	Plan name GUARDIAN STORAGE DEVELOPMENT INC. 401K PSP & TRUST PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor GUARDIAN STORAGE DEVELOPMENT INC.	c EIN-PN 23-2928415-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	H. EIKENHOUT & SONS, INC. 401(K) PLAN	
b	Name of plan sponsor	H. EIKENHOUT & SONS, INC.	c EIN-PN 38-1967099-001
a	Plan name	HAAS AUTOMATION INC. 401K PROFIT	
b	Name of plan sponsor	HAAS AUTOMATION INC	c EIN-PN 95-3883244-001
a	Plan name	HANDICAP VILLAGE D/B/A ONE VISION 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	ONE VISION	c EIN-PN 42-0953968-001
a	Plan name	HANNOVER LIFE REASSURANCE COMPANY OF AMERICA RETIREMENT PLAN	
b	Name of plan sponsor	HANNOVER LIFE REASSURANCE COMPANY OF AMERICA	c EIN-PN 59-2859797-001
a	Plan name	HANSEN & ADKINS AUTO TRANSPORT INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HANSEN & ADKINS AUTO TRANSPORT	c EIN-PN 95-4485461-001
a	Plan name	HANSON MAVES & CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HANSON MAVES & CO., INC.	c EIN-PN 41-0916741-001
a	Plan name	HAPPY MONEY 401(K) PLAN	
b	Name of plan sponsor	HAPPY MONEY, INC.	c EIN-PN 26-4419538-001
a	Plan name	HARVEST BIBLE CHAPEL 403(B)(9) PLAN	
b	Name of plan sponsor	HARVEST BIBLE CHAPEL DO NOT USE	c EIN-PN 36-3590027-002
a	Plan name	HEALTHPEAK PROPERTIES, INC.401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HEALTHPEAK PROPERTIES, INC.	c EIN-PN 33-0091377-001
a	Plan name	HENDERSON BROTHERS, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor	HENDERSON BROTHERS, INC.	c EIN-PN 25-0543730-001
a	Plan name	HERITAGE BANK, INC. 401(K) PLAN	
b	Name of plan sponsor	HERITAGE BANK	c EIN-PN 61-1174806-001
a	Plan name	HERITAGE HEALTH SOLUTIONS 401K	
b	Name of plan sponsor	HERITAGE HEALTH SOLUTIONS	c EIN-PN 27-1516386-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	HICAPS, INC. 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	HICAPS, INC.	c EIN-PN 56-1561637-001
a	Plan name	HOLBEIN, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	HOLBEIN, INC.	c EIN-PN 25-1743293-001
a	Plan name	HOME CHEF 401(K) PLAN	
b	Name of plan sponsor	RELISH LABS LLC DBA HOME CHEF	c EIN-PN 46-3043362-001
a	Plan name	HOME TOWN RESTYLING, LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	HOME TOWN RESTYLING, LLC	c EIN-PN 82-3768253-001
a	Plan name	HOWARD, WERSHBALE & CO. PROFIT SHARING & 401(K) PLAN AND TRUST	
b	Name of plan sponsor	HOWARD, WERSHBALE & CO.	c EIN-PN 34-1663157-001
a	Plan name	HP-UOV 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	THE HEALTH PLAN OF WEST VIRGINIA, INC.	c EIN-PN 55-0585592-002
a	Plan name	HUB GROUP EMPLOYEE PROFIT SHARING AND TRUST PLAN	
b	Name of plan sponsor	HUB GROUP, INC.	c EIN-PN 36-4007085-001
a	Plan name	HUTCHINSON & WALTER LLC 401K PROFIT	
b	Name of plan sponsor	HUTCHINSON AND WALTER CPAS	c EIN-PN 91-1004812-001
a	Plan name	ICERTIS 401(K) PLAN	
b	Name of plan sponsor	ICERTIS INC.	c EIN-PN 80-0380654-001
a	Plan name	IFABM 401(K) PLAN	
b	Name of plan sponsor	INTEGRITY BUYER, LLC DBA INTEGRITY FAB & MACHINE, INC.	c EIN-PN 92-0290893-001
a	Plan name	IGD INDUSTRIES, INC. 401K RETIREMENT PLAN	
b	Name of plan sponsor	IGD INDUSTRIES, INC.	c EIN-PN 20-3947215-001
a	Plan name	IMAGEFIRST OF IOWA, INC. RETIREMENT PLAN	
b	Name of plan sponsor	ASI	c EIN-PN 42-1241530-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	IMMUNOTEK BIO CENTERS, LLC 401(K) SAVINGS PLAN	
b	Name of plan sponsor	IMMUNOTEK	c EIN-PN 46-3136583-001
a	Plan name	INFINITY MEDICAL MANAGEMENT 401(K) PLAN	
b	Name of plan sponsor	INFINITY MEDICAL MANAGEMENT, LLC	c EIN-PN 87-1118991-001
a	Plan name	INJECTECH, LLC 401(K) PLAN	
b	Name of plan sponsor	INJECTECH, LLC	c EIN-PN 84-1520989-002
a	Plan name	INTERNET SOCIETY 401(K) SAVINGS PLAN	
b	Name of plan sponsor	INTERNET SOCIETY	c EIN-PN 54-1650477-001
a	Plan name	INTERSTATE ROOFING AND WATERPROOFING, INC. 401(K) SALARY REDUCTION PLAN	
b	Name of plan sponsor	INTERSTATE ROOFING AND WATERPROOFING, INC.	c EIN-PN 39-1138482-002
a	Plan name	ITENTIAL, INC. RETIREMENT PLAN	
b	Name of plan sponsor	ITENTIAL, INC.	c EIN-PN 46-4934449-001
a	Plan name	ITG HOLDINGS USA, INC. EMPLOYEE SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	ITG BRANDS, LLC	c EIN-PN 94-2994213-001
a	Plan name	J R ZUKIN CORPORATION 401K PLAN	
b	Name of plan sponsor	JR ZUKIN CORPORATION	c EIN-PN 95-1478121-002
a	Plan name	J.I. LANDIS WELDING & MECHANICAL INC	
b	Name of plan sponsor	J I LANDIS WELDING MECHANICAL	c EIN-PN 23-3069336-001
a	Plan name	JEFFREY N. POWERS, P. C. 401(K) PLAN	
b	Name of plan sponsor	JEFFREY N. POWERS, P.C.	c EIN-PN 90-0061925-002
a	Plan name	JOHN T. TURCO & ASSOCIATES 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	JOHN T. TURCO & ASSOCIATES, P.C., L.L.O.	c EIN-PN 45-5320854-001
a	Plan name	JONES PERFORMANCE PRODUCTS 401K PLAN	
b	Name of plan sponsor	JONES PERFORMANCE PRODUCTS INC	c EIN-PN 84-0886942-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name JOSEPH, MANN & CREED EMPLOYEES 401(K) PLAN	
b	Name of plan sponsor MEDIA COLLECTIONS, INC DBA JOSEPH, MANN & CREED	c EIN-PN 34-1940904-001
a	Plan name JSN ASSOCIATES, LLC 401(K) PLAN	
b	Name of plan sponsor JSN ASSOCIATES, LLC	c EIN-PN 04-3378977-001
a	Plan name JUMPSTART INC. RETIREMENT PLAN	
b	Name of plan sponsor JUMPSTART INC	c EIN-PN 34-1398522-001
a	Plan name KADEAN CONSTRUCTION CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KADEAN CONSTRUCTION COMPANY, INC.	c EIN-PN 43-1545913-001
a	Plan name KAULIG COMPANIES 401(K) PLAN	
b	Name of plan sponsor KAULIG CAPITAL, LLC	c EIN-PN 81-3380680-001
a	Plan name KEB AMERICA, INC. 401(K) PLAN	
b	Name of plan sponsor KEB AMERICA, INC	c EIN-PN 41-1348864-001
a	Plan name KEN GRAHAM TRUCKING, INC. 401(K) PLAN	
b	Name of plan sponsor KEN GRAHAM TRUCKING, INC.	c EIN-PN 38-2314349-003
a	Plan name KENNICKELL PRINT AND COMMUNICATIONS 401(K) PLAN	
b	Name of plan sponsor KENNICKELL PRINT AND COMMUNICATIONS INC.	c EIN-PN 58-0660189-001
a	Plan name KERBERROSE S.C. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor KERBERROSE S.C.	c EIN-PN 39-1658423-001
a	Plan name KEZAR LIFE SCIENCES RETIREMENT PLAN	
b	Name of plan sponsor KEZAR LIFE SCIENCES, INC.	c EIN-PN 47-3366145-002
a	Plan name KG RETIREMENT PLAN	
b	Name of plan sponsor KARSTEN GROUP, LLC	c EIN-PN 82-1425379-001
a	Plan name KOBE STEEL USA RETIREMENT PLAN	
b	Name of plan sponsor KOBE STEEL USA INC.	c EIN-PN 13-3458454-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	KOLINSKY WEALTH MANAGEMENT LLC 401K	
b	Name of plan sponsor	KOLINSKY WEALTH MANAGEMENT LLC	c EIN-PN 27-2353546-001
a	Plan name	KP LLC 401(K) SAVINGS & RETIREMENT PLAN	
b	Name of plan sponsor	KP LLC	c EIN-PN 93-0563572-001
a	Plan name	KSL ADVISORS, LLC 401(K) PLAN	
b	Name of plan sponsor	KSL ADVISORS, LLC	c EIN-PN 20-3270347-001
a	Plan name	KT HEALTH, LLC 401(K) PLAN	
b	Name of plan sponsor	KT HEALTH, LLC	c EIN-PN 46-4446188-001
a	Plan name	L&B ELECTRICAL 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	L&B ELECTRICAL CONTRACTORS, INC	c EIN-PN 01-0485958-001
a	Plan name	L.A. FINANCIAL CREDIT UNION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	L.A. FINANCIAL FEDERAL CREDIT UNION	c EIN-PN 95-1644513-001
a	Plan name	LA CROSSE CPAS LLC 401(K) P/S PLAN	
b	Name of plan sponsor	LA CROSSE CPAS LLC	c EIN-PN 46-1410019-001
a	Plan name	LABCONNECT 401K PLAN	
b	Name of plan sponsor	LABCONNECT, LLC	c EIN-PN 06-1644519-001
a	Plan name	LAKE 401(K) PLAN	
b	Name of plan sponsor	LAKE WEEKEND WEAR LLC	c EIN-PN 46-4647933-001
a	Plan name	LAKEFIELD VIETERINARY GROUP INC 401K	
b	Name of plan sponsor	LAKEFIELD VETERINARY GROUP INC	c EIN-PN 80-0887479-001
a	Plan name	LAKELAND INDUSTRIES INC. 401K PLAN	
b	Name of plan sponsor	LAKELAND INDUSTRIES INC	c EIN-PN 13-3115216-001
a	Plan name	LAMINATORS INCORPORATED EMPLOYEES 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAMINATORS INCORPORATED	c EIN-PN 23-1636067-002

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name LATIMER LEVAY FYOCK, LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor LATIMER LEVAY FYOCK, LLC	c EIN-PN 01-0793587-001
a	Plan name LEOPOLD'S ICE CREAM 401K PLAN	
b	Name of plan sponsor LEOPOLDS ICE CREAM	c EIN-PN 20-0646051-001
a	Plan name LEVEL 10, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LEVEL 10, LLC	c EIN-PN 30-0002269-001
a	Plan name LISTERHILL CREDIT UNION 401(K) PLAN	
b	Name of plan sponsor LISTERHILL CREDIT UNION	c EIN-PN 63-0333902-003
a	Plan name LOMBARD-CONRAD ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor LOMBARD-CONRAD ARCHITECTS, INC.	c EIN-PN 82-0308831-001
a	Plan name LONGEVITI, LLC 401(K) PLAN	
b	Name of plan sponsor LONGEVITI, LLC	c EIN-PN 46-5275665-001
a	Plan name LOOP1, LLC 401(K) PLAN	
b	Name of plan sponsor LOOP1, LLC	c EIN-PN 27-0867728-001
a	Plan name LUCKY EMPLOYEE 401(K) RETIREMENT PLAN	
b	Name of plan sponsor LUCKY CHANCES, INC.	c EIN-PN 94-3199406-001
a	Plan name LUNDBECK 401K NORTH	
b	Name of plan sponsor LUNDBECK LLC	c EIN-PN 36-4408953-001
a	Plan name LINDORA WELLNESS, INC. 401(K) PLAN	
b	Name of plan sponsor LINDORA WELLNESS INCORPORATED	c EIN-PN 87-4134663-001
a	Plan name M. GLOSSER & SONS, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor M. GLOSSER & SONS, INC.	c EIN-PN 25-0955578-003
a	Plan name MAINSTAY LIFE SERVICES 401(K) PLAN	
b	Name of plan sponsor MAINSTAY LIFE SERVICES	c EIN-PN 25-1215557-001

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)		
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>		
a	Plan name	MAREL USA 401K PLAN
b	Name of plan sponsor	MAREL INC
c	EIN-PN	48-1174114-002
a	Plan name	MATICA BIOTECHNOLOGY, INC. 401(K) PLAN
b	Name of plan sponsor	MATICA BIOTECHNOLOGY, INC
c	EIN-PN	84-3095639-001
a	Plan name	MAYERSEEDLINE 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MAYERSEEDLINE, LLC
c	EIN-PN	26-0142781-004
a	Plan name	MBS 401(K) PLAN
b	Name of plan sponsor	MBS FABRICATION, INC.
c	EIN-PN	04-3389054-001
a	Plan name	MCCAUSLAND KEEN & BUCKMAN 401K
b	Name of plan sponsor	MCCAUSLAND KEEN AND BUCKMAN
c	EIN-PN	23-2706042-002
a	Plan name	MCDOWALL COMPANY PROFIT SHARING & 401(K) PLAN
b	Name of plan sponsor	MCDOWALL COMPANY
c	EIN-PN	41-0946275-001
a	Plan name	MCGOWAN & COMPANY INC. EMPLOYEES' 401K
b	Name of plan sponsor	MCGOWAN COMPANY INC
c	EIN-PN	34-0841381-001
a	Plan name	MED-LAB SUPPLY CO., INC. RETIREMENT PLAN
b	Name of plan sponsor	MED-LAB SUPPLY CO., INC.
c	EIN-PN	59-1022024-001
a	Plan name	MEDAIRE 401(K) PLAN
b	Name of plan sponsor	MEDAIRE, INC.
c	EIN-PN	98-0598955-001
a	Plan name	MEDICAL RESOURCE GROUP 401K PLAN
b	Name of plan sponsor	ME3DICAL RESOURCE GROUP
c	EIN-PN	34-1874916-001
a	Plan name	MEKIS CONSTRUCTION CORPORATION 401(K) PROFIT SHARING PLAN
b	Name of plan sponsor	MEKIS CONSTRUCTION CORPORATION
c	EIN-PN	25-1147270-001
a	Plan name	MERIBEL ENTERPRISES LLC RETIREMENT SAVINGS PL
b	Name of plan sponsor	MERIBEL ENTERPRISES LLC
c	EIN-PN	05-0527601-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	METAGENICS LLC 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	METAGENICS LLC	c EIN-PN 95-3841881-002
a	Plan name	METRO CREDIT UNION 401(K) SAFE HARBOR PLAN	
b	Name of plan sponsor	METRO CU FEDERAL CREDIT UNION	c EIN-PN 47-6026142-002
a	Plan name	MFS SUPPLY LLC 401K PLAN	
b	Name of plan sponsor	MFS SUPPLY LLC	c EIN-PN 20-4935387-001
a	Plan name	MIDWEST RUBBER SERVICE & SUPPLY CO. PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	MIDWEST RUBBER SERVICE & SUPPLY CO.	c EIN-PN 41-1272472-001
a	Plan name	MIEKLES NORTHSIDE HARDWARE, INC. 401(K) PS PLAN	
b	Name of plan sponsor	MEIKLES NORTHSIDE HARDWARE, INC.	c EIN-PN 39-1274699-001
a	Plan name	MIHM BROS., INC. 401(K) & PROFIT SHARING PLAN	
b	Name of plan sponsor	MIHM BROS., INC.	c EIN-PN 54-2087120-001
a	Plan name	MILES-MCCLELLAN CONSTRUCTION COMPANY, INC. 401(K) SALARY DEFERRAL PLAN	
b	Name of plan sponsor	MILES-MCCLELLAN CONSTRUCTION COMPANY, INC.	c EIN-PN 31-0987415-005
a	Plan name	MILHENCH INDUSTRIAL SUPPLY CO., INC. 401(K) PLAN	
b	Name of plan sponsor	MILHENCH INDUSTRIAL SUPPLY CO., INC 401(K) PLAN	c EIN-PN 04-2848619-001
a	Plan name	MILLENNIUM LOGISTICS MANAGEMENT LLC	
b	Name of plan sponsor	MILLENNIUM LOGISTICS MANAGEMENT LLC	c EIN-PN 27-5527952-001
a	Plan name	MINNEAPOLIS-FOWLerville CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	MINNEAPOLIS-FOWLerville CORPORATION	c EIN-PN 41-1977442-001
a	Plan name	MINNETONKA MOCCASIN CO., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	MINNETONKA MOCCASIN COMPANY, INC.	c EIN-PN 41-0647360-002
a	Plan name	MISSION COMMUNITY HOSPITAL'S 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	DEANCO HEALTHCARE, LLC DBA MISSION COMMUNITY HOSPITAL	c EIN-PN 27-2099923-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name MISSION CRITICAL GROUP 401(K) PLAN	
b	Name of plan sponsor MISSION CRITICAL GROUP, LLC	c EIN-PN 92-3164405-002
a	Plan name MODERN TRANSPORTATION SERVICES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor MODERN TRANSPORTATION, LLC	c EIN-PN 25-1544945-001
a	Plan name MOLY-COP USA LLC 401(K) PLAN	
b	Name of plan sponsor MOLY-COP USA LLC	c EIN-PN 20-1689954-001
a	Plan name MONDO 401K PLAN	
b	Name of plan sponsor BRAD MONDO INC	c EIN-PN 82-3650314-001
a	Plan name MORGAN CONSTRUCTION COMPANY, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor MORGAN CONSTRUCTION COMPANY, INC.	c EIN-PN 62-1248003-001
a	Plan name MUELLER SPORTS MEDICINE INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor MUELLER SPORTS MEDICINE INC.	c EIN-PN 39-1024736-001
a	Plan name N.R.F. DISTRIBUTORS RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor N.R.F. DISTRIBUTORS INC.	c EIN-PN 01-0319607-002
a	Plan name NACOGDOCHES COMMERCIAL BANCSHARES, INC. EMPLOYEE STOCK OWNERSHIP PLAN AND TRUST	
b	Name of plan sponsor NACOGDOCHES COMMERCIAL BANCSHARES, INC.	c EIN-PN 75-1827898-002
a	Plan name NATIONAL BLANKING, LLC 401(K) PLAN	
b	Name of plan sponsor NATIONAL BLANKING, LLC	c EIN-PN 81-3501904-001
a	Plan name NATIONAL GALVANIZING, L.P. PROFIT SHARING AND SAVINGS PLAN	
b	Name of plan sponsor NATIONAL GALVANIZING, L.P.	c EIN-PN 38-3056910-002
a	Plan name NATIONAL MATERIAL PROCESSING, LLC PLANT 1 UNION 401(K) PLAN	
b	Name of plan sponsor NATIONAL MATERIAL, L.P.	c EIN-PN 90-0905915-002
a	Plan name NATIONAL MATERIAL, L.P. DEFERRED COMPENSATION PLAN 401(K)	
b	Name of plan sponsor NATIONAL MATERIAL, L.P.	c EIN-PN 36-3559267-004

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 NATIONWIDE SEPARATE ACCOUNT	
b	Name of plan sponsor NATIONWIDE TRUST COMPANY	c EIN-PN 31-1592130-001
a	Plan name NEW HORIZON KIDS 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor NEW HORIZON KIDS	c EIN-PN 41-1719363-001
a	Plan name NEWBURY PARK TREE SERVICE INC 401K PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor NEWBURY PARK TREE SERVICE, INC	c EIN-PN 20-2063791-001
a	Plan name NEWBURYPORT DENTAL ASSOCIATES, PC 401(K) PROFIT SH	
b	Name of plan sponsor NEWBURYPORT DENTAL ASSOCIATES PC	c EIN-PN 04-3531101-001
a	Plan name NORTH AMERICAN CLIENT SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor NORTH AMERICAN CLIENT SERVICES, INC.	c EIN-PN 88-0252963-001
a	Plan name NORTH SHORE AUDIOLOGY CONSULTANTS	
b	Name of plan sponsor NORTH SHORE AUDIOLOGY CONSULTANTS	c EIN-PN 99-0890636-001
a	Plan name NORTHLAND RESIDENTIAL LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor NORTHLAND RESIDENTIAL LLC	c EIN-PN 04-3280612-001
a	Plan name NORTHWEST TITLE FAMILY OF COMPANIES, INC. 401(K) PSP AND TRUST	
b	Name of plan sponsor NORTHWEST TITLE FAMILY OF COMPANIES, INC.	c EIN-PN 31-0730671-001
a	Plan name NTS AMEGA WEST 401K PLAN	
b	Name of plan sponsor NTS AMEGA WEST USA INC	c EIN-PN 85-2888357-001
a	Plan name NYX, INC. & AFFILIATES 401(K) PLAN	
b	Name of plan sponsor NYX, INC.	c EIN-PN 38-2806132-002
a	Plan name O'ROURKE BROS., INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor OROURKE BROS., INC.	c EIN-PN 42-1039137-001
a	Plan name OBSIDIAN SOLUTIONS GROUP 401(K) PLAN	
b	Name of plan sponsor OBSIDIAN SOLUTIONS GROUP LLC	c EIN-PN 27-3709520-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name OFFICE OF THE CHAPTER 13 TRUSTEE	
b	Name of plan sponsor OFFICE OF THE CHAPTER 13 TRUSTEE	c EIN-PN 22-3872787-001
a	Plan name OLLION 401(K) PLAN	
b	Name of plan sponsor OLLION, INC.	c EIN-PN 35-2429290-001
a	Plan name OMNEX GROUP, INC. 401K PLAN	
b	Name of plan sponsor OMNEX GROUP, INC.	c EIN-PN 33-0422209-001
a	Plan name ONE SOURCE PREFERRED 401(K) PLAN	
b	Name of plan sponsor ONE SOURCE PREFERRED, INC.	c EIN-PN 04-3363462-001
a	Plan name ONEAMERICA SEPARATE ACCOUNT	
b	Name of plan sponsor AMERICAN UNITED LIFE INSURANCE COMPANY	c EIN-PN 35-0145825-100
a	Plan name ONEWORLD 401(K) PLAN	
b	Name of plan sponsor ONEWORLD COMMUNITY HEALTH CENTERS, INC.	c EIN-PN 47-0548990-001
a	Plan name ONIX NETWORKING 401(K) PLAN	
b	Name of plan sponsor ONIX NETWORKING CORP.	c EIN-PN 34-1729033-001
a	Plan name ONSITE MAMMOGRAPHY LLC 401(K) PLAN	
b	Name of plan sponsor ONSITE MAMMOGRAPHY, LLC	c EIN-PN 26-3693194-001
a	Plan name ORGAIN RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor ORGAIN, LLC	c EIN-PN 26-3364542-001
a	Plan name OXFORD INSTRUMENTS 401(K) PLAN	
b	Name of plan sponsor OXFORD INSTRUMENTS HOLDINGS 2013, INC.	c EIN-PN 80-0906730-012
a	Plan name PADGETT CONSTRUCTION INC.	
b	Name of plan sponsor PADGETT CONSTRUCTION INC	c EIN-PN 61-1088978-002
a	Plan name PAISLEYHR 401K PLAN	
b	Name of plan sponsor FINGERCHECK PEO LLC DBA PAISLEYHR	c EIN-PN 92-1788164-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	PARK WEST 401(K) EMPLOYEE RETIREMENT PLAN	
b	Name of plan sponsor	PARK WEST LANDSCAPE, INC.	c EIN-PN 95-3814677-002
a	Plan name	PARKER INTEGRATIVE HEALTH AN AE OF THE ALERA PEP	
b	Name of plan sponsor	PARKER INTEGRATIVE HEALTH	c EIN-PN 01-0851518-876
a	Plan name	PARMETECH, INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	PARMETECH, INC.	c EIN-PN 23-2768578-001
a	Plan name	PAULETTE S. BASS, DDS 401(K) PLAN	
b	Name of plan sponsor	PAULETTE S. BASS, DDS	c EIN-PN 38-3204777-001
a	Plan name	PAVION CORP. 401(K) PLAN	
b	Name of plan sponsor	PAVION CORP.	c EIN-PN 54-2054948-001
a	Plan name	PEAK TECHNICAL SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	PEAK TECHNICAL SERVICES, INC.	c EIN-PN 25-1390574-001
a	Plan name	PEEPLS INDUSTRIES, INC. 401(K) PLAN	
b	Name of plan sponsor	PEEPLS INDUSTRIES, INC.	c EIN-PN 58-1317514-001
a	Plan name	PENSKE VEHICLE SERVICES, INC. 401(K) PLAN	
b	Name of plan sponsor	PENSKE VEHICLE SERVICES, INC.	c EIN-PN 51-0395686-001
a	Plan name	PEOPLES SERVICES INC. 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	PEOPLES SERVICES INC	c EIN-PN 34-1692443-002
a	Plan name	PERFECT PLASTIC PRINTING CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PERFECT PLASTIC PRINTING CORPORATION	c EIN-PN 36-2555809-003
a	Plan name	PETER BREGA, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	PETER BREGA, INC.	c EIN-PN 13-1699122-001
a	Plan name	PETROSPECS 401(K) PLAN	
b	Name of plan sponsor	MACELBERT, INC., DBA PETROSPECS, INC.	c EIN-PN 85-3217377-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name PHOENIX SOLUTIONS CO. 401(K) PLAN	
b	Name of plan sponsor FLUIDYNE ENGINEERING CORP. DBA PHOENIX SOLUTIONS CO.	c EIN-PN 41-0724317-003
a	Plan name PHUSION PROJECTS, LLC 401(K) PLAN	
b	Name of plan sponsor PHUSION PROJECTS, LLC	c EIN-PN 20-8141359-001
a	Plan name PITTSBURGH INSTITUTE OF AERONAUTICS	
b	Name of plan sponsor SUZANNE MARKLE	c EIN-PN 25-0912618-007
a	Plan name PLANNED SYSTEMS INTERNATIONAL, INC. 401(K) PLAN	
b	Name of plan sponsor PLANNED SYSTEMS INTERNATIONAL, INC.	c EIN-PN 52-1576690-001
a	Plan name PLAVE KOCH PLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PLAVE KOCH PLC	c EIN-PN 20-8111692-001
a	Plan name PMC GAGE 401(K) PLAN AND TRUST	
b	Name of plan sponsor PMC GAGE, INC.	c EIN-PN 34-1889157-001
a	Plan name POLINGER COMPANY 401(K) PLAN	
b	Name of plan sponsor POLINGER COMPANY	c EIN-PN 52-0624763-002
a	Plan name POOLE BROOKE PLUMLEE PC 401(K) PLAN	
b	Name of plan sponsor POOLE BROOKE PLUMLEE PC	c EIN-PN 54-1414013-001
a	Plan name PRAESES 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor PRAESES, LLC	c EIN-PN 20-8083840-001
a	Plan name PREMIUM BRANDS US MEATS 401(K) PLAN	
b	Name of plan sponsor OBERTO SNACKS INC.	c EIN-PN 82-5144642-001
a	Plan name PROFIT SHARING PLAN FOR ITG BRANDS, LLC HOURLY PAID EMPLOYEES	
b	Name of plan sponsor ITG BRANDS	c EIN-PN 94-2994213-003
a	Plan name PROJECT44, INC. 401(K) PLAN	
b	Name of plan sponsor PROJECT44, INC. 401(K) PLAN	c EIN-PN 81-2970923-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	PURPLE COMMUNICATIONS, INC. 401(K) PLAN	
b	Name of plan sponsor	PURPLE COMMUNICATIONS, INC.	c EIN-PN 22-3693371-001
a	Plan name	PURPOSE VENTURE ADVISORS LLC 401K PROFIT	
b	Name of plan sponsor	PURPOSE VENTURE ADVISORS LLC	c EIN-PN 84-4250696-001
a	Plan name	R.O. WHITESELL & ASSOCIATES, INC. EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	R.O. WHITESELL & ASSOCIATES, INC.	c EIN-PN 35-1998487-001
a	Plan name	RADICAL VENTURES	
b	Name of plan sponsor	RADICAL VENTURES, LLC	c EIN-PN 51-0396043-001
a	Plan name	RAREMED SOLUTIONS SAVINGS PLAN	
b	Name of plan sponsor	SUMMIT ACCESS SOLUTIONS, LLC DBA RAREMED	c EIN-PN 82-4888275-001
a	Plan name	RBA CUSTOM WINDOWS 401(K) PLAN	
b	Name of plan sponsor	GARDEN STATE CUSTOM WINDOWS, LLC	c EIN-PN 13-4223118-001
a	Plan name	RDG PLANNING & DESIGN, INC. 401(K) RETIREMENT PLAN RDG PLANNING & DESIGN, INC.	
b	Name of plan sponsor	RDG PLANNING & DESIGN, INC.	c EIN-PN 42-1338016-001
a	Plan name	RDQ, INC. 401(K) PLAN	
b	Name of plan sponsor	RDQ, INC.	c EIN-PN 82-4418108-001
a	Plan name	REAL ESTATE EQUITY EXCHANGE INC. DBA UNISON 401(K) PLAN	
b	Name of plan sponsor	REAL ESTATE EQUITY EXCHANGE INC.	c EIN-PN 20-1374297-002
a	Plan name	REDSTONE PAYMENT SOLUTIONS, LLC 401(K) PLAN	
b	Name of plan sponsor	REDSTONE PAYMENT SOLUTIONS, LLC	c EIN-PN 90-0486928-001
a	Plan name	REED CONSTRUCTION 401(K) PLAN	
b	Name of plan sponsor	REED CONSTRUCTION, LLC	c EIN-PN 36-1672190-001
a	Plan name	REGIONAL EYE ASSOCIATES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	REGIONAL EYE ASSOCIATES, INC.	c EIN-PN 55-0740986-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name REGIONAL INDUSTRIAL DEVELOPMENT CORPORATION OF SOUTHWESTERN PENNSYLVANIA 401K PSP & TRUST	
b	Name of plan sponsor RIDC	c EIN-PN 25-1033264-003
a	Plan name RELIANCE JIO INFOCOMM USA 401(K) PLAN	
b	Name of plan sponsor RELIANCE JIO INFOCOMM USA	c EIN-PN 46-2945446-002
a	Plan name RELISHIQ INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor RELISH IQ	c EIN-PN 85-4099959-001
a	Plan name REMOTELY PILOTED SOLUTIONS, LLC	
b	Name of plan sponsor REMOTELY PILOTED SOLUTIONS, LLC	c EIN-PN 46-0716722-001
a	Plan name RESIDENTIAL SEWAGE TREATMENT CO., INC. PROFIT SHARING/401K PLAN	
b	Name of plan sponsor RESIDENTIAL SEWAGE TREATMENT CO., INC.	c EIN-PN 43-1496407-001
a	Plan name RESURGENT CAPITAL SERVICES GROUP	
b	Name of plan sponsor RESURGENT CAPITAL SERVICES LP	c EIN-PN 76-0609845-001
a	Plan name RETIREMENT PLAN FOR EMPLOYEES OF JOHNNY R. ADCOCK, CLU & ASSOCIATES, INC.	
b	Name of plan sponsor JOHNNY R. ADCOCK, CLU & ASSOC., INC.	c EIN-PN 59-3216303-001
a	Plan name REVVITY, INC. MASTER TRUST	
b	Name of plan sponsor REVVITY, INC.	c EIN-PN 04-2052042-001
a	Plan name RHODE ISLAND PBS FOUNDATION 403B PLAN	
b	Name of plan sponsor RHODE ISLAND PBS FOUNDATION	c EIN-PN 22-2859005-001
a	Plan name ROLAND FOODS, LLC RETIREMENT BENEFIT PLAN	
b	Name of plan sponsor ROLAND FOODS, LLC	c EIN-PN 13-5371294-002
a	Plan name ROSEVIEW ASSETS MANAGEMENT 2 LLC 401K	
b	Name of plan sponsor JOSHUA ANDERSON	c EIN-PN 93-3388528-001
a	Plan name ROYAL LABEL COMPANY INC 401K PSP &	
b	Name of plan sponsor ROYAL LABEL COMPANY INC	c EIN-PN 04-2255738-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	RSI TAX-DEFERRED RETIREMENT PLAN	
b	Name of plan sponsor	RESORT SERVICES, INC.	c EIN-PN 57-0550479-001
a	Plan name	SALUDA GRADE ADVISORY RETIREMENT PLAN	
b	Name of plan sponsor	SALUDA GRADE ADVISORY	c EIN-PN 83-3165460-001
a	Plan name	SAVAGE & TURNER, P. C. 401(K) PLAN	
b	Name of plan sponsor	SAVAGE & TURNER,P.C.	c EIN-PN 58-2035325-001
a	Plan name	SAVANNAH ECONOMIC DEVELOPMENT AUTHORITY PENSION PLAN	
b	Name of plan sponsor	SAVANNAH ECONOMIC DEVELOPMENT AUTHORITY	c EIN-PN 58-6001588-001
a	Plan name	SAVANNAH SURFACES 401(K) PLAN	
b	Name of plan sponsor	SAVANNAH SURFACES	c EIN-PN 80-0003596-001
a	Plan name	SAVANNAH VASCULAR INSTITUTE, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SAVANNAH VASCULAR INSTITUTE, LLC	c EIN-PN 26-1758203-001
a	Plan name	SCENIC SIGN CORPORATION PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	SCENIC SIGN CORPORATION	c EIN-PN 41-0984033-001
a	Plan name	SCHLEUNIGER, INC. 401(K) PLAN	
b	Name of plan sponsor	SCHLEUNIGER, INC.	c EIN-PN 02-0417301-001
a	Plan name	SCHMIDT BROS. CUSTOM HOMES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SCHMIDT BROS. CUSTOM HOMES, INC.	c EIN-PN 39-1781171-002
a	Plan name	SCHOLA INC 401K PLAN	
b	Name of plan sponsor	SCHOLA INC	c EIN-PN 47-4208802-001
a	Plan name	SEABREEZE MANAGEMENT CO INC. 401K PLAN	
b	Name of plan sponsor	SEABREEZE MANAGEMENT COMPANY INC	c EIN-PN 33-0467088-002
a	Plan name	SEARS TROSTEL 401K PLAN	
b	Name of plan sponsor	ST OPERATING COMPANY LLC DBA SEARS TROST	c EIN-PN 99-3220196-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SEELOS THERAPEUTICS INC. 401K PLAN	
b	Name of plan sponsor	SEELOS THERAPEUTICS INC	c EIN-PN 87-0449967-001
a	Plan name	SEI 401(K) PLAN	
b	Name of plan sponsor	SYNERGY ENTERPRISES, INCORPORATED	c EIN-PN 04-3755253-001
a	Plan name	SELLEN CONSTRUCTION CO INC 401K	
b	Name of plan sponsor	SELLEN CONSTRUCTION	c EIN-PN 91-0592890-008
a	Plan name	SEMLER BROSSY CONSULTING GROUP LLC 401K	
b	Name of plan sponsor	SEMLER BROSSY CONSULTING GROUP LLC	c EIN-PN 95-4885750-001
a	Plan name	SENIOR RESOURCE GROUP 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	SRG OPERATING, INC.	c EIN-PN 91-2160583-001
a	Plan name	SEPARATE ACCOUNT A	
b	Name of plan sponsor	STANDARD INSURANCE COMPANY	c EIN-PN 93-0242990-005
a	Plan name	SHULMAN, ROGERS, GANDAL, PORDY & ECKER, P.A. RETIREMENT PLAN	
b	Name of plan sponsor	SHULMAN ROGERS GANDAL PORDY & ECKER P A	c EIN-PN 52-1008944-001
a	Plan name	SILVER BIRCH LIVING 401(K) SAVINGS PLAN	
b	Name of plan sponsor	SILVER BIRCH SERVICES LLC	c EIN-PN 82-3479583-001
a	Plan name	SKJODT-BARRETT 401K PLAN	
b	Name of plan sponsor	SKJODT-BARRETT CONTRACT PACKAGING	c EIN-PN 99-0363116-001
a	Plan name	SKYLINE CONSTRUCTION ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor	SKYLINE CONSTRUCTION ENTERPRISES, INC.	c EIN-PN 84-3642337-001
a	Plan name	SKYWORD, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SKYWORD, INC.	c EIN-PN 20-1689728-001
a	Plan name	SLETTA ENTERPRISES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SLETTA ENTERPRISES, INC.	c EIN-PN 41-0964230-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name SOF-TECH MAINTENANCE COMPANY 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SOF-TECH MAINTENANCE COMPANY	c EIN-PN 02-0643658-001
a	Plan name SOLAR ATMOSPHERES INC. 401K PROFIT SHARING PLAN	
b	Name of plan sponsor SOLAR ATMOSPHERES INC.	c EIN-PN 23-2363698-001
a	Plan name SOLUTIONS 21, INC.	
b	Name of plan sponsor MICHELLE CERQUA	c EIN-PN 25-1736924-007
a	Plan name SOUTHERN HEMATOLOGY & ONCOLOGY/ P.C. PROFIT SHARING PLAN	
b	Name of plan sponsor SOUTHERN HEMATOLOGY & ONCOLOGY, P.C.	c EIN-PN 63-1055248-002
a	Plan name SPARK POWER CORP USA 401(K) PLAN	
b	Name of plan sponsor SPARK POWER CORP USA	c EIN-PN 83-1846482-001
a	Plan name SPB HOSPITALITY LLC RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor SPB HOSPITALITY, LLC	c EIN-PN 85-1028712-001
a	Plan name SPECIALTY TOOL & MACHINE INC AND GENERAL STAMPING INC. 401(K) PLAN	
b	Name of plan sponsor SPECIALTY TOOL & MACHINE INC. AND GENERAL STAMPING INC.	c EIN-PN 47-0655076-001
a	Plan name SPECIALTYCARE 401(K) PLAN	
b	Name of plan sponsor SPECIALTYCARE, INC.	c EIN-PN 20-8825842-001
a	Plan name SPOTLIGHT LLC 401(K) PROFIT SHARING PLAN AND TRUST	
b	Name of plan sponsor SPOTLIGHT LLC	c EIN-PN 45-3060308-001
a	Plan name ST. LOUIS CITY SC 401(K) PLAN	
b	Name of plan sponsor TKFC LC DBA ST. LOUIS CITY SC	c EIN-PN 84-1769892-001
a	Plan name ST. LUKE'S UNITED METHODIST CHURCH 403(B)(9) PLAN	
b	Name of plan sponsor ST. LUKES UNITED METHODIST CHURCH	c EIN-PN 74-1216232-002
a	Plan name STAGE FRONT PRESENTATION SYSTEMS 401(K) PLAN	
b	Name of plan sponsor STAGE FRONT PRESENTATION SYSTEMS	c EIN-PN 58-1309568-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	STAR CASES 401(K) PLAN	
b	Name of plan sponsor	STAR CASES, LLC	c EIN-PN 81-3687931-001
a	Plan name	STENERSON BROS. LUMBER CO. PROFIT SHARING 401(K) PLAN	
b	Name of plan sponsor	STENERSON BROS. LUMBER CO	c EIN-PN 41-0559400-001
a	Plan name	STOCKBRIDGE EMPLOYEE SAVINGS & INVESTMENT PLAN	
b	Name of plan sponsor	STOCKBRIDGE CAPITAL GROUP, LLC	c EIN-PN 42-1558275-001
a	Plan name	STODDARD BAPTIST NURSING HOME 401(K) PLAN	
b	Name of plan sponsor	STODDARD BAPTIST NURSING HOME	c EIN-PN 62-1182648-001
a	Plan name	STOELZLE GLASS USA, INC. 401(K) PLAN	
b	Name of plan sponsor	STOELZLE GLASS USA, INC.	c EIN-PN 27-1766515-001
a	Plan name	STRATEGIC CONNECTIONS 401(K) PLAN	
b	Name of plan sponsor	STRATEGIC CONNECTIONS 401(K) PLAN	c EIN-PN 56-2100480-001
a	Plan name	STUBBE & ASSOCIATES, INC. SAVINGS PLAN	
b	Name of plan sponsor	STUBBE & ASSOCIATES, INC.	c EIN-PN 41-1546926-001
a	Plan name	SUMMIT PACKAGING SYSTEMS 401(K) PLAN	
b	Name of plan sponsor	SUMMIT PACKAGING SYSTEMS, LLC	c EIN-PN 02-0325133-002
a	Plan name	SUN DENTAL ASSOCIATES 401(K) PLAN	
b	Name of plan sponsor	SUN DENTAL ASSOCIATES	c EIN-PN 52-1744262-001
a	Plan name	SUN GARDEN - GANGI CANNING CO. LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SUN GARDEN - GANGI CANNING CO., LLC	c EIN-PN 77-0489522-001
a	Plan name	SUNNEN EMPLOYEES' RETIREMENT PLAN	
b	Name of plan sponsor	SUNNEN PRODUCTS COMPANY	c EIN-PN 43-0543500-002
a	Plan name	SUPERIOR CONTRUCTION CO. INC. EMPLOYEES	
b	Name of plan sponsor	SUPERIOR CONSTRUCTION COMPANY	c EIN-PN 35-1035114-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	SUROVELL ISAACS & LEVY PLC 401(K) RETIREMENT PLAN AND TRUST	
b	Name of plan sponsor	SUROVELL ISAACS & LEVY PLC	c EIN-PN 03-0469030-001
a	Plan name	SWAGVAULT 401(K)	
b	Name of plan sponsor	PRODEGE, LLC DBA SWAGBUCKS	c EIN-PN 03-0563997-001
a	Plan name	SWIPEJOBS, INC. 401(K) PLAN	
b	Name of plan sponsor	SWIPEJOBS, INC.	c EIN-PN 47-1203513-001
a	Plan name	SYMPHONA LLP RETIREMENT PLAN	
b	Name of plan sponsor	SYMPHONA LLP	c EIN-PN 58-2663273-001
a	Plan name	SYNAPSE PARTNERS LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	SYNAPSE PARTNERS LLC	c EIN-PN 20-2806268-001
a	Plan name	SYSTEM DYNAMICS INTERNATIONAL, INC. 401(K) PLAN	
b	Name of plan sponsor	SYSTEM DYNAMICS INTERNATIONAL, INC.	c EIN-PN 59-1923177-003
a	Plan name	SZANCA SOLUTIONS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	SZANCA SOLUTIONS, INC.	c EIN-PN 52-2447092-001
a	Plan name	TAKASAGO INTERNATIONAL CORP. (USA) 401(K) PLAN	
b	Name of plan sponsor	TAKASAGO INTERNATIONAL CORP. (USA) 401(K) PLAN	c EIN-PN 13-2606972-004
a	Plan name	TEAMAN, RAMIREZ & SMITH, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TEAMAN, RAMIREZ & SMITH, INC.	c EIN-PN 95-3636462-001
a	Plan name	TEAMDYNAMIX SOLUTIONS 401(K) PLAN	
b	Name of plan sponsor	TEAMDYNAMIX SOLUTIONS LLC	c EIN-PN 31-1804205-001
a	Plan name	TEC-MASTERS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TEC-MASTERS, INC.	c EIN-PN 63-0971481-001
a	Plan name	TECNICO CORPORATION 401(K) PLAN	
b	Name of plan sponsor	TECNICO CORPORATION	c EIN-PN 54-1571418-004

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	TEIJIN AUTOMOTIVE TECHNOLOGIES 401(K) PLAN	
b	Name of plan sponsor	TEIJIN AUTOMOTIVE TECHNOLOGIES	c EIN-PN 52-2108862-001
a	Plan name	TEX-TECH INDUSTRIES INVESTMENT PLAN	
b	Name of plan sponsor	TEX-TECH INDUSTRIES, INC.	c EIN-PN 04-2809865-001
a	Plan name	TEXANS CREDIT UNION 401(K) SAVINGS PLAN	
b	Name of plan sponsor	TEXANS CREDIT UNION	c EIN-PN 75-0992590-002
a	Plan name	TEXAS CENTER FOR UROLOGY, LLP 401(K) PLAN	
b	Name of plan sponsor	TEXAS CENTER FOR UROLOGY, LLP	c EIN-PN 32-0359358-001
a	Plan name	TEXAS INSTITUTE FOR SURGERY, LLP 401(K) PLAN	
b	Name of plan sponsor	TEXAS INSTITUTE FOR SURGERY, LLP	c EIN-PN 77-0628004-002
a	Plan name	THE AZALEA GROUP, LLC	
b	Name of plan sponsor	KRISTEN OBUSH	c EIN-PN 83-4440941-007
a	Plan name	THE CEDAR MEMORIAL FUNERAL HOME COMPANY RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	THE CEDAR MEMORIAL FUNERAL HOME COMPANY	c EIN-PN 42-0895217-001
a	Plan name	THE CYNOSURE GROUP 401(K) PLAN	
b	Name of plan sponsor	THE CYNOSURE GROUP LLC	c EIN-PN 47-2392807-001
a	Plan name	THE FIDUCIARY GROUP LLC PROFIT SHARING PLAN	
b	Name of plan sponsor	THE FIDUCIARY GROUP LLC	c EIN-PN 47-3210786-002
a	Plan name	THE FORTISS GROUP 401K PLAN	
b	Name of plan sponsor	FORTISS, LLC	c EIN-PN 20-1057643-001
a	Plan name	THE GATEWAY U.S. 401K PLAN	
b	Name of plan sponsor	GATEWAY US HOLDINGS INC	c EIN-PN 47-4645536-001
a	Plan name	THE GEL GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor	THE GEL GROUP, INC. 401(K) PLAN	c EIN-PN 57-0713831-001

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)		
a	Plan name THE IMAGE GROUP, INC. 401(K) PLAN	
b	Name of plan sponsor THE IMAGE GROUP, INC.	c EIN-PN 34-1629768-001
a	Plan name THE KENNEBEC COMPANY 401(K) PLAN	
b	Name of plan sponsor THE KENNEBEC COMPANY	c EIN-PN 47-2618545-001
a	Plan name THE PARKER POE ADAMS & BERNSTEIN LLP 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor PARKER POE ADAMS & BERNSTEIN LLP	c EIN-PN 56-0928467-001
a	Plan name THE PITTSBURGH GOLF CLUB 401(K) PLAN	
b	Name of plan sponsor THE PITTSBURGH GOLF CLUB	c EIN-PN 25-0729930-002
a	Plan name THE RETIREMENT INCOME PLAN OF THE CORPORATION OF FINE ARTS MUSEUMS	
b	Name of plan sponsor CORPORATION OF THE FINE ARTS MUSEUMS	c EIN-PN 94-3045948-001
a	Plan name THE RMS 401(K) PLAN	
b	Name of plan sponsor RESIDENTIAL MANAGEMENT SYSTEMS, INC.	c EIN-PN 31-1066646-002
a	Plan name THERAPY BRANDS 401(K) PLAN	
b	Name of plan sponsor THERAPY BRANDS THRIVE, LLC	c EIN-PN 88-3340006-001
a	Plan name THRAILKILL ALL METALS FABRICATING, INC. PROFIT SHARING PLAN	
b	Name of plan sponsor THRAILKILL ALL METALS FABRICATING, INC.	c EIN-PN 75-1626647-001
a	Plan name TIMBERLAND CONSTRUCTION, INC. 401(K) PLAN	
b	Name of plan sponsor TIMBERLAND CONSTRUCTION, INC.	c EIN-PN 81-1526759-001
a	Plan name TIRES TIRES TIRES 401(K) PLAN	
b	Name of plan sponsor TTT, INC.	c EIN-PN 20-8677623-002
a	Plan name TJD ENERGY SERVICES, LLC	
b	Name of plan sponsor CORTNEY CAPO	c EIN-PN 46-2261163-007
a	Plan name TORRANCE CASTING, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor TORRANCE CASTING, INC.	c EIN-PN 39-0903148-003

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	TOWER INDUSTRIES, INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TOWER INDUSTRIES, INC.	c EIN-PN 42-0774895-003
a	Plan name	TOYO INK 401(K) PLAN	
b	Name of plan sponsor	TOYO INK INTERNATIONAL CORP.	c EIN-PN 22-2969724-001
a	Plan name	TRAF-SYS, INC.	
b	Name of plan sponsor	CHRISTOPHER WADSWORTH	c EIN-PN 25-1886302-007
a	Plan name	TRANS-TECH ENERGY, LLC 401K PLAN	
b	Name of plan sponsor	TRANS-TECH ENERGY, LLC	c EIN-PN 46-1316128-001
a	Plan name	TRAUT COMPANIES 401(K) PLAN	
b	Name of plan sponsor	TRAUT COMPANIES	c EIN-PN 41-1429889-001
a	Plan name	TRIBRIDGE PARTNERS, LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	TRIBRIDGE PARTNERS, LLC	c EIN-PN 46-1325247-001
a	Plan name	TRUST COOPERAGE CORPORATION RETIREMENT PLAN	
b	Name of plan sponsor	TRUST COOPERAGE CORPORATION	c EIN-PN 82-4287820-001
a	Plan name	TSL MARKETING LLC PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	TSL MARKETING LLC	c EIN-PN 27-1501216-001
a	Plan name	TT ELECTRONICS 401(K) RETIREMENT PLAN	
b	Name of plan sponsor	TT GROUP INDUSTRIES, INC.	c EIN-PN 56-1536704-002
a	Plan name	TYLER TECHNOLOGIES, INC. 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	TYLER TECHNOLOGIES, INC.	c EIN-PN 75-2303920-002
a	Plan name	UMGC VENTURES, INC. 401(K) PLAN	
b	Name of plan sponsor	UMGC VENTURES, INC.	c EIN-PN 81-2898004-001
a	Plan name	UNION HOME MORTGAGE CORPORATION 401K PL	
b	Name of plan sponsor	UNION HOME MORTGAGE CORPORATION	c EIN-PN 34-1084436-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	UNIPOWER LLC 401K PLAN	
b	Name of plan sponsor	UNIPOWER LLC DBA UNIPOWER	c EIN-PN 22-3310719-001
a	Plan name	UNITED CENTER JOINT VENTURE 401K AND SUPPLEMENTAL RETIREMENT PLAN-AT YOUR SERVICE, LLC	
b	Name of plan sponsor	AT YOUR SERVICE, LLC	c EIN-PN 36-1976810-001
a	Plan name	UNITED CENTER JOINT VENTURE 401K AND SUPPLEMENTAL RETIREMENT PLAN-UNITED CENTER JOINT VENTURE	
b	Name of plan sponsor	UNITED CENTER JOINT VENTURE	c EIN-PN 36-3676920-001
a	Plan name	UNITED COMMUNITY ACTION PARTNERSHIP, INC. 401(K) PLAN	
b	Name of plan sponsor	UNITED COMMUNITY ACTION PARTNERSHIP	c EIN-PN 41-0904860-002
a	Plan name	UNIVERSAL FREIGHT SYSTEMS, INC. 401(K) PLAN	
b	Name of plan sponsor	UNIVERSAL FREIGHT SYSTEMS, INC.	c EIN-PN 02-0661072-001
a	Plan name	UPSTREAM 401(K) PLAN	
b	Name of plan sponsor	UPSTREAM USA, INC.	c EIN-PN 35-2581424-001
a	Plan name	VELOX VALUATIONS LLC 401(K) PLAN	
b	Name of plan sponsor	VELOX VALUATIONS LLC	c EIN-PN 84-4430975-001
a	Plan name	VERSABANK USA 401K PLAN	
b	Name of plan sponsor	VERSABANK USA	c EIN-PN 41-0531730-001
a	Plan name	VERUNA INC 401K PROFIT SHARING PLAN	
b	Name of plan sponsor	VERUNA INC	c EIN-PN 83-4401239-001
a	Plan name	VIGEN CONSTRUCTION, INC. RETIREMENT & 401(K) PLAN	
b	Name of plan sponsor	VIGEN CONSTRUCTION, INC.	c EIN-PN 41-0946854-001
a	Plan name	VIRTUS 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	VIRTUS 401(K) PROFIT SHARING PLAN	c EIN-PN 46-3745376-001
a	Plan name	VISIONPOINT GROUP LLC 401(K) PLAN	
b	Name of plan sponsor	VISIONPOINT GROUP LLC	c EIN-PN 92-1024573-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
<small>(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)</small>			
a	Plan name	VOSGES CHOCOLATE LLC 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	LAMONTAGNE HOLDINGS LLC	c EIN-PN 93-2712881-001
a	Plan name	WACOSA 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WACOSA	c EIN-PN 41-0871466-001
a	Plan name	WALKER FAMILY VETERINARY HOSPITAL 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WVH LLC DBA WALKER FAMILY VETERINARY HOSPITAL	c EIN-PN 88-2320763-001
a	Plan name	WARRIOR MFG., LLC 401(K) PROFIT SHARING PLAN & TRUST	
b	Name of plan sponsor	WARRIOR MFG., LLC	c EIN-PN 41-2023701-001
a	Plan name	WASHINGTON RADIOLOGY ASSOCIATES, PLLC PROFIT SHARING PLAN	
b	Name of plan sponsor	WASHINGTON RADIOLOGY ASSOCIATES, PLLC	c EIN-PN 52-0940005-002
a	Plan name	WELLBE SENIOR MEDICAL 401(K) PLAN	
b	Name of plan sponsor	WELLBE SENIOR MEDICAL, LLC	c EIN-PN 83-3843209-001
a	Plan name	WESTERN TRAILER CO 401K	
b	Name of plan sponsor	WESTERN TRAILER CO	c EIN-PN 82-0347136-001
a	Plan name	WHOLESTONE FARMS COOPERATIVE 401(K) PLAN	
b	Name of plan sponsor	WHOLESTONE FARMS COOPERATIVE, INC.	c EIN-PN 83-1174153-001
a	Plan name	WILLIAM D. HILLEN, A CORPORATION PROFIT SHARING PLAN	
b	Name of plan sponsor	WILLIAM D. HILLEN, A CORPORATION	c EIN-PN 84-0585620-001
a	Plan name	WINDSET FARMS INC. 401(K) PLAN	
b	Name of plan sponsor	WINDSET FARMS (CALIFORNIA) INC.	c EIN-PN 42-1771013-001
a	Plan name	WINDSONG FARM GOLF CLUB LLC 401(K) PLAN	
b	Name of plan sponsor	WINDSONG FARM GOLF CLUB LLC	c EIN-PN 45-4216284-001
a	Plan name	WIREGRASS ORTHODONTIC SPECIALISTS, LLC RETIREMENT PLAN	
b	Name of plan sponsor	WIREGRASS ORTHODONTIC SPECIALISTS, LLC	c EIN-PN 68-0592895-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	WIRTZ CORPORATION 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	WIRTZ CORPORATION	c EIN-PN 36-1976810-004
a	Plan name	WOODWORTH, INC. 401(K) PLAN	
b	Name of plan sponsor	WOODWORTH, INC.	c EIN-PN 38-2905648-001
a	Plan name	WORLDCOM EXCHANGE, INC. 401(K) PLAN	
b	Name of plan sponsor	WORLDCOM EXCHANGE, INC.	c EIN-PN 04-3061090-001
a	Plan name	XALOY 401K PLAN	
b	Name of plan sponsor	XALOY LLC	c EIN-PN 81-4251752-001
a	Plan name	XENIUM 401(K) RETIREMENT SAVINGS PLAN	
b	Name of plan sponsor	XENIUM RESOURCES, INC.	c EIN-PN 93-1277996-006
a	Plan name	YAEGER ARCHITECTURE, INC. 401 K & PROFIT SHARING PLAN	
b	Name of plan sponsor	YAEGER ARCHITECTURE, INC.	c EIN-PN 43-1011722-001
a	Plan name	YOUABLE EMOTIONAL HEALTH 401(K) PLAN	
b	Name of plan sponsor	YOUABLE EMOTIONAL HEALTH	c EIN-PN 41-0962511-002
a	Plan name	ZAPATA GROUP INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ZAPATA GROUP INC.	c EIN-PN 56-1816365-001
a	Plan name	ZEP INC. 401K PLAN	
b	Name of plan sponsor	ZEP INC	c EIN-PN 26-0783366-007
a	Plan name	ZEPHYR MANUFACTURING COMPANY INC. 401(K) PROFIT SHARING PLAN	
b	Name of plan sponsor	ZEPHYR MANUFACTURING COMPANY INC.	c EIN-PN 95-4349246-002
a	Plan name	ZIMKOR LLC SAVINGS PLAN	
b	Name of plan sponsor	ZIMKOR LLC	c EIN-PN 22-3868860-001
a	Plan name		
b	Name of plan sponsor		c EIN-PN

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

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan MID CAP VALUE FUND II	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT GRAY TRUST COMPANY, LLC	D Employer Identification Number (EIN) 38-7312964

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.

		(a) Beginning of Year	(b) End of Year
Assets			
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)	177653	142863
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)	18031818	140833499
(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)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	18209471	140976362
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h	0	30951
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	180038	142863
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	180038	173814
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	18029433	140802548

Part II Income and Expense Statement

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

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

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		4194658
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		4194658

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	3509	
(5) Investment advisory and investment management fees	2i(5)	33628	
(6) Bank or trust company trustee/custodial fees	2i(6)	35806	
(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)		72943
j Total expenses. Add all expense amounts in column (b) and enter total	2j		72943

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		4121715
l Transfers of assets:			
(1) To this plan	2l(1)		131497362
(2) From this plan	2l(2)		12845962

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name:

(2) EIN:

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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