Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

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

B This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

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

D Check box if filing under:
- ☐ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN

1b Three-digit plan number (PN) ▶ 501

1c Effective date of plan

2a Plan sponsor's name (employer, if for a single-employer plan)
Mailing address (include room, apt., suite no. and street, or P.O. Box)
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)
SOUTHERN OHIO CHAMBER ALLIANCE

1435 VINE STREET
CINCINNATI, OH 45202

2b Employer Identification Number (EIN)
47-1267936

2c Plan Sponsor's telephone number
513-452-5103

2d Business code (see instructions)

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

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

SIGN HERE			
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Filed with authorized/valid electronic signature.	02/12/2026	MATT APPENZELLER
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:

a Sponsor's name

c Plan Name

4b EIN

4d PN

5	Total number of participants at the beginning of the plan year	**5**	
6	Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1)	Total number of active participants at the beginning of the plan year	**6a(1)**	
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	
b	Retired or separated participants receiving benefits	**6b**	
c	Other retired or separated participants entitled to future benefits	**6c**	
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	0
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	
f	Total. Add lines **6d** and **6e**.	**6f**	
g(1)	Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	**6g(1)**	
g(2)	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g(2)**	
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

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

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

9a Plan funding arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [ ] Trust
- **(4)** [ ] General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

- **(1)** [ ] Insurance
- **(2)** [ ] Code section 412(e)(3) insurance contracts
- **(3)** [ ] Trust
- **(4)** [ ] General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... [X] 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.) ..... [X] 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 159916161

SCHEDULE A (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Insurance Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

A Name of plan
SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTHERN OHIO CHAMBER ALLIANCE

D Employer Identification Number (EIN)
47-1267936

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

1 Coverage Information:

(a) Name of insurance carrier
COMMUNITY INSURANCE COMPANY

(b) EIN	**(c)** NAIC code	**(d)** Contract or identification number	**(e)** Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	**(g)** To
31-1440175	10345	0000	92753	05/01/2024	04/30/2025

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

(a) Total amount of commissions paid	**(b)** Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

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

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	
c	Premiums due but unpaid at the end of the year	6c	
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.	6d	

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity

(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee

(3) ☐ guaranteed investment (4) ☐ other ▶

b	Balance at the end of the previous year			7b	0
c	Additions: (1) Contributions deposited during the year	7c(1)			
	(2) Dividends and credits	7c(2)			
	(3) Interest credited during the year	7c(3)			
	(4) Transferred from separate account	7c(4)			
	(5) Other (specify below)	7c(5)			
	▶				
	(6)Total additions			7c(6)	0
d	Total of balance and additions (add lines **7b** and **7c(6)**).			7d	0
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)			
	(2) Administration charge made by carrier	7e(2)			
	(3) Transferred to separate account	7e(3)			
	(4) Other (specify below)	7e(4)			
	▶				
	(5) Total deductions			7e(5)	0
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	0

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:				
a Premiums: (1) Amount received	9a(1)			
(2) Increase (decrease) in amount due but unpaid	9a(2)			
(3) Increase (decrease) in unearned premium reserve	9a(3)			
(4) Earned ((1) + (2) - (3))			9a(4)	0
b Benefit charges (1) Claims paid	9b(1)			
(2) Increase (decrease) in claim reserves	9b(2)			
(3) Incurred claims (add (1) and (2))			9b(3)	0
(4) Claims charged			9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	9c(1)(A)			
(B) Administrative service or other fees	9c(1)(B)			
(C) Other specific acquisition costs	9c(1)(C)			
(D) Other expenses	9c(1)(D)			
(E) Taxes	9c(1)(E)			
(F) Charges for risks or other contingencies	9c(1)(F)			
(G) Other retention charges	9c(1)(G)			
(H) Total retention			9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were [ ] paid in cash, or [ ] credited.)			9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			9d(1)	
(2) Claim reserves			9d(2)	
(3) Other reserves			9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)			9e	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			10a	28562039
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.			10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? [ ] Yes [X] No

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

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2024** **This Form is Open to Public Inspection.**

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

A Name of plan
SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTHERN OHIO CHAMBER ALLIANCE

D Employer Identification Number (EIN)
47-1267936

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . ☐ Yes ☒ No

b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

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

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

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

COMMUNITY INSURANCE COMPANY

31-1440175

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12	N/A	20863683	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

CONSOLIPLEX CHAMBERS LLC

38-3929095

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 15 16	N/A	3709319	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

X-FACTOR MEDIA

35-2377502

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	N/A	757856	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

SOCA SERVICES LLC

85-4395712

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
14	N/A	474793	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

NAVIA BENEFIT SOLUTIONS

91-1467758

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
38	N/A	362244	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MALONEY + NOVOTNY, LLC

34-0677006

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10 16	N/A	87937	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

HUNTINGTON NATIONAL BANK

31-0966785

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	N/A	78107	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

THE OHLMANN GROUP, INC.

31-0682270

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49	N/A	7809	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

OPTUM

41-1858498

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11	N/A	5903	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)

(complete as many entries as needed)

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

A Name of plan
SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN

B Three-digit plan number (PN) ▶ 501

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
SOUTHERN OHIO CHAMBER ALLIANCE

D Employer Identification Number (EIN)
47-1267936

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:

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):

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	1 GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	1 GROUP LLC	**c** EIN-PN	81-4035734-501
a Plan name	1 STOP PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	1 STOP PEST CONTROL	**c** EIN-PN	46-5556879-501
a Plan name	1 TOM PLUMBER OF COLUMBUS SOCA BENEFIT PLAN		
b Name of plan sponsor	1 TOM PLUMBER OF COLUMBUS	**c** EIN-PN	35-2821416-501
a Plan name	1062 TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	1062 TECHNOLOGIES INC	**c** EIN-PN	81-4097155-501
a Plan name	11 ATHLETICS SOCA BENEFIT PLAN		
b Name of plan sponsor	11 ATHLETICS	**c** EIN-PN	46-5431425-501
a Plan name	11310 JUNIPER REAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	11310 JUNIPER REAR LLC	**c** EIN-PN	82-3410341-501
a Plan name	121 ECOMMERCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	121 ECOMMERCE LLC	**c** EIN-PN	47-2368498-501
a Plan name	14720 HARVARD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	14720 HARVARD INC	**c** EIN-PN	04-3602379-502
a Plan name	1716 STRATEGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	1716 STRATEGY LLC	**c** EIN-PN	82-4420674-501
a Plan name	1922 ON THE SQUARE SOCA BENEFIT PLAN		
b Name of plan sponsor	1922 ON THE SQUARE	**c** EIN-PN	84-2931150-501
a Plan name	1956 MANAGEMENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	1956 MANAGEMENT GROUP LLC	**c** EIN-PN	85-4264502-501
a Plan name	1992 ELM RD LLC VALLEYVIEW SOCA BENEFIT PLAN		
b Name of plan sponsor	1992 ELM RD LLC VALLEYVIEW	**c** EIN-PN	88-3979998-501

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	1N5 SOCA BENEFIT PLAN		
b Name of plan sponsor	1N5	**c** EIN-PN	27-3346632-501
a Plan name	1ST CLASS MARKETING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	1ST CLASS MARKETING, LLC	**c** EIN-PN	27-5315007-501
a Plan name	1ST CORP SERVS SOCA BENEFIT PLAN		
b Name of plan sponsor	1ST CORP SERVS	**c** EIN-PN	31-1627005-501
a Plan name	1ST IMPRESSIONS LANDSCAPE & GARDEN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	1ST IMPRESSIONS LANDSCAPE & GARDEN CENTER	**c** EIN-PN	31-1429201-501
a Plan name	2 SERVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	2 SERVE LLC	**c** EIN-PN	86-3527003-501
a Plan name	212 ENVIRONMENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	212 ENVIRONMENTAL	**c** EIN-PN	32-0490800-501
a Plan name	21ST CENTURY ALARM SOCA BENEFIT PLAN		
b Name of plan sponsor	21ST CENTURY ALARM	**c** EIN-PN	34-1853356-501
a Plan name	21ST CENTURY SOLUTIONS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	21ST CENTURY SOLUTIONS LTD	**c** EIN-PN	34-1980391-501
a Plan name	2401 WHIPPLE PROPERTY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	2401 WHIPPLE PROPERTY LLC	**c** EIN-PN	81-4171315-501
a Plan name	2JS TOOL AND DIE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	2JS TOOL AND DIE LLC	**c** EIN-PN	20-1080666-501
a Plan name	2LMN, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	2LMN, INC	**c** EIN-PN	31-1124011-501
a Plan name	2ND GEAR MANAGMENT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	2ND GEAR MANAGMENT INC.	**c** EIN-PN	82-2824973-501

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	2SHEA CREATIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	2SHEA CREATIVE LLC	**c** EIN-PN	27-1686596-501
a Plan name	3 AXIS ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	3 AXIS ADVISORS	**c** EIN-PN	82-5461195-501
a Plan name	3 D TECH SERVICES CO SOCA BENEFIT PLAN		
b Name of plan sponsor	3 D TECH SERVICES CO	**c** EIN-PN	81-3924242-501
a Plan name	3 PIGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	3 PIGS LLC	**c** EIN-PN	46-3995489-501
a Plan name	3 VALLEY CONSERVATION TRUST SOCA BENEFIT PLAN		
b Name of plan sponsor	3 VALLEY CONSERVATION TRUST	**c** EIN-PN	31-1418241-501
a Plan name	33 COFFEE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	33 COFFEE LLC	**c** EIN-PN	87-1156125-501
a Plan name	3B IT SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	3B IT SERVICES LLC	**c** EIN-PN	87-2811342-501
a Plan name	3B2M LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	3B2M LLC	**c** EIN-PN	92-1978872-501
a Plan name	3C CONTRACTING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	3C CONTRACTING, INC.	**c** EIN-PN	20-4212461-501
a Plan name	3D MEATS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	3D MEATS LLC	**c** EIN-PN	86-3465853-501
a Plan name	3DX SCENIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	3DX SCENIC LLC	**c** EIN-PN	93-3041882-501
a Plan name	3P CUSTOM BUILDS SOCA BENEFIT PLAN		
b Name of plan sponsor	3P CUSTOM BUILDS	**c** EIN-PN	87-2689584-501

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	3P SOLUTIONS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	3P SOLUTIONS INC.	**c** EIN-PN	85-0828212-501
a Plan name	3RD STREET STRATEGY SOCA BENEFIT PLAN		
b Name of plan sponsor	3RD STREET STRATEGY	**c** EIN-PN	87-2050803-501
a Plan name	3SG PLUS SOCA BENEFIT PLAN		
b Name of plan sponsor	3SG PLUS	**c** EIN-PN	46-5504877-501
a Plan name	4 CS GEM IMPORTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	4 CS GEM IMPORTS INC	**c** EIN-PN	31-1241201-501
a Plan name	4 X 4'S UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	4 X 4S UNLIMITED	**c** EIN-PN	34-1470905-501
a Plan name	425 NILES CORTLAND ROAD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	425 NILES CORTLAND ROAD LLC	**c** EIN-PN	45-3538767-501
a Plan name	4415 WDG ROAD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	4415 WDG ROAD INC	**c** EIN-PN	42-7281397-501
a Plan name	4BIS COM SOCA BENEFIT PLAN		
b Name of plan sponsor	4BIS COM	**c** EIN-PN	03-0385031-501
a Plan name	4J CINCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	4J CINCY LLC	**c** EIN-PN	83-3080483-501
a Plan name	4TH FLOOR CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	4TH FLOOR CREATIVE	**c** EIN-PN	47-3808998-501
a Plan name	4XBOLT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	4XBOLT LLC	**c** EIN-PN	86-1552896-501
a Plan name	500 AUTO SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	500 AUTO SALES	**c** EIN-PN	55-0827550-501

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	614 SPORTS CARDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	614 SPORTS CARDS LLC	**c** EIN-PN	30-1164306-501
a Plan name	6S PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	6S PRODUCTS LLC	**c** EIN-PN	61-1458279-502
a Plan name	7080 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	7080 INC	**c** EIN-PN	36-4903277-501
a Plan name	720 MARKET LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	720 MARKET LLC	**c** EIN-PN	81-1328926-501
a Plan name	740 AUTO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	740 AUTO LLC	**c** EIN-PN	93-4511268-501
a Plan name	828 TRANSPORT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	828 TRANSPORT INC	**c** EIN-PN	85-2403343-501
a Plan name	9 TREES LANDSCAPE CONSTRUCTION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	9 TREES LANDSCAPE CONSTRUCTION, LLC	**c** EIN-PN	47-0849996-501
a Plan name	937 PAYROLL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	937 PAYROLL LLC	**c** EIN-PN	82-1079216-501
a Plan name	A & C HOMEBUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	A & C HOMEBUILDERS	**c** EIN-PN	34-1911192-501
a Plan name	A & S CONSOLIDATED INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A & S CONSOLIDATED INC	**c** EIN-PN	82-4861489-501
a Plan name	A & S KHANDELWAL MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A & S KHANDELWAL MD INC	**c** EIN-PN	34-1284372-501
a Plan name	A AND A TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A AND A TRANSPORT LLC	**c** EIN-PN	27-1554451-501

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	A AND B MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	A AND B MACHINE	**c** EIN-PN	26-1115064-501
a Plan name	A AND D PROPERTIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	A AND D PROPERTIES LTD	**c** EIN-PN	34-1869285-501
a Plan name	A AND E WELD AND INSTALL SOCA BENEFIT PLAN		
b Name of plan sponsor	A AND E WELD AND INSTALL	**c** EIN-PN	56-2306062-501
a Plan name	A AND S PLAY ZONE SOCA BENEFIT PLAN		
b Name of plan sponsor	A AND S PLAY ZONE	**c** EIN-PN	45-0503000-501
a Plan name	A BETTER LIFE 2 EMBRACE SOCA BENEFIT PLAN		
b Name of plan sponsor	A BETTER LIFE 2 EMBRACE	**c** EIN-PN	82-2279413-501
a Plan name	A CALL TO COLLEGE SOCA BENEFIT PLAN		
b Name of plan sponsor	A CALL TO COLLEGE	**c** EIN-PN	31-1333812-501
a Plan name	A CARING DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	A CARING DENTAL GROUP	**c** EIN-PN	34-1784742-501
a Plan name	A CREATIVE JOURNEY SOCA BENEFIT PLAN		
b Name of plan sponsor	A CREATIVE JOURNEY	**c** EIN-PN	47-4109100-501
a Plan name	A DRILLING CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A DRILLING CO LLC	**c** EIN-PN	83-4013840-501
a Plan name	A H STURGILL ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A H STURGILL ROOFING INC	**c** EIN-PN	31-1366660-501
a Plan name	A JAY S RECONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	A JAY S RECONDITIONING	**c** EIN-PN	31-1191058-501
a Plan name	A KID AGAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	A KID AGAIN	**c** EIN-PN	31-1440073-501

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	A KID CLUB INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	A KID CLUB INC.	**c** EIN-PN	20-4234782-501
a Plan name	A L A ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A L A ELECTRIC LLC	**c** EIN-PN	81-3275998-501
a Plan name	A LOVING HEART HOME HEALTH CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	A LOVING HEART HOME HEALTH CARE	**c** EIN-PN	81-1212338-501
a Plan name	A NEW DAY LODI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A NEW DAY LODI LLC	**c** EIN-PN	81-1927012-501
a Plan name	A NEW LEAF INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A NEW LEAF INC	**c** EIN-PN	20-0145259-501
a Plan name	A PARENT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	A PARENT COMPANY	**c** EIN-PN	83-3162188-501
a Plan name	A PEACE OF MIND HOME IMPROVEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	A PEACE OF MIND HOME IMPROVEMENT	**c** EIN-PN	83-1000033-501
a Plan name	A PEACE OF MIND WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	A PEACE OF MIND WELLNESS	**c** EIN-PN	85-1658803-501
a Plan name	A PLACE 4 ME COLLABORATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	A PLACE 4 ME COLLABORATIVE	**c** EIN-PN	92-0724183-501
a Plan name	A PLUS POWDER COATERS SOCA BENEFIT PLAN		
b Name of plan sponsor	A PLUS POWDER COATERS	**c** EIN-PN	34-1834291-501
a Plan name	A R WIRELESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A R WIRELESS INC	**c** EIN-PN	31-1726981-501
a Plan name	A SERVICE GLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	A SERVICE GLASS	**c** EIN-PN	31-0832731-501

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	A SPECIAL WISH FOUNDATION - DAYTON CHAPTER SOCA BENEFIT PLAN		
b Name of plan sponsor	A SPECIAL WISH FOUNDATION - DAYTON CHAPTER	**c** EIN-PN	31-1234314-501
a Plan name	A STEP ABOVE FLOORING SOCA BENEFIT PLAN		
b Name of plan sponsor	A STEP ABOVE FLOORING	**c** EIN-PN	27-3264778-501
a Plan name	A T REDDER & COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	A T REDDER & COMPANY INC	**c** EIN-PN	31-1125489-501
a Plan name	A TO Z DRAIN SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A TO Z DRAIN SERVICE LLC	**c** EIN-PN	34-1907199-501
a Plan name	A YOUNGER YOU SOCA BENEFIT PLAN		
b Name of plan sponsor	A YOUNGER YOU	**c** EIN-PN	86-1205811-501
a Plan name	A&L TOWING AND RECOVERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A&L TOWING AND RECOVERY LLC	**c** EIN-PN	27-3999932-501
a Plan name	A1 AMUSEMENT & PARTY SOCA BENEFIT PLAN		
b Name of plan sponsor	A1 AMUSEMENT & PARTY	**c** EIN-PN	31-1668079-501
a Plan name	A-1 CONCRETE LEVELING SOCA BENEFIT PLAN		
b Name of plan sponsor	A-1 CONCRETE LEVELING	**c** EIN-PN	34-1923066-501
a Plan name	A-1 COPY & MAILING SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	A-1 COPY & MAILING SERV	**c** EIN-PN	03-0427659-501
a Plan name	A1 INDUSTRIAL RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	A1 INDUSTRIAL RESOURCES	**c** EIN-PN	82-3940733-501
a Plan name	A2 INFLUENCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	A2 INFLUENCE LLC	**c** EIN-PN	93-3360079-501
a Plan name	A2Z FIELD SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	A2Z FIELD SERVICES	**c** EIN-PN	31-1756026-502

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	AAA EXCAVATING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AAA EXCAVATING, INC.	**c** EIN-PN	34-1932803-501
a Plan name	AAI SCIENTIFIC CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	AAI SCIENTIFIC CORPORATION	**c** EIN-PN	88-1951591-501
a Plan name	AAM MOLD & MACHINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AAM MOLD & MACHINE LLC	**c** EIN-PN	47-2522500-501
a Plan name	AAO SPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AAO SPORTS LLC	**c** EIN-PN	88-2914824-501
a Plan name	AARON SMITH ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AARON SMITH ELECTRIC INC	**c** EIN-PN	47-3596790-501
a Plan name	AARX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AARX LLC	**c** EIN-PN	82-4393487-501
a Plan name	ABA THERAPY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ABA THERAPY SOLUTIONS	**c** EIN-PN	81-3503869-501
a Plan name	ABBEY CREDIT UNION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABBEY CREDIT UNION INC	**c** EIN-PN	31-0329725-501
a Plan name	ABBEY ROAD CHIMNEY SWEEP SOCA BENEFIT PLAN		
b Name of plan sponsor	ABBEY ROAD CHIMNEY SWEEP	**c** EIN-PN	31-1705357-501
a Plan name	ABBOT STUDIOS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABBOT STUDIOS, LLC	**c** EIN-PN	31-1181520-501
a Plan name	ABBOTT IMAGE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ABBOTT IMAGE SOLUTIONS	**c** EIN-PN	45-4541922-501
a Plan name	ABC SIGNS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ABC SIGNS, INC.	**c** EIN-PN	31-1507707-501

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	ABC THERAPY LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	ABC THERAPY LTD	**c** EIN-PN	27-2031358-501
a Plan name	ABCO BAR AND TUBE CUTTING SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	ABCO BAR AND TUBE CUTTING SERVICE	**c** EIN-PN	31-1095674-501
a Plan name	ABER AUTOMOTIVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABER AUTOMOTIVE INC	**c** EIN-PN	34-1738362-501
a Plan name	ABER'S TRUCK CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ABERS TRUCK CENTER	**c** EIN-PN	34-0961649-501
a Plan name	ABJ EQUIPFIX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABJ EQUIPFIX LLC	**c** EIN-PN	34-1962900-501
a Plan name	ABOUT TIME SOFTWARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABOUT TIME SOFTWARE INC	**c** EIN-PN	31-1630001-501
a Plan name	ABRAHAM MILLER EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRAHAM MILLER EXCAVATING	**c** EIN-PN	30-0461292-502
a Plan name	ABRAM CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRAM CONTRACTORS	**c** EIN-PN	86-1061128-501
a Plan name	ABRAMS EYE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRAMS EYE CENTER INC	**c** EIN-PN	34-1952042-501
a Plan name	ABRASIVE SPECIALTIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRASIVE SPECIALTIES INC	**c** EIN-PN	31-0910428-501
a Plan name	ABRE IO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRE IO INC	**c** EIN-PN	82-3446743-501
a Plan name	ABRUZZI RACING TRANSMISSIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ABRUZZI RACING TRANSMISSIONS, INC.	**c** EIN-PN	20-0759093-501

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	ABS COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ABS COMMUNICATIONS	**c** EIN-PN	47-2726860-501
a Plan name	ABS MONEY SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	ABS MONEY SYSTEMS	**c** EIN-PN	31-1223499-501
a Plan name	ABSOLUTE IRRIGATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ABSOLUTE IRRIGATION LLC	**c** EIN-PN	20-4756424-501
a Plan name	ABSOLUTE RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	ABSOLUTE RESOURCES	**c** EIN-PN	47-1649901-501
a Plan name	ABSOLUTE ROOFING AND CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ABSOLUTE ROOFING AND CONSTRUCTION	**c** EIN-PN	45-4010366-501
a Plan name	AC GREEN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AC GREEN, LLC	**c** EIN-PN	87-3030540-501
a Plan name	AC PLUMBING HEAT AND MECH SOCA BENEFIT PLAN		
b Name of plan sponsor	AC PLUMBING HEAT AND MECH	**c** EIN-PN	34-1868469-501
a Plan name	AC SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	AC SERVICE	**c** EIN-PN	80-0015665-501
a Plan name	AC SPECIALTY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AC SPECIALTY INC	**c** EIN-PN	34-1517172-501
a Plan name	AC ZANDER SOCA BENEFIT PLAN		
b Name of plan sponsor	AC ZANDER	**c** EIN-PN	38-3645155-501
a Plan name	ACA ENGINEERING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACA ENGINEERING INC	**c** EIN-PN	34-1952690-501
a Plan name	ACADEMY ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	ACADEMY ONE	**c** EIN-PN	26-3133445-501

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	ACADEMY RENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ACADEMY RENTAL GROUP	**c** EIN-PN	83-2734424-501
a Plan name	ACADIA LEAD MANAGEMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACADIA LEAD MANAGEMENT SERVICES	**c** EIN-PN	20-4561890-501
a Plan name	ACC PARTY RENTAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACC PARTY RENTAL INC	**c** EIN-PN	31-1582695-502
a Plan name	ACCELITUDE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCELITUDE LLC	**c** EIN-PN	83-2584144-501
a Plan name	ACCESS ADVANTAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCESS ADVANTAGE	**c** EIN-PN	20-8285914-501
a Plan name	ACCESS CENTER FOR INDEPENDENT LIVING SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCESS CENTER FOR INDEPENDENT LIVING	**c** EIN-PN	31-1125390-501
a Plan name	ACCESS DOOR CONTROLS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCESS DOOR CONTROLS LLC	**c** EIN-PN	26-0217634-501
a Plan name	ACCESS SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCESS SOLUTIONS INC	**c** EIN-PN	31-1524213-501
a Plan name	ACCLAIM DESIGN BUILD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCLAIM DESIGN BUILD LLC	**c** EIN-PN	87-1950104-501
a Plan name	ACCLIMATE TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCLIMATE TECHNOLOGIES INC	**c** EIN-PN	55-0855833-501
a Plan name	ACCOUNTING SOLUTIONS OF OH SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCOUNTING SOLUTIONS OF OH	**c** EIN-PN	45-3574213-501
a Plan name	ACCUDOSE PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCUDOSE PHARMACY	**c** EIN-PN	81-0710351-501

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	ACCUFORM MFG. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCUFORM MFG. INC.	**c** EIN-PN	34-1721232-501
a Plan name	ACCURATE AUTO REPAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCURATE AUTO REPAIR LLC	**c** EIN-PN	27-0326018-501
a Plan name	ACCURATE BUSINESS MACHINES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCURATE BUSINESS MACHINES	**c** EIN-PN	20-1950788-501
a Plan name	ACCURATE GEAR MFG INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCURATE GEAR MFG INC.	**c** EIN-PN	31-0861236-501
a Plan name	ACCURATE MACHINE & WELD SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCURATE MACHINE & WELD	**c** EIN-PN	31-1609612-501
a Plan name	ACCUSHRED, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACCUSHRED, LLC	**c** EIN-PN	52-2379628-501
a Plan name	ACE BROS PLUMBING & HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	ACE BROS PLUMBING & HEATING	**c** EIN-PN	34-1724943-501
a Plan name	ACE DIVERSIFIED SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACE DIVERSIFIED SERVICES, LLC	**c** EIN-PN	34-1934013-501
a Plan name	ACE ONE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ACE ONE INC.	**c** EIN-PN	86-3461976-501
a Plan name	ACE REDIMIX SOCA BENEFIT PLAN		
b Name of plan sponsor	ACE REDIMIX	**c** EIN-PN	81-2234872-501
a Plan name	ACE VISION SOCA BENEFIT PLAN		
b Name of plan sponsor	ACE VISION	**c** EIN-PN	20-5671382-501
a Plan name	ACES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACES	**c** EIN-PN	47-2920709-501

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	ACES PICKLEBALL SOCA BENEFIT PLAN		
b Name of plan sponsor	ACES PICKLEBALL	**c** EIN-PN	88-2990905-501
a Plan name	ACHI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACHI LLC	**c** EIN-PN	84-4599137-501
a Plan name	ACHIEVE CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	ACHIEVE CREDIT UNION	**c** EIN-PN	34-0894661-501
a Plan name	ACKERMANN CPA SOCA BENEFIT PLAN		
b Name of plan sponsor	ACKERMANN CPA	**c** EIN-PN	46-4447909-501
a Plan name	ACME STEAK & SEAFOOD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACME STEAK & SEAFOOD INC	**c** EIN-PN	20-0052558-501
a Plan name	ACOCK ASSOCIATES ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ACOCK ASSOCIATES ARCHITECTS	**c** EIN-PN	31-1630631-501
a Plan name	ACS CONTRACTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACS CONTRACTING SERVICES	**c** EIN-PN	47-4767619-501
a Plan name	ACT CARES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACT CARES	**c** EIN-PN	81-3388042-501
a Plan name	ACTION MANAGEMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACTION MANAGEMENT SERVICES	**c** EIN-PN	34-1911342-501
a Plan name	ACTION SUPERABRASIVES SOCA BENEFIT PLAN		
b Name of plan sponsor	ACTION SUPERABRASIVES	**c** EIN-PN	34-1473009-501
a Plan name	ACTIVE LIVING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACTIVE LIVING, LLC	**c** EIN-PN	82-0648882-501
a Plan name	ACTIVITIES BEYOND THE CLASSROOM SOCA BENEFIT PLAN		
b Name of plan sponsor	ACTIVITIES BEYOND THE CLASSROOM	**c** EIN-PN	35-2222723-501

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	ACUPOLL PRECISION RESEARCH, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ACUPOLL PRECISION RESEARCH, INC	**c** EIN-PN	46-0823347-501
a Plan name	AD DIRECT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AD DIRECT, INC.	**c** EIN-PN	34-1745179-501
a Plan name	ADAD TRIFIRO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAD TRIFIRO, LLC	**c** EIN-PN	27-2928481-501
a Plan name	ADAM L. GIDLOW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAM L. GIDLOW LLC	**c** EIN-PN	34-1946122-501
a Plan name	ADAM-EVE SEWER & DRAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAM-EVE SEWER & DRAIN	**c** EIN-PN	34-1684552-501
a Plan name	ADAMS CO CANCER CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAMS CO CANCER CENTER LLC	**c** EIN-PN	20-8078829-501
a Plan name	ADAMS TREE PRESERVATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAMS TREE PRESERVATION	**c** EIN-PN	35-2479065-501
a Plan name	ADAMSON FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAMSON FIRE PROTECTION	**c** EIN-PN	27-2309665-501
a Plan name	ADAPTIVE INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAPTIVE INVESTMENTS	**c** EIN-PN	81-1570631-501
a Plan name	ADAPTIVE SPORTS CONNECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADAPTIVE SPORTS CONNECTION	**c** EIN-PN	31-1561944-502
a Plan name	ADCAL COAT AND LAMINATE SOCA BENEFIT PLAN		
b Name of plan sponsor	ADCAL COAT AND LAMINATE	**c** EIN-PN	65-1166570-501
a Plan name	ADDICTION OUTREACH CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADDICTION OUTREACH CLINIC	**c** EIN-PN	36-4779483-501

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	ADDICTION SERVICES COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	ADDICTION SERVICES COUNCIL	**c** EIN-PN	31-6059934-501
a Plan name	ADDISON WALLACE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADDISON WALLACE INC	**c** EIN-PN	25-1927167-501
a Plan name	ADDRESSED FOR SUCCESS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADDRESSED FOR SUCCESS	**c** EIN-PN	30-0890013-501
a Plan name	ADG - MF LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADG - MF LLC	**c** EIN-PN	82-5158781-501
a Plan name	ADKINS TIMBER PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADKINS TIMBER PRODUCTS	**c** EIN-PN	31-1629569-501
a Plan name	ADOPT A CLASS FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADOPT A CLASS FOUNDATION	**c** EIN-PN	20-2587299-501
a Plan name	ADP HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADP HOLDINGS LLC	**c** EIN-PN	84-2940275-501
a Plan name	ADVANCE INDUSTRIAL MFG INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCE INDUSTRIAL MFG INC	**c** EIN-PN	38-3130737-501
a Plan name	ADVANCED AMMONIA REFRIGERATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED AMMONIA REFRIGERATION	**c** EIN-PN	31-1306881-501
a Plan name	ADVANCED ASPHALT PAVING SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED ASPHALT PAVING	**c** EIN-PN	34-1726724-501
a Plan name	ADVANCED BACKGROUND CHECK SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED BACKGROUND CHECK	**c** EIN-PN	31-1495911-501
a Plan name	ADVANCED CARDIOVASCULAR CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED CARDIOVASCULAR CENTER	**c** EIN-PN	20-8952950-501

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	ADVANCED CAULKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED CAULKING LLC	**c** EIN-PN	20-8445731-501
a Plan name	ADVANCED CUSTOM SOUND SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED CUSTOM SOUND	**c** EIN-PN	20-2889122-501
a Plan name	ADVANCED DEALER SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED DEALER SOLUTIONS	**c** EIN-PN	46-4175006-502
a Plan name	ADVANCED DISTRIBUTION SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED DISTRIBUTION SVS	**c** EIN-PN	04-3617346-501
a Plan name	ADVANCED DOOR & HARDWARE LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED DOOR & HARDWARE LTD	**c** EIN-PN	46-1842178-501
a Plan name	ADVANCED EYE SOLUTIONS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED EYE SOLUTIONS INC.	**c** EIN-PN	61-1454383-501
a Plan name	ADVANCED FLOOR COATINGS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED FLOOR COATINGS INC	**c** EIN-PN	84-1147547-501
a Plan name	ADVANCED FUEL SYSTEMS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED FUEL SYSTEMS INC.	**c** EIN-PN	31-1622985-501
a Plan name	ADVANCED HOME HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED HOME HEALTH	**c** EIN-PN	34-1766845-501
a Plan name	ADVANCED INDUSTRIAL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED INDUSTRIAL PRODUCTS	**c** EIN-PN	31-1035342-501
a Plan name	ADVANCED LOCK AND SECURITY SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED LOCK AND SECURITY	**c** EIN-PN	87-2451412-501
a Plan name	ADVANCED MACHINERY COMPANIES SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED MACHINERY COMPANIES	**c** EIN-PN	31-0939354-501

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	ADVANCED MOBILE FLEET,INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED MOBILE FLEET,INC.	**c** EIN-PN	31-1384174-501
a Plan name	ADVANCED POOLS OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED POOLS OF OHIO	**c** EIN-PN	47-5488661-501
a Plan name	ADVANCED SOLUTIONS CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED SOLUTIONS CONTROL	**c** EIN-PN	84-3498734-501
a Plan name	ADVANCED TECHNOLOGY CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED TECHNOLOGY CONSULTING INC	**c** EIN-PN	92-2618599-501
a Plan name	ADVANCED TIRE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANCED TIRE, INC.	**c** EIN-PN	34-1860195-501
a Plan name	ADVANTAGE FAMILY OUTREACH SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE FAMILY OUTREACH	**c** EIN-PN	46-2440398-502
a Plan name	ADVANTAGE IMAGING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE IMAGING, LLC	**c** EIN-PN	20-8306685-501
a Plan name	ADVANTAGE MARKETING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE MARKETING INC	**c** EIN-PN	34-1879495-501
a Plan name	ADVANTAGE MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE MEDIA	**c** EIN-PN	20-1593284-501
a Plan name	ADVANTAGE PLUMBING AND DRAIN SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE PLUMBING AND DRAIN SOLUTIONS LLC	**c** EIN-PN	85-3539089-501
a Plan name	ADVANTAGE ROOFING AND EXTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE ROOFING AND EXTERIORS	**c** EIN-PN	30-0037739-501
a Plan name	ADVANTIC BUILDING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVANTIC BUILDING GROUP LLC	**c** EIN-PN	86-1711316-501

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	ADVENTURE SUBARU SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVENTURE SUBARU	**c** EIN-PN	46-1548767-501
a Plan name	ADVOCACY AND COMMUNICATION SOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVOCACY AND COMMUNICATION SOLUTION	**c** EIN-PN	26-2467116-501
a Plan name	ADVOCATING OPPORTUNITY SOCA BENEFIT PLAN		
b Name of plan sponsor	ADVOCATING OPPORTUNITY	**c** EIN-PN	47-1098005-502
a Plan name	AE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	AE ELECTRIC	**c** EIN-PN	34-1908559-501
a Plan name	AEF HEALTHCARE CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AEF HEALTHCARE CONSULTANTS	**c** EIN-PN	27-0856336-501
a Plan name	AERIAL WIRELESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AERIAL WIRELESS INC	**c** EIN-PN	82-5079509-502
a Plan name	AERO VELOCITY SOCA BENEFIT PLAN		
b Name of plan sponsor	AERO VELOCITY	**c** EIN-PN	99-2377184-501
a Plan name	AEROSPORT MOD & DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	AEROSPORT MOD & DESIGN	**c** EIN-PN	31-1811477-501
a Plan name	AESTHETIC LASER RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	AESTHETIC LASER RENTALS	**c** EIN-PN	88-0890043-501
a Plan name	AEY ELECTRIC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AEY ELECTRIC, INC.	**c** EIN-PN	34-1105610-501
a Plan name	AFCONA ADDITIVES SOCA BENEFIT PLAN		
b Name of plan sponsor	AFCONA ADDITIVES	**c** EIN-PN	47-4091110-501
a Plan name	AFFINITY CENTER,INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AFFINITY CENTER,INC.	**c** EIN-PN	31-1488448-501

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	AFFORDABLE TREE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	AFFORDABLE TREE SERVICE	**c** EIN-PN	26-3950566-501
a Plan name	AFFORDABLE WASTE SOCA BENEFIT PLAN		
b Name of plan sponsor	AFFORDABLE WASTE	**c** EIN-PN	82-2844396-501
a Plan name	AFTER-SCHOOL ALL-STARS SOCA BENEFIT PLAN		
b Name of plan sponsor	AFTER-SCHOOL ALL-STARS	**c** EIN-PN	31-1736272-501
a Plan name	AGAR SOCA BENEFIT PLAN		
b Name of plan sponsor	AGAR	**c** EIN-PN	80-0300732-501
a Plan name	AGEE CLYMER MITCHELL PORTMAN SOCA BENEFIT PLAN		
b Name of plan sponsor	AGEE CLYMER MITCHELL PORTMAN	**c** EIN-PN	31-0980384-501
a Plan name	AGENT RON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AGENT RON LLC	**c** EIN-PN	45-0666325-501
a Plan name	AGH MEDICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AGH MEDICAL LLC	**c** EIN-PN	81-1451819-501
a Plan name	AGI PHOTOGRAPHIC IMAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	AGI PHOTOGRAPHIC IMAGING	**c** EIN-PN	31-1246984-501
a Plan name	AGILE SIGN AND LIGHTING MAINTENANCE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AGILE SIGN AND LIGHTING MAINTENANCE, INC.	**c** EIN-PN	20-8083731-501
a Plan name	AGNONE, MORRISON & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	AGNONE, MORRISON & ASSOCIATES	**c** EIN-PN	20-1773485-501
a Plan name	AGREE AUTO SALES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AGREE AUTO SALES INC	**c** EIN-PN	34-1584754-501
a Plan name	AGRICULTURAL DESIGN, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AGRICULTURAL DESIGN, INC.	**c** EIN-PN	34-1670180-501

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	AGROSCAPES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AGROSCAPES INC	**c** EIN-PN	31-1542360-502
a Plan name	AHC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AHC INC	**c** EIN-PN	31-1132630-501
a Plan name	AHEAD OF THE CURVE GIFTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AHEAD OF THE CURVE GIFTS	**c** EIN-PN	82-1705753-501
a Plan name	AIM CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	AIM CONSTRUCTION	**c** EIN-PN	20-8634858-501
a Plan name	AIM ECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AIM ECYCLING	**c** EIN-PN	46-2250572-501
a Plan name	AIMECH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AIMECH LLC	**c** EIN-PN	83-3943898-501
a Plan name	AIMSURPLUS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AIMSURPLUS, LLC	**c** EIN-PN	82-2442061-501
a Plan name	AINSLEY OIL SOCA BENEFIT PLAN		
b Name of plan sponsor	AINSLEY OIL	**c** EIN-PN	34-1148185-501
a Plan name	AIR HANDLING EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR HANDLING EQUIPMENT	**c** EIN-PN	30-0710591-502
a Plan name	AIR HEATER SEAL SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR HEATER SEAL	**c** EIN-PN	31-1267259-501
a Plan name	AIR LIFT & LUBE SERVICE CO SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR LIFT & LUBE SERVICE CO	**c** EIN-PN	20-3724192-501
a Plan name	AIR PLUS HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR PLUS HEATING AND COOLING	**c** EIN-PN	31-1675990-501

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	AIR QUALITY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR QUALITY SOLUTIONS	**c** EIN-PN	45-4911459-501
a Plan name	AIR SOLUTION COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	AIR SOLUTION COMPANY	**c** EIN-PN	38-3463823-501
a Plan name	AIRCRAFT GROUND SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	AIRCRAFT GROUND SERVICES	**c** EIN-PN	34-1872694-501
a Plan name	AIRE-FLO INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AIRE-FLO INDUSTRIES LLC	**c** EIN-PN	46-4090194-501
a Plan name	AIRFAST HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AIRFAST HEATING AND COOLING	**c** EIN-PN	31-1604372-501
a Plan name	AIRPORT AUTO PARTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AIRPORT AUTO PARTS	**c** EIN-PN	34-1674277-501
a Plan name	AIRTRIM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AIRTRIM INC	**c** EIN-PN	31-1283496-501
a Plan name	AJ SMITH HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AJ SMITH HEATING AND COOLING	**c** EIN-PN	81-3660403-501
a Plan name	AJAZ UMERANI MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AJAZ UMERANI MD INC	**c** EIN-PN	31-1618591-501
a Plan name	AJJ PROPERTY INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AJJ PROPERTY INVESTMENTS	**c** EIN-PN	83-3087860-501
a Plan name	AJP FOODS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AJP FOODS INC.	**c** EIN-PN	34-1791068-501
a Plan name	AJT MANAGEMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	AJT MANAGEMENT SERVICES	**c** EIN-PN	27-3564932-501

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	AK ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AK ELECTRIC LLC	**c** EIN-PN	81-0833997-501
a Plan name	AKADA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AKADA INC	**c** EIN-PN	31-1517477-501
a Plan name	AKRON AUTO PAINTING AND COLLISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON AUTO PAINTING AND COLLISION INC	**c** EIN-PN	34-1626778-501
a Plan name	AKRON BAR ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON BAR ASSOCIATION	**c** EIN-PN	34-1683645-501
a Plan name	AKRON CLEVELAND ASSOCIATION OF REALTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON CLEVELAND ASSOCIATION OF REALTORS	**c** EIN-PN	34-0152180-501
a Plan name	AKRON FAMILY INSTITUTE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON FAMILY INSTITUTE INC	**c** EIN-PN	34-1757672-501
a Plan name	AKRON PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON PEST CONTROL	**c** EIN-PN	26-1377426-501
a Plan name	AKRON PHARMACY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON PHARMACY LLC	**c** EIN-PN	46-1022854-501
a Plan name	AKRON URBAN LEAGUE SOCA BENEFIT PLAN		
b Name of plan sponsor	AKRON URBAN LEAGUE	**c** EIN-PN	34-0714520-501
a Plan name	AKROSENSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AKROSENSE LLC	**c** EIN-PN	45-3739643-501
a Plan name	ALADOR KENNELS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALADOR KENNELS INC	**c** EIN-PN	31-0987044-501
a Plan name	ALAN GALVEZ INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALAN GALVEZ INSURANCE	**c** EIN-PN	04-3728839-501

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	ALAN R. WEINSTEIN, DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALAN R. WEINSTEIN, DDS	**c** EIN-PN	31-0839715-501
a Plan name	ALAN STONE CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALAN STONE CO INC	**c** EIN-PN	31-4444098-501
a Plan name	ALBATROSS MGMT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBATROSS MGMT LLC	**c** EIN-PN	45-5597410-502
a Plan name	ALBATROSS PLUMBING SOLUTIONS LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBATROSS PLUMBING SOLUTIONS LLP	**c** EIN-PN	92-2711892-501
a Plan name	ALBAUGH ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBAUGH ELECTRIC LLC	**c** EIN-PN	84-4668916-501
a Plan name	ALBCO FOUNDRY & MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBCO FOUNDRY & MACHINE	**c** EIN-PN	34-0800320-501
a Plan name	ALBERT KLABUNDE NAMETH SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBERT KLABUNDE NAMETH	**c** EIN-PN	46-5285202-501
a Plan name	ALBRIGHT SECURITY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ALBRIGHT SECURITY CENTER	**c** EIN-PN	34-1249213-501
a Plan name	ALCHEM CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ALCHEM CORPORATION	**c** EIN-PN	34-1864541-501
a Plan name	ALCHEMISTS REFUGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALCHEMISTS REFUGE	**c** EIN-PN	92-0510103-501
a Plan name	ALCOHOL AND DRUG FREEDOM CENTER OF KNOX COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	ALCOHOL AND DRUG FREEDOM CENTER OF KNOX COUNTY	**c** EIN-PN	31-0963263-501
a Plan name	ALD MANUFACTURING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALD MANUFACTURING INC	**c** EIN-PN	34-1192493-501

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	ALEGRE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALEGRE INC	**c** EIN-PN	31-1368476-501
a Plan name	ALEK INDUSTRIES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ALEK INDUSTRIES INC.	**c** EIN-PN	31-1154440-501
a Plan name	ALEXANDER EQUIPMENT SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALEXANDER EQUIPMENT SERVICES LLC	**c** EIN-PN	82-4870431-501
a Plan name	ALEXIS KLASSEN & ASSOCIATES DDS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALEXIS KLASSEN & ASSOCIATES DDS, LLC	**c** EIN-PN	85-1622327-501
a Plan name	ALEXY METALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALEXY METALS LLC	**c** EIN-PN	20-3140048-501
a Plan name	ALFA COUNSELING AND CONSULTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ALFA COUNSELING AND CONSULTATION	**c** EIN-PN	46-4479011-501
a Plan name	ALGEBRA AEC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALGEBRA AEC	**c** EIN-PN	46-5701910-501
a Plan name	ALGER FAMILY FARM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALGER FAMILY FARM LLC	**c** EIN-PN	84-3854067-501
a Plan name	ALIGNED CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALIGNED CHIROPRACTIC	**c** EIN-PN	45-2557536-501
a Plan name	ALIGNMENT ENGINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALIGNMENT ENGINE INC	**c** EIN-PN	86-3658887-501
a Plan name	ALISON TAYLOR STATE FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	ALISON TAYLOR STATE FARM	**c** EIN-PN	45-3616065-501
a Plan name	ALL AMERICAN EYEGLASS REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL AMERICAN EYEGLASS REPAIR	**c** EIN-PN	73-1641735-501

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	ALL AROUND ACCOUNTING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL AROUND ACCOUNTING, LLC	**c** EIN-PN	31-1560870-501
a Plan name	ALL CITY CLEANING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL CITY CLEANING SERVICES	**c** EIN-PN	20-4531026-501
a Plan name	ALL COMFORT HEATING AND AIR CONDITIONING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL COMFORT HEATING AND AIR CONDITIONING LLC	**c** EIN-PN	20-1606606-502
a Plan name	ALL COUNTY CRANE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL COUNTY CRANE	**c** EIN-PN	34-1789170-501
a Plan name	ALL COUNTY DRAINAGE CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL COUNTY DRAINAGE CONTRACTORS	**c** EIN-PN	31-1535763-501
a Plan name	ALL CRAFT MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL CRAFT MANUFACTURING	**c** EIN-PN	31-1297787-501
a Plan name	ALL DECKED OUT SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL DECKED OUT	**c** EIN-PN	47-3339038-501
a Plan name	ALL DRAIN DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL DRAIN DAYTON	**c** EIN-PN	84-2866599-501
a Plan name	ALL FREIGHT DELIVERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL FREIGHT DELIVERY LLC	**c** EIN-PN	26-4304073-501
a Plan name	ALL HEARTS HOME HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL HEARTS HOME HEALTH	**c** EIN-PN	01-0892684-501
a Plan name	ALL HOURS MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL HOURS MECHANICAL	**c** EIN-PN	81-0752115-501
a Plan name	ALL IN GOOD TASTE LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL IN GOOD TASTE LTD	**c** EIN-PN	31-1663570-501

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	ALL IN ONE TIRE & AUTO SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL IN ONE TIRE & AUTO	**c** EIN-PN	46-5468794-501
a Plan name	ALL IN RECYCLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL IN RECYCLING LLC	**c** EIN-PN	85-2600682-501
a Plan name	ALL OHIO WELDING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL OHIO WELDING, INC	**c** EIN-PN	83-3078350-501
a Plan name	ALL PACK SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL PACK SERVICES LLC	**c** EIN-PN	47-4888347-501
a Plan name	ALL PRO RECRUITING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL PRO RECRUITING LLC	**c** EIN-PN	83-3512166-501
a Plan name	ALL SEASON LANDWORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL SEASON LANDWORKS INC	**c** EIN-PN	31-1395232-501
a Plan name	ALL SEASONS RV SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL SEASONS RV	**c** EIN-PN	34-1236696-501
a Plan name	ALL SECURED SECURITY SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL SECURED SECURITY SERVICES LLC	**c** EIN-PN	80-0149174-501
a Plan name	ALL SKILL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL SKILL SERVICES	**c** EIN-PN	20-2977748-501
a Plan name	ALL STAR PHYSICAL THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL STAR PHYSICAL THERAPY	**c** EIN-PN	27-2609232-501
a Plan name	ALL STATE EXTERIORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL STATE EXTERIORS LLC	**c** EIN-PN	26-0735572-501
a Plan name	ALL UNITY HOME HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL UNITY HOME HEALTH LLC	**c** EIN-PN	90-0938558-501

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	ALL UTILITIES AND EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL UTILITIES AND EXCAVATING INC	**c** EIN-PN	31-1697522-501
a Plan name	ALL WALLS AND CEILING SYSTEMS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL WALLS AND CEILING SYSTEMS, LLC	**c** EIN-PN	47-5086489-501
a Plan name	ALL WEATHER HEAT AND COOL SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL WEATHER HEAT AND COOL	**c** EIN-PN	34-1863496-502
a Plan name	ALL-CRAFT WELLMAN PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALL-CRAFT WELLMAN PRODUCTS	**c** EIN-PN	81-4568567-501
a Plan name	ALLEGRO MEDIA DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLEGRO MEDIA DESIGN	**c** EIN-PN	80-0496306-501
a Plan name	ALLEN METRO HOUSING SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLEN METRO HOUSING	**c** EIN-PN	34-1191172-501
a Plan name	ALLEN STOVALL NEUMAN & ASHTON LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLEN STOVALL NEUMAN & ASHTON LLP	**c** EIN-PN	20-0108058-502
a Plan name	ALLEN WILLIAMS AND HUGHES SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLEN WILLIAMS AND HUGHES	**c** EIN-PN	31-1538022-501
a Plan name	ALLERGY & ASTHMA ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLERGY & ASTHMA ASSOCIATES, INC.	**c** EIN-PN	31-1449027-501
a Plan name	ALLERGY DIAGNOSTIC SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLERGY DIAGNOSTIC SYSTEMS	**c** EIN-PN	34-1638209-501
a Plan name	ALLIANCE BUILDING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIANCE BUILDING GROUP	**c** EIN-PN	46-5598409-501
a Plan name	ALLIANCE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIANCE ELECTRIC	**c** EIN-PN	92-2865449-501

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	ALLIED BEHAVIORAL HEALTH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED BEHAVIORAL HEALTH SERVICES	**c** EIN-PN	34-1943399-501
a Plan name	ALLIED DOOR SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED DOOR SYSTEMS	**c** EIN-PN	81-4798900-501
a Plan name	ALLIED GLASS AND MIRROR SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED GLASS AND MIRROR	**c** EIN-PN	87-2442616-501
a Plan name	ALLIED PLUMBING & SEWER SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED PLUMBING & SEWER SERVICE	**c** EIN-PN	31-1152774-501
a Plan name	ALLIED SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED SERVICES, INC.	**c** EIN-PN	31-0573144-501
a Plan name	ALLIED TECHNICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLIED TECHNICAL	**c** EIN-PN	31-1400989-501
a Plan name	ALLISON CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLISON CONTRACTING	**c** EIN-PN	35-2379331-501
a Plan name	ALLSTATE DISPOSAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLSTATE DISPOSAL LLC	**c** EIN-PN	84-2316824-501
a Plan name	ALLY TITLE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	ALLY TITLE AGENCY	**c** EIN-PN	84-2126527-501
a Plan name	ALMENDINGER SAWMILL SOCA BENEFIT PLAN		
b Name of plan sponsor	ALMENDINGER SAWMILL	**c** EIN-PN	31-1366478-501
a Plan name	ALMUR CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALMUR CONSTRUCTION INC	**c** EIN-PN	20-3154725-501
a Plan name	ALPHA CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALPHA CONSTRUCTION LLC	**c** EIN-PN	35-2825642-501

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	ALPHA INSULATION AND GUTTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALPHA INSULATION AND GUTTERS	**c** EIN-PN	61-1686016-501
a Plan name	ALPHA RETIREMENT INSURANCE SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALPHA RETIREMENT INSURANCE SOLUTIONS, LLC	**c** EIN-PN	47-3848612-501
a Plan name	ALPHAONE EXTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ALPHAONE EXTERIORS	**c** EIN-PN	47-2016280-501
a Plan name	ALPINE HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALPINE HOLDINGS LLC	**c** EIN-PN	46-5745265-501
a Plan name	ALREDDY CAFE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALREDDY CAFE	**c** EIN-PN	03-0529789-501
a Plan name	ALS AUTO SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALS AUTO SERVICE INC	**c** EIN-PN	45-1263995-501
a Plan name	ALS DELICIOUS POPCORN SOCA BENEFIT PLAN		
b Name of plan sponsor	ALS DELICIOUS POPCORN	**c** EIN-PN	82-5481700-501
a Plan name	ALT SOLUTION CAR CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	ALT SOLUTION CAR CARE	**c** EIN-PN	34-1805369-501
a Plan name	ALTIX CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ALTIX CORPORATION	**c** EIN-PN	32-0558852-501
a Plan name	ALTO DESIGN GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ALTO DESIGN GROUP	**c** EIN-PN	83-2711223-501
a Plan name	ALTUS DIRECT HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALTUS DIRECT HEALTH LLC	**c** EIN-PN	84-3456421-501
a Plan name	ALVEO HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ALVEO HEALTH LLC	**c** EIN-PN	31-1237647-501

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	AM & O TOWING INC BILLSON SOCA BENEFIT PLAN		
b Name of plan sponsor	AM & O TOWING INC BILLSON	**c** EIN-PN	34-1337744-501
a Plan name	AM COACHING AND CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	AM COACHING AND CONSULTING	**c** EIN-PN	82-5205641-501
a Plan name	AM SHIPPING SOCA BENEFIT PLAN		
b Name of plan sponsor	AM SHIPPING	**c** EIN-PN	31-1100814-501
a Plan name	AMALTECH SOCA BENEFIT PLAN		
b Name of plan sponsor	AMALTECH	**c** EIN-PN	90-0451663-501
a Plan name	AMANDA BLACK HLTH AND FIT SOCA BENEFIT PLAN		
b Name of plan sponsor	AMANDA BLACK HLTH AND FIT	**c** EIN-PN	83-4534843-501
a Plan name	AMARAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMARAL INC	**c** EIN-PN	85-4106112-501
a Plan name	AMAXX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMAXX INC	**c** EIN-PN	83-0366083-501
a Plan name	AMAZING SMILES DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMAZING SMILES DENTAL LLC	**c** EIN-PN	31-0670170-501
a Plan name	AMBASSADOR INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMBASSADOR INDUSTRIES LLC	**c** EIN-PN	84-2911707-501
a Plan name	AMBIENT AUTOMOTIVE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMBIENT AUTOMOTIVE, INC.	**c** EIN-PN	82-4151467-501
a Plan name	AMBROSE ASPHALT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMBROSE ASPHALT LLC	**c** EIN-PN	31-1730427-501
a Plan name	AMBROSIAS AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMBROSIAS AUTOMOTIVE	**c** EIN-PN	47-1521603-501

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	AMBURGY PROPERTIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMBURGY PROPERTIES, INC.	**c** EIN-PN	31-1226684-501
a Plan name	AMC RAIL SOCA BENEFIT PLAN		
b Name of plan sponsor	AMC RAIL	**c** EIN-PN	82-5349556-501
a Plan name	AMERI-CAL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERI-CAL CORP	**c** EIN-PN	34-1032235-501
a Plan name	AMERICAN ACADEMY OF FACIAL ESTHETICS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN ACADEMY OF FACIAL ESTHETICS	**c** EIN-PN	27-1097471-501
a Plan name	AMERICAN AIR BALANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN AIR BALANCE	**c** EIN-PN	47-5606536-501
a Plan name	AMERICAN ASSOC OF BOVINE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN ASSOC OF BOVINE	**c** EIN-PN	91-6063428-501
a Plan name	AMERICAN ASSOC OF SERVICE COORDINATORS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN ASSOC OF SERVICE COORDINATORS	**c** EIN-PN	31-1670185-501
a Plan name	AMERICAN BRASS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN BRASS	**c** EIN-PN	34-0064620-501
a Plan name	AMERICAN CENTER FOR CONFLICT RESOLUTION INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN CENTER FOR CONFLICT RESOLUTION INC.	**c** EIN-PN	20-0391373-501
a Plan name	AMERICAN CHEMICAL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN CHEMICAL PRODUCTS	**c** EIN-PN	34-1234190-501
a Plan name	AMERICAN CHURCH GROUP OF OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN CHURCH GROUP OF OHIO LLC	**c** EIN-PN	47-3444923-501
a Plan name	AMERICAN COATINGS CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN COATINGS CORP	**c** EIN-PN	31-1581806-501

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	AMERICAN COLLECTION SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN COLLECTION SYSTEM	**c** EIN-PN	31-0964646-501
a Plan name	AMERICAN COMPASSIONATE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN COMPASSIONATE	**c** EIN-PN	47-1822306-501
a Plan name	AMERICAN CONSOLIDATED NATURAL RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN CONSOLIDATED NATURAL RESOURCES	**c** EIN-PN	85-1484557-501
a Plan name	AMERICAN DAIRY ASSOCIATION MIDEAST SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN DAIRY ASSOCIATION MIDEAST	**c** EIN-PN	31-0838179-502
a Plan name	AMERICAN DRILLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN DRILLING	**c** EIN-PN	45-1138592-502
a Plan name	AMERICAN ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN ENGINEERING	**c** EIN-PN	26-0375726-501
a Plan name	AMERICAN EQUIPMENT SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN EQUIPMENT SERVICES INC	**c** EIN-PN	31-1425558-502
a Plan name	AMERICAN FIRE AND SPRINKLR SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN FIRE AND SPRINKLR	**c** EIN-PN	27-5169171-501
a Plan name	AMERICAN FIREWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN FIREWORKS	**c** EIN-PN	34-0804602-501
a Plan name	AMERICAN HEARTLAND, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN HEARTLAND, INC.	**c** EIN-PN	31-1293226-501
a Plan name	AMERICAN HERITAGE HOMES SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN HERITAGE HOMES	**c** EIN-PN	31-1583987-502
a Plan name	AMERICAN HOMELAND TITLE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN HOMELAND TITLE AGENCY	**c** EIN-PN	34-2003521-502

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	AMERICAN LED-GIBLE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN LED-GIBLE, INC.	**c** EIN-PN	31-0889747-501
a Plan name	AMERICAN LIGHT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN LIGHT COMPANY	**c** EIN-PN	31-4115670-502
a Plan name	AMERICAN NEGOTIATION INST SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN NEGOTIATION INST	**c** EIN-PN	81-4344444-501
a Plan name	AMERICAN PATRIOT TITLE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN PATRIOT TITLE	**c** EIN-PN	20-5953878-501
a Plan name	AMERICAN PLUMBING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN PLUMBING INC	**c** EIN-PN	30-0159202-501
a Plan name	AMERICAN PRIDE LAWN AND LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN PRIDE LAWN AND LANDSCAPING	**c** EIN-PN	36-4504050-501
a Plan name	AMERICAN RESCUE TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN RESCUE TECHNOLOGY	**c** EIN-PN	31-1380231-501
a Plan name	AMERICAN ROOFING TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN ROOFING TECHNOLOGIES	**c** EIN-PN	46-4830789-501
a Plan name	AMERICAN SIGN MUSEUM SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN SIGN MUSEUM	**c** EIN-PN	31-1642445-501
a Plan name	AMERICAN SPECIALTY METALS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN SPECIALTY METALS	**c** EIN-PN	34-1117683-501
a Plan name	AMERICAN STRUCTURAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN STRUCTURAL GROUP	**c** EIN-PN	84-4363412-501
a Plan name	AMERICAN TITLE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN TITLE SOLUTIONS	**c** EIN-PN	46-1790460-501

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	AMERICAN TRAILER HOMES SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN TRAILER HOMES	**c** EIN-PN	84-3487861-501
a Plan name	AMERICAN WAY EXTERIORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAN WAY EXTERIORS LLC	**c** EIN-PN	47-1668936-501
a Plan name	AMERICAS PACKARD MUSEUM SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICAS PACKARD MUSEUM	**c** EIN-PN	31-1340842-501
a Plan name	AMERICRAFT MANUFACTURING COMPANY, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICRAFT MANUFACTURING COMPANY, INC	**c** EIN-PN	31-0947175-501
a Plan name	AMERICUT CORING AND SAWING SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERICUT CORING AND SAWING	**c** EIN-PN	34-1800396-501
a Plan name	AMERIFAST ACQUISITIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERIFAST ACQUISITIONS	**c** EIN-PN	85-0704719-502
a Plan name	AMERIKARE AMBULANCE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERIKARE AMBULANCE SERVICE	**c** EIN-PN	27-4446546-501
a Plan name	AMERI-LINE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERI-LINE INC.	**c** EIN-PN	34-1739026-501
a Plan name	AMERIMAC APPRAISAL MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERIMAC APPRAISAL MANAGEMENT LLC	**c** EIN-PN	47-5251775-501
a Plan name	AMERIPRISE SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERIPRISE	**c** EIN-PN	87-2684523-501
a Plan name	AMERIPRISE FINANCIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	AMERIPRISE FINANCIAL SERVICES	**c** EIN-PN	34-1832544-501
a Plan name	AMG, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMG, INC.	**c** EIN-PN	31-0983767-501

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	AML INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	AML INDUSTRIES	**c** EIN-PN	34-1619779-501
a Plan name	AMOS MEMORIAL PUBLIC LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	AMOS MEMORIAL PUBLIC LIBRARY	**c** EIN-PN	34-6401347-501
a Plan name	AMP MICROCOMPUTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AMP MICROCOMPUTER, INC.	**c** EIN-PN	31-1247973-501
a Plan name	AMP STRATEGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMP STRATEGY LLC	**c** EIN-PN	81-4994455-501
a Plan name	AMPLE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AMPLE, LLC	**c** EIN-PN	26-2489106-501
a Plan name	AMS PROPERTY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	AMS PROPERTY MANAGEMENT	**c** EIN-PN	81-5085553-501
a Plan name	AMY PATTERSON COM CLEANING SOCA BENEFIT PLAN		
b Name of plan sponsor	AMY PATTERSON COM CLEANING	**c** EIN-PN	47-4036336-501
a Plan name	ANALYSIS EXPRESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANALYSIS EXPRESS LLC	**c** EIN-PN	59-3773871-501
a Plan name	ANCHOR ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANCHOR ASSOCIATES LLC	**c** EIN-PN	31-1758158-501
a Plan name	ANCHOR FABRICATORS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ANCHOR FABRICATORS, INC.	**c** EIN-PN	31-0528348-501
a Plan name	ANCHORED CONNECTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ANCHORED CONNECTIONS	**c** EIN-PN	84-2492461-501
a Plan name	ANCHORING HOPE COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	ANCHORING HOPE COUNSELING	**c** EIN-PN	83-0719336-501

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	ANDAJO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDAJO LLC	**c** EIN-PN	26-2053829-501
a Plan name	ANDERSON AUTOMATIC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON AUTOMATIC	**c** EIN-PN	31-1267082-502
a Plan name	ANDERSON CAMPBELL INS SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON CAMPBELL INS	**c** EIN-PN	34-1625200-501
a Plan name	ANDERSON DECORATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON DECORATING INC	**c** EIN-PN	31-1429435-501
a Plan name	ANDERSON FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON FAMILY DENTISTRY	**c** EIN-PN	87-2799490-501
a Plan name	ANDERSON FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON FINANCIAL	**c** EIN-PN	47-3611187-501
a Plan name	ANDERSON ROBERTSON MARKET SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDERSON ROBERTSON MARKET	**c** EIN-PN	26-4685634-501
a Plan name	ANDRE FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDRE FARMS LLC	**c** EIN-PN	26-1684747-501
a Plan name	ANDREW ARTHUR HOMES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREW ARTHUR HOMES, LLC	**c** EIN-PN	46-4363481-501
a Plan name	ANDREW BROBBEY MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREW BROBBEY MD INC	**c** EIN-PN	16-1744280-501
a Plan name	ANDREW CASEY ELECTRICAL CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREW CASEY ELECTRICAL CONTRACTORS	**c** EIN-PN	81-3105614-501
a Plan name	ANDREW J BUCHER CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREW J BUCHER CO.	**c** EIN-PN	31-1551547-501

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	ANDREW J DEVANTIER FINANCIAL PLANNING SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREW J DEVANTIER FINANCIAL PLANNING	**c** EIN-PN	36-3820339-501
a Plan name	ANDREWS ARCHITECTS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREWS ARCHITECTS INC.	**c** EIN-PN	31-0939772-501
a Plan name	ANDREWS CYCLES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDREWS CYCLES LLC	**c** EIN-PN	81-2635510-501
a Plan name	ANDROSIK LEASING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANDROSIK LEASING LLC	**c** EIN-PN	35-2285965-501
a Plan name	ANEST IWATA SOCA BENEFIT PLAN		
b Name of plan sponsor	ANEST IWATA	**c** EIN-PN	57-1165493-501
a Plan name	ANESTHESIA MANAGEMENT ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ANESTHESIA MANAGEMENT ASSOCIATION	**c** EIN-PN	99-0438947-501
a Plan name	ANEW BEHAVIORAL HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ANEW BEHAVIORAL HEALTH	**c** EIN-PN	85-0960145-501
a Plan name	ANEW HEALTHCARE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ANEW HEALTHCARE SOLUTIONS	**c** EIN-PN	81-1139525-501
a Plan name	ANGEL ELDEN DESIGNS LIMITED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANGEL ELDEN DESIGNS LIMITED LLC	**c** EIN-PN	45-3705914-501
a Plan name	ANGELS 4 LIFE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANGELS 4 LIFE LLC	**c** EIN-PN	90-0907031-501
a Plan name	ANGELS AT WORK HOME HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ANGELS AT WORK HOME HEALTH	**c** EIN-PN	83-4594549-501
a Plan name	ANIMAL CARE CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANIMAL CARE CLINIC	**c** EIN-PN	26-4082916-502

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	ANIMAL CARE UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	ANIMAL CARE UNLIMITED	**c** EIN-PN	31-1313501-501
a Plan name	ANIMAL MED CNTR SPRINGBORO SOCA BENEFIT PLAN		
b Name of plan sponsor	ANIMAL MED CNTR SPRINGBORO	**c** EIN-PN	41-2190500-501
a Plan name	ANIMAL REMOVER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANIMAL REMOVER LLC	**c** EIN-PN	80-0598459-501
a Plan name	ANIMED RESEARCH CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ANIMED RESEARCH CONSULTING	**c** EIN-PN	34-1918112-501
a Plan name	ANNA MARKET SOCA BENEFIT PLAN		
b Name of plan sponsor	ANNA MARKET	**c** EIN-PN	84-1880370-501
a Plan name	ANNASHAE CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ANNASHAE CORPORATION	**c** EIN-PN	34-1330981-501
a Plan name	ANNUITY ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ANNUITY ADVISORS	**c** EIN-PN	31-1775854-501
a Plan name	ANSPACH MEEKS ELLENBERGER LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ANSPACH MEEKS ELLENBERGER LLP	**c** EIN-PN	34-1695517-501
a Plan name	ANTENNAGEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTENNAGEAR	**c** EIN-PN	27-0678220-501
a Plan name	ANTHONY LEE SCREEN PRINT SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTHONY LEE SCREEN PRINT	**c** EIN-PN	34-1755607-501
a Plan name	ANTHONY MUNOZ FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTHONY MUNOZ FOUNDATION	**c** EIN-PN	30-0009110-501
a Plan name	ANTHONY P KOULIANOS MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTHONY P KOULIANOS MD INC	**c** EIN-PN	55-0809533-501

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	ANTHONYS FURNITURE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTHONYS FURNITURE LLC	**c** EIN-PN	81-2031779-501
a Plan name	ANTHROTECH SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTHROTECH	**c** EIN-PN	31-0911717-501
a Plan name	ANTOLINO AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	ANTOLINO AND ASSOCIATES	**c** EIN-PN	31-1039907-501
a Plan name	ANYSEALS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANYSEALS INC	**c** EIN-PN	34-1927645-501
a Plan name	ANYTHING GRANITE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ANYTHING GRANITE LLC	**c** EIN-PN	87-3820267-501
a Plan name	AODK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AODK INC	**c** EIN-PN	34-1898372-501
a Plan name	AP FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	AP FAMILY DENTISTRY	**c** EIN-PN	92-2279696-501
a Plan name	AP TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	AP TECH	**c** EIN-PN	36-4500825-501
a Plan name	APEC ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	APEC ENGINEERING	**c** EIN-PN	27-0948803-501
a Plan name	APEX COMMERCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	APEX COMMERCIAL GROUP	**c** EIN-PN	83-2454687-501
a Plan name	APEX MICRODEVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	APEX MICRODEVICES LLC	**c** EIN-PN	81-0742883-501
a Plan name	APOLLO DRAPERIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	APOLLO DRAPERIES INC	**c** EIN-PN	31-0830699-501

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	APOSTOLIC CHRISTIAN COUNTRY INN SOCA BENEFIT PLAN		
b Name of plan sponsor	APOSTOLIC CHRISTIAN COUNTRY INN	**c** EIN-PN	34-1908866-501
a Plan name	APPALACHIAN BLUE SKIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	APPALACHIAN BLUE SKIES LLC	**c** EIN-PN	47-3763318-501
a Plan name	APPARELMASTER SOCA BENEFIT PLAN		
b Name of plan sponsor	APPARELMASTER	**c** EIN-PN	31-1658285-501
a Plan name	APPLAUSE INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	APPLAUSE INTERNATIONAL	**c** EIN-PN	20-3748466-501
a Plan name	APPLE PI CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	APPLE PI CONSULTING	**c** EIN-PN	30-0521655-501
a Plan name	APPLIED ENGINEERING COMPANIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	APPLIED ENGINEERING COMPANIES LLC	**c** EIN-PN	33-2536071-501
a Plan name	APPLIED GRAPHICS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	APPLIED GRAPHICS LTD	**c** EIN-PN	75-2994614-502
a Plan name	APPLIED LEARNING INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	APPLIED LEARNING INSTITUTE	**c** EIN-PN	85-0743282-501
a Plan name	APRICITY ROBOTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	APRICITY ROBOTICS	**c** EIN-PN	85-4119096-501
a Plan name	APRIL SUNSHINE DESIGNS SOCA BENEFIT PLAN		
b Name of plan sponsor	APRIL SUNSHINE DESIGNS	**c** EIN-PN	47-4057622-501
a Plan name	AQUA CLEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	AQUA CLEAR	**c** EIN-PN	20-0137013-501
a Plan name	AQUA SCIENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	AQUA SCIENCE	**c** EIN-PN	31-1098949-501

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	AQUABLOK, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	AQUABLOK, LTD	**c** EIN-PN	34-1904902-501
a Plan name	AR LOR LC SOCA BENEFIT PLAN		
b Name of plan sponsor	AR LOR LC	**c** EIN-PN	82-4195087-501
a Plan name	ARBORVIEW FAMILY MEDICINE SOCA BENEFIT PLAN		
b Name of plan sponsor	ARBORVIEW FAMILY MEDICINE	**c** EIN-PN	31-1529521-501
a Plan name	ARBUCKLE PHAYER ACCOUNTING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARBUCKLE PHAYER ACCOUNTING GROUP LLC	**c** EIN-PN	26-4398893-501
a Plan name	ARC DRILLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARC DRILLING LLC	**c** EIN-PN	34-0879869-501
a Plan name	ARC RESIN CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ARC RESIN CORPORATION	**c** EIN-PN	31-1394391-501
a Plan name	ARC STAFFING SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARC STAFFING SOLUTIONS LLC	**c** EIN-PN	20-3154401-501
a Plan name	ARCACOUSTICS AMERICAS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCACOUSTICS AMERICAS LLC	**c** EIN-PN	81-2869253-501
a Plan name	ARCH DESIGN WINDOWS & DOORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCH DESIGN WINDOWS & DOORS LLC	**c** EIN-PN	26-2881055-501
a Plan name	ARCH UNION HOLDINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCH UNION HOLDINGS, LLC	**c** EIN-PN	87-4152228-501
a Plan name	ARCHBOLD COMMUNITY LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHBOLD COMMUNITY LIBRARY	**c** EIN-PN	34-6400865-501
a Plan name	ARCHER ENERGY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHER ENERGY, LLC	**c** EIN-PN	47-2060931-501

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	ARCHITECTS SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHITECTS SALES	**c** EIN-PN	31-0885860-501
a Plan name	ARCHITECTURAL ALLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHITECTURAL ALLIANCE	**c** EIN-PN	31-0988689-501
a Plan name	ARCHITECTURAL DESIGN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHITECTURAL DESIGN INC	**c** EIN-PN	34-1613146-501
a Plan name	ARCHITECTURAL FIBERGLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	ARCHITECTURAL FIBERGLASS	**c** EIN-PN	34-1783278-501
a Plan name	ARDENT ENVIRONMENTAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ARDENT ENVIRONMENTAL SERVICES	**c** EIN-PN	85-3473598-501
a Plan name	AREA 419 FIREARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	AREA 419 FIREARMS	**c** EIN-PN	81-3659787-501
a Plan name	AREA HEATING AND AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	AREA HEATING AND AIR	**c** EIN-PN	31-1571842-501
a Plan name	ARGO-HYTOS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARGO-HYTOS INC	**c** EIN-PN	34-1877742-501
a Plan name	ARGYLE SOLUTIONS GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ARGYLE SOLUTIONS GROUP	**c** EIN-PN	45-5591293-501
a Plan name	ARISTA HOME CARE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ARISTA HOME CARE SOLUTIONS	**c** EIN-PN	47-1865080-501
a Plan name	ARKMALIBU SOCA BENEFIT PLAN		
b Name of plan sponsor	ARKMALIBU	**c** EIN-PN	31-1622585-501
a Plan name	ARLINGTON HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ARLINGTON HEALTH	**c** EIN-PN	27-4285098-501

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	ARLINGTON NATURAL GAS CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	ARLINGTON NATURAL GAS CO.	**c** EIN-PN	34-4178030-501
a Plan name	ARLINGTON OPTICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ARLINGTON OPTICAL	**c** EIN-PN	04-3637651-501
a Plan name	ARLT & COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARLT & COMPANY LLC	**c** EIN-PN	81-0990916-501
a Plan name	ARMADA RISK PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	ARMADA RISK PARTNERS	**c** EIN-PN	47-5287260-501
a Plan name	ARMBRUSTER MOVING AND STORAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ARMBRUSTER MOVING AND STORAGE	**c** EIN-PN	34-1672645-501
a Plan name	ARMCORP CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ARMCORP CONSTRUCTION	**c** EIN-PN	27-0308374-501
a Plan name	ARMOLOY OF OHIO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARMOLOY OF OHIO INC	**c** EIN-PN	31-1062513-501
a Plan name	ARMOR PAVING AND SEALING SOCA BENEFIT PLAN		
b Name of plan sponsor	ARMOR PAVING AND SEALING	**c** EIN-PN	81-1805526-501
a Plan name	ARNOLD & CLIFFORD LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ARNOLD & CLIFFORD LLP	**c** EIN-PN	84-4442230-501
a Plan name	ARNOLD GAUGE COMPANY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ARNOLD GAUGE COMPANY, INC.	**c** EIN-PN	31-1193590-501
a Plan name	ARNOLD, GRUBER AND HAREN, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	ARNOLD, GRUBER AND HAREN, LTD	**c** EIN-PN	84-3236545-501
a Plan name	ARNOLDS SMALL MIRACLES SOCA BENEFIT PLAN		
b Name of plan sponsor	ARNOLDS SMALL MIRACLES	**c** EIN-PN	92-0484068-501

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	ARPS DAIRY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ARPS DAIRY INC	**c** EIN-PN	34-4466210-501
a Plan name	ARROWOOD PROPERTY MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	ARROWOOD PROPERTY MGMT	**c** EIN-PN	26-1824524-501
a Plan name	ARSCO CUSTOM METALS SOCA BENEFIT PLAN		
b Name of plan sponsor	ARSCO CUSTOM METALS	**c** EIN-PN	26-3827476-501
a Plan name	ART EVANS AND SONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ART EVANS AND SONS, INC.	**c** EIN-PN	31-1208014-501
a Plan name	ART OF INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ART OF INTERIORS	**c** EIN-PN	04-3698735-501
a Plan name	ART THERAPY STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	ART THERAPY STUDIO	**c** EIN-PN	34-6608596-501
a Plan name	ARTEMIS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTEMIS CENTER	**c** EIN-PN	31-1120194-501
a Plan name	ARTICHOKE OTR SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTICHOKE OTR	**c** EIN-PN	47-3546220-501
a Plan name	ARTICLES INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTICLES INCORPORATED	**c** EIN-PN	31-1424770-501
a Plan name	ARTISTIC TILE AND MARBLE SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTISTIC TILE AND MARBLE	**c** EIN-PN	26-4652293-501
a Plan name	ARTS MUFFLER AND TIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTS MUFFLER AND TIRE	**c** EIN-PN	34-1555783-501
a Plan name	ARTZ DEWHIRST & WHEELER LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ARTZ DEWHIRST & WHEELER LLP	**c** EIN-PN	31-1221758-501

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	ARUNA PROJECT SOCA BENEFIT PLAN		
b Name of plan sponsor	ARUNA PROJECT	**c** EIN-PN	47-1266446-501
a Plan name	ARY ROEPCKE MULCHAEY SOCA BENEFIT PLAN		
b Name of plan sponsor	ARY ROEPCKE MULCHAEY	**c** EIN-PN	52-2370901-501
a Plan name	ASAP SANITARY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ASAP SANITARY SERVICES	**c** EIN-PN	81-1227968-501
a Plan name	ASCEND CONSULTING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASCEND CONSULTING, LLC	**c** EIN-PN	82-2593762-501
a Plan name	ASCEND PSYCHOLOGICAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ASCEND PSYCHOLOGICAL SERVICES	**c** EIN-PN	84-3740032-501
a Plan name	ASCENT CONCRETE POLISHING SOCA BENEFIT PLAN		
b Name of plan sponsor	ASCENT CONCRETE POLISHING	**c** EIN-PN	85-2065156-501
a Plan name	ASCH FIXTURE AND MILLWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	ASCH FIXTURE AND MILLWORK	**c** EIN-PN	47-3456578-501
a Plan name	ASHLAND ANESTHESIA PSC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLAND ANESTHESIA PSC INC	**c** EIN-PN	61-1382581-501
a Plan name	ASHLAND AREA COC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLAND AREA COC	**c** EIN-PN	34-0678472-501
a Plan name	ASHLAND CHIROPRACTIC CENTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLAND CHIROPRACTIC CENTER, INC.	**c** EIN-PN	20-2061977-501
a Plan name	ASHLAND SCALE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLAND SCALE COMPANY	**c** EIN-PN	34-1623460-501
a Plan name	ASHLAND TRACTOR SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLAND TRACTOR SALES	**c** EIN-PN	34-1759772-501

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	ASHLEY HIMES INSURANCE AND FINANCIAL SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHLEY HIMES INSURANCE AND FINANCIAL SERVICES, LLC	**c** EIN-PN	81-2166382-501
a Plan name	ASHTABULA DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHTABULA DENTAL	**c** EIN-PN	34-1254881-501
a Plan name	ASHTONNE PACKAGING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASHTONNE PACKAGING, INC	**c** EIN-PN	80-0872349-501
a Plan name	ASIMUS TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	ASIMUS TRUCKING	**c** EIN-PN	47-3373007-501
a Plan name	ASPHALT SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASPHALT SOLUTIONS INC	**c** EIN-PN	82-0543406-501
a Plan name	ASPHALT SOLUTIONS OF AMERICA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASPHALT SOLUTIONS OF AMERICA LLC	**c** EIN-PN	85-1515177-501
a Plan name	ASPRA INDUSTRIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASPRA INDUSTRIAL LLC	**c** EIN-PN	34-1717502-501
a Plan name	ASSAF AND DAVID, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSAF AND DAVID, LLC	**c** EIN-PN	27-0132677-501
a Plan name	ASSET PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSET PROTECTION	**c** EIN-PN	20-0447167-501
a Plan name	ASSET RECOVERY SERVICES ENTERPRISE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSET RECOVERY SERVICES ENTERPRISE, LLC	**c** EIN-PN	27-5031168-501
a Plan name	ASSOC PROF ENGINEERING CON SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOC PROF ENGINEERING CON	**c** EIN-PN	46-2695085-501
a Plan name	ASSOCIATED HYDRO EXCAVATING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOCIATED HYDRO EXCAVATING, INC	**c** EIN-PN	46-2650004-502

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	ASSOCIATED SCALE SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOCIATED SCALE	**c** EIN-PN	35-2204332-501
a Plan name	ASSOCIATES IN PODIATRY SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOCIATES IN PODIATRY	**c** EIN-PN	31-1398022-502
a Plan name	ASSOCIATES IN WOMENS HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOCIATES IN WOMENS HEALTH	**c** EIN-PN	31-1381919-501
a Plan name	ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES SOCA BENEFIT PLAN		
b Name of plan sponsor	ASSOCIATION OF INDEPENDENT COLLEGES AND UNIVERSITIES	**c** EIN-PN	31-0746875-501
a Plan name	ASTER GLOBAL ENVIRO SOL SOCA BENEFIT PLAN		
b Name of plan sponsor	ASTER GLOBAL ENVIRO SOL	**c** EIN-PN	83-3517710-501
a Plan name	ASTRO INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ASTRO INDUSTRIES INC	**c** EIN-PN	31-0726326-501
a Plan name	AT3 PROFESSIONAL STAFFING SOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AT3 PROFESSIONAL STAFFING SOLUTIONS, INC.	**c** EIN-PN	46-0643002-501
a Plan name	ATARAXIA PROPERTIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATARAXIA PROPERTIES INC	**c** EIN-PN	88-0676087-501
a Plan name	ATCHLEY SIGNS & GRAPHICS, SOCA BENEFIT PLAN		
b Name of plan sponsor	ATCHLEY SIGNS & GRAPHICS,	**c** EIN-PN	20-5807946-501
a Plan name	ATHELAS SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATHELAS SERVICES LLC	**c** EIN-PN	82-3703022-501
a Plan name	ATHENA RESEARCH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATHENA RESEARCH INC	**c** EIN-PN	34-1963147-501
a Plan name	ATHENA THERAPY HOLDING CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	ATHENA THERAPY HOLDING CO.	**c** EIN-PN	46-2272250-501

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	ATHENS OVERLAND LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATHENS OVERLAND LLC	**c** EIN-PN	87-1113743-501
a Plan name	ATHLETIX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATHLETIX LLC	**c** EIN-PN	86-3123835-501
a Plan name	ATKINS AND WALDREN DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATKINS AND WALDREN DDS INC	**c** EIN-PN	31-0817975-501
a Plan name	ATLANTIC SIGN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ATLANTIC SIGN COMPANY	**c** EIN-PN	13-4251818-501
a Plan name	ATLANTIC WELDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATLANTIC WELDING LLC	**c** EIN-PN	87-0958733-501
a Plan name	ATLAS CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	ATLAS CONSTRUCTION CO	**c** EIN-PN	31-4358470-501
a Plan name	ATLAS DOWEL AND WOOD PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ATLAS DOWEL AND WOOD PRODUCTS	**c** EIN-PN	61-1353759-501
a Plan name	ATLAS ENVIRONMENTAL MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	ATLAS ENVIRONMENTAL MGMT	**c** EIN-PN	84-1808506-501
a Plan name	ATMOS360 SOCA BENEFIT PLAN		
b Name of plan sponsor	ATMOS360	**c** EIN-PN	83-3869983-501
a Plan name	ATO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATO LLC	**c** EIN-PN	82-1248960-501
a Plan name	ATOM MATIC REFRIGERATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ATOM MATIC REFRIGERATION	**c** EIN-PN	34-1962796-501
a Plan name	ATTIC RESEARCH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ATTIC RESEARCH LLC	**c** EIN-PN	88-4229287-501

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	ATTN 2 DETAIL MOBILE WASH CO SOCA BENEFIT PLAN		
b Name of plan sponsor	ATTN 2 DETAIL MOBILE WASH CO	**c** EIN-PN	47-3407401-501
a Plan name	ATTORNEY DANIEL G. KEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	ATTORNEY DANIEL G. KEATING	**c** EIN-PN	45-4344720-501
a Plan name	AUBURN PIPE & PLUMBERS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUBURN PIPE & PLUMBERS	**c** EIN-PN	34-1304266-501
a Plan name	AUBURN VETERINARY HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	AUBURN VETERINARY HOSPITAL	**c** EIN-PN	34-1789021-501
a Plan name	AUER KITCHENS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUER KITCHENS	**c** EIN-PN	31-0971784-501
a Plan name	AUGLAIZE ERIE MACHINE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AUGLAIZE ERIE MACHINE, INC.	**c** EIN-PN	34-1486715-501
a Plan name	AUGUSTINE AUTOMOTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUGUSTINE AUTOMOTIVE LLC	**c** EIN-PN	27-1546126-501
a Plan name	AUGUSTWENTY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUGUSTWENTY LLC	**c** EIN-PN	85-2490408-501
a Plan name	AUSTINTOWN PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUSTINTOWN PEDIATRICS	**c** EIN-PN	30-0170616-501
a Plan name	AUTHORIZED GRAIN SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTHORIZED GRAIN SERVICE LLC	**c** EIN-PN	31-1462841-501
a Plan name	AUTO EXPRESS OF HAMILTON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTO EXPRESS OF HAMILTON LLC	**c** EIN-PN	20-3184808-501
a Plan name	AUTO GLASS SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTO GLASS SYSTEMS INC	**c** EIN-PN	34-1715324-501

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	AUTO GROUP PURCHASING SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTO GROUP PURCHASING	**c** EIN-PN	20-4548706-501
a Plan name	AUTOBAHN SERVICE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOBAHN SERVICE CENTER	**c** EIN-PN	34-1696848-501
a Plan name	AUTOMATED CONVERTING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMATED CONVERTING SOLUTIONS	**c** EIN-PN	82-2019846-501
a Plan name	AUTOMATED MACHINE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMATED MACHINE SYSTEMS	**c** EIN-PN	31-1709638-501
a Plan name	AUTOMATED MACHINERY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMATED MACHINERY INC	**c** EIN-PN	31-1109411-501
a Plan name	AUTOMATOR MARKING SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMATOR MARKING SYSTEMS	**c** EIN-PN	25-1597263-501
a Plan name	AUTOMOTIVE AND FLEET SVC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMOTIVE AND FLEET SVC	**c** EIN-PN	45-5020679-501
a Plan name	AUTOMOTIVE EXCELLENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTOMOTIVE EXCELLENCE	**c** EIN-PN	34-1471458-501
a Plan name	AUTUMN DAYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AUTUMN DAYS LLC	**c** EIN-PN	90-0357716-501
a Plan name	AVAIL INTERIORS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AVAIL INTERIORS, INC.	**c** EIN-PN	47-2227094-501
a Plan name	AVALON DOWNTOWN PIZZERIA SOCA BENEFIT PLAN		
b Name of plan sponsor	AVALON DOWNTOWN PIZZERIA	**c** EIN-PN	81-1718219-501
a Plan name	AVALON HEALTH HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	AVALON HEALTH HOLDINGS	**c** EIN-PN	45-4734202-501

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	AVANTE BUSINESS GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AVANTE BUSINESS GROUP LLC	**c** EIN-PN	87-1546345-501
a Plan name	AVATAR MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	AVATAR MANAGEMENT	**c** EIN-PN	47-2542299-501
a Plan name	AVATAR SYNDICATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AVATAR SYNDICATE LLC	**c** EIN-PN	76-0846884-501
a Plan name	AVE AUTOMEDIA, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AVE AUTOMEDIA, INC.	**c** EIN-PN	81-2928184-501
a Plan name	AVENUE PARTNERS INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AVENUE PARTNERS INVESTMENTS LLC	**c** EIN-PN	83-3940753-501
a Plan name	AVIATION HALL OF FAME SOCA BENEFIT PLAN		
b Name of plan sponsor	AVIATION HALL OF FAME	**c** EIN-PN	23-7117952-501
a Plan name	AVONDALE DEVELOPMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	AVONDALE DEVELOPMENT CORP	**c** EIN-PN	45-2412695-501
a Plan name	AVT BECKETT ELEVATORS USA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	AVT BECKETT ELEVATORS USA, INC	**c** EIN-PN	61-1853400-501
a Plan name	AVVENIRE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	AVVENIRE SOLUTIONS	**c** EIN-PN	74-3105791-501
a Plan name	AW HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	AW HEATING AND COOLING	**c** EIN-PN	31-1568488-501
a Plan name	AWAD SHALASH OLIVE TREE DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AWAD SHALASH OLIVE TREE DENTAL LLC	**c** EIN-PN	99-2108848-501
a Plan name	AWESOME ENTERTAINMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AWESOME ENTERTAINMENT LLC	**c** EIN-PN	81-3793899-501

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	AWESOME SAUCE VAPOR SOCA BENEFIT PLAN		
b Name of plan sponsor	AWESOME SAUCE VAPOR	**c** EIN-PN	47-3802115-501
a Plan name	AWETOMATON LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	AWETOMATON LTD	**c** EIN-PN	85-2444160-501
a Plan name	AXCESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	AXCESS LLC	**c** EIN-PN	85-1894753-501
a Plan name	AXE S TREE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	AXE S TREE SERVICE	**c** EIN-PN	27-1092681-501
a Plan name	AXELIX HEALTH CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	AXELIX HEALTH CONSULTING	**c** EIN-PN	27-2802974-501
a Plan name	AYDELOTT EQUIPMENT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	AYDELOTT EQUIPMENT, INC.	**c** EIN-PN	31-1289733-501
a Plan name	A-Z PLUMBING & DRAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	A-Z PLUMBING & DRAIN	**c** EIN-PN	41-2199378-501
a Plan name	AZTEC IMPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	AZTEC IMPORTS	**c** EIN-PN	34-1322648-501
a Plan name	B & B BOX COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	B & B BOX COMPANY	**c** EIN-PN	34-4491446-501
a Plan name	B & B SPECIALTY PIPING SOCA BENEFIT PLAN		
b Name of plan sponsor	B & B SPECIALTY PIPING	**c** EIN-PN	20-1138871-501
a Plan name	B & B WOOD PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	B & B WOOD PRODUCTS	**c** EIN-PN	34-0890251-502
a Plan name	B & J ELECTRIC OF POLAND SOCA BENEFIT PLAN		
b Name of plan sponsor	B & J ELECTRIC OF POLAND	**c** EIN-PN	34-1542115-501

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

a Plan name	B & L PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	B & L PROPERTIES	**c** EIN-PN	36-4568842-501
a Plan name	B AND A HOLDINGS OF AMERICA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	B AND A HOLDINGS OF AMERICA LLC	**c** EIN-PN	20-8939372-501
a Plan name	B AND B PAINTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	B AND B PAINTING SERVICES	**c** EIN-PN	87-4813870-501
a Plan name	B AND C BLACKTOP SEALING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	B AND C BLACKTOP SEALING INC	**c** EIN-PN	31-1538018-501
a Plan name	B AND R WHOLE SALE TIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	B AND R WHOLE SALE TIRE	**c** EIN-PN	82-1735499-501
a Plan name	B AND S LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	B AND S LOGISTICS LLC	**c** EIN-PN	45-3631629-501
a Plan name	B D RV AND TRUCK REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	B D RV AND TRUCK REPAIR	**c** EIN-PN	81-1245193-501
a Plan name	B DRY SYSTEMS OF N C OH SOCA BENEFIT PLAN		
b Name of plan sponsor	B DRY SYSTEMS OF N C OH	**c** EIN-PN	31-8729453-501
a Plan name	B K TOOL CO SOCA BENEFIT PLAN		
b Name of plan sponsor	B K TOOL CO	**c** EIN-PN	31-1209661-501
a Plan name	B R E A D SOCA BENEFIT PLAN		
b Name of plan sponsor	B R E A D	**c** EIN-PN	31-1467082-501
a Plan name	B R PALLET INC SOCA BENEFIT PLAN		
b Name of plan sponsor	B R PALLET INC	**c** EIN-PN	34-1735126-501
a Plan name	B RENNER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	B RENNER LLC	**c** EIN-PN	47-2511270-501

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

a Plan name	B RILEY SOBER HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	B RILEY SOBER HOUSE	**c** EIN-PN	81-4500441-501
a Plan name	B&R RAILROAD SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	B&R RAILROAD SERVICES	**c** EIN-PN	32-0165912-501
a Plan name	B&S CUSTOM MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	B&S CUSTOM MACHINE	**c** EIN-PN	47-4412982-501
a Plan name	B&T ROOFING LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	B&T ROOFING LTD	**c** EIN-PN	31-1616662-501
a Plan name	B.D. MORGAN & CO., INC SOCA BENEFIT PLAN		
b Name of plan sponsor	B.D. MORGAN & CO., INC	**c** EIN-PN	31-0383085-501
a Plan name	BA SERVICES OF OHIO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BA SERVICES OF OHIO INC	**c** EIN-PN	34-1891687-501
a Plan name	BABA INDIA RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	BABA INDIA RESTAURANT	**c** EIN-PN	57-1183776-501
a Plan name	BABITHA NALLURI MD LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BABITHA NALLURI MD LTD	**c** EIN-PN	34-1995033-501
a Plan name	BACKCOUNTRY GALLERY SOCA BENEFIT PLAN		
b Name of plan sponsor	BACKCOUNTRY GALLERY	**c** EIN-PN	47-4313865-501
a Plan name	BACKDRAFT SCREEN PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BACKDRAFT SCREEN PRINTING	**c** EIN-PN	46-1633965-501
a Plan name	BAERS PAVING SOCA BENEFIT PLAN		
b Name of plan sponsor	BAERS PAVING	**c** EIN-PN	47-3958246-501
a Plan name	BAHAN FARMS EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	BAHAN FARMS EXCAVATING	**c** EIN-PN	84-4119274-501

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	BAHNS VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAHNS VETERINARY CLINIC	**c** EIN-PN	31-0616816-501
a Plan name	BAILEY C BRYANT PSYD LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BAILEY C BRYANT PSYD LTD	**c** EIN-PN	81-2282105-501
a Plan name	BAIR'S POLARIS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAIRS POLARIS LLC	**c** EIN-PN	47-2238591-501
a Plan name	BAKER ELECTRIC, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAKER ELECTRIC, LLC	**c** EIN-PN	45-3549398-501
a Plan name	BAKER HAZEL & SNIDER FUNERAL HOME INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAKER HAZEL & SNIDER FUNERAL HOME INC	**c** EIN-PN	31-0840018-501
a Plan name	BAKER, BEDNAR & ASSOCIATE SOCA BENEFIT PLAN		
b Name of plan sponsor	BAKER, BEDNAR & ASSOCIATE	**c** EIN-PN	34-1601665-501
a Plan name	BAKERS ACRES SOCA BENEFIT PLAN		
b Name of plan sponsor	BAKERS ACRES	**c** EIN-PN	31-1366171-501
a Plan name	BALANCE FOOT AND ANKLE SOCA BENEFIT PLAN		
b Name of plan sponsor	BALANCE FOOT AND ANKLE	**c** EIN-PN	81-4664040-502
a Plan name	BALANCED FINANCIAL CONCEPTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BALANCED FINANCIAL CONCEPTS	**c** EIN-PN	46-4263266-501
a Plan name	BALANCED PROPERTY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BALANCED PROPERTY SOLUTIONS	**c** EIN-PN	31-1089941-501
a Plan name	BALDYS FURNITURE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BALDYS FURNITURE LLC	**c** EIN-PN	92-3859499-501
a Plan name	BALLJACKETS SOCA BENEFIT PLAN		
b Name of plan sponsor	BALLJACKETS	**c** EIN-PN	46-1021750-501

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	BALLOON WORKS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BALLOON WORKS, INC	**c** EIN-PN	31-1586437-501
a Plan name	BAM BAM AUTO PARTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BAM BAM AUTO PARTS	**c** EIN-PN	92-0486341-501
a Plan name	BAMBECK & VEST ASSOCIATES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAMBECK & VEST ASSOCIATES, INC	**c** EIN-PN	31-1113382-501
a Plan name	BANDIT & BEBE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BANDIT & BEBE LLC	**c** EIN-PN	81-0916887-501
a Plan name	BANDK CONCRETE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	BANDK CONCRETE CONSTRUCTION	**c** EIN-PN	34-1776309-501
a Plan name	BANE STAFFING SOCA BENEFIT PLAN		
b Name of plan sponsor	BANE STAFFING	**c** EIN-PN	27-3843056-501
a Plan name	BANG ZOOM SOCA BENEFIT PLAN		
b Name of plan sponsor	BANG ZOOM	**c** EIN-PN	31-1599268-501
a Plan name	BANKING SOFT SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BANKING SOFT SOLUTIONS LLC	**c** EIN-PN	81-3471802-501
a Plan name	BAR CODES UNLIMITED INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAR CODES UNLIMITED INC	**c** EIN-PN	31-1263407-501
a Plan name	BARBARINOS RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	BARBARINOS RESTAURANT	**c** EIN-PN	34-1257659-501
a Plan name	BARBERTON COMMUNITY DEVL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BARBERTON COMMUNITY DEVL CORP	**c** EIN-PN	34-1533284-501
a Plan name	BARDES CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	BARDES CORPORATION	**c** EIN-PN	31-1499681-501

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	BAREFOOT LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAREFOOT LANDSCAPING LLC	**c** EIN-PN	23-3103231-501
a Plan name	BARIUM CHEMICALS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BARIUM CHEMICALS INC.	**c** EIN-PN	34-0084595-501
a Plan name	BARN STORMERS COLLECTIBLES SOCA BENEFIT PLAN		
b Name of plan sponsor	BARN STORMERS COLLECTIBLES	**c** EIN-PN	83-1096092-501
a Plan name	BARNES TAX AND ADVISORY SE SOCA BENEFIT PLAN		
b Name of plan sponsor	BARNES TAX AND ADVISORY SE	**c** EIN-PN	45-5439667-501
a Plan name	BARNES WILDLIFE CONTROL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BARNES WILDLIFE CONTROL LLC	**c** EIN-PN	45-4300502-501
a Plan name	BARNEY CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	BARNEY CORPORATION	**c** EIN-PN	31-0946928-501
a Plan name	BARNEY DEBROSSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BARNEY DEBROSSE LLC	**c** EIN-PN	27-1653254-501
a Plan name	BARNWOOD CAPITAL MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	BARNWOOD CAPITAL MGMT	**c** EIN-PN	88-1248585-501
a Plan name	BARR CORPORATES SUCCESS SOCA BENEFIT PLAN		
b Name of plan sponsor	BARR CORPORATES SUCCESS	**c** EIN-PN	27-3306855-501
a Plan name	BARRETT MORTGAGE SERVICES OH SOCA BENEFIT PLAN		
b Name of plan sponsor	BARRETT MORTGAGE SERVICES OH	**c** EIN-PN	31-1351342-501
a Plan name	BARRY DYNGLES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BARRY DYNGLES, LLC	**c** EIN-PN	46-4400999-501
a Plan name	BARRY FARMER DRAPERIES SOCA BENEFIT PLAN		
b Name of plan sponsor	BARRY FARMER DRAPERIES	**c** EIN-PN	31-1113153-501

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	BARRY H ZIMMER SOCA BENEFIT PLAN		
b Name of plan sponsor	BARRY H ZIMMER	**c** EIN-PN	30-0862730-501
a Plan name	BARTON INNOVATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BARTON INNOVATIONS	**c** EIN-PN	26-2414996-501
a Plan name	BAS BROADCASTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BAS BROADCASTING	**c** EIN-PN	36-4493946-501
a Plan name	BASCHS WATCH SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BASCHS WATCH SERVICE	**c** EIN-PN	34-1698291-501
a Plan name	BASETEK, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BASETEK, LLC	**c** EIN-PN	34-1942492-501
a Plan name	BASIL'S SOCA BENEFIT PLAN		
b Name of plan sponsor	BASILS	**c** EIN-PN	46-4399652-501
a Plan name	BASINGER PLG AND HTG SOCA BENEFIT PLAN		
b Name of plan sponsor	BASINGER PLG AND HTG	**c** EIN-PN	34-1747641-501
a Plan name	BASS CONSULTING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BASS CONSULTING GROUP LLC	**c** EIN-PN	27-5316727-501
a Plan name	BASSI 5 SOCA BENEFIT PLAN		
b Name of plan sponsor	BASSI 5	**c** EIN-PN	27-2571920-501
a Plan name	BATANIAN TREE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BATANIAN TREE SERVICE	**c** EIN-PN	34-1657291-501
a Plan name	BATH CREATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BATH CREATIONS	**c** EIN-PN	27-5039113-501
a Plan name	BATH INSPIRATIONS OF CINCI SOCA BENEFIT PLAN		
b Name of plan sponsor	BATH INSPIRATIONS OF CINCI	**c** EIN-PN	45-3678383-501

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	BATT AND STEVENS BODY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	BATT AND STEVENS BODY SHOP	**c** EIN-PN	34-1718379-501
a Plan name	BAUGHMAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAUGHMAN INC	**c** EIN-PN	31-1503411-501
a Plan name	BAUGHN INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BAUGHN INSURANCE GROUP	**c** EIN-PN	30-0375409-501
a Plan name	BAUMER CONSTRUCTION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BAUMER CONSTRUCTION, INC.	**c** EIN-PN	34-1413348-501
a Plan name	BAUMGARDNER PRODUCTS CO SOCA BENEFIT PLAN		
b Name of plan sponsor	BAUMGARDNER PRODUCTS CO	**c** EIN-PN	34-1662004-501
a Plan name	BAY AUTO CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BAY AUTO CARE	**c** EIN-PN	83-1271051-501
a Plan name	BAYSHORE COUNSELING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	BAYSHORE COUNSELING SVS	**c** EIN-PN	34-1341444-501
a Plan name	BAYSIDE COMFORT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BAYSIDE COMFORT INC	**c** EIN-PN	34-1633205-501
a Plan name	BBCO DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BBCO DESIGN LLC	**c** EIN-PN	27-1134922-501
a Plan name	BCI BEVERAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	BCI BEVERAGE	**c** EIN-PN	27-3078531-501
a Plan name	BCI MECHANICAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BCI MECHANICAL CONTRACTING	**c** EIN-PN	20-8225567-501
a Plan name	BCL ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BCL ENTERPRISES INC	**c** EIN-PN	31-1390009-501

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	BCM INKS USA INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BCM INKS USA INC.	**c** EIN-PN	31-1259368-501
a Plan name	BCS TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	BCS TECHNOLOGIES	**c** EIN-PN	31-1582820-501
a Plan name	BDK FEED AND SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	BDK FEED AND SUPPLY	**c** EIN-PN	35-2580925-501
a Plan name	BEAM & STONE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAM & STONE LLC	**c** EIN-PN	99-1461451-501
a Plan name	BEAMALLOY TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAMALLOY TECHNOLOGIES LLC	**c** EIN-PN	20-0326509-501
a Plan name	BEANSTALK INVESTMENT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEANSTALK INVESTMENT, LLC	**c** EIN-PN	88-1507859-501
a Plan name	BEAR HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAR HEATING AND COOLING	**c** EIN-PN	34-1501275-501
a Plan name	BEARD PENSION SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BEARD PENSION SERVICES, INC.	**c** EIN-PN	34-1760227-501
a Plan name	BEARDED BROS AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	BEARDED BROS AUTOMOTIVE	**c** EIN-PN	84-4910819-501
a Plan name	BEAUMONT MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAUMONT MACHINE	**c** EIN-PN	88-1316153-501
a Plan name	BEAVER PARK NORTH, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAVER PARK NORTH, INC	**c** EIN-PN	34-1441614-501
a Plan name	BEAVER VALLEY SELF STORAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	BEAVER VALLEY SELF STORAGE	**c** EIN-PN	20-3886894-501

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	BECK ALUMINUM INTERNATIONAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECK ALUMINUM INTERNATIONAL, LLC	**c** EIN-PN	20-1148801-501
a Plan name	BECK CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECK CONSULTING INC	**c** EIN-PN	31-1624935-501
a Plan name	BECK FAMILY DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECK FAMILY DENTAL LLC	**c** EIN-PN	86-2154428-501
a Plan name	BECK SAND AND GRAVEL SOCA BENEFIT PLAN		
b Name of plan sponsor	BECK SAND AND GRAVEL	**c** EIN-PN	34-1179523-501
a Plan name	BECK STUDIOS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECK STUDIOS INC	**c** EIN-PN	31-0641568-501
a Plan name	BECKER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKER CONSTRUCTION	**c** EIN-PN	31-1334065-501
a Plan name	BECKER FIREPROTECTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKER FIREPROTECTION LLC	**c** EIN-PN	05-0534322-501
a Plan name	BECKERT OUTDOOR POWER EQUIPMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKERT OUTDOOR POWER EQUIPMENT LLC	**c** EIN-PN	31-1422165-501
a Plan name	BECKI TAYLOR INS AND FIN SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKI TAYLOR INS AND FIN	**c** EIN-PN	30-0574178-501
a Plan name	BECKMAN SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKMAN SERVICES INC	**c** EIN-PN	31-0995806-501
a Plan name	BECKMAN WEIL & SHEPARDSON SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKMAN WEIL & SHEPARDSON	**c** EIN-PN	31-0727988-501
a Plan name	BECKS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	BECKS CONSTRUCTION	**c** EIN-PN	34-1087966-501

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	BED BUG SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BED BUG SOLUTIONS	**c** EIN-PN	82-3496839-501
a Plan name	BEDWAY DEVELOPMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BEDWAY DEVELOPMENT CORP	**c** EIN-PN	55-0726170-501
a Plan name	BEECHWOLD HARDWARE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BEECHWOLD HARDWARE COMPANY	**c** EIN-PN	31-4402007-501
a Plan name	BEEK CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BEEK CONSULTING	**c** EIN-PN	45-4431798-502
a Plan name	BEEMER MACHINE CO SOCA BENEFIT PLAN		
b Name of plan sponsor	BEEMER MACHINE CO	**c** EIN-PN	34-1638249-501
a Plan name	BEER GEEKS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEER GEEKS LLC	**c** EIN-PN	47-5130133-501
a Plan name	BEGIN AGAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	BEGIN AGAIN	**c** EIN-PN	27-4725902-501
a Plan name	BELDEN OPTOMETRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BELDEN OPTOMETRY LLC	**c** EIN-PN	81-4405213-501
a Plan name	BELL TOWER BREWING SOCA BENEFIT PLAN		
b Name of plan sponsor	BELL TOWER BREWING	**c** EIN-PN	84-4905895-501
a Plan name	BELL TREE PRODUCTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BELL TREE PRODUCTIONS LLC	**c** EIN-PN	46-4919178-501
a Plan name	BELLA MARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLA MARE LLC	**c** EIN-PN	81-5407146-501
a Plan name	BELLA VITA NETWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLA VITA NETWORK	**c** EIN-PN	34-1441574-501

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	BELLAGIO WINDOW FASHIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLAGIO WINDOW FASHIONS	**c** EIN-PN	84-3403449-501
a Plan name	BELLAS CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLAS CONSTRUCTION LLC	**c** EIN-PN	84-2446583-501
a Plan name	BELLBROOK FAMILY PRACTICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLBROOK FAMILY PRACTICE	**c** EIN-PN	26-3941372-501
a Plan name	BELLBROOK FENCE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BELLBROOK FENCE COMPANY	**c** EIN-PN	31-0807474-501
a Plan name	BELMONT METROPOLITAN HOUSING AUTHORITY SOCA BENEFIT PLAN		
b Name of plan sponsor	BELMONT METROPOLITAN HOUSING AUTHORITY	**c** EIN-PN	34-0898262-501
a Plan name	BENCHMARK INSURANCE MGT SOCA BENEFIT PLAN		
b Name of plan sponsor	BENCHMARK INSURANCE MGT	**c** EIN-PN	74-3191520-501
a Plan name	BENCHMARK WEALTH MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	BENCHMARK WEALTH MGMT	**c** EIN-PN	83-1768527-501
a Plan name	BENDER COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BENDER COMMUNICATIONS	**c** EIN-PN	34-1752485-501
a Plan name	BENEFACTORS COUNSEL SOCA BENEFIT PLAN		
b Name of plan sponsor	BENEFACTORS COUNSEL	**c** EIN-PN	31-1691131-501
a Plan name	BENEFICIAL TALENT SOURCE SOCA BENEFIT PLAN		
b Name of plan sponsor	BENEFICIAL TALENT SOURCE	**c** EIN-PN	27-4798164-501
a Plan name	BENNETT ADELSON PROFESSIONAL SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNETT ADELSON PROFESSIONAL SERVICES INC	**c** EIN-PN	81-4676378-501
a Plan name	BENNETT ELECTRIC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNETT ELECTRIC, INC	**c** EIN-PN	34-1045736-501

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	BENNETT ENGINEERING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNETT ENGINEERING INC.	**c** EIN-PN	31-1681181-501
a Plan name	BENNETT GROEBER MULLEN FELTNER SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNETT GROEBER MULLEN FELTNER	**c** EIN-PN	34-1601163-501
a Plan name	BENNETT TRAILER SALES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNETT TRAILER SALES, INC	**c** EIN-PN	34-1803645-501
a Plan name	BENNYS SPORT BAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BENNYS SPORT BAR LLC	**c** EIN-PN	47-5365369-501
a Plan name	BENSCHOTER HAY AND STRAW SOCA BENEFIT PLAN		
b Name of plan sponsor	BENSCHOTER HAY AND STRAW	**c** EIN-PN	82-2477725-501
a Plan name	BENSMAN WELDING SOCA BENEFIT PLAN		
b Name of plan sponsor	BENSMAN WELDING	**c** EIN-PN	31-1131863-501
a Plan name	BENTOFF & SPERO SOCA BENEFIT PLAN		
b Name of plan sponsor	BENTOFF & SPERO	**c** EIN-PN	34-1089595-501
a Plan name	BENTRONIX CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BENTRONIX CORP	**c** EIN-PN	34-1434179-501
a Plan name	BERARDI PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	BERARDI PARTNERS	**c** EIN-PN	31-1016083-501
a Plan name	BERENS TREE & EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	BERENS TREE & EXCAVATING	**c** EIN-PN	27-3381246-501
a Plan name	BERG-BERRY ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BERG-BERRY ASSOCIATES INC	**c** EIN-PN	31-1001720-501
a Plan name	BERKHEIMER TRANSPORT SOL SOCA BENEFIT PLAN		
b Name of plan sponsor	BERKHEIMER TRANSPORT SOL	**c** EIN-PN	84-3868470-501

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	BERNARD LABORATORIES SOCA BENEFIT PLAN		
b Name of plan sponsor	BERNARD LABORATORIES	**c** EIN-PN	31-0623011-501
a Plan name	BERNECKER BROTHERS ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BERNECKER BROTHERS ROOFING INC	**c** EIN-PN	30-1161142-501
a Plan name	BERNER ARCHITECTURE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BERNER ARCHITECTURE LLC	**c** EIN-PN	86-1452666-501
a Plan name	BERRY MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	BERRY MARKETING	**c** EIN-PN	31-1039919-501
a Plan name	BERTAGNA GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BERTAGNA GROUP	**c** EIN-PN	83-2023866-501
a Plan name	BERWICK ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BERWICK ANIMAL CLINIC	**c** EIN-PN	45-4008951-501
a Plan name	BES ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BES ENTERPRISES LLC	**c** EIN-PN	82-3506787-501
a Plan name	BEST CAKES UPPER ARLINGTON SOCA BENEFIT PLAN		
b Name of plan sponsor	BEST CAKES UPPER ARLINGTON	**c** EIN-PN	47-4757678-501
a Plan name	BEST CHOICE PERSONAL CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BEST CHOICE PERSONAL CARE	**c** EIN-PN	81-3210380-501
a Plan name	BEST COURIER SOCA BENEFIT PLAN		
b Name of plan sponsor	BEST COURIER	**c** EIN-PN	31-1201441-501
a Plan name	BEST FOOD TRUCKS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEST FOOD TRUCKS, INC	**c** EIN-PN	32-0507852-501
a Plan name	BEST OF ATHENS RENTALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEST OF ATHENS RENTALS LLC	**c** EIN-PN	06-1690044-501

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	BETA INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BETA INDUSTRIES INC	**c** EIN-PN	31-0738376-501
a Plan name	BETHART PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BETHART PRINTING	**c** EIN-PN	31-1024995-501
a Plan name	BETRAS KOPP AND HARSHMAN SOCA BENEFIT PLAN		
b Name of plan sponsor	BETRAS KOPP AND HARSHMAN	**c** EIN-PN	34-1881804-501
a Plan name	BETTER BUSINESS BUREAU OF AKRON SOCA BENEFIT PLAN		
b Name of plan sponsor	BETTER BUSINESS BUREAU OF AKRON	**c** EIN-PN	34-0097830-501
a Plan name	BETTER LIVING HOME HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	BETTER LIVING HOME HEALTH	**c** EIN-PN	03-0535751-501
a Plan name	BEXLEY MOTORCAR COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEXLEY MOTORCAR COMPANY LLC	**c** EIN-PN	75-3177990-501
a Plan name	BEYER SERVICE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BEYER SERVICE CENTER	**c** EIN-PN	31-1654846-501
a Plan name	BEYOND BEHAVIORAL HEALTHCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BEYOND BEHAVIORAL HEALTHCARE	**c** EIN-PN	85-3845924-501
a Plan name	BEYOND SKIN AESTHETICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BEYOND SKIN AESTHETICS LLC	**c** EIN-PN	82-3629631-501
a Plan name	BFILTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BFILTER INC	**c** EIN-PN	88-2029872-501
a Plan name	BH MATERIAL HANDLING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BH MATERIAL HANDLING SOLUTIONS	**c** EIN-PN	88-3922173-501
a Plan name	BH SOLUTIONS GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BH SOLUTIONS GROUP INC	**c** EIN-PN	34-1909266-501

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	BHK MANAGEMENT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BHK MANAGEMENT, INC.	**c** EIN-PN	51-0608980-501
a Plan name	BHKB ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	BHKB ENTERPRISES	**c** EIN-PN	27-4415852-501
a Plan name	BHS CONNECT SOCA BENEFIT PLAN		
b Name of plan sponsor	BHS CONNECT	**c** EIN-PN	45-5540055-501
a Plan name	BIA OF CENTRAL OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	BIA OF CENTRAL OHIO	**c** EIN-PN	31-4366381-501
a Plan name	BICYCLE ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	BICYCLE ONE	**c** EIN-PN	47-2423609-501
a Plan name	BIEHL BROTHERS CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BIEHL BROTHERS CONTRACTING	**c** EIN-PN	20-3961630-501
a Plan name	BIG BEAR VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG BEAR VENTURES	**c** EIN-PN	47-4457159-501
a Plan name	BIG BROTHERS BIG SISTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG BROTHERS BIG SISTERS	**c** EIN-PN	34-1369023-501
a Plan name	BIG BROTHERS BIG SISTERS OF BUTLER COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG BROTHERS BIG SISTERS OF BUTLER COUNTY	**c** EIN-PN	31-0846147-501
a Plan name	BIG DADDY'S TOWING SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG DADDYS TOWING	**c** EIN-PN	34-1880132-501
a Plan name	BIG FUN COLUMBUS SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG FUN COLUMBUS	**c** EIN-PN	46-2612266-501
a Plan name	BIG HILL REALTY CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG HILL REALTY CORP	**c** EIN-PN	31-0654836-501

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	BIG IDEA GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG IDEA GROUP	**c** EIN-PN	32-0307783-501
a Plan name	BIG KITTY LABS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIG KITTY LABS LLC	**c** EIN-PN	27-2008830-501
a Plan name	BIGIRONBUCKET LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIGIRONBUCKET LLC	**c** EIN-PN	82-2977418-501
a Plan name	BILL SOWERS TREE SERVICE AND NURSERY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BILL SOWERS TREE SERVICE AND NURSERY, LLC	**c** EIN-PN	11-3721830-501
a Plan name	BILL SPADE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BILL SPADE ELECTRIC	**c** EIN-PN	31-1265972-501
a Plan name	BILLER AND KIMBLE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BILLER AND KIMBLE, LLC	**c** EIN-PN	83-1761429-501
a Plan name	BILLIARDS PLUS SOCA BENEFIT PLAN		
b Name of plan sponsor	BILLIARDS PLUS	**c** EIN-PN	31-1418410-501
a Plan name	BILLY BACK EXCAVATING, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BILLY BACK EXCAVATING, LTD	**c** EIN-PN	31-1772745-501
a Plan name	BILSKI DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BILSKI DENTAL GROUP	**c** EIN-PN	34-1955259-501
a Plan name	BIO ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	BIO ONE	**c** EIN-PN	81-2156269-501
a Plan name	BIOCHIP LABS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIOCHIP LABS INC	**c** EIN-PN	85-1207315-501
a Plan name	BIO-LIME CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BIO-LIME CONSULTING	**c** EIN-PN	86-1846840-501

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	BIOMEDICAL LABORATORIES SOCA BENEFIT PLAN		
b Name of plan sponsor	BIOMEDICAL LABORATORIES	**c** EIN-PN	25-1807456-501
a Plan name	BIP AUBURN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIP AUBURN LLC	**c** EIN-PN	32-0462845-501
a Plan name	BIRDDOG TALENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIRDDOG TALENT LLC	**c** EIN-PN	87-4408035-501
a Plan name	BIRDFISH BREWING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BIRDFISH BREWING COMPANY LLC	**c** EIN-PN	47-1961878-501
a Plan name	BIRK PAVING SOCA BENEFIT PLAN		
b Name of plan sponsor	BIRK PAVING	**c** EIN-PN	47-3375702-501
a Plan name	BISHOPS QUARTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BISHOPS QUARTER	**c** EIN-PN	82-3876642-501
a Plan name	BISSNUSS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BISSNUSS, INC.	**c** EIN-PN	34-1392362-501
a Plan name	BISTRO 1907 LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BISTRO 1907 LTD	**c** EIN-PN	82-4815717-501
a Plan name	BIZIZIOPZ LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	BIZIZIOPZ LLP	**c** EIN-PN	88-0569044-501
a Plan name	BKT USA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BKT USA INC	**c** EIN-PN	38-3797751-501
a Plan name	BLACCO SPLICING AND RIGGING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACCO SPLICING AND RIGGING	**c** EIN-PN	31-0805040-501
a Plan name	BLACK CAP ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK CAP ELECTRIC	**c** EIN-PN	81-3479587-501

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	BLACK DAWG SEALCOAT SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK DAWG SEALCOAT	**c** EIN-PN	99-1919572-501
a Plan name	BLACK GATE PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK GATE PARTNERS LLC	**c** EIN-PN	81-5479575-501
a Plan name	BLACK HORSE RESOURCES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK HORSE RESOURCES LLC	**c** EIN-PN	81-1231967-501
a Plan name	BLACK LION PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK LION PRODUCTS	**c** EIN-PN	27-1239781-501
a Plan name	BLACK PUG SOFTWARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK PUG SOFTWARE LLC	**c** EIN-PN	27-4928578-501
a Plan name	BLACK RHINO MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK RHINO MANUFACTURING	**c** EIN-PN	85-0749606-501
a Plan name	BLACK RIVER GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK RIVER GROUP INC	**c** EIN-PN	34-0864084-501
a Plan name	BLACK SWAMP EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACK SWAMP EQUIPMENT	**c** EIN-PN	06-1696742-501
a Plan name	BLACKBURN FABRICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACKBURN FABRICATION	**c** EIN-PN	31-1446789-501
a Plan name	BLACKHORSE WASTE TRADING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLACKHORSE WASTE TRADING	**c** EIN-PN	45-1257968-501
a Plan name	BLAGOIS INTL CAR SERV INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLAGOIS INTL CAR SERV INC	**c** EIN-PN	31-1452803-501
a Plan name	BLAKEMORE, MEEKER & BOWLER CO, LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	BLAKEMORE, MEEKER & BOWLER CO, LPA	**c** EIN-PN	34-1205817-502

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	BLAKES HOME IMPROVEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	BLAKES HOME IMPROVEMENT	**c** EIN-PN	84-3131169-501
a Plan name	BLIND WAVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLIND WAVE LLC	**c** EIN-PN	82-3917619-501
a Plan name	BLISS 360 MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLISS 360 MARKETING	**c** EIN-PN	82-4908158-501
a Plan name	BLISS INK SOCA BENEFIT PLAN		
b Name of plan sponsor	BLISS INK	**c** EIN-PN	81-1134660-501
a Plan name	BLITZ REVOLUTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLITZ REVOLUTION INC	**c** EIN-PN	86-3384112-501
a Plan name	BLOOM LAND COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLOOM LAND COMPANY LLC	**c** EIN-PN	35-2202824-501
a Plan name	BLUE ASH DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE ASH DENTAL GROUP	**c** EIN-PN	27-3411012-501
a Plan name	BLUE BOAT COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE BOAT COUNSELING	**c** EIN-PN	90-1509736-501
a Plan name	BLUE CRANIUM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE CRANIUM LLC	**c** EIN-PN	26-3209157-501
a Plan name	BLUE FROG PROMOTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE FROG PROMOTIONS	**c** EIN-PN	20-1723062-501
a Plan name	BLUE MEN MOVING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE MEN MOVING LLC	**c** EIN-PN	45-1513407-501
a Plan name	BLUE OCEAN INVEST GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE OCEAN INVEST GROUP	**c** EIN-PN	92-1536011-501

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	BLUE SKIES OPERATING CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE SKIES OPERATING CORP	**c** EIN-PN	84-4635140-501
a Plan name	BLUE SKY CONSTRUCTION MGMT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE SKY CONSTRUCTION MGMT LLC	**c** EIN-PN	46-0855174-501
a Plan name	BLUE SKY TRAINING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE SKY TRAINING LLC	**c** EIN-PN	47-5144484-501
a Plan name	BLUE WATER VACCINES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE WATER VACCINES, INC.	**c** EIN-PN	83-2262816-501
a Plan name	BLUEBALL VET CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUEBALL VET CLINIC	**c** EIN-PN	82-1338699-501
a Plan name	BLUE-BIRD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUE-BIRD LLC	**c** EIN-PN	85-4070535-501
a Plan name	BLUEFOOT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUEFOOT LLC	**c** EIN-PN	87-3924733-501
a Plan name	BLUEORANGE COMPLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUEORANGE COMPLIANCE	**c** EIN-PN	27-2202729-501
a Plan name	BLUEQUARTZ SOFTWARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUEQUARTZ SOFTWARE LLC	**c** EIN-PN	46-4180627-501
a Plan name	BLUETEAM NETWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUETEAM NETWORKS	**c** EIN-PN	81-4198762-501
a Plan name	BLUFFTON DIESEL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUFFTON DIESEL SERVICE	**c** EIN-PN	47-4461422-501
a Plan name	BLUFFTON PRECAST CONCRETE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUFFTON PRECAST CONCRETE COMPANY	**c** EIN-PN	34-0922004-502

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	BLUFORD JACKSON FLOORING SOCA BENEFIT PLAN		
b Name of plan sponsor	BLUFORD JACKSON FLOORING	**c** EIN-PN	88-3366479-501
a Plan name	BMI USA SOCA BENEFIT PLAN		
b Name of plan sponsor	BMI USA	**c** EIN-PN	36-4956234-501
a Plan name	BMO HOLDINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BMO HOLDINGS, LLC	**c** EIN-PN	47-1281246-501
a Plan name	BMORE REAL ESTATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BMORE REAL ESTATE LLC	**c** EIN-PN	83-4695280-501
a Plan name	BOARDWALK 2022, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOARDWALK 2022, INC	**c** EIN-PN	36-4578052-501
a Plan name	BOAT MASTERS MARINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOAT MASTERS MARINE INC	**c** EIN-PN	34-1829545-501
a Plan name	BOATEFX SOCA BENEFIT PLAN		
b Name of plan sponsor	BOATEFX	**c** EIN-PN	83-3100460-501
a Plan name	BOATHOUSE MARINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOATHOUSE MARINE INC	**c** EIN-PN	20-5383310-501
a Plan name	BOB BENNETT CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB BENNETT CONSTRUCTION	**c** EIN-PN	34-1059168-501
a Plan name	BOB COOK PLUMBING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB COOK PLUMBING INC	**c** EIN-PN	46-5654300-501
a Plan name	BOB CULTRONA LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB CULTRONA LANDSCAPING	**c** EIN-PN	34-1392452-501
a Plan name	BOB MARSHALL ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB MARSHALL ENTERPRISES	**c** EIN-PN	31-0840049-501

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	BOB S MORAINE TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB S MORAINE TRUCKING INC	**c** EIN-PN	31-1098964-501
a Plan name	BOB WOLFER PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	BOB WOLFER PLUMBING	**c** EIN-PN	31-1019356-501
a Plan name	BOB'S GARAGE AND TOWING SOCA BENEFIT PLAN		
b Name of plan sponsor	BOBS GARAGE AND TOWING	**c** EIN-PN	34-1848230-501
a Plan name	BOBS TIRE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BOBS TIRE SERVICE	**c** EIN-PN	80-0467648-501
a Plan name	BOCZAR EXCAVATING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOCZAR EXCAVATING LLC	**c** EIN-PN	26-0453628-501
a Plan name	BO-DEC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BO-DEC, INC	**c** EIN-PN	34-1261182-502
a Plan name	BODINE & COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BODINE & COMPANY	**c** EIN-PN	87-3318415-501
a Plan name	BODY WORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	BODY WORKS	**c** EIN-PN	31-1194709-501
a Plan name	BOEHMAN AND PRUDHOMME, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BOEHMAN AND PRUDHOMME, INC.	**c** EIN-PN	31-1681360-501
a Plan name	BOHLAND JEWELERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOHLAND JEWELERS INC	**c** EIN-PN	34-1820612-501
a Plan name	BOICH REALTY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOICH REALTY, LLC	**c** EIN-PN	83-0843238-501
a Plan name	BOJHUN ENVIRO SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	BOJHUN ENVIRO SERVICES	**c** EIN-PN	45-5279635-501

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	BOLD CHANGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLD CHANGE LLC	**c** EIN-PN	84-4830792-501
a Plan name	BOLEY BRACES SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLEY BRACES	**c** EIN-PN	46-5630289-501
a Plan name	BOLIN FARMS TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLIN FARMS TRUCKING INC	**c** EIN-PN	81-3469462-501
a Plan name	BOLON HART SHIVES & CRISP SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLON HART SHIVES & CRISP	**c** EIN-PN	31-0972875-501
a Plan name	BOLON TIMBER SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLON TIMBER	**c** EIN-PN	58-2677337-501
a Plan name	BOLT CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOLT CONSTRUCTION INC	**c** EIN-PN	34-1345895-501
a Plan name	BONAVENTURA FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	BONAVENTURA FINANCIAL	**c** EIN-PN	27-4724481-501
a Plan name	BOND CHEMICALS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOND CHEMICALS INC	**c** EIN-PN	34-0877586-502
a Plan name	BOND MACHINE COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOND MACHINE COMPANY INC	**c** EIN-PN	31-0805605-501
a Plan name	BONE & JOINT SURGEONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BONE & JOINT SURGEONS INC	**c** EIN-PN	34-2045293-502
a Plan name	BONECUTTER PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	BONECUTTER PROPERTIES	**c** EIN-PN	46-1668169-502
a Plan name	BONNER FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	BONNER FARMS	**c** EIN-PN	34-1806334-501

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	BONNIE SPEED DELIVERY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BONNIE SPEED DELIVERY INC	**c** EIN-PN	34-1051611-501
a Plan name	BOOM CRATE STUDIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	BOOM CRATE STUDIOS	**c** EIN-PN	46-1102026-501
a Plan name	BOOMERS MEDICAL EQUIPMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOOMERS MEDICAL EQUIPMENT INC	**c** EIN-PN	31-1092614-501
a Plan name	BOONE'S POWER EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	BOONES POWER EQUIPMENT	**c** EIN-PN	31-1582488-501
a Plan name	BOOTH CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOOTH CHIROPRACTIC	**c** EIN-PN	34-1930548-501
a Plan name	BORCHERS CONSTRUCTION CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	BORCHERS CONSTRUCTION CORPORATION	**c** EIN-PN	31-0589099-501
a Plan name	BORDNER 2 INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BORDNER 2 INVESTMENTS LLC	**c** EIN-PN	47-3235716-501
a Plan name	BOUNDARY SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOUNDARY SYSTEMS INC	**c** EIN-PN	45-4140638-501
a Plan name	BOWER STEVENSON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWER STEVENSON LLC	**c** EIN-PN	81-4580022-501
a Plan name	BOWERS HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWERS HEATING AND COOLING	**c** EIN-PN	34-1923596-501
a Plan name	BOWLERSTORE COM SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWLERSTORE COM	**c** EIN-PN	26-2217794-501
a Plan name	BOWLING GREEN COC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWLING GREEN COC	**c** EIN-PN	34-4421232-501

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	BOWLING GREEN LINCOLN INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWLING GREEN LINCOLN INC.	**c** EIN-PN	34-1239797-502
a Plan name	BOWLING S CARPET SOCA BENEFIT PLAN		
b Name of plan sponsor	BOWLING S CARPET	**c** EIN-PN	56-2310860-501
a Plan name	BOX KING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOX KING, LLC	**c** EIN-PN	20-4355877-501
a Plan name	BOXLEY CONTRACTING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	BOXLEY CONTRACTING SVS	**c** EIN-PN	47-4033984-501
a Plan name	BOYD FUNERAL HOME INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYD FUNERAL HOME INC	**c** EIN-PN	31-1049258-501
a Plan name	BOYD LEGAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYD LEGAL SOLUTIONS	**c** EIN-PN	27-3567122-501
a Plan name	BOYLE MECHANICAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYLE MECHANICAL SOLUTIONS	**c** EIN-PN	46-2711325-501
a Plan name	BOYS AND GIRLS CLUB DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYS AND GIRLS CLUB DAYTON	**c** EIN-PN	31-0536657-501
a Plan name	BOYS AND GIRLS CLUB OF HAMILTON SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYS AND GIRLS CLUB OF HAMILTON	**c** EIN-PN	31-0616383-501
a Plan name	BOYS AND GIRLS CLUB OF WEST CHESTER/LIBERTY SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYS AND GIRLS CLUB OF WEST CHESTER/LIBERTY	**c** EIN-PN	46-3631593-501
a Plan name	BOYS AND GIRLS CLUBS OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	BOYS AND GIRLS CLUBS OF OHIO	**c** EIN-PN	88-2909822-501
a Plan name	BOZICH FOOD SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BOZICH FOOD SERVICE	**c** EIN-PN	82-1182948-501

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	BPK MANAGEMENT COMPANY LLC/MILESTONE MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	BPK MANAGEMENT COMPANY LLC/MILESTONE MEDIA	**c** EIN-PN	93-3273536-501
a Plan name	BPS PRODUCTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BPS PRODUCTS, INC.	**c** EIN-PN	34-1519176-501
a Plan name	BR STAFFING & ADVERTISING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BR STAFFING & ADVERTISING LLC	**c** EIN-PN	88-3702176-501
a Plan name	BRADBURY MILLER ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADBURY MILLER ASSOCIATES	**c** EIN-PN	46-3442663-501
a Plan name	BRADFIELD COMMUNITY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADFIELD COMMUNITY CENTER	**c** EIN-PN	34-4436839-501
a Plan name	BRADLEY FRICK & ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADLEY FRICK & ASSOC	**c** EIN-PN	45-3933759-501
a Plan name	BRADLEY PAYNE ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADLEY PAYNE ADVISORS	**c** EIN-PN	26-4226778-501
a Plan name	BRADSTREET & COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADSTREET & COMPANY INC	**c** EIN-PN	31-1627142-501
a Plan name	BRADY SIGN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BRADY SIGN COMPANY	**c** EIN-PN	31-1542896-501
a Plan name	BRAINARD RIVET COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAINARD RIVET COMPANY	**c** EIN-PN	34-1854559-501
a Plan name	BRAKEY ENERGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAKEY ENERGY INC	**c** EIN-PN	34-1942150-501
a Plan name	BRAL LAND CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAL LAND CORPORATION	**c** EIN-PN	34-1750928-501

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	BRAMHALL ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAMHALL ENGINEERING	**c** EIN-PN	34-1822908-501
a Plan name	BRANDIENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	BRANDIENCE	**c** EIN-PN	26-3895651-501
a Plan name	BRANDON HEATING AND AIR CONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	BRANDON HEATING AND AIR CONDITIONING	**c** EIN-PN	90-0147673-501
a Plan name	BRANDSTETTERS KANGA ROOF SOCA BENEFIT PLAN		
b Name of plan sponsor	BRANDSTETTERS KANGA ROOF	**c** EIN-PN	31-1754273-501
a Plan name	BRANDT BROTHERS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRANDT BROTHERS	**c** EIN-PN	34-1128940-501
a Plan name	BRANDWELL SOLUTIONS LNC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRANDWELL SOLUTIONS LNC	**c** EIN-PN	81-5399187-501
a Plan name	BRASS ACCENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRASS ACCENTS	**c** EIN-PN	34-1904893-501
a Plan name	BRATENAHL CAPITAL PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRATENAHL CAPITAL PARTNERS	**c** EIN-PN	57-1166668-501
a Plan name	BRAVURA STRATEGIC MARKETING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAVURA STRATEGIC MARKETING, LLC	**c** EIN-PN	20-2997914-501
a Plan name	BRAXOS SECURITY SOFTWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BRAXOS SECURITY SOFTWARE	**c** EIN-PN	46-2625351-501
a Plan name	BRC PROFESSIONAL BUILDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRC PROFESSIONAL BUILDING LLC	**c** EIN-PN	31-0927803-501
a Plan name	BREAKTHROUGH CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	BREAKTHROUGH CINCINNATI	**c** EIN-PN	31-1357625-501

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	BREAKTHROUGH COACHING SOCA BENEFIT PLAN		
b Name of plan sponsor	BREAKTHROUGH COACHING	**c** EIN-PN	93-2332205-501
a Plan name	BRECKENRIDGE KITCHEN EQUIP SOCA BENEFIT PLAN		
b Name of plan sponsor	BRECKENRIDGE KITCHEN EQUIP	**c** EIN-PN	34-1870715-501
a Plan name	BRECKSVILLE DENTAL EXCEL SOCA BENEFIT PLAN		
b Name of plan sponsor	BRECKSVILLE DENTAL EXCEL	**c** EIN-PN	26-1152156-501
a Plan name	BREEZEWAY INC DEANS MOBILE SOCA BENEFIT PLAN		
b Name of plan sponsor	BREEZEWAY INC DEANS MOBILE	**c** EIN-PN	34-1546528-501
a Plan name	BREEZEWOOD GARDEN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BREEZEWOOD GARDEN CENTER	**c** EIN-PN	34-1178886-501
a Plan name	BRENDA STATES INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	BRENDA STATES INSURANCE AGENCY	**c** EIN-PN	81-5362197-501
a Plan name	BRENKO PATTERNS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRENKO PATTERNS	**c** EIN-PN	65-1304344-501
a Plan name	BRENNAN HEAT AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	BRENNAN HEAT AND COOLING	**c** EIN-PN	34-1230950-502
a Plan name	BRENNER INDUSTRIAL SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	BRENNER INDUSTRIAL SALES	**c** EIN-PN	34-0671544-501
a Plan name	BRENNER KAPROSY MITCHELL SOCA BENEFIT PLAN		
b Name of plan sponsor	BRENNER KAPROSY MITCHELL	**c** EIN-PN	34-1630533-501
a Plan name	BRET RIPKE CONCRETE & CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRET RIPKE CONCRETE & CONSTRUCTION LLC	**c** EIN-PN	45-1499277-501
a Plan name	BREWERS PERFORMANCE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BREWERS PERFORMANCE INC.	**c** EIN-PN	31-1744971-501

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	BRIAN BISHOP FIN ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIAN BISHOP FIN ADVISORS	**c** EIN-PN	11-3670197-501
a Plan name	BRIAN L. SHOOK ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIAN L. SHOOK ELECTRIC	**c** EIN-PN	55-0885104-501
a Plan name	BRIAN R CAIN MD & ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIAN R CAIN MD & ASSOC	**c** EIN-PN	81-2097076-501
a Plan name	BRIANS AUTOMOTIVE REPAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIANS AUTOMOTIVE REPAIR LLC	**c** EIN-PN	47-3818867-501
a Plan name	BRICK HOUSE BLUE SOCA BENEFIT PLAN		
b Name of plan sponsor	BRICK HOUSE BLUE	**c** EIN-PN	82-0971141-501
a Plan name	BRICK POWER WASHING SOCA BENEFIT PLAN		
b Name of plan sponsor	BRICK POWER WASHING	**c** EIN-PN	84-3613918-501
a Plan name	BRIDAL AND FORMAL OUTLET SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIDAL AND FORMAL OUTLET	**c** EIN-PN	31-1191274-501
a Plan name	BRIDGED CONCEPTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIDGED CONCEPTS	**c** EIN-PN	46-1242710-501
a Plan name	BRIDGEPORT K9 EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIDGEPORT K9 EQUIPMENT	**c** EIN-PN	36-4851726-501
a Plan name	BRIDGEWICK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIDGEWICK LLC	**c** EIN-PN	48-2803142-501
a Plan name	BRIGHT BEGINNINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIGHT BEGINNINGS	**c** EIN-PN	31-1550578-501
a Plan name	BRIGHT LINE LEGAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIGHT LINE LEGAL LLC	**c** EIN-PN	84-3276487-501

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	BRIGHTER TOMORROW SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIGHTER TOMORROW	**c** EIN-PN	85-1089997-501
a Plan name	BRIGID'S PATH SOCA BENEFIT PLAN		
b Name of plan sponsor	BRIGIDS PATH	**c** EIN-PN	47-1200761-501
a Plan name	BRILLHART'S BODY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	BRILLHARTS BODY SHOP	**c** EIN-PN	47-1922526-501
a Plan name	BRILLIANT WATER AND SEWER DISTRICT SOCA BENEFIT PLAN		
b Name of plan sponsor	BRILLIANT WATER AND SEWER DISTRICT	**c** EIN-PN	34-1759593-501
a Plan name	BRISTOL DISPOSAL SOCA BENEFIT PLAN		
b Name of plan sponsor	BRISTOL DISPOSAL	**c** EIN-PN	34-1874919-501
a Plan name	BROAD AND JAMES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROAD AND JAMES INC	**c** EIN-PN	31-0962132-501
a Plan name	BROADFIELD TECHNOLOGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROADFIELD TECHNOLOGY LLC	**c** EIN-PN	88-0547158-501
a Plan name	BROADSTREET PARTNERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROADSTREET PARTNERS INC	**c** EIN-PN	31-0982037-501
a Plan name	BROADWAY FAMILY MEDICINE SOCA BENEFIT PLAN		
b Name of plan sponsor	BROADWAY FAMILY MEDICINE	**c** EIN-PN	61-1436559-501
a Plan name	BROBST MAINTENANCE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BROBST MAINTENANCE INC.	**c** EIN-PN	34-1790435-501
a Plan name	BROCK BUILDERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROCK BUILDERS INC	**c** EIN-PN	47-5676659-501
a Plan name	BROCK DAVIDSON ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	BROCK DAVIDSON ENTERPRISES	**c** EIN-PN	30-0144183-501

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	BROCKMAN AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BROCKMAN AND COMPANY	**c** EIN-PN	31-1347162-501
a Plan name	BROCO PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	BROCO PRODUCTS	**c** EIN-PN	34-1029991-501
a Plan name	BRODBECK PORTER INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	BRODBECK PORTER INSURANCE AGENCY	**c** EIN-PN	31-1755597-501
a Plan name	BRODE CONSULTING SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRODE CONSULTING SERVICES INC	**c** EIN-PN	20-2126836-501
a Plan name	BRODMOR, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRODMOR, INC	**c** EIN-PN	34-1379842-501
a Plan name	BROGAN-FOLZ, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BROGAN-FOLZ, INC.	**c** EIN-PN	31-0724898-501
a Plan name	BROOKE HANCOCK JEFFERSON METROPOLITIAN PLANNING COMMISSION SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKE HANCOCK JEFFERSON METROPOLITIAN PLANNING COMMISSION	**c** EIN-PN	55-0514063-501
a Plan name	BROOKEWOOD BUILDERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKEWOOD BUILDERS LLC	**c** EIN-PN	83-2362523-501
a Plan name	BROOKFALL GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKFALL GROUP LLC	**c** EIN-PN	83-2710198-501
a Plan name	BROOKFIELD TRUCK TRAILER REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKFIELD TRUCK TRAILER REPAIR	**c** EIN-PN	83-3143655-501
a Plan name	BROOKLYN HEIGHTS CEMETERY ASSN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKLYN HEIGHTS CEMETERY ASSN INC	**c** EIN-PN	34-0115700-501
a Plan name	BROOKSIDE ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKSIDE ANIMAL HOSPITAL	**c** EIN-PN	20-2057766-501

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	BROOKSIDE LAWN SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BROOKSIDE LAWN SERVICE	**c** EIN-PN	30-0158937-501
a Plan name	BROTHERS AND A BARBELL SOCA BENEFIT PLAN		
b Name of plan sponsor	BROTHERS AND A BARBELL	**c** EIN-PN	85-1484877-501
a Plan name	BROTHERS EXC AND TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	BROTHERS EXC AND TRUCKING	**c** EIN-PN	45-4140966-501
a Plan name	BROTHERS EXPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	BROTHERS EXPRESS	**c** EIN-PN	31-1325427-501
a Plan name	BROWN BEAR BAKERY SOCA BENEFIT PLAN		
b Name of plan sponsor	BROWN BEAR BAKERY	**c** EIN-PN	46-4843292-501
a Plan name	BROWN DOG INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROWN DOG INVESTMENTS LLC	**c** EIN-PN	20-1593255-501
a Plan name	BROWN FORWARD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BROWN FORWARD INC	**c** EIN-PN	34-0117640-501
a Plan name	BROWN LOGISTICS SOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BROWN LOGISTICS SOLUTIONS, INC.	**c** EIN-PN	31-4426782-501
a Plan name	BRUBAKER & WILLIAMS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BRUBAKER & WILLIAMS LTD	**c** EIN-PN	83-2942194-501
a Plan name	BRUCE D. ROBINSON DESIGN GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BRUCE D. ROBINSON DESIGN GROUP	**c** EIN-PN	31-1138899-501
a Plan name	BRUCOLI & POTTER, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRUCOLI & POTTER, LLC	**c** EIN-PN	93-4629569-501
a Plan name	BRUNS AND CROSS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRUNS AND CROSS LLC	**c** EIN-PN	82-5224411-501

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	BRUSH BERNARD LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	BRUSH BERNARD LLP	**c** EIN-PN	20-3652116-501
a Plan name	BRYAN FORD LINCOLN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BRYAN FORD LINCOLN INC	**c** EIN-PN	34-1884654-501
a Plan name	BSA ACQUISITION CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	BSA ACQUISITION CORP	**c** EIN-PN	82-0586249-501
a Plan name	BSB PARTNERS CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	BSB PARTNERS CPAS	**c** EIN-PN	26-2890963-501
a Plan name	BTA COLLISION CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BTA COLLISION CENTER	**c** EIN-PN	34-1801028-501
a Plan name	BTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BTS, LLC	**c** EIN-PN	81-4869913-501
a Plan name	BUB TRUCK HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUB TRUCK HOLDINGS LLC	**c** EIN-PN	84-3943502-501
a Plan name	BUBBAROCK MEAT CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUBBAROCK MEAT CO LLC	**c** EIN-PN	85-1041594-501
a Plan name	BUCKEYE AG SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE AG SUPPLY	**c** EIN-PN	83-1108151-501
a Plan name	BUCKEYE CARPET CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE CARPET CARE INC	**c** EIN-PN	31-0996945-501
a Plan name	BUCKEYE COLLISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE COLLISION INC	**c** EIN-PN	31-0913618-501
a Plan name	BUCKEYE DELI PROVISIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE DELI PROVISIONS	**c** EIN-PN	46-5051310-501

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	BUCKEYE DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE DENTAL	**c** EIN-PN	03-0446553-501
a Plan name	BUCKEYE ELM CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE ELM CONTRACTING	**c** EIN-PN	82-5049969-501
a Plan name	BUCKEYE FAMILY HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE FAMILY HEALTH	**c** EIN-PN	31-1724100-502
a Plan name	BUCKEYE FAMILY HEALTHCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE FAMILY HEALTHCARE	**c** EIN-PN	81-3571830-502
a Plan name	BUCKEYE HANDYMAN OF COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE HANDYMAN OF COLUMBUS LLC	**c** EIN-PN	88-1402778-501
a Plan name	BUCKEYE HEART AND VASCULAR SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE HEART AND VASCULAR	**c** EIN-PN	26-0194551-501
a Plan name	BUCKEYE INNOVATION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE INNOVATION, LLC	**c** EIN-PN	26-4783541-501
a Plan name	BUCKEYE INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE INSURANCE GROUP	**c** EIN-PN	31-6035649-501
a Plan name	BUCKEYE METAL WORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE METAL WORKS INC	**c** EIN-PN	31-1418933-501
a Plan name	BUCKEYE MOTOR SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE MOTOR SALES	**c** EIN-PN	81-3958837-501
a Plan name	BUCKEYE PIPE INSPECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE PIPE INSPECTION	**c** EIN-PN	46-2726823-502
a Plan name	BUCKEYE SANITARY SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE SANITARY SERVICE	**c** EIN-PN	31-1423432-501

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	BUCKEYE SHOOTING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE SHOOTING CENTER	**c** EIN-PN	85-3803844-501
a Plan name	BUCKEYE SUPER WASH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE SUPER WASH, LLC	**c** EIN-PN	26-1584733-502
a Plan name	BUCKEYE TIRE & SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE TIRE & SERVICE	**c** EIN-PN	31-0717703-501
a Plan name	BUCKEYE TREE AND CRANE SERVICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE TREE AND CRANE SERVICE, LLC	**c** EIN-PN	26-2896202-501
a Plan name	BUCKEYE VET CLINIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE VET CLINIC LLC	**c** EIN-PN	27-2294734-501
a Plan name	BUCKEYE VOLLEYBALL CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKEYE VOLLEYBALL CLUB	**c** EIN-PN	26-3318775-501
a Plan name	BUCKINGHAM ELECTRIC, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKINGHAM ELECTRIC, LLC	**c** EIN-PN	35-2355637-501
a Plan name	BUCKLEY BROS. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKLEY BROS. INC.	**c** EIN-PN	31-0563689-501
a Plan name	BUCKMAN ENOCHS COSS AND ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKMAN ENOCHS COSS AND ASSOC	**c** EIN-PN	31-0984265-501
a Plan name	BUCKMINNS D AND D HARLEY DAVIDSON SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCKMINNS D AND D HARLEY DAVIDSON	**c** EIN-PN	26-4516138-501
a Plan name	BUCYRUS INTERNAL MEDICINE SOCA BENEFIT PLAN		
b Name of plan sponsor	BUCYRUS INTERNAL MEDICINE	**c** EIN-PN	34-1919580-501
a Plan name	BUDDY FITNESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUDDY FITNESS LLC	**c** EIN-PN	46-2447391-501

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	BUDERER DRUG COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	BUDERER DRUG COMPANY	**c** EIN-PN	34-1896674-501
a Plan name	BUDGET BLIND OF AMHERST SOCA BENEFIT PLAN		
b Name of plan sponsor	BUDGET BLIND OF AMHERST	**c** EIN-PN	83-3495597-501
a Plan name	BUDGET HVAC, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUDGET HVAC, LLC	**c** EIN-PN	26-3316582-501
a Plan name	BUDGET MARCOM SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BUDGET MARCOM SOLUTIONS	**c** EIN-PN	47-2649537-501
a Plan name	BUFF CITY SOAP SOCA BENEFIT PLAN		
b Name of plan sponsor	BUFF CITY SOAP	**c** EIN-PN	85-1147288-501
a Plan name	BUG PATROL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUG PATROL LLC	**c** EIN-PN	45-2892882-501
a Plan name	BUGABOO CONTROLS SOCA BENEFIT PLAN		
b Name of plan sponsor	BUGABOO CONTROLS	**c** EIN-PN	45-5074812-501
a Plan name	BUILD PRO 360 SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILD PRO 360	**c** EIN-PN	81-2647140-501
a Plan name	BUILDER BROS CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILDER BROS CONSTRUCTION LLC	**c** EIN-PN	87-1737914-501
a Plan name	BUILDERS EXCHANGE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILDERS EXCHANGE INC	**c** EIN-PN	34-0121870-502
a Plan name	BUILDERSCAPE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILDERSCAPE INC	**c** EIN-PN	20-0537419-501
a Plan name	BUILDING 42 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILDING 42 LLC	**c** EIN-PN	46-5452611-501

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	BUILDINGLOGIX SOCA BENEFIT PLAN		
b Name of plan sponsor	BUILDINGLOGIX	**c** EIN-PN	93-2121773-501
a Plan name	BULL BEAR DEFENSE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	BULL BEAR DEFENSE SOLUTIONS	**c** EIN-PN	85-1726468-501
a Plan name	BUNCH TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	BUNCH TRUCKING	**c** EIN-PN	82-4134188-501
a Plan name	BUOYANT BRANDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUOYANT BRANDS INC	**c** EIN-PN	84-3304452-501
a Plan name	BURDENS LAWN CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	BURDENS LAWN CARE	**c** EIN-PN	83-2081089-501
a Plan name	BURER'S GARAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	BURERS GARAGE	**c** EIN-PN	31-0623916-501
a Plan name	BURGESS HEARSE AMBULANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	BURGESS HEARSE AMBULANCE	**c** EIN-PN	34-1359799-501
a Plan name	BURKETT INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BURKETT INDUSTRIES INC	**c** EIN-PN	34-4197960-501
a Plan name	BURKHART CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	BURKHART CONSTRUCTION SERVICES	**c** EIN-PN	82-1353035-501
a Plan name	BURNETTS SEPTIC SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	BURNETTS SEPTIC SERVICES	**c** EIN-PN	34-1908761-501
a Plan name	BURNS & HASSMAN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BURNS & HASSMAN LLC	**c** EIN-PN	81-2812239-501
a Plan name	BURNS CONSULTING ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BURNS CONSULTING ASSOCIATES INC	**c** EIN-PN	20-8122149-501

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	BURTCH SEED CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	BURTCH SEED CO.	**c** EIN-PN	34-1278962-501
a Plan name	BUSCHUR ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSCHUR ENTERPRISES	**c** EIN-PN	31-0834572-501
a Plan name	BUSH ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSH ENTERPRISES LLC	**c** EIN-PN	84-3645673-501
a Plan name	BUSH FIREPLACE SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSH FIREPLACE	**c** EIN-PN	34-1269269-501
a Plan name	BUSHELMAN SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSHELMAN SUPPLY	**c** EIN-PN	31-0553323-502
a Plan name	BUSHNELL INVESTMENT CO SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSHNELL INVESTMENT CO	**c** EIN-PN	31-1627191-501
a Plan name	BUSINESS MEDICAL SERVICES BUREAU, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSINESS MEDICAL SERVICES BUREAU, INC.	**c** EIN-PN	34-0936593-501
a Plan name	BUSINESS REVIEW SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	BUSINESS REVIEW SERVICES	**c** EIN-PN	31-1375518-501
a Plan name	BUTCHKO ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTCHKO ELECTRIC INC	**c** EIN-PN	34-1917066-501
a Plan name	BUTEN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTEN INC	**c** EIN-PN	31-1293981-501
a Plan name	BUTLER COUNTY LUMBER SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTLER COUNTY LUMBER	**c** EIN-PN	31-0230970-501
a Plan name	BUTLER COUNTY UNITED WAY SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTLER COUNTY UNITED WAY	**c** EIN-PN	31-0734490-501

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	BUTLER CTY VISITORS BUREAU SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTLER CTY VISITORS BUREAU	**c** EIN-PN	74-3162619-501
a Plan name	BUTTERFIELD RECOVERY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	BUTTERFIELD RECOVERY GROUP	**c** EIN-PN	84-3722262-501
a Plan name	BUURMA FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	BUURMA FARMS	**c** EIN-PN	34-1379634-501
a Plan name	BUYTRUCKWHEELS.COM SOCA BENEFIT PLAN		
b Name of plan sponsor	BUYTRUCKWHEELS.COM	**c** EIN-PN	46-2159285-501
a Plan name	BUZZ KILLER SOCA BENEFIT PLAN		
b Name of plan sponsor	BUZZ KILLER	**c** EIN-PN	82-1428012-501
a Plan name	BV MOBILE HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BV MOBILE HEALTH LLC	**c** EIN-PN	81-0917728-501
a Plan name	BW SUPPLY CO SOCA BENEFIT PLAN		
b Name of plan sponsor	BW SUPPLY CO	**c** EIN-PN	36-3137214-501
a Plan name	BWS EDUCATION CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	BWS EDUCATION CONSULTING	**c** EIN-PN	46-5464171-501
a Plan name	BYCE AUCTION LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	BYCE AUCTION LTD	**c** EIN-PN	20-4563487-501
a Plan name	BYTEWING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	BYTEWING LLC	**c** EIN-PN	83-3668629-501
a Plan name	C & B TRANSPORT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	C & B TRANSPORT GROUP	**c** EIN-PN	90-0603626-501
a Plan name	C & L ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	C & L ELECTRIC	**c** EIN-PN	26-2102527-501

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	C AND C INDY CYLINDER HEAD SOCA BENEFIT PLAN		
b Name of plan sponsor	C AND C INDY CYLINDER HEAD	**c** EIN-PN	84-3874827-501
a Plan name	C AND S SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	C AND S SOLUTIONS	**c** EIN-PN	31-1812544-501
a Plan name	C C SEAMLESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	C C SEAMLESS LLC	**c** EIN-PN	81-2573216-501
a Plan name	C L PUGH AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	C L PUGH AND ASSOCIATES	**c** EIN-PN	34-0727150-501
a Plan name	C M M S, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	C M M S, INC.	**c** EIN-PN	46-5069411-501
a Plan name	C NORRIS MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	C NORRIS MANUFACTURING	**c** EIN-PN	27-1587813-501
a Plan name	C REESE INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	C REESE INTERIORS	**c** EIN-PN	45-4604733-501
a Plan name	C TUCKER COPE & ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	C TUCKER COPE & ASSOCIATES INC	**c** EIN-PN	34-1255878-501
a Plan name	C&D COLLISION SOCA BENEFIT PLAN		
b Name of plan sponsor	C&D COLLISION	**c** EIN-PN	31-1713824-501
a Plan name	C&S LAWN AND LANDSCAPE SOCA BENEFIT PLAN		
b Name of plan sponsor	C&S LAWN AND LANDSCAPE	**c** EIN-PN	47-3386363-501
a Plan name	C. JOSEPH MCCULLOUGH CO. LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	C. JOSEPH MCCULLOUGH CO. LPA	**c** EIN-PN	83-2032754-501
a Plan name	C. LEE PLUMBING SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	C. LEE PLUMBING SERVICES, LLC	**c** EIN-PN	20-0982712-501

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	C-3 GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	C-3 GROUP	**c** EIN-PN	26-3783602-501
a Plan name	CA ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CA ELECTRIC INC	**c** EIN-PN	31-0840589-501
a Plan name	CA JOSEPH CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	CA JOSEPH CO.	**c** EIN-PN	34-1379416-501
a Plan name	CA MCANLY ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CA MCANLY ASSOCIATES	**c** EIN-PN	31-1163705-501
a Plan name	CABINETPAK KITCHENS SOCA BENEFIT PLAN		
b Name of plan sponsor	CABINETPAK KITCHENS	**c** EIN-PN	31-8084433-501
a Plan name	CABLE COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CABLE COMMUNICATIONS	**c** EIN-PN	34-1850292-502
a Plan name	CADENZA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CADENZA LLC	**c** EIN-PN	26-4637349-501
a Plan name	CAFE 19 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAFE 19 LLC	**c** EIN-PN	84-2874826-501
a Plan name	CAFE MOCHIKO SOCA BENEFIT PLAN		
b Name of plan sponsor	CAFE MOCHIKO	**c** EIN-PN	83-4578612-501
a Plan name	CAFEO HOSPITALITY SOCA BENEFIT PLAN		
b Name of plan sponsor	CAFEO HOSPITALITY	**c** EIN-PN	31-1747351-501
a Plan name	CAFFE CAPRI ITALIAN BAR AND GRILLE SOCA BENEFIT PLAN		
b Name of plan sponsor	CAFFE CAPRI ITALIAN BAR AND GRILLE	**c** EIN-PN	34-1859524-501
a Plan name	CAHILL CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAHILL CONSTRUCTION INC	**c** EIN-PN	31-1483191-501

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	CAI INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	CAI INSURANCE AGENCY	**c** EIN-PN	31-0572951-501
a Plan name	CAIR OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	CAIR OHIO	**c** EIN-PN	31-1602287-501
a Plan name	CAIRN RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	CAIRN RECOVERY	**c** EIN-PN	84-3571930-501
a Plan name	CAL ANALYTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAL ANALYTICS	**c** EIN-PN	27-3478971-501
a Plan name	CALIMAN FUNERAL SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CALIMAN FUNERAL SERVICES INC	**c** EIN-PN	31-1792728-501
a Plan name	CALL MANAGEMENT RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	CALL MANAGEMENT RESOURCES	**c** EIN-PN	31-4445594-501
a Plan name	CALLAHAN CUTTING TOOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	CALLAHAN CUTTING TOOLS	**c** EIN-PN	20-1810226-501
a Plan name	CALLAND AG TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	CALLAND AG TRANSPORT	**c** EIN-PN	45-3185856-502
a Plan name	CALS TOWING SOCA BENEFIT PLAN		
b Name of plan sponsor	CALS TOWING	**c** EIN-PN	31-0860369-501
a Plan name	CALVARY CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	CALVARY CONTRACTING	**c** EIN-PN	31-1386515-501
a Plan name	CAM PILATES MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAM PILATES MANAGEMENT LLC	**c** EIN-PN	85-4115149-501
a Plan name	CAMARGO RENTAL CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMARGO RENTAL CENTER INC	**c** EIN-PN	31-1039045-501

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	CAMBRIDGE BONE & JOINT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMBRIDGE BONE & JOINT LLC	**c** EIN-PN	92-3450386-501
a Plan name	CAMBRIDGE GUERNSEY COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMBRIDGE GUERNSEY COUNTY	**c** EIN-PN	01-0775286-501
a Plan name	CAMCO HYDRAULICS CO SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMCO HYDRAULICS CO	**c** EIN-PN	26-3842940-501
a Plan name	CAMELOT DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMELOT DENTAL GROUP	**c** EIN-PN	31-0849510-501
a Plan name	CAMMEL SAW COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMMEL SAW COMPANY INC	**c** EIN-PN	34-1659082-501
a Plan name	CAMP BOW WOW SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMP BOW WOW	**c** EIN-PN	85-3096417-501
a Plan name	CAMP LIVINGSTON INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMP LIVINGSTON INC.	**c** EIN-PN	31-6050765-501
a Plan name	CAMP5 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMP5 LLC	**c** EIN-PN	82-5060946-501
a Plan name	CAMPBELL BUILDERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL BUILDERS, INC	**c** EIN-PN	31-1012346-501
a Plan name	CAMPBELL FAMILY PRACTICE SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL FAMILY PRACTICE	**c** EIN-PN	81-4751598-501
a Plan name	CAMPBELL HARDWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL HARDWARE	**c** EIN-PN	45-3215345-501
a Plan name	CAMPBELL KIDDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL KIDDS INC	**c** EIN-PN	47-4093801-501

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	CAMPBELL METAL MAINTANENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL METAL MAINTANENCE	**c** EIN-PN	47-5607289-501
a Plan name	CAMPBELL RESOURCES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL RESOURCES LLC	**c** EIN-PN	20-8636643-501
a Plan name	CAMPBELL SIGNS AND APPAREL SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL SIGNS AND APPAREL	**c** EIN-PN	81-2063631-501
a Plan name	CAMPTONS CABINETRY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPTONS CABINETRY, LLC	**c** EIN-PN	36-4665737-501
a Plan name	CAMPUSPARC MANAGEMENT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CAMPUSPARC MANAGEMENT INC.	**c** EIN-PN	45-5577802-501
a Plan name	CANADUS TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANADUS TECHNOLOGIES LLC	**c** EIN-PN	04-3643259-501
a Plan name	CANAL CHIRO AND REHAB INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANAL CHIRO AND REHAB INC	**c** EIN-PN	31-1402355-502
a Plan name	CANAL CITY INDUSTRIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANAL CITY INDUSTRIAL LLC	**c** EIN-PN	81-1828847-502
a Plan name	CANAL FAMILY DENTISTRY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANAL FAMILY DENTISTRY INC	**c** EIN-PN	31-1533372-501
a Plan name	CANARY INSURANCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANARY INSURANCE INC	**c** EIN-PN	81-1076038-501
a Plan name	CANCER FAMILY CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CANCER FAMILY CARE	**c** EIN-PN	31-0805286-501
a Plan name	CANCER SUPPORT COM CTR OH SOCA BENEFIT PLAN		
b Name of plan sponsor	CANCER SUPPORT COM CTR OH	**c** EIN-PN	20-1388385-501

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	CANDLEWOOD LAKE ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANDLEWOOD LAKE ASSOC	**c** EIN-PN	31-0879984-501
a Plan name	CANDM WOODCRAFTERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANDM WOODCRAFTERS INC	**c** EIN-PN	31-1542058-501
a Plan name	CANINE ADVENTURES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CANINE ADVENTURES LLC	**c** EIN-PN	47-2682790-501
a Plan name	CANNATA COMPANIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	CANNATA COMPANIES LTD	**c** EIN-PN	27-3282397-501
a Plan name	CANOPY CHILD ADVOCACY CNTR SOCA BENEFIT PLAN		
b Name of plan sponsor	CANOPY CHILD ADVOCACY CNTR	**c** EIN-PN	84-3398528-501
a Plan name	CANTEEN SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTEEN SERVICE	**c** EIN-PN	34-1028890-501
a Plan name	CANTER AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTER AND ASSOCIATES	**c** EIN-PN	26-1822552-501
a Plan name	CANTERBURY CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTERBURY CREATIVE	**c** EIN-PN	83-3268305-501
a Plan name	CANTON DATA PRINT SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTON DATA PRINT	**c** EIN-PN	81-4265155-501
a Plan name	CANTON GEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTON GEAR	**c** EIN-PN	34-0894394-502
a Plan name	CANTON MUSEUM OF ART SOCA BENEFIT PLAN		
b Name of plan sponsor	CANTON MUSEUM OF ART	**c** EIN-PN	34-0733127-501
a Plan name	CAP CITY DECKS AND PATIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAP CITY DECKS AND PATIOS	**c** EIN-PN	84-5099272-501

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	CAPANNARI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPANNARI INC	**c** EIN-PN	31-1303504-501
a Plan name	CAPC GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPC GROUP LLC	**c** EIN-PN	31-1788710-501
a Plan name	CAPITAL ASSOCIATION MGMT PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL ASSOCIATION MGMT PARTNERS	**c** EIN-PN	81-4052448-501
a Plan name	CAPITAL CITY AVIATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL CITY AVIATION INC	**c** EIN-PN	20-1614692-501
a Plan name	CAPITAL CORE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL CORE INC	**c** EIN-PN	31-1034112-501
a Plan name	CAPITAL DOOR SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL DOOR SOLUTIONS	**c** EIN-PN	47-1561606-501
a Plan name	CAPITAL GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL GRAPHICS	**c** EIN-PN	83-1140975-501
a Plan name	CAPITAL MEDICAL RESOURCES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITAL MEDICAL RESOURCES LLC	**c** EIN-PN	27-3786855-501
a Plan name	CAPITOL CONSULTING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITOL CONSULTING GROUP	**c** EIN-PN	31-1440468-501
a Plan name	CAPITOL TUNNELING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPITOL TUNNELING INC	**c** EIN-PN	31-0802082-501
a Plan name	CAPRIOTTIS SANDWICH SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPRIOTTIS SANDWICH SHOP	**c** EIN-PN	92-1372079-501
a Plan name	CAPRON CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPRON CONSTRUCTION INC	**c** EIN-PN	34-1698523-501

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	CAPSTONE FINANCIAL CONSLTS INC CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPSTONE FINANCIAL CONSLTS INC CPAS	**c** EIN-PN	74-3107359-501
a Plan name	CAPSTONE PROPERTY SOLUTIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPSTONE PROPERTY SOLUTIONS, INC	**c** EIN-PN	31-0930517-501
a Plan name	CAPTION LABS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPTION LABS LLC	**c** EIN-PN	32-0431928-501
a Plan name	CAPUTO BROS PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPUTO BROS PROPERTIES	**c** EIN-PN	34-0770427-501
a Plan name	CAPWELLS AUTOMOTIVE PROFESSIONALS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAPWELLS AUTOMOTIVE PROFESSIONALS, LLC	**c** EIN-PN	92-3991766-501
a Plan name	CAR WASH DEPOT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CAR WASH DEPOT, INC.	**c** EIN-PN	20-3273265-501
a Plan name	CARA REEVES CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	CARA REEVES CREATIVE	**c** EIN-PN	45-2940734-501
a Plan name	CARBONATE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARBONATE INC	**c** EIN-PN	84-2959460-501
a Plan name	CARDINAL ASPHALT SOCA BENEFIT PLAN		
b Name of plan sponsor	CARDINAL ASPHALT	**c** EIN-PN	34-1766976-502
a Plan name	CARDINAL HOME HEALTHCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CARDINAL HOME HEALTHCARE	**c** EIN-PN	32-0134287-501
a Plan name	CARDINAL LAND CONSERVANCY SOCA BENEFIT PLAN		
b Name of plan sponsor	CARDINAL LAND CONSERVANCY	**c** EIN-PN	31-1673211-501
a Plan name	CARDINAL WEALTH PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	CARDINAL WEALTH PARTNERS	**c** EIN-PN	86-1589020-501

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	CARE MONSTER SOCA BENEFIT PLAN		
b Name of plan sponsor	CARE MONSTER	**c** EIN-PN	47-4210103-501
a Plan name	CAREER STRATEGY CONSULTANT SOCA BENEFIT PLAN		
b Name of plan sponsor	CAREER STRATEGY CONSULTANT	**c** EIN-PN	27-2793460-501
a Plan name	CARES EMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CARES EMS	**c** EIN-PN	93-2162395-501
a Plan name	CAREW INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CAREW INTERNATIONAL	**c** EIN-PN	31-0947122-501
a Plan name	CAREY ENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CAREY ENT	**c** EIN-PN	26-3729876-501
a Plan name	CARING FOR YOURS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARING FOR YOURS LLC	**c** EIN-PN	51-0642806-501
a Plan name	CARL'S DELI OF HYDE PARK, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARLS DELI OF HYDE PARK, LLC	**c** EIN-PN	88-0602161-501
a Plan name	CARLS MARKET INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARLS MARKET INC	**c** EIN-PN	31-1050370-501
a Plan name	CARL'S TOWING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARLS TOWING, LLC	**c** EIN-PN	46-4422404-501
a Plan name	CARNATION ELECTRIC MOTOR SOCA BENEFIT PLAN		
b Name of plan sponsor	CARNATION ELECTRIC MOTOR	**c** EIN-PN	34-1796614-501
a Plan name	CARNATION FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CARNATION FINANCIAL	**c** EIN-PN	46-4974730-501
a Plan name	CARNEGIE COMPANIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CARNEGIE COMPANIES, INC.	**c** EIN-PN	34-1681162-501

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	CARPENTER INS & FIN SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARPENTER INS & FIN SERVICES INC	**c** EIN-PN	88-1172641-501
a Plan name	CARPER WELL SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARPER WELL SERVICE INC	**c** EIN-PN	31-1326672-501
a Plan name	CARPET CARE PLUS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CARPET CARE PLUS, INC.	**c** EIN-PN	31-1374536-501
a Plan name	CARR TOOL COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CARR TOOL COMPANY	**c** EIN-PN	31-0578372-501
a Plan name	CARRABINE & REARDON CO. LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	CARRABINE & REARDON CO. LPA	**c** EIN-PN	51-0604714-501
a Plan name	CARROLL DMD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARROLL DMD LLC	**c** EIN-PN	81-4500052-501
a Plan name	CARROLL EQUINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARROLL EQUINE LLC	**c** EIN-PN	92-0567603-501
a Plan name	CARROLL INSURANCE & RISK SOCA BENEFIT PLAN		
b Name of plan sponsor	CARROLL INSURANCE & RISK	**c** EIN-PN	83-3064909-501
a Plan name	CARSONLYNCH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARSONLYNCH LLC	**c** EIN-PN	87-3361510-501
a Plan name	CARSTAR COLLISION CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	CARSTAR COLLISION CENTER	**c** EIN-PN	83-2696835-501
a Plan name	CARSTAR OF FAIRFIELD SOCA BENEFIT PLAN		
b Name of plan sponsor	CARSTAR OF FAIRFIELD	**c** EIN-PN	87-1171111-501
a Plan name	CARTER PRIVATE WEALTH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARTER PRIVATE WEALTH, LLC	**c** EIN-PN	88-2765478-501

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	CARTERS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CARTERS CONSTRUCTION	**c** EIN-PN	31-1243862-502
a Plan name	CARTOON BOOKS SOCA BENEFIT PLAN		
b Name of plan sponsor	CARTOON BOOKS	**c** EIN-PN	95-4486919-501
a Plan name	CARUSO ENGINEERING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CARUSO ENGINEERING LLC	**c** EIN-PN	82-2745088-501
a Plan name	CASA ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CASA ENTERPRISES LLC	**c** EIN-PN	81-1197975-501
a Plan name	CASA TLAQUEPAQUE SOCA BENEFIT PLAN		
b Name of plan sponsor	CASA TLAQUEPAQUE	**c** EIN-PN	84-4630235-501
a Plan name	CASABLANCA VINTAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	CASABLANCA VINTAGE	**c** EIN-PN	46-2814190-501
a Plan name	CASALINOVA INVESTIGATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CASALINOVA INVESTIGATIONS	**c** EIN-PN	38-3663629-501
a Plan name	CASE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CASE, LLC	**c** EIN-PN	83-3509420-501
a Plan name	CASHMANS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CASHMANS, INC.	**c** EIN-PN	31-1668652-501
a Plan name	CASPER CASPER AND CASPER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CASPER CASPER AND CASPER LLC	**c** EIN-PN	82-1366451-501
a Plan name	CASS FRAMES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CASS FRAMES INC.	**c** EIN-PN	34-1693616-501
a Plan name	CASTER CONNECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CASTER CONNECTION	**c** EIN-PN	34-1636988-501

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	CASTLE GARAGE DOOR SOCA BENEFIT PLAN		
b Name of plan sponsor	CASTLE GARAGE DOOR	**c** EIN-PN	92-0358753-501
a Plan name	CAT CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CAT CONSULTING LLC	**c** EIN-PN	26-2319635-501
a Plan name	CATALYFT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CATALYFT, LLC	**c** EIN-PN	47-5545222-501
a Plan name	CATALYST ELEMENT CONSULT SOCA BENEFIT PLAN		
b Name of plan sponsor	CATALYST ELEMENT CONSULT	**c** EIN-PN	83-2831323-501
a Plan name	CATHY L GRAVES DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CATHY L GRAVES DDS INC	**c** EIN-PN	35-2215163-501
a Plan name	CATULLO COUNSELING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CATULLO COUNSELING LLC	**c** EIN-PN	99-0845129-501
a Plan name	CAYOSOFT SOCA BENEFIT PLAN		
b Name of plan sponsor	CAYOSOFT	**c** EIN-PN	82-3865984-502
a Plan name	CB TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	CB TECH	**c** EIN-PN	31-1313504-501
a Plan name	CBAO SOCA BENEFIT PLAN		
b Name of plan sponsor	CBAO	**c** EIN-PN	31-0898724-501
a Plan name	CBJ LICENSE SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CBJ LICENSE SERVICES LLC	**c** EIN-PN	47-3916849-501
a Plan name	CC TIFFIN HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CC TIFFIN HOLDINGS LLC	**c** EIN-PN	93-2086395-501
a Plan name	CCM ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	CCM ELECTRIC	**c** EIN-PN	34-1713327-501

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	CCPC INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CCPC INC.	**c** EIN-PN	34-1386480-501
a Plan name	CCS YATES AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CCS YATES AGENCY LLC	**c** EIN-PN	46-1317697-501
a Plan name	CDF STUCCO SOCA BENEFIT PLAN		
b Name of plan sponsor	CDF STUCCO	**c** EIN-PN	81-2516335-501
a Plan name	CDI INDUSTRIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CDI INDUSTRIES, INC.	**c** EIN-PN	34-1857490-501
a Plan name	CECOS GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CECOS GROUP	**c** EIN-PN	26-2951470-501
a Plan name	CECW MANAGEMENT COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CECW MANAGEMENT COMPANY LLC	**c** EIN-PN	82-3779542-501
a Plan name	CEDAR HILL FURNITURE SOCA BENEFIT PLAN		
b Name of plan sponsor	CEDAR HILL FURNITURE	**c** EIN-PN	31-1351809-502
a Plan name	CEFALU & SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CEFALU & SONS INC	**c** EIN-PN	31-1157893-501
a Plan name	CELESTE CLEANING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CELESTE CLEANING COMPANY	**c** EIN-PN	83-3739834-501
a Plan name	CELINA ANIMAL HOSPITAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CELINA ANIMAL HOSPITAL INC	**c** EIN-PN	34-1339371-501
a Plan name	CENTER FOR BENEFITS MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER FOR BENEFITS MANAGEMENT	**c** EIN-PN	74-3144644-501
a Plan name	CENTER FOR HOLOCAUST & HUMANITY EDUCATION SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER FOR HOLOCAUST & HUMANITY EDUCATION	**c** EIN-PN	20-5090993-501

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	CENTER FOR LOCAL GOVERNEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER FOR LOCAL GOVERNEMENT	**c** EIN-PN	31-1305568-501
a Plan name	CENTER FOR RELATED DISORDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER FOR RELATED DISORDERS	**c** EIN-PN	76-0719567-501
a Plan name	CENTER OF MUSIC AND ART SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER OF MUSIC AND ART	**c** EIN-PN	55-0707360-501
a Plan name	CENTER SEEDS SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTER SEEDS	**c** EIN-PN	46-2627328-501
a Plan name	CENTERVILLE INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTERVILLE INSURANCE	**c** EIN-PN	31-1766265-501
a Plan name	CENTRAL COMMUNITY HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL COMMUNITY HOUSE	**c** EIN-PN	31-4379438-501
a Plan name	CENTRAL MARKETING ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL MARKETING ASSOC	**c** EIN-PN	31-0804561-501
a Plan name	CENTRAL OH FABRICATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OH FABRICATION LLC	**c** EIN-PN	26-3668707-501
a Plan name	CENTRAL OH HOSPT COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OH HOSPT COUNCIL	**c** EIN-PN	26-2795133-501
a Plan name	CENTRAL OHIO AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO AUTO BODY	**c** EIN-PN	81-1705516-501
a Plan name	CENTRAL OHIO BAG AND BURLAP SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO BAG AND BURLAP	**c** EIN-PN	31-1237925-501
a Plan name	CENTRAL OHIO COMPREHENSIVE FOOTCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO COMPREHENSIVE FOOTCARE	**c** EIN-PN	61-1952148-501

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	CENTRAL OHIO GAS LINE SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO GAS LINE SERVICES LLC	**c** EIN-PN	74-3169986-501
a Plan name	CENTRAL OHIO PROVISIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO PROVISIONS	**c** EIN-PN	31-1806623-501
a Plan name	CENTRAL OHIO RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO RECYCLING	**c** EIN-PN	45-4934003-501
a Plan name	CENTRAL OHIO SURGICAL INSTITUTE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OHIO SURGICAL INSTITUTE LLC	**c** EIN-PN	74-3059062-501
a Plan name	CENTRATECH SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CENTRATECH SERVICE INC	**c** EIN-PN	31-1320958-501
a Plan name	CEPHAS ENTERPRISES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CEPHAS ENTERPRISES, LLC	**c** EIN-PN	20-8044633-501
a Plan name	CERKL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CERKL, INC.	**c** EIN-PN	27-0733747-501
a Plan name	CERTIFIED TREE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CERTIFIED TREE CARE	**c** EIN-PN	51-0445702-501
a Plan name	CERV FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	CERV FOUNDATION	**c** EIN-PN	31-1347969-501
a Plan name	CETITEC USA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CETITEC USA INC	**c** EIN-PN	81-1152092-501
a Plan name	CFS COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CFS COLUMBUS LLC	**c** EIN-PN	92-2223929-501
a Plan name	CH 13 TRUSTEE, ED A BAILEY SOCA BENEFIT PLAN		
b Name of plan sponsor	CH 13 TRUSTEE, ED A BAILEY	**c** EIN-PN	85-2560461-501

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	CHAATRIK ARCHITECTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAATRIK ARCHITECTURE	**c** EIN-PN	82-2752352-501
a Plan name	CHADAN ENGINEERING SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CHADAN ENGINEERING SERVICES, INC.	**c** EIN-PN	55-0592492-501
a Plan name	CHAGRIN VALLEY NURSERIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAGRIN VALLEY NURSERIES INC	**c** EIN-PN	34-0854009-501
a Plan name	CHAGRIN VALLEY SOAP SALVE SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAGRIN VALLEY SOAP SALVE	**c** EIN-PN	20-0416182-501
a Plan name	CHAGRINOVATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAGRINOVATIONS LLC	**c** EIN-PN	83-3450313-501
a Plan name	CHALET PREMIER SOCA BENEFIT PLAN		
b Name of plan sponsor	CHALET PREMIER	**c** EIN-PN	34-1937724-501
a Plan name	CHALLENGEU OHIO COMMUNITY SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	CHALLENGEU OHIO COMMUNITY SCHOOL	**c** EIN-PN	88-4132469-501
a Plan name	CHALTRON SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHALTRON SYSTEMS	**c** EIN-PN	34-1427264-501
a Plan name	CHAMBERS FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAMBERS FUNERAL HOME	**c** EIN-PN	34-0800762-501
a Plan name	CHAMELEON INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAMELEON INVESTMENTS	**c** EIN-PN	45-4397694-501
a Plan name	CHAMOUN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAMOUN INC	**c** EIN-PN	34-1839890-501
a Plan name	CHAMPION TRADING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAMPION TRADING GROUP	**c** EIN-PN	81-3875335-501

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	CHAPIN LEGAL GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAPIN LEGAL GROUP LLC	**c** EIN-PN	31-1776829-501
a Plan name	CHAPLAIN PARTNERSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	CHAPLAIN PARTNERSHIP	**c** EIN-PN	34-1175624-501
a Plan name	CHARLES BALLOU SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES BALLOU	**c** EIN-PN	31-1154790-501
a Plan name	CHARLES FAZIO & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES FAZIO & ASSOCIATES	**c** EIN-PN	34-1927306-501
a Plan name	CHARLES H SAMPSON VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES H SAMPSON VENTURES	**c** EIN-PN	83-2023672-501
a Plan name	CHARLES J YOURSTOWSKY DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES J YOURSTOWSKY DDS	**c** EIN-PN	34-1602797-501
a Plan name	CHARLES LIPTAK CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES LIPTAK CONSTRUCTION	**c** EIN-PN	34-1951398-501
a Plan name	CHARLES V. SIMMS DEVELOPMENT CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLES V. SIMMS DEVELOPMENT CORP.	**c** EIN-PN	31-0603334-501
a Plan name	CHARLIE MOOTZ TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLIE MOOTZ TRUCKING LLC	**c** EIN-PN	20-4959351-501
a Plan name	CHARLIE'S AUTOMOTIVE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLIES AUTOMOTIVE, INC.	**c** EIN-PN	20-0566798-501
a Plan name	CHARLTON CHARLTON & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHARLTON CHARLTON & ASSOCIATES	**c** EIN-PN	82-2206192-501
a Plan name	CHASE PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHASE PROPERTIES	**c** EIN-PN	81-4660793-501

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	CHC MANUFACTURING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHC MANUFACTURING INC	**c** EIN-PN	26-0639374-501
a Plan name	CHEESEBURGER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHEESEBURGER INC	**c** EIN-PN	34-1808473-501
a Plan name	CHEFFY DRUGS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHEFFY DRUGS	**c** EIN-PN	20-5572381-501
a Plan name	CHEMICAL METHODS INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	CHEMICAL METHODS INCORPORATED	**c** EIN-PN	34-1085010-501
a Plan name	CHEROKEE ROSE RESIDENTIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CHEROKEE ROSE RESIDENTIAL	**c** EIN-PN	83-1456509-501
a Plan name	CHESHIRE CROSSING ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CHESHIRE CROSSING ANIMAL HOSPITAL	**c** EIN-PN	20-5272182-501
a Plan name	CHEST DISEASE ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHEST DISEASE ASSOCIATES	**c** EIN-PN	34-1203858-501
a Plan name	CHESTA CO. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CHESTA CO. INC.	**c** EIN-PN	31-1459569-501
a Plan name	CHESTER LAW GROUP CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	CHESTER LAW GROUP CO LPA	**c** EIN-PN	20-8466495-501
a Plan name	CHESTER LEASING SOCA BENEFIT PLAN		
b Name of plan sponsor	CHESTER LEASING	**c** EIN-PN	34-0947718-501
a Plan name	CHESTERLAND FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CHESTERLAND FAMILY DENTAL	**c** EIN-PN	84-2619121-501
a Plan name	CHHAYA VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	CHHAYA VENTURES	**c** EIN-PN	84-4527116-503

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	CHICKASAW GARAGE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CHICKASAW GARAGE INC.	**c** EIN-PN	34-1699442-501
a Plan name	CHILD CARE CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILD CARE CONSULTANTS	**c** EIN-PN	31-1010195-501
a Plan name	CHILDREN S ADVOCACY CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILDREN S ADVOCACY CTR	**c** EIN-PN	34-1894371-501
a Plan name	CHILDREN'S MEETING HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILDRENS MEETING HOUSE	**c** EIN-PN	31-0825265-501
a Plan name	CHILDRENS MUSEUM OF CLEVELAND SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILDRENS MUSEUM OF CLEVELAND	**c** EIN-PN	34-1360267-501
a Plan name	CHILDRESS COLLISION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILDRESS COLLISION LLC	**c** EIN-PN	34-1822863-501
a Plan name	CHILDS HOPE INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILDS HOPE INTERNATIONAL	**c** EIN-PN	26-2650311-502
a Plan name	CHILL TEX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILL TEX LLC	**c** EIN-PN	27-3655911-501
a Plan name	CHILLI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHILLI LLC	**c** EIN-PN	85-1644118-501
a Plan name	CHIPPEWA TOOL AND MFG SOCA BENEFIT PLAN		
b Name of plan sponsor	CHIPPEWA TOOL AND MFG	**c** EIN-PN	34-0971245-501
a Plan name	CHIRO CLE SOCA BENEFIT PLAN		
b Name of plan sponsor	CHIRO CLE	**c** EIN-PN	83-3206772-501
a Plan name	CHIROLIFE CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHIROLIFE CHIROPRACTIC	**c** EIN-PN	20-5819401-501

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	CHIROPTERA GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CHIROPTERA GROUP	**c** EIN-PN	20-4425439-501
a Plan name	CHOICE PROPERTY RESOURCE SOCA BENEFIT PLAN		
b Name of plan sponsor	CHOICE PROPERTY RESOURCE	**c** EIN-PN	31-1629123-501
a Plan name	CHOP SUEY CARRYOUT SOCA BENEFIT PLAN		
b Name of plan sponsor	CHOP SUEY CARRYOUT	**c** EIN-PN	31-1462278-501
a Plan name	CHRIS ENRIGHT PLUMBING AND CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRIS ENRIGHT PLUMBING AND CONSTRUCTION	**c** EIN-PN	37-1423821-501
a Plan name	CHRIS FRAME TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRIS FRAME TRUCKING LLC	**c** EIN-PN	31-1453882-501
a Plan name	CHRIS VOGEL DESIGN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRIS VOGEL DESIGN, LLC	**c** EIN-PN	90-1120428-501
a Plan name	CHRISTINE ANDREWS LISW-S SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRISTINE ANDREWS LISW-S	**c** EIN-PN	36-2840373-501
a Plan name	CHRISTOPHER J. MADDOX DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRISTOPHER J. MADDOX DDS	**c** EIN-PN	31-1636908-501
a Plan name	CHRISTOS MEDICAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRISTOS MEDICAL INC	**c** EIN-PN	26-4489059-501
a Plan name	CHROBAK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHROBAK LLC	**c** EIN-PN	04-3624699-502
a Plan name	CHRYSALIS FAMILY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CHRYSALIS FAMILY SOLUTIONS	**c** EIN-PN	04-8482754-501
a Plan name	CHURCHWELL FIRE CONSULTANTS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CHURCHWELL FIRE CONSULTANTS, INC	**c** EIN-PN	34-1620359-501

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	CIANCI ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CIANCI ELECTRIC LLC	**c** EIN-PN	81-4696729-502
a Plan name	CICADA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CICADA INC	**c** EIN-PN	20-5453586-501
a Plan name	CICEROADAMS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CICEROADAMS, LLC	**c** EIN-PN	47-2819390-501
a Plan name	CINCI ORAL & MAXILLOFACIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCI ORAL & MAXILLOFACIAL	**c** EIN-PN	31-1302330-501
a Plan name	CINCINNATI AQUARIUM DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI AQUARIUM DESIGN	**c** EIN-PN	20-3455486-501
a Plan name	CINCINNATI AUTO CREDIT SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI AUTO CREDIT	**c** EIN-PN	20-1846757-501
a Plan name	CINCINNATI BIKE SHARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI BIKE SHARE INC	**c** EIN-PN	46-4043546-501
a Plan name	CINCINNATI BIRTH CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI BIRTH CENTER	**c** EIN-PN	83-4303256-501
a Plan name	CINCINNATI CABINET REFACING SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI CABINET REFACING	**c** EIN-PN	32-0030209-501
a Plan name	CINCINNATI CENTER FOR DBT SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI CENTER FOR DBT	**c** EIN-PN	85-0519067-501
a Plan name	CINCINNATI CHIMNEY SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI CHIMNEY	**c** EIN-PN	20-4137337-501
a Plan name	CINCINNATI GILBERT MACHINE TOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI GILBERT MACHINE TOOL	**c** EIN-PN	38-3243753-501

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	CINCINNATI HILLEL SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI HILLEL	**c** EIN-PN	52-1844823-501
a Plan name	CINCINNATI INVESTMENT ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI INVESTMENT ADVISORS	**c** EIN-PN	45-3858179-501
a Plan name	CINCINNATI METALS COMPANY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI METALS COMPANY, INC.	**c** EIN-PN	31-1071344-501
a Plan name	CINCINNATI OBSERVATION & PROFESSIONAL STAFFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI OBSERVATION & PROFESSIONAL STAFFING INC	**c** EIN-PN	81-4191357-501
a Plan name	CINCINNATI OBSERVATORY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI OBSERVATORY CENTER	**c** EIN-PN	31-1665954-501
a Plan name	CINCINNATI OCCUPATIONAL THERAPY INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI OCCUPATIONAL THERAPY INSTITUTE	**c** EIN-PN	31-1195429-501
a Plan name	CINCINNATI ORAL AND MAXILLOFACIAL SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI ORAL AND MAXILLOFACIAL SURGERY	**c** EIN-PN	31-0864973-501
a Plan name	CINCINNATI ORAL SURGEONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI ORAL SURGEONS INC	**c** EIN-PN	31-1408637-501
a Plan name	CINCINNATI PACKAGING AND DISTRIBUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI PACKAGING AND DISTRIBUTION	**c** EIN-PN	36-4526032-501
a Plan name	CINCINNATI PAIN PHYSICIANS SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI PAIN PHYSICIANS	**c** EIN-PN	46-2969829-501
a Plan name	CINCINNATI PARKS FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI PARKS FOUNDATION	**c** EIN-PN	31-1429016-501
a Plan name	CINCINNATI PROPANE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI PROPANE, INC	**c** EIN-PN	31-1317618-501

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	CINCINNATI PROSTHODONTICS & ORAL RECONSTRUCTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI PROSTHODONTICS & ORAL RECONSTRUCTIONS	**c** EIN-PN	33-2140625-501
a Plan name	CINCINNATI SAFETY UPFITTERS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI SAFETY UPFITTERS, LLC	**c** EIN-PN	81-1174808-501
a Plan name	CINCINNATI SCHOLARSHIP FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI SCHOLARSHIP FOUNDATION	**c** EIN-PN	31-0603619-501
a Plan name	CINCINNATI SERVICE AND REBUILDERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI SERVICE AND REBUILDERS, INC	**c** EIN-PN	61-1399610-501
a Plan name	CINCINNATI STONEWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI STONEWORKS	**c** EIN-PN	20-8672983-501
a Plan name	CINCINNATI WEB INTEGRATORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI WEB INTEGRATORS LLC	**c** EIN-PN	47-1034365-501
a Plan name	CINCINNATI YOUTH COLLABORATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCINNATI YOUTH COLLABORATIVE	**c** EIN-PN	31-1204406-501
a Plan name	CINCY ELECTRICAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCY ELECTRICAL SOLUTIONS	**c** EIN-PN	26-4006721-501
a Plan name	CINCY SECURITY AND SOUND SOCA BENEFIT PLAN		
b Name of plan sponsor	CINCY SECURITY AND SOUND	**c** EIN-PN	81-5364124-501
a Plan name	CINDAY MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	CINDAY MARKETING	**c** EIN-PN	27-1406956-501
a Plan name	CIRCLE EXPRESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CIRCLE EXPRESS INC	**c** EIN-PN	31-1341648-501
a Plan name	CIRCLE G PLUMB HEAT COOL SOCA BENEFIT PLAN		
b Name of plan sponsor	CIRCLE G PLUMB HEAT COOL	**c** EIN-PN	31-1513508-501

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	CIRCLE MOLD, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CIRCLE MOLD, INC	**c** EIN-PN	34-1010150-501
a Plan name	CITILOOKOUT SOCA BENEFIT PLAN		
b Name of plan sponsor	CITILOOKOUT	**c** EIN-PN	26-1991074-501
a Plan name	CITIZENS AMBULANCE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	CITIZENS AMBULANCE SERVICE	**c** EIN-PN	34-1251576-501
a Plan name	CITYWIDE MATERIALS SOCA BENEFIT PLAN		
b Name of plan sponsor	CITYWIDE MATERIALS	**c** EIN-PN	31-1356897-501
a Plan name	CIVIC GARDEN OF CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	CIVIC GARDEN OF CINCINNATI	**c** EIN-PN	31-0559893-501
a Plan name	CJE RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	CJE RESTORATION	**c** EIN-PN	84-3354328-501
a Plan name	CJR WASTE REMOVAL, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CJR WASTE REMOVAL, INC	**c** EIN-PN	31-1627018-501
a Plan name	CK FAMILY CAR CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CK FAMILY CAR CARE	**c** EIN-PN	27-1876566-501
a Plan name	CLAMPS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLAMPS INC	**c** EIN-PN	34-4467749-501
a Plan name	CLARICO SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CLARICO SYSTEMS	**c** EIN-PN	88-3377064-501
a Plan name	CLARION MANAGEMENT LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	CLARION MANAGEMENT LTD	**c** EIN-PN	34-1826152-501
a Plan name	CLARK FAMILY PRACTICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLARK FAMILY PRACTICE LLC	**c** EIN-PN	88-2049539-501

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	CLARK REDER ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	CLARK REDER ENGINEERING	**c** EIN-PN	27-1233633-501
a Plan name	CLASSIC BAKERY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC BAKERY	**c** EIN-PN	34-1898903-501
a Plan name	CLASSIC FORD BRONCOS SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC FORD BRONCOS	**c** EIN-PN	27-5236175-501
a Plan name	CLASSIC IMPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC IMPORTS	**c** EIN-PN	34-1732790-501
a Plan name	CLASSIC IMPRESSIONS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC IMPRESSIONS LTD	**c** EIN-PN	30-0253449-501
a Plan name	CLASSIC KITCHEN DESIGN OF CINCINNATI, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC KITCHEN DESIGN OF CINCINNATI, INC.	**c** EIN-PN	31-1600598-501
a Plan name	CLASSIC MOMENTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CLASSIC MOMENTS, INC.	**c** EIN-PN	26-4718808-501
a Plan name	CLE CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	CLE CONSULTING	**c** EIN-PN	81-5138935-501
a Plan name	CLE TURNKEY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLE TURNKEY	**c** EIN-PN	82-2409385-501
a Plan name	CLEAN CUT LANDSCAPE LAWN SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAN CUT LANDSCAPE LAWN	**c** EIN-PN	31-1765699-501
a Plan name	CLEAN FUELS OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAN FUELS OHIO	**c** EIN-PN	04-3595329-501
a Plan name	CLEAN N GREEN LAWN SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAN N GREEN LAWN SERVICES LLC	**c** EIN-PN	84-4509766-501

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	CLEANCUT BATH SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEANCUT BATH	**c** EIN-PN	26-3285760-501
a Plan name	CLEANROOM DESIGN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEANROOM DESIGN INC	**c** EIN-PN	81-4598354-501
a Plan name	CLEANSERV INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEANSERV INC	**c** EIN-PN	31-1431578-501
a Plan name	CLEAR CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAR CONSULTING	**c** EIN-PN	20-1144956-501
a Plan name	CLEAR CREEK APPLIED TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAR CREEK APPLIED TECHNOLOGIES INC	**c** EIN-PN	33-1148844-501
a Plan name	CLEAR CREEK FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEAR CREEK FARM	**c** EIN-PN	31-0982443-501
a Plan name	CLEARCREEK CONSTRUCTION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEARCREEK CONSTRUCTION, LLC	**c** EIN-PN	30-0677926-501
a Plan name	CLEARSHIELD AUTO GLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEARSHIELD AUTO GLASS	**c** EIN-PN	46-5450563-501
a Plan name	CLEARVIEW CLEANING CONTRACTORS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEARVIEW CLEANING CONTRACTORS, INC.	**c** EIN-PN	13-4235982-501
a Plan name	CLEARVIEW DEVELOPMENTAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEARVIEW DEVELOPMENTAL SERVICES	**c** EIN-PN	82-2090964-501
a Plan name	CLEMONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEMONS, INC.	**c** EIN-PN	03-0556973-501
a Plan name	CLERMONT ADULT RESIDENTIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CLERMONT ADULT RESIDENTIAL	**c** EIN-PN	31-0902357-501

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	CLERMONT COUNTY CONVENTION AND VISITORS BUREAU SOCA BENEFIT PLAN		
b Name of plan sponsor	CLERMONT COUNTY CONVENTION AND VISITORS BUREAU	**c** EIN-PN	31-1003247-501
a Plan name	CLERMONT SOIL AND WATER CON SOCA BENEFIT PLAN		
b Name of plan sponsor	CLERMONT SOIL AND WATER CON	**c** EIN-PN	31-1040342-501
a Plan name	CLEVELAND ARCHITECTURAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND ARCHITECTURAL	**c** EIN-PN	34-0936237-501
a Plan name	CLEVELAND CENTER FOR COMPREHENSIVE DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND CENTER FOR COMPREHENSIVE DENTISTRY	**c** EIN-PN	31-1541953-501
a Plan name	CLEVELAND CHARCOAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND CHARCOAL	**c** EIN-PN	34-1663240-501
a Plan name	CLEVELAND COSMETOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND COSMETOLOGY	**c** EIN-PN	20-2652492-501
a Plan name	CLEVELAND DIESEL REPAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND DIESEL REPAIR LLC	**c** EIN-PN	81-1471417-501
a Plan name	CLEVELAND EXCAVATING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND EXCAVATING LLC	**c** EIN-PN	83-1397808-501
a Plan name	CLEVELAND FLORIST CO SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND FLORIST CO	**c** EIN-PN	82-2463791-501
a Plan name	CLEVELAND INDUST RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND INDUST RECYCLING	**c** EIN-PN	88-2846175-501
a Plan name	CLEVELAND KIDS BOOK BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND KIDS BOOK BANK	**c** EIN-PN	47-5553602-501
a Plan name	CLEVELAND LEADER IN ENDODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND LEADER IN ENDODONTICS	**c** EIN-PN	34-1758687-501

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	CLEVELAND LIGHTING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND LIGHTING CENTER	**c** EIN-PN	34-1783540-501
a Plan name	CLEVELAND MONTESSORI SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND MONTESSORI	**c** EIN-PN	34-1767241-501
a Plan name	CLEVELAND OHIO POWDER COATING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND OHIO POWDER COATING COMPANY	**c** EIN-PN	20-3335971-501
a Plan name	CLEVELAND PICK A PART SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND PICK A PART	**c** EIN-PN	34-1518617-501
a Plan name	CLEVELAND PRIMECARE SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND PRIMECARE	**c** EIN-PN	47-2187025-501
a Plan name	CLEVELAND ROCK AND TILE SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND ROCK AND TILE	**c** EIN-PN	20-5262362-501
a Plan name	CLEVELAND STEEL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND STEEL SERVICES	**c** EIN-PN	84-4151498-501
a Plan name	CLEVELAND TREE AND STUMP SOCA BENEFIT PLAN		
b Name of plan sponsor	CLEVELAND TREE AND STUMP	**c** EIN-PN	81-3774021-501
a Plan name	CLIFFEL REALTY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CLIFFEL REALTY GROUP	**c** EIN-PN	46-4993214-501
a Plan name	CLINCO & SUTTON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINCO & SUTTON INC	**c** EIN-PN	31-1584518-501
a Plan name	CLINIC PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINIC PHARMACY	**c** EIN-PN	81-1852665-501
a Plan name	CLINMUNICATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINMUNICATIONS LLC	**c** EIN-PN	82-2770440-502

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	CLINTON MEDICAL TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINTON MEDICAL TRANSPORT	**c** EIN-PN	31-1303387-501
a Plan name	CLINTON WARREN JFD SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINTON WARREN JFD	**c** EIN-PN	20-0412052-501
a Plan name	CLINTONVILLE ANIMAL HOSPITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINTONVILLE ANIMAL HOSPITAL LLC	**c** EIN-PN	82-4805615-501
a Plan name	CLINTONVILLE SERVICENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLINTONVILLE SERVICENTER INC	**c** EIN-PN	31-0738829-501
a Plan name	CLOSSMAN PROPERTY MANAGMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CLOSSMAN PROPERTY MANAGMENT	**c** EIN-PN	31-1791379-501
a Plan name	CLOUD COVER, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLOUD COVER, LLC	**c** EIN-PN	46-0988039-501
a Plan name	CLOVER KIDS DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CLOVER KIDS DENTAL	**c** EIN-PN	84-3422694-501
a Plan name	CLR EGGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLR EGGS, LLC	**c** EIN-PN	83-4357578-501
a Plan name	CLS FINISHING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLS FINISHING INC	**c** EIN-PN	34-1633353-501
a Plan name	CLUB MMA, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CLUB MMA, LLC	**c** EIN-PN	26-1105203-501
a Plan name	CLUNE CONSULTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	CLUNE CONSULTING SERVICES	**c** EIN-PN	47-3194618-501
a Plan name	CMH SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CMH SOLUTIONS LLC	**c** EIN-PN	27-1488385-501

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	CMT SOCA BENEFIT PLAN		
b Name of plan sponsor	CMT	**c** EIN-PN	27-2183850-501
a Plan name	CMT IMPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CMT IMPORTS	**c** EIN-PN	31-1782338-501
a Plan name	CNV CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	CNV CREATIVE	**c** EIN-PN	47-4331650-501
a Plan name	CO.MISH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CO.MISH, LLC	**c** EIN-PN	81-3719673-501
a Plan name	COAL GROVE PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	COAL GROVE PHARMACY	**c** EIN-PN	20-1171980-501
a Plan name	COASTAL YACHT DETAILING SOCA BENEFIT PLAN		
b Name of plan sponsor	COASTAL YACHT DETAILING	**c** EIN-PN	82-2697487-501
a Plan name	COC OF SANDUSKY COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	COC OF SANDUSKY COUNTY	**c** EIN-PN	34-4407238-501
a Plan name	CODE CHIRO SOCA BENEFIT PLAN		
b Name of plan sponsor	CODE CHIRO	**c** EIN-PN	81-1211514-501
a Plan name	CODY WHEELER SEPTIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CODY WHEELER SEPTIC LLC	**c** EIN-PN	84-3104101-501
a Plan name	COFFING ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COFFING ELECTRIC LLC	**c** EIN-PN	81-1594881-501
a Plan name	COHEN ROSENTHAL AND KRAMER SOCA BENEFIT PLAN		
b Name of plan sponsor	COHEN ROSENTHAL AND KRAMER	**c** EIN-PN	74-3069210-501
a Plan name	COHO CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	COHO CREATIVE	**c** EIN-PN	02-0624807-501

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	COIL PROCESSING REPAIR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COIL PROCESSING REPAIR INC	**c** EIN-PN	20-1793034-501
a Plan name	COIL WORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COIL WORKS INC	**c** EIN-PN	88-4396844-501
a Plan name	COIN SHOP CLEVELAND SOCA BENEFIT PLAN		
b Name of plan sponsor	COIN SHOP CLEVELAND	**c** EIN-PN	46-3501023-501
a Plan name	COL TITLE AG OF WESTERVILL SOCA BENEFIT PLAN		
b Name of plan sponsor	COL TITLE AG OF WESTERVILL	**c** EIN-PN	26-3299054-501
a Plan name	COLAMP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLAMP LLC	**c** EIN-PN	92-0384802-501
a Plan name	COLE ACTON HARMON DUNN LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	COLE ACTON HARMON DUNN LPA	**c** EIN-PN	31-1002249-501
a Plan name	COLE TOOLING AND STAMPING SOCA BENEFIT PLAN		
b Name of plan sponsor	COLE TOOLING AND STAMPING	**c** EIN-PN	34-0762165-501
a Plan name	COLERAIN LICENSE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	COLERAIN LICENSE AGENCY	**c** EIN-PN	45-5326084-501
a Plan name	COLES AND ASSOCIATES LLC, CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	COLES AND ASSOCIATES LLC, CPAS	**c** EIN-PN	31-1719915-501
a Plan name	COLINEAR CORE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLINEAR CORE INC	**c** EIN-PN	87-2776875-501
a Plan name	COLLEGE HILL CURC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLLEGE HILL CURC	**c** EIN-PN	31-0873280-501
a Plan name	COLLEGE OF OPTOMETRISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	COLLEGE OF OPTOMETRISTS	**c** EIN-PN	41-0962335-501

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	COLONIAL MACHINE CO SOCA BENEFIT PLAN		
b Name of plan sponsor	COLONIAL MACHINE CO	**c** EIN-PN	34-0669840-501
a Plan name	COLONIAL POST AND FENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	COLONIAL POST AND FENCE	**c** EIN-PN	31-1777555-501
a Plan name	COLONIAL SURFACE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	COLONIAL SURFACE SOLUTIONS	**c** EIN-PN	82-3531143-502
a Plan name	COLOR CLASSIC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	COLOR CLASSIC, INC.	**c** EIN-PN	31-1681611-501
a Plan name	COLOR WORLD PAINTING COLUMBUS SOCA BENEFIT PLAN		
b Name of plan sponsor	COLOR WORLD PAINTING COLUMBUS	**c** EIN-PN	93-4210002-501
a Plan name	COLORING BOOK SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLORING BOOK SOLUTIONS LLC	**c** EIN-PN	42-1590711-501
a Plan name	COLUMBIA FINANCIAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA FINANCIAL INC	**c** EIN-PN	45-4028723-501
a Plan name	COLUMBIA MACHINE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA MACHINE COMPANY	**c** EIN-PN	31-4152450-501
a Plan name	COLUMBUS AWNING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS AWNING COMPANY	**c** EIN-PN	27-4733924-501
a Plan name	COLUMBUS INSTRUMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS INSTRUMENTS LLC	**c** EIN-PN	86-1969345-501
a Plan name	COLUMBUS NEPHROLOGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS NEPHROLOGY INC	**c** EIN-PN	31-1477544-502
a Plan name	COLUMBUS PEDIATRIC DENTISTRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS PEDIATRIC DENTISTRY LLC	**c** EIN-PN	84-2031932-501

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	COLUMBUS PHYSICAL THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS PHYSICAL THERAPY	**c** EIN-PN	31-1533908-502
a Plan name	COLUMBUS ROOFING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS ROOFING COMPANY	**c** EIN-PN	87-3832145-501
a Plan name	COLUMBUS STEEL ERECTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS STEEL ERECTORS	**c** EIN-PN	31-1770397-501
a Plan name	COLUMBUS SURGICAL ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS SURGICAL ASSOC	**c** EIN-PN	31-1585627-501
a Plan name	COLUMBUS WORKS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS WORKS, INC.	**c** EIN-PN	38-4015966-501
a Plan name	COM ROOF AND COAT SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	COM ROOF AND COAT SYSTEMS	**c** EIN-PN	90-0735999-501
a Plan name	COMBINED PROFESSIONAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMBINED PROFESSIONAL SERVICES LLC	**c** EIN-PN	81-2712763-501
a Plan name	COMCAGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMCAGE LLC	**c** EIN-PN	27-1309492-501
a Plan name	COMER INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMER INSURANCE AGENCY INC	**c** EIN-PN	34-1384011-501
a Plan name	COMFORT CREW HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	COMFORT CREW HEATING & COOLING	**c** EIN-PN	93-3353024-501
a Plan name	COMFORT MED HEAT AND AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	COMFORT MED HEAT AND AIR	**c** EIN-PN	41-2092319-501
a Plan name	COMMERCIAL LIGHTING & ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMERCIAL LIGHTING & ELECTRIC	**c** EIN-PN	20-4911516-501

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	COMMERCIAL REFRIGERATION SPEC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMERCIAL REFRIGERATION SPEC	**c** EIN-PN	03-0422487-501
a Plan name	COMMERCIAL STEEL TREATING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMERCIAL STEEL TREATING CO	**c** EIN-PN	34-0869736-501
a Plan name	COMMISSION FOR JEWISH EDU SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMISSION FOR JEWISH EDU	**c** EIN-PN	34-1288594-501
a Plan name	COMMON GROUND CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMON GROUND CENTER	**c** EIN-PN	34-1838503-501
a Plan name	COMMONWLTH SUB TITLE AGCY SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMONWLTH SUB TITLE AGCY	**c** EIN-PN	20-4479888-501
a Plan name	COMMUNICATION RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNICATION RESOURCES	**c** EIN-PN	34-1409247-501
a Plan name	COMMUNITY AIDS NETWORK/AKRON PRIDE INITIATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY AIDS NETWORK/AKRON PRIDE INITIATIVE	**c** EIN-PN	31-1506671-501
a Plan name	COMMUNITY BUILDING STRATEGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY BUILDING STRATEGIES	**c** EIN-PN	81-1947120-501
a Plan name	COMMUNITY CONNECTIONS NORTHEAST OH SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY CONNECTIONS NORTHEAST OH	**c** EIN-PN	81-3582289-501
a Plan name	COMMUNITY ENERGY ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY ENERGY ADVISORS	**c** EIN-PN	32-0418035-502
a Plan name	COMMUNITY FIRST REAL EST SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY FIRST REAL EST	**c** EIN-PN	32-0170367-501
a Plan name	COMMUNITY FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY FOUNDATION	**c** EIN-PN	34-1904353-501

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	COMMUNITY INNOVATION DEVELOPMENT PARTNERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY INNOVATION DEVELOPMENT PARTNERS INC	**c** EIN-PN	87-1821494-501
a Plan name	COMMUNITY INTEGRATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY INTEGRATION INC	**c** EIN-PN	46-3305462-502
a Plan name	COMMUNITY LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY LIBRARY	**c** EIN-PN	31-0793687-501
a Plan name	COMMUNITY MEDICAL ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY MEDICAL ASSOC	**c** EIN-PN	34-1888823-501
a Plan name	COMMUNITY MEDICAL SPECIALISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY MEDICAL SPECIALISTS	**c** EIN-PN	27-3482932-502
a Plan name	COMMUNITY MONTESSORI SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY MONTESSORI SCHOOL	**c** EIN-PN	83-3932205-501
a Plan name	COMMUNITY PET CARE CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY PET CARE CLINIC	**c** EIN-PN	81-3228147-501
a Plan name	COMMUNITY SHELTER BOARD SOCA BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY SHELTER BOARD	**c** EIN-PN	31-1181284-501
a Plan name	COMP GERIATRIC CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	COMP GERIATRIC CARE	**c** EIN-PN	14-2009046-502
a Plan name	COMPAK SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPAK	**c** EIN-PN	85-2568800-501
a Plan name	COMPARE QUOTES SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPARE QUOTES	**c** EIN-PN	35-2587592-501
a Plan name	COMPASS INFRASTRUCTURE GRP SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPASS INFRASTRUCTURE GRP	**c** EIN-PN	83-2662402-501

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	COMPASS PAYROLL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPASS PAYROLL SERVICES	**c** EIN-PN	34-1938500-501
a Plan name	COMPENSATION SOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPENSATION SOLUTIONS, INC.	**c** EIN-PN	31-1719239-501
a Plan name	COMPETITIVE HAULING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPETITIVE HAULING INC	**c** EIN-PN	26-0471715-501
a Plan name	COMPLETE CARE PHYSICAL THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLETE CARE PHYSICAL THERAPY	**c** EIN-PN	26-0631786-501
a Plan name	COMPLETE FOOT AND ANKLE SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLETE FOOT AND ANKLE	**c** EIN-PN	45-4404247-502
a Plan name	COMPLETE FOUNDATION SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLETE FOUNDATION SVS	**c** EIN-PN	46-0727381-501
a Plan name	COMPLETE PHARMACY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLETE PHARMACY SOLUTIONS	**c** EIN-PN	26-4142231-501
a Plan name	COMPLETE PIPELINE SVS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLETE PIPELINE SVS LTD	**c** EIN-PN	81-3374200-501
a Plan name	COMPLIANT ACCESS PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPLIANT ACCESS PRODUCTS LLC	**c** EIN-PN	26-0121527-501
a Plan name	COMPREHENSIVE BEHAV HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE BEHAV HEALTH	**c** EIN-PN	26-1950208-502
a Plan name	COMPREHENSIVE CONCEPTS IN SPEECH AND HEARING SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE CONCEPTS IN SPEECH AND HEARING	**c** EIN-PN	31-1294802-501
a Plan name	COMPREHENSIVE INTERNAL MED SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE INTERNAL MED	**c** EIN-PN	34-1884221-501

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	COMPREHENSIVE INTERNAL MED SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE INTERNAL MED	**c** EIN-PN	26-4224102-501
a Plan name	COMPREHENSIVE OBGYN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE OBGYN, LLC	**c** EIN-PN	47-4746000-501
a Plan name	COMPREHENSIVE REIMBURSEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE REIMBURSEMENT	**c** EIN-PN	20-4759190-501
a Plan name	COMPREHENSIVE SURGICAL AND WOUND CARE CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE SURGICAL AND WOUND CARE CONSULTANTS	**c** EIN-PN	27-2601753-501
a Plan name	COMPREHENSIVE TITLE CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE TITLE CORP.	**c** EIN-PN	41-2262617-501
a Plan name	COMPREHENSIVE URGENT CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE URGENT CARE	**c** EIN-PN	45-1501909-501
a Plan name	COMPREHENSIVE UROLOGY INSTITUTE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE UROLOGY INSTITUTE, INC.	**c** EIN-PN	82-2306747-501
a Plan name	COMPTON POWER EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPTON POWER EQUIPMENT	**c** EIN-PN	31-0971944-501
a Plan name	COMPUTER AIDED SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPUTER AIDED SOLUTIONS	**c** EIN-PN	34-1957539-501
a Plan name	COMPUTER CONTROL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPUTER CONTROL SYSTEMS	**c** EIN-PN	31-1468648-501
a Plan name	COMPUTOL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COMPUTOL INC	**c** EIN-PN	34-1645631-501
a Plan name	CONCEPT DEVELOPERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCEPT DEVELOPERS INC	**c** EIN-PN	34-1843719-501

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	CONCERNED CITIZENS AGAINST VIOLENCE AGAINST WOMEN SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCERNED CITIZENS AGAINST VIOLENCE AGAINST WOMEN	**c** EIN-PN	31-0935117-501
a Plan name	CONCESSIONS BY COX OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCESSIONS BY COX OF OHIO	**c** EIN-PN	20-0856146-501
a Plan name	CONCIERGE NURSE NAVIGATORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCIERGE NURSE NAVIGATORS LLC	**c** EIN-PN	85-1793018-501
a Plan name	CONCORD CHAPEL ANIMAL HOSP SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCORD CHAPEL ANIMAL HOSP	**c** EIN-PN	06-1795847-501
a Plan name	CONCORD FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCORD FIRE PROTECTION	**c** EIN-PN	31-1443819-502
a Plan name	CONCORDE MORTGAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCORDE MORTGAGE	**c** EIN-PN	31-1445769-501
a Plan name	CONCRETE CRAFT OF CLEVELAND SW SOCA BENEFIT PLAN		
b Name of plan sponsor	CONCRETE CRAFT OF CLEVELAND SW	**c** EIN-PN	81-4839346-502
a Plan name	CONNECTED ELECTRICAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONNECTED ELECTRICAL, LLC	**c** EIN-PN	83-4116526-501
a Plan name	CONNECTED PSYCHOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	CONNECTED PSYCHOLOGY	**c** EIN-PN	47-1216260-501
a Plan name	CONNOLLY CONSTRUCTION COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CONNOLLY CONSTRUCTION COMPANY	**c** EIN-PN	31-4399056-502
a Plan name	CONNOR KIMMET AND HAFENSTEIN LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	CONNOR KIMMET AND HAFENSTEIN LLP	**c** EIN-PN	26-1511671-501
a Plan name	CONSERVATIVE FINANCIAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSERVATIVE FINANCIAL SOLUTIONS	**c** EIN-PN	06-1777301-501

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	CONSOLIDATED ANALYTICAL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSOLIDATED ANALYTICAL SYSTEMS	**c** EIN-PN	45-4530654-501
a Plan name	CONSOLIPLEX HOLDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSOLIPLEX HOLDING LLC	**c** EIN-PN	46-1778400-502
a Plan name	CONSTELLATION ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSTELLATION ADVISORS	**c** EIN-PN	26-3941439-501
a Plan name	CONSTRUCTABILITY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSTRUCTABILITY INC	**c** EIN-PN	27-2695215-501
a Plan name	CONSTRUCTION CONSULTING & ESTIMATING SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSTRUCTION CONSULTING & ESTIMATING	**c** EIN-PN	99-0645859-501
a Plan name	CONSTRUCTION SUPPORT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONSTRUCTION SUPPORT SOLUTIONS	**c** EIN-PN	26-3478840-502
a Plan name	CONTAINER MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTAINER MANUFACTURING	**c** EIN-PN	31-1560032-501
a Plan name	CONTEMPORARY PHYSICIANS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTEMPORARY PHYSICIANS	**c** EIN-PN	81-3706295-501
a Plan name	CONTINENTAL CARBON GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTINENTAL CARBON GROUP	**c** EIN-PN	38-4058787-502
a Plan name	CONTROL SMART LIGHTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTROL SMART LIGHTING LLC	**c** EIN-PN	35-2621649-501
a Plan name	CONTROL SYSTEMS CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTROL SYSTEMS CO.	**c** EIN-PN	34-1234403-501
a Plan name	CONTROLLED ACCESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTROLLED ACCESS INC	**c** EIN-PN	34-1756826-501

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	CONTROLLED AIR, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTROLLED AIR, INC	**c** EIN-PN	31-0654348-501
a Plan name	CONTROLLERSHIP GROUP, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONTROLLERSHIP GROUP, INC	**c** EIN-PN	59-3799692-501
a Plan name	CONVERGE TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	CONVERGE TECHNOLOGIES	**c** EIN-PN	47-1997791-501
a Plan name	CONVERSE ALL STEEL SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	CONVERSE ALL STEEL SVS	**c** EIN-PN	34-1757561-501
a Plan name	CONWAY MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CONWAY MEDIA LLC	**c** EIN-PN	46-3229483-501
a Plan name	COOKSEY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COOKSEY INC	**c** EIN-PN	34-0890265-501
a Plan name	COOL MACHINES SOCA BENEFIT PLAN		
b Name of plan sponsor	COOL MACHINES	**c** EIN-PN	56-2549402-501
a Plan name	COOLEY CUSTOM CABINETRY SOCA BENEFIT PLAN		
b Name of plan sponsor	COOLEY CUSTOM CABINETRY	**c** EIN-PN	31-1431094-501
a Plan name	COOMBS EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	COOMBS EXCAVATING	**c** EIN-PN	31-1269447-501
a Plan name	COOPER AND ELLIOTT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COOPER AND ELLIOTT LLC	**c** EIN-PN	31-1435396-501
a Plan name	COOPER ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	COOPER ELECTRIC	**c** EIN-PN	31-0961323-501
a Plan name	COORFAB SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COORFAB SERVICES LLC	**c** EIN-PN	47-2547152-501

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	COPPER RUN CAPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	COPPER RUN CAPITAL	**c** EIN-PN	26-2441769-501
a Plan name	COPY KING SOCA BENEFIT PLAN		
b Name of plan sponsor	COPY KING	**c** EIN-PN	34-1727780-501
a Plan name	COR FORKLIFTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COR FORKLIFTS LLC	**c** EIN-PN	47-3185342-501
a Plan name	CORCORAN TILE & MARBLE SOCA BENEFIT PLAN		
b Name of plan sponsor	CORCORAN TILE & MARBLE	**c** EIN-PN	34-1743907-502
a Plan name	CORE HCM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORE HCM LLC	**c** EIN-PN	82-2291206-501
a Plan name	CORE HOME FITNESS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORE HOME FITNESS, LLC	**c** EIN-PN	82-2779335-501
a Plan name	CORE QUANTUM TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	CORE QUANTUM TECHNOLOGY	**c** EIN-PN	45-5524279-501
a Plan name	CORECONNECTIONS PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	CORECONNECTIONS PARTNERS	**c** EIN-PN	81-3520212-501
a Plan name	COREHOUSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COREHOUSE LLC	**c** EIN-PN	81-3397667-501
a Plan name	COREY BOYKO DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	COREY BOYKO DDS	**c** EIN-PN	84-2197028-501
a Plan name	CORIGRAPHICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORIGRAPHICS INC	**c** EIN-PN	31-1192873-501
a Plan name	CORNERSBURG PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNERSBURG PIZZA	**c** EIN-PN	85-0664516-501

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	CORNERSTONE INNOVATIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNERSTONE INNOVATIONS, INC	**c** EIN-PN	20-5524151-501
a Plan name	CORNERSTONE TRUCKS SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNERSTONE TRUCKS	**c** EIN-PN	31-1572261-501
a Plan name	CORNETET MEYER RUSH & SPILLANE CO. LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNETET MEYER RUSH & SPILLANE CO. LPA	**c** EIN-PN	31-1405482-501
a Plan name	CORNHOLE WORLDWIDE SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNHOLE WORLDWIDE	**c** EIN-PN	27-2422106-501
a Plan name	CORNWELL & SONS FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CORNWELL & SONS FARMS	**c** EIN-PN	27-0805910-501
a Plan name	CORONET JEWELRY SOCA BENEFIT PLAN		
b Name of plan sponsor	CORONET JEWELRY	**c** EIN-PN	47-5628158-501
a Plan name	CORP FOR FINDLAY MARKET SOCA BENEFIT PLAN		
b Name of plan sponsor	CORP FOR FINDLAY MARKET	**c** EIN-PN	31-1740317-501
a Plan name	CORP HLTH TEST AND SAFETY SOCA BENEFIT PLAN		
b Name of plan sponsor	CORP HLTH TEST AND SAFETY	**c** EIN-PN	30-0742673-501
a Plan name	CORP OIL FIELD SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORP OIL FIELD SERVICES LLC	**c** EIN-PN	26-2035597-501
a Plan name	CORPORATE LIVING SOCA BENEFIT PLAN		
b Name of plan sponsor	CORPORATE LIVING	**c** EIN-PN	71-0891175-501
a Plan name	CORS & BASSETT SOCA BENEFIT PLAN		
b Name of plan sponsor	CORS & BASSETT	**c** EIN-PN	31-1603428-501
a Plan name	CORVEXXE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CORVEXXE, LLC	**c** EIN-PN	85-0621289-501

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	COSMOPOLITAN DERMATOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	COSMOPOLITAN DERMATOLOGY	**c** EIN-PN	47-2469122-501
a Plan name	COST SAVER ROOF AND WINDOW SOCA BENEFIT PLAN		
b Name of plan sponsor	COST SAVER ROOF AND WINDOW	**c** EIN-PN	84-4276652-501
a Plan name	COTTERMAN & SONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	COTTERMAN & SONS LLC	**c** EIN-PN	45-4168757-501
a Plan name	COUNTERTOP CONNECTION,LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTERTOP CONNECTION,LTD	**c** EIN-PN	31-1793163-501
a Plan name	COUNTRY ATTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTRY ATTIC	**c** EIN-PN	47-2731984-501
a Plan name	COUNTRY INTELLIGENCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTRY INTELLIGENCE GROUP	**c** EIN-PN	46-1636295-501
a Plan name	COUNTRYSIDE BODY & WELDING SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTRYSIDE BODY & WELDING	**c** EIN-PN	38-2922553-501
a Plan name	COUNTRYWIDE PAVING CONCRET SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTRYWIDE PAVING CONCRET	**c** EIN-PN	85-3788239-501
a Plan name	COUNTY CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTY CORP	**c** EIN-PN	31-0978908-501
a Plan name	COUNTY ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTY ELECTRIC INC	**c** EIN-PN	20-4046653-501
a Plan name	COUNTY ENGINEERS ASSOCIATION OF OH SOCA BENEFIT PLAN		
b Name of plan sponsor	COUNTY ENGINEERS ASSOCIATION OF OH	**c** EIN-PN	31-0641161-501
a Plan name	COUPLE TO COUPLE LEAGUE INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	COUPLE TO COUPLE LEAGUE INTERNATIONAL	**c** EIN-PN	31-0842914-501

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	COURT DIAG & TREAT CNTR SOCA BENEFIT PLAN		
b Name of plan sponsor	COURT DIAG & TREAT CNTR	**c** EIN-PN	34-1237138-501
a Plan name	COURT OF MASTER SOMMELIERS AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	COURT OF MASTER SOMMELIERS AMERICA	**c** EIN-PN	68-0398505-501
a Plan name	COVENANT ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	COVENANT ANIMAL CLINIC	**c** EIN-PN	31-1506120-501
a Plan name	COVEST SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	COVEST SERVICES	**c** EIN-PN	27-5401194-501
a Plan name	COVRETT, GRAEFF & WITTENBERG, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	COVRETT, GRAEFF & WITTENBERG, LTD.	**c** EIN-PN	46-1173677-501
a Plan name	COX SPECIALTY MARKETS SOCA BENEFIT PLAN		
b Name of plan sponsor	COX SPECIALTY MARKETS	**c** EIN-PN	31-1448020-501
a Plan name	COYLE FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	COYLE FUNERAL HOME	**c** EIN-PN	34-4212160-501
a Plan name	COZZA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	COZZA INC	**c** EIN-PN	34-1501902-501
a Plan name	CPK DANCE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CPK DANCE, LLC	**c** EIN-PN	47-2614899-501
a Plan name	CPM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CPM LLC	**c** EIN-PN	01-0909162-501
a Plan name	CPM TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CPM TRANSPORT LLC	**c** EIN-PN	47-5053944-501
a Plan name	CRABTREE DRILLING SOCA BENEFIT PLAN		
b Name of plan sponsor	CRABTREE DRILLING	**c** EIN-PN	26-2857462-501

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	CRABTREE HEATING & AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	CRABTREE HEATING & AIR	**c** EIN-PN	31-1242471-501
a Plan name	CRAFTSMEN RECREATIONAL CLUB INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAFTSMEN RECREATIONAL CLUB INC	**c** EIN-PN	34-0649132-501
a Plan name	CRAGO VETERINARY CENTRE SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAGO VETERINARY CENTRE	**c** EIN-PN	45-3722829-501
a Plan name	CRAMER OIL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAMER OIL INC	**c** EIN-PN	31-1502070-501
a Plan name	CRAMER PHYSICAL THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAMER PHYSICAL THERAPY	**c** EIN-PN	46-2932930-501
a Plan name	CRANDALL LAW, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRANDALL LAW, LLC	**c** EIN-PN	27-5484072-501
a Plan name	CRANE HEATING AND AIR CONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	CRANE HEATING AND AIR CONDITIONING	**c** EIN-PN	31-0573149-501
a Plan name	CRANKDAT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRANKDAT INC	**c** EIN-PN	82-2274057-501
a Plan name	CRAWFORD MECHANICAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAWFORD MECHANICAL SERVICES	**c** EIN-PN	31-1566801-501
a Plan name	CRAZY RICHARDS SOCA BENEFIT PLAN		
b Name of plan sponsor	CRAZY RICHARDS	**c** EIN-PN	81-0866706-501
a Plan name	CREAM + SUGAR COFFEEHOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	CREAM + SUGAR COFFEEHOUSE	**c** EIN-PN	84-3859556-501
a Plan name	CREATING CENTRAL FUTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATING CENTRAL FUTURES	**c** EIN-PN	86-3727135-501

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	CREATIVE ASSEMBLY SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE ASSEMBLY SYSTEMS	**c** EIN-PN	32-0373226-501
a Plan name	CREATIVE DEPARTMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE DEPARTMENT	**c** EIN-PN	31-1541252-501
a Plan name	CREATIVE LABELS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE LABELS INC.	**c** EIN-PN	20-8979721-501
a Plan name	CREATIVE LIVING SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE LIVING	**c** EIN-PN	23-7159623-501
a Plan name	CREATIVE SCAPES LAWN AND LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE SCAPES LAWN AND LANDSCAPING	**c** EIN-PN	20-8859011-501
a Plan name	CREATIVE SIGNALS SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE SIGNALS	**c** EIN-PN	84-5100503-501
a Plan name	CREATIVE SPOT SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE SPOT	**c** EIN-PN	31-1407138-501
a Plan name	CREATIVE TOOL AND DIE SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVE TOOL AND DIE	**c** EIN-PN	81-0937641-501
a Plan name	CREATIVES ON CALL SOCA BENEFIT PLAN		
b Name of plan sponsor	CREATIVES ON CALL	**c** EIN-PN	43-1702061-501
a Plan name	CREEKSIDE ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	CREEKSIDE ANIMAL CLINIC	**c** EIN-PN	34-1756206-501
a Plan name	CRENOS PIZZA CO SOCA BENEFIT PLAN		
b Name of plan sponsor	CRENOS PIZZA CO	**c** EIN-PN	31-1808055-501
a Plan name	CRESCENT MOON DOORS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CRESCENT MOON DOORS, INC.	**c** EIN-PN	20-8190006-501

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	CREST BENDING SOCA BENEFIT PLAN		
b Name of plan sponsor	CREST BENDING	**c** EIN-PN	34-1005557-501
a Plan name	CREST CRAFT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CREST CRAFT COMPANY	**c** EIN-PN	31-0571524-501
a Plan name	CRESTPOINT COMPANIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	CRESTPOINT COMPANIES LTD	**c** EIN-PN	45-4004037-501
a Plan name	CRESTVIEW AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	CRESTVIEW AUTO BODY	**c** EIN-PN	52-2389453-501
a Plan name	CRESTVIEW VET CLINIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRESTVIEW VET CLINIC LLC	**c** EIN-PN	87-2446614-501
a Plan name	CRI INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	CRI INTERIORS	**c** EIN-PN	58-2670487-501
a Plan name	CRICKET RIDGE ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CRICKET RIDGE ANIMAL HOSPITAL	**c** EIN-PN	46-1663992-501
a Plan name	CRIMSON DESIGN GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRIMSON DESIGN GROUP LLC	**c** EIN-PN	26-1672096-501
a Plan name	CRIMSON RESOURCES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRIMSON RESOURCES LLC	**c** EIN-PN	47-5495116-501
a Plan name	CRISTO HOMES,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRISTO HOMES,INC	**c** EIN-PN	31-1411292-501
a Plan name	CRITERIUM LISZKAY ENGINEERS SOCA BENEFIT PLAN		
b Name of plan sponsor	CRITERIUM LISZKAY ENGINEERS	**c** EIN-PN	86-2707913-501
a Plan name	CROAK ASSET MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	CROAK ASSET MANAGEMENT	**c** EIN-PN	83-0646952-501

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	CROOKED HANDLE SOCA BENEFIT PLAN		
b Name of plan sponsor	CROOKED HANDLE	**c** EIN-PN	46-4469911-501
a Plan name	CROSBYS DRUGS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CROSBYS DRUGS INC	**c** EIN-PN	31-0996978-501
a Plan name	CROSSLAND ARCHITECTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CROSSLAND ARCHITECTS, INC.	**c** EIN-PN	31-0919824-501
a Plan name	CROSSROADS COINS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CROSSROADS COINS INC	**c** EIN-PN	31-0983526-501
a Plan name	CROSSROADS COUNSELING SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	CROSSROADS COUNSELING SERV	**c** EIN-PN	34-1218170-501
a Plan name	CROSSWOODS WOMENS HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	CROSSWOODS WOMENS HEALTH	**c** EIN-PN	31-1153782-502
a Plan name	CROW DZIEDZIAK PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CROW DZIEDZIAK PROPERTIES LLC	**c** EIN-PN	30-0133333-501
a Plan name	CROWE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CROWE CONSTRUCTION	**c** EIN-PN	01-0936406-501
a Plan name	CROWN ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	CROWN ELECTRIC	**c** EIN-PN	20-2390889-501
a Plan name	CROWN REPUBLIC GASTROPUB SOCA BENEFIT PLAN		
b Name of plan sponsor	CROWN REPUBLIC GASTROPUB	**c** EIN-PN	82-2187371-501
a Plan name	CROYS TC AND SON, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CROYS TC AND SON, LLC.	**c** EIN-PN	34-1786711-501
a Plan name	CRU SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CRU SOLUTIONS	**c** EIN-PN	34-1685646-501

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	CRUSHPROOF TUBING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	CRUSHPROOF TUBING COMPANY	**c** EIN-PN	34-4480069-501
a Plan name	CRYSTAL ART IMPORTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CRYSTAL ART IMPORTS INC	**c** EIN-PN	31-1373908-501
a Plan name	CRYSTAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	CRYSTAL CONTRACTING	**c** EIN-PN	26-2774644-501
a Plan name	CS IMPACT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CS IMPACT LLC	**c** EIN-PN	93-4313248-501
a Plan name	CSA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CSA INC	**c** EIN-PN	34-1789006-501
a Plan name	CSD SEARCH SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	CSD SEARCH SOLUTIONS	**c** EIN-PN	84-3020321-501
a Plan name	CSI INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	CSI INTERNATIONAL	**c** EIN-PN	31-1431455-501
a Plan name	CSJ SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CSJ SERVICES INC	**c** EIN-PN	27-3554925-501
a Plan name	CSK ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CSK ELECTRIC INC	**c** EIN-PN	20-3586288-501
a Plan name	CTEK TOOL & MACHINE COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CTEK TOOL & MACHINE COMPANY INC	**c** EIN-PN	31-1693836-501
a Plan name	CUBBAGE ELECTRIC & PLUMBING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUBBAGE ELECTRIC & PLUMBING LLC	**c** EIN-PN	82-3624469-501
a Plan name	CULTIVATE COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	CULTIVATE COUNSELING	**c** EIN-PN	83-1564699-501

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	CUMBERLAND DIVERSIFIED METALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUMBERLAND DIVERSIFIED METALS LLC	**c** EIN-PN	92-0808522-501
a Plan name	CUNNINGHAM & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CUNNINGHAM & ASSOCIATES	**c** EIN-PN	34-1180505-501
a Plan name	CUNNINGHAM & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CUNNINGHAM & ASSOCIATES	**c** EIN-PN	38-3349378-501
a Plan name	CURATIVE MARKETING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CURATIVE MARKETING LLC	**c** EIN-PN	82-2524729-501
a Plan name	CURATOLO SIDOTI & TRILLIS SOCA BENEFIT PLAN		
b Name of plan sponsor	CURATOLO SIDOTI & TRILLIS	**c** EIN-PN	30-0267361-501
a Plan name	CURB APPEAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	CURB APPEAL CONTRACTING	**c** EIN-PN	81-0581760-501
a Plan name	CURRY ROBY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CURRY ROBY LLC	**c** EIN-PN	01-0606703-501
a Plan name	CURRY SONS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	CURRY SONS CONSTRUCTION	**c** EIN-PN	27-3739156-501
a Plan name	CURSIVE SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CURSIVE SOLUTIONS INC	**c** EIN-PN	87-4611687-501
a Plan name	CUSTOM BUILT CRATES SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM BUILT CRATES	**c** EIN-PN	31-1565625-501
a Plan name	CUSTOM COILS SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM COILS	**c** EIN-PN	34-1922840-501
a Plan name	CUSTOM CONTROLS GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM CONTROLS GROUP LLC	**c** EIN-PN	27-3446388-501

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	CUSTOM DESIGN TEAM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM DESIGN TEAM INC	**c** EIN-PN	38-3881914-501
a Plan name	CUSTOM FIT PLUMBING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM FIT PLUMBING LLC	**c** EIN-PN	83-3493037-501
a Plan name	CUSTOM HAULING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM HAULING SERVICES	**c** EIN-PN	83-0522912-501
a Plan name	CUSTOM MACHINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM MACHINE INC	**c** EIN-PN	34-1726670-501
a Plan name	CUSTOM MATERIALS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM MATERIALS, INC	**c** EIN-PN	34-0947646-501
a Plan name	CUSTOM SPEED PARTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM SPEED PARTS	**c** EIN-PN	34-0924667-501
a Plan name	CUSTOM STAFFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM STAFFING INC	**c** EIN-PN	34-1606717-501
a Plan name	CUSTOM TARPAULIN PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM TARPAULIN PRODUCTS	**c** EIN-PN	34-1641211-501
a Plan name	CUSTOM VEHICLES OF ZANESVILLE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUSTOM VEHICLES OF ZANESVILLE INC	**c** EIN-PN	31-1147267-501
a Plan name	CUTHBERT GREENHOUSE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CUTHBERT GREENHOUSE INC	**c** EIN-PN	31-1321200-501
a Plan name	CUTTING EDGE ASSEMBLY SOCA BENEFIT PLAN		
b Name of plan sponsor	CUTTING EDGE ASSEMBLY	**c** EIN-PN	46-4396162-501
a Plan name	CUTTING EDGE MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	CUTTING EDGE MANUFACTURING	**c** EIN-PN	81-0868928-501

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	CV REAL PROPERTY SOCA BENEFIT PLAN		
b Name of plan sponsor	CV REAL PROPERTY	**c** EIN-PN	86-1070643-501
a Plan name	CYBERVATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CYBERVATION INC	**c** EIN-PN	31-1621060-501
a Plan name	CYBR CASTLE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CYBR CASTLE, INC.	**c** EIN-PN	84-4686096-501
a Plan name	CYCLE SEARCH INTERNATIONAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	CYCLE SEARCH INTERNATIONAL INC	**c** EIN-PN	31-1385776-501
a Plan name	CYNAMAR, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	CYNAMAR, INC.	**c** EIN-PN	27-0227768-501
a Plan name	CYNTHIA BENNETT PHD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	CYNTHIA BENNETT PHD LLC	**c** EIN-PN	82-3436485-502
a Plan name	D & D MOVING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	D & D MOVING INC	**c** EIN-PN	26-0004103-501
a Plan name	D AND E MACHINE CO SOCA BENEFIT PLAN		
b Name of plan sponsor	D AND E MACHINE CO	**c** EIN-PN	31-1311977-501
a Plan name	D AND J ELECTRICAL SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	D AND J ELECTRICAL SERVICES, LLC	**c** EIN-PN	31-1586539-501
a Plan name	D AND S VENDING SOCA BENEFIT PLAN		
b Name of plan sponsor	D AND S VENDING	**c** EIN-PN	34-1017506-501
a Plan name	D AND T BODY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	D AND T BODY SHOP	**c** EIN-PN	31-0891730-501
a Plan name	D AND W COLLISION SOCA BENEFIT PLAN		
b Name of plan sponsor	D AND W COLLISION	**c** EIN-PN	31-1272485-501

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	D B G CONSULTING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	D B G CONSULTING INC.	**c** EIN-PN	34-1789345-501
a Plan name	D DONATS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	D DONATS INC	**c** EIN-PN	31-1358435-501
a Plan name	D KENT INVESTMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	D KENT INVESTMENT LLC	**c** EIN-PN	82-4166881-501
a Plan name	D MAYFIELD & CO SOCA BENEFIT PLAN		
b Name of plan sponsor	D MAYFIELD & CO	**c** EIN-PN	84-3238968-501
a Plan name	D&D INDUSTRIAL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	D&D INDUSTRIAL SERVICE	**c** EIN-PN	34-1692432-501
a Plan name	D&M EXCAVATING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	D&M EXCAVATING, INC.	**c** EIN-PN	31-0737265-501
a Plan name	D&W FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	D&W FARMS	**c** EIN-PN	20-0429718-501
a Plan name	D.L. MILLER AND SONS AND CO SOCA BENEFIT PLAN		
b Name of plan sponsor	D.L. MILLER AND SONS AND CO	**c** EIN-PN	31-1189372-501
a Plan name	D.T. MOORE AND COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	D.T. MOORE AND COMPANY LLC	**c** EIN-PN	27-3672478-501
a Plan name	D3 SURGICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	D3 SURGICAL	**c** EIN-PN	27-3854918-501
a Plan name	D4 INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	D4 INDUSTRIES	**c** EIN-PN	31-1415965-501
a Plan name	DA ACHKAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DA ACHKAR LLC	**c** EIN-PN	31-1699381-501

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	DAILY DENTAL & BRACESBAR SOCA BENEFIT PLAN		
b Name of plan sponsor	DAILY DENTAL & BRACESBAR	**c** EIN-PN	81-4827817-501
a Plan name	DAISY LANE PROPERTY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	DAISY LANE PROPERTY MANAGEMENT	**c** EIN-PN	88-3460997-501
a Plan name	DALES LAWNCARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DALES LAWNCARE INC	**c** EIN-PN	20-4261167-501
a Plan name	DALTON BUILDING ENCLOSURES SOCA BENEFIT PLAN		
b Name of plan sponsor	DALTON BUILDING ENCLOSURES	**c** EIN-PN	81-2751386-502
a Plan name	DALTON PROTECTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DALTON PROTECTION INC	**c** EIN-PN	46-3158686-501
a Plan name	DAM MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAM MANAGEMENT LLC	**c** EIN-PN	85-3026744-501
a Plan name	DAMASCUS HARDWARE AND WATER COND SOCA BENEFIT PLAN		
b Name of plan sponsor	DAMASCUS HARDWARE AND WATER COND	**c** EIN-PN	34-1851144-501
a Plan name	DAMBROWSKY INCOME TAX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAMBROWSKY INCOME TAX LLC	**c** EIN-PN	27-0574845-501
a Plan name	DAN DAILEY STATE FARM INS SOCA BENEFIT PLAN		
b Name of plan sponsor	DAN DAILEY STATE FARM INS	**c** EIN-PN	31-0918268-501
a Plan name	DAN WELCH TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	DAN WELCH TRUCKING	**c** EIN-PN	31-1815240-501
a Plan name	DANA WHITE MACHINING & WELDING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DANA WHITE MACHINING & WELDING INC	**c** EIN-PN	34-1786803-501
a Plan name	DANBERT CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	DANBERT CONTRACTORS	**c** EIN-PN	31-1029004-501

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	DANCE ETC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DANCE ETC INC	**c** EIN-PN	31-1461709-501
a Plan name	DANDD CLASSIC BRIGHTWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	DANDD CLASSIC BRIGHTWORKS	**c** EIN-PN	31-1589661-501
a Plan name	DANDELION ARTS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DANDELION ARTS, INC	**c** EIN-PN	45-5496805-501
a Plan name	DANGELO TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	DANGELO TECHNOLOGIES	**c** EIN-PN	61-1671248-501
a Plan name	DANIEL ROBERT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DANIEL ROBERT INC	**c** EIN-PN	26-3119520-501
a Plan name	DANVILLE FEED AND SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	DANVILLE FEED AND SUPPLY	**c** EIN-PN	31-0868192-501
a Plan name	DAPRILE INS GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAPRILE INS GROUP LLC	**c** EIN-PN	45-4244862-501
a Plan name	DAPS WEST LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAPS WEST LLC	**c** EIN-PN	84-3317943-501
a Plan name	DARAH MEDICAL EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	DARAH MEDICAL EQUIPMENT	**c** EIN-PN	56-2609082-501
a Plan name	DARAY LAW SOCA BENEFIT PLAN		
b Name of plan sponsor	DARAY LAW	**c** EIN-PN	82-4610919-501
a Plan name	DARIEN SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	DARIEN SOLUTIONS	**c** EIN-PN	04-3684776-501
a Plan name	DARK HORSE HOMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DARK HORSE HOMES LLC	**c** EIN-PN	87-0959572-501

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	DARKE RURAL ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	DARKE RURAL ELECTRIC	**c** EIN-PN	34-4215670-501
a Plan name	DARR BUSINESS OPERATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	DARR BUSINESS OPERATIONS	**c** EIN-PN	92-1190239-501
a Plan name	DARR FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DARR FARMS	**c** EIN-PN	45-3276932-501
a Plan name	DAS HAUS LITTLE ITALY SOCA BENEFIT PLAN		
b Name of plan sponsor	DAS HAUS LITTLE ITALY	**c** EIN-PN	85-1435564-501
a Plan name	DATA LOGISTICS CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DATA LOGISTICS CONSULTING INC	**c** EIN-PN	31-1580233-501
a Plan name	DATA MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	DATA MANAGEMENT	**c** EIN-PN	31-0961973-501
a Plan name	DATA RESOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DATA RESOLUTIONS, INC.	**c** EIN-PN	31-1685613-501
a Plan name	DATA RESOURCE ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DATA RESOURCE ASSOCIATES INC	**c** EIN-PN	31-1426591-501
a Plan name	DATAKINETICS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DATAKINETICS, INC.	**c** EIN-PN	34-1588325-501
a Plan name	DAVE KEHL CHEVROLET SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVE KEHL CHEVROLET	**c** EIN-PN	34-1107975-501
a Plan name	DAVE ROUSH PLUMBING AND HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVE ROUSH PLUMBING AND HEATING	**c** EIN-PN	31-1699028-501
a Plan name	DAVES TRUCK AND AUTO PAINT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVES TRUCK AND AUTO PAINT INC	**c** EIN-PN	31-1327697-501

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	DAVID A MORVAY DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID A MORVAY DDS	**c** EIN-PN	34-1632559-501
a Plan name	DAVID A NOVOTNY MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID A NOVOTNY MD INC	**c** EIN-PN	34-1902721-501
a Plan name	DAVID E DEYNOYER SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID E DEYNOYER	**c** EIN-PN	31-1289639-501
a Plan name	DAVID GRISCHKAN MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID GRISCHKAN MD INC	**c** EIN-PN	34-1309677-501
a Plan name	DAVID J SIMMONS & ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID J SIMMONS & ASSOC	**c** EIN-PN	20-1084826-501
a Plan name	DAVID KEIL SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID KEIL	**c** EIN-PN	61-1518782-501
a Plan name	DAVID W PETTI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVID W PETTI LLC	**c** EIN-PN	27-5284338-501
a Plan name	DAVIDSON WELL DRILLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVIDSON WELL DRILLING LLC	**c** EIN-PN	30-1198475-501
a Plan name	DAVIES ARCHITECTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVIES ARCHITECTURE	**c** EIN-PN	92-1508035-501
a Plan name	DAVIS FABRICATORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVIS FABRICATORS INC	**c** EIN-PN	34-1406721-501
a Plan name	DAVIS LAW FIRM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVIS LAW FIRM INC	**c** EIN-PN	27-1440283-501
a Plan name	DAVIS PIANO MOVING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVIS PIANO MOVING INC	**c** EIN-PN	31-1361667-501

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	DAVRO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAVRO INC	**c** EIN-PN	38-3881416-501
a Plan name	DAWN LANDALS SOCA BENEFIT PLAN		
b Name of plan sponsor	DAWN LANDALS	**c** EIN-PN	81-5226959-501
a Plan name	DAWN MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAWN MANAGEMENT LLC	**c** EIN-PN	26-1231434-501
a Plan name	DAWSON FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DAWSON FARMS	**c** EIN-PN	31-0783193-501
a Plan name	DAY AND NIGHT BUILDING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	DAY AND NIGHT BUILDING SVS	**c** EIN-PN	27-2392075-501
a Plan name	DAY FUNERAL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	DAY FUNERAL SERVICE	**c** EIN-PN	61-1688640-501
a Plan name	DAY PISTON GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAY PISTON GROUP LLC	**c** EIN-PN	88-2654415-501
a Plan name	DAY PRECISION WALL SOCA BENEFIT PLAN		
b Name of plan sponsor	DAY PRECISION WALL	**c** EIN-PN	31-0561449-501
a Plan name	DAYS APPLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYS APPLIANCE	**c** EIN-PN	81-4605110-501
a Plan name	DAYS OF DISCOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYS OF DISCOVERY	**c** EIN-PN	31-1379790-501
a Plan name	DAYTON CINCI TECH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON CINCI TECH SERVICES	**c** EIN-PN	20-2776212-501
a Plan name	DAYTON CLUTCH AND JOINT SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON CLUTCH AND JOINT	**c** EIN-PN	31-0517278-501

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	DAYTON COATING TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON COATING TECH	**c** EIN-PN	02-0569887-501
a Plan name	DAYTON CONTEMPORARY DANCE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON CONTEMPORARY DANCE COMPANY	**c** EIN-PN	23-7220259-501
a Plan name	DAYTON GEAR AND TOOL CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON GEAR AND TOOL CO INC	**c** EIN-PN	31-0518588-501
a Plan name	DAYTON METAL DOOR SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON METAL DOOR	**c** EIN-PN	31-0920407-501
a Plan name	DAYTON NEUROLOGIC ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON NEUROLOGIC ASSOC	**c** EIN-PN	47-3633525-502
a Plan name	DAYTON ORTHOPAEDIC SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON ORTHOPAEDIC SURGERY	**c** EIN-PN	31-0735678-501
a Plan name	DAYTON RESPIRATORY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON RESPIRATORY, LLC	**c** EIN-PN	31-1406938-501
a Plan name	DAYTON STENCIL WORKS CO SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON STENCIL WORKS CO	**c** EIN-PN	31-0258860-501
a Plan name	DAYTON SWIM SCHOOL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DAYTON SWIM SCHOOL LLC	**c** EIN-PN	47-3914091-501
a Plan name	DB UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	DB UNLIMITED	**c** EIN-PN	46-2374911-501
a Plan name	DBR FINANCE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DBR FINANCE INC.	**c** EIN-PN	47-4398547-501
a Plan name	DBS FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	DBS FINANCIAL	**c** EIN-PN	01-0808349-501

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	DBS STAINLESS STEEL FABRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	DBS STAINLESS STEEL FABRIC	**c** EIN-PN	31-1135062-501
a Plan name	DC DOOR COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	DC DOOR COMPANY	**c** EIN-PN	55-0891823-501
a Plan name	DC JOHNSON LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	DC JOHNSON LIMITED	**c** EIN-PN	47-1351482-501
a Plan name	DCP TOOL & MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	DCP TOOL & MANUFACTURING	**c** EIN-PN	54-2085776-501
a Plan name	DCR OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DCR OHIO LLC	**c** EIN-PN	46-4369504-501
a Plan name	DCW GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	DCW GROUP	**c** EIN-PN	34-1849819-501
a Plan name	DD&P CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	DD&P CONSULTING	**c** EIN-PN	20-2623781-501
a Plan name	DEAN R WAGNER CO SOCA BENEFIT PLAN		
b Name of plan sponsor	DEAN R WAGNER CO	**c** EIN-PN	31-1526966-501
a Plan name	DEAN TURNER JEWELRY SOCA BENEFIT PLAN		
b Name of plan sponsor	DEAN TURNER JEWELRY	**c** EIN-PN	76-4867002-501
a Plan name	DEAN WHITAKER & CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	DEAN WHITAKER & CO.	**c** EIN-PN	31-1626386-501
a Plan name	DEANGELIS INSURANCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEANGELIS INSURANCE INC	**c** EIN-PN	20-5762592-501
a Plan name	DEANS FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	DEANS FUNERAL HOME	**c** EIN-PN	84-1768911-501

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	DECCO ALLOYS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DECCO ALLOYS INC	**c** EIN-PN	34-1634335-501
a Plan name	DECKER'S NURSERY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DECKERS NURSERY, INC.	**c** EIN-PN	31-1058922-501
a Plan name	DECORATIVE PAVING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DECORATIVE PAVING INC	**c** EIN-PN	36-3086458-501
a Plan name	DEECH MANAGEMENT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEECH MANAGEMENT, LLC	**c** EIN-PN	46-1678612-501
a Plan name	DEEPWOOD NORTH CO. LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEEPWOOD NORTH CO. LLC	**c** EIN-PN	24-9817192-501
a Plan name	DEER CREEK HONEY FARMS, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	DEER CREEK HONEY FARMS, LTD.	**c** EIN-PN	31-1562238-501
a Plan name	DEERFIELD NURSING CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	DEERFIELD NURSING CORP	**c** EIN-PN	31-1198105-501
a Plan name	DEFFET GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEFFET GROUP INC	**c** EIN-PN	31-1268478-501
a Plan name	DEFINITIVE MOTORWERK, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEFINITIVE MOTORWERK, LLC	**c** EIN-PN	87-4226957-501
a Plan name	DEFO LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DEFO LTD	**c** EIN-PN	26-0080217-501
a Plan name	DEIBEL MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	DEIBEL MANUFACTURING	**c** EIN-PN	86-1216070-501
a Plan name	DEIBLE'S HARDWOOD FLOORS SOCA BENEFIT PLAN		
b Name of plan sponsor	DEIBLES HARDWOOD FLOORS	**c** EIN-PN	31-1259179-501

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	DEJOHN FLYNN MYLOTT FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	DEJOHN FLYNN MYLOTT FUNERAL HOME	**c** EIN-PN	34-1527154-501
a Plan name	DELANEY & CO CPA SOCA BENEFIT PLAN		
b Name of plan sponsor	DELANEY & CO CPA	**c** EIN-PN	45-5255949-501
a Plan name	DELANO SHERLEY & ASSOC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELANO SHERLEY & ASSOC INC	**c** EIN-PN	31-0011000-501
a Plan name	DELAWARE AUTOMOTIVE SVC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELAWARE AUTOMOTIVE SVC	**c** EIN-PN	47-1986954-501
a Plan name	DELAWARE NW VET CLINIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELAWARE NW VET CLINIC LLC	**c** EIN-PN	85-1956540-501
a Plan name	DELAWARE OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELAWARE OHIO LLC	**c** EIN-PN	99-0840480-501
a Plan name	DELAWARE SPEECH AND HEARING SOCA BENEFIT PLAN		
b Name of plan sponsor	DELAWARE SPEECH AND HEARING	**c** EIN-PN	31-0739192-501
a Plan name	DEL-MOR DWELLINGS CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	DEL-MOR DWELLINGS CORP	**c** EIN-PN	31-1302382-501
a Plan name	DELPHOS FUEL AND TRUCK WASH SOCA BENEFIT PLAN		
b Name of plan sponsor	DELPHOS FUEL AND TRUCK WASH	**c** EIN-PN	05-0553521-501
a Plan name	DELPHOS MACHINE AND TOOL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELPHOS MACHINE AND TOOL INC	**c** EIN-PN	31-0622565-501
a Plan name	DELTA DIVERSIFIED SOCA BENEFIT PLAN		
b Name of plan sponsor	DELTA DIVERSIFIED	**c** EIN-PN	34-1293673-501
a Plan name	DELTA MFG INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DELTA MFG INC	**c** EIN-PN	65-0031333-501

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 TELECOM SOCA BENEFIT PLAN		
b Name of plan sponsor	DELTA TELECOM	**c** EIN-PN	20-4996085-501
a Plan name	DELUXE DOOR SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DELUXE DOOR SYSTEMS	**c** EIN-PN	20-1939263-501
a Plan name	DENISON AUTO PARTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DENISON AUTO PARTS INC	**c** EIN-PN	34-0930103-501
a Plan name	DENISSOFF ENTERPRISE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DENISSOFF ENTERPRISE LLC	**c** EIN-PN	56-2560433-501
a Plan name	DENNIS AND WILLIAMS CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	DENNIS AND WILLIAMS CO LPA	**c** EIN-PN	31-0833320-501
a Plan name	DENNIS BENTON DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	DENNIS BENTON DDS	**c** EIN-PN	34-1820826-501
a Plan name	DENTAL ASSOCIATES OF LANCASTER SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTAL ASSOCIATES OF LANCASTER	**c** EIN-PN	31-1012034-501
a Plan name	DENTAL ASSOCIATES OF WEST CHESTER SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTAL ASSOCIATES OF WEST CHESTER	**c** EIN-PN	31-1603769-501
a Plan name	DENTAL REFLECTIONS DUBLIN SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTAL REFLECTIONS DUBLIN	**c** EIN-PN	47-3836552-501
a Plan name	DENTAL SPECIALTIES W CHSTR SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTAL SPECIALTIES W CHSTR	**c** EIN-PN	27-2177356-501
a Plan name	DENTISTRY AT UNIV POINTE SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTISTRY AT UNIV POINTE	**c** EIN-PN	82-1731773-501
a Plan name	DENTISTRY AT WINBURY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DENTISTRY AT WINBURY INC	**c** EIN-PN	34-1201379-501

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	DENYO NORTH AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	DENYO NORTH AMERICA	**c** EIN-PN	20-3561054-501
a Plan name	DERMATOLOGY AND COSMETIC SURGERY OF DUBLIN SOCA BENEFIT PLAN		
b Name of plan sponsor	DERMATOLOGY AND COSMETIC SURGERY OF DUBLIN	**c** EIN-PN	20-5791445-502
a Plan name	DERMATOLOGY SPECIALISTS OF GREATER CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	DERMATOLOGY SPECIALISTS OF GREATER CINCINNATI	**c** EIN-PN	31-0821243-501
a Plan name	DERMWAREHOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	DERMWAREHOUSE	**c** EIN-PN	81-2014412-501
a Plan name	DESIGN & SOFTWARE INTL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN & SOFTWARE INTL INC	**c** EIN-PN	31-1435015-501
a Plan name	DESIGN BUILD ELECTRIC LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN BUILD ELECTRIC LTD	**c** EIN-PN	92-1020428-501
a Plan name	DESIGN HOUSE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN HOUSE INC	**c** EIN-PN	30-0623099-501
a Plan name	DESIGN IMPACT SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN IMPACT	**c** EIN-PN	26-4662578-501
a Plan name	DESIGN MOJO SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN MOJO	**c** EIN-PN	81-2046435-501
a Plan name	DESIGN RITE SPRINKLER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGN RITE SPRINKLER COMPANY	**c** EIN-PN	31-1721654-501
a Plan name	DESIGNLEVEL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DESIGNLEVEL LLC	**c** EIN-PN	27-3060873-501
a Plan name	DESKEY SOCA BENEFIT PLAN		
b Name of plan sponsor	DESKEY	**c** EIN-PN	13-1815548-502

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	DESTINATION TOLEDO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DESTINATION TOLEDO, INC.	**c** EIN-PN	34-1480959-501
a Plan name	DETAIL DESIGN STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	DETAIL DESIGN STUDIO	**c** EIN-PN	32-0447296-501
a Plan name	DETAILED MACHINING SOCA BENEFIT PLAN		
b Name of plan sponsor	DETAILED MACHINING	**c** EIN-PN	34-1937234-501
a Plan name	DETAILED STEEL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	DETAILED STEEL SOLUTIONS	**c** EIN-PN	84-2696084-501
a Plan name	DETILLION FENCE CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DETILLION FENCE CO INC	**c** EIN-PN	31-1467019-501
a Plan name	DEVCO OIL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEVCO OIL INC	**c** EIN-PN	31-0881889-501
a Plan name	DEVELOPMENT ARCHITECTECTURE COLLABORATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	DEVELOPMENT ARCHITECTECTURE COLLABORATIVE	**c** EIN-PN	85-2917375-501
a Plan name	DEVISH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEVISH INC	**c** EIN-PN	26-3121450-501
a Plan name	DEWEY FURNITURE & CARPET SOCA BENEFIT PLAN		
b Name of plan sponsor	DEWEY FURNITURE & CARPET	**c** EIN-PN	34-1193969-501
a Plan name	DEXTARA DIGITAL (USA) INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DEXTARA DIGITAL (USA) INC	**c** EIN-PN	87-0927012-501
a Plan name	DIABETES & ENDOCRINOLOGY ASSOCIATES OF STARK SOCA BENEFIT PLAN		
b Name of plan sponsor	DIABETES & ENDOCRINOLOGY ASSOCIATES OF STARK	**c** EIN-PN	34-1049612-502
a Plan name	DIAMOND EXCAVATION AND CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAMOND EXCAVATION AND CONCRETE	**c** EIN-PN	85-4381267-501

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	DIAMOND HEAVY HAUL SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAMOND HEAVY HAUL	**c** EIN-PN	31-1489855-501
a Plan name	DIAMOND ROOFING SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAMOND ROOFING SYSTEMS	**c** EIN-PN	46-2010388-503
a Plan name	DIAMOND TECH MACHINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAMOND TECH MACHINE LLC	**c** EIN-PN	34-1684446-501
a Plan name	DIAMOND TITLE COMPANY OF NORTH EAST OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAMOND TITLE COMPANY OF NORTH EAST OHIO	**c** EIN-PN	20-3690040-501
a Plan name	DIAPHARMA GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIAPHARMA GROUP INC	**c** EIN-PN	31-1482990-501
a Plan name	DICK ESSER PLUMBING AND HEATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DICK ESSER PLUMBING AND HEATING INC	**c** EIN-PN	34-1627990-501
a Plan name	DICK WILLS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	DICK WILLS CONSTRUCTION	**c** EIN-PN	34-1404913-501
a Plan name	DIE GUYS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DIE GUYS, INC.	**c** EIN-PN	34-1915480-501
a Plan name	DIETRICH VON HILDEBRAND LEGACY PROJECT SOCA BENEFIT PLAN		
b Name of plan sponsor	DIETRICH VON HILDEBRAND LEGACY PROJECT	**c** EIN-PN	59-3781326-501
a Plan name	DIGESTIVE ASSOCIATES OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	DIGESTIVE ASSOCIATES OF OHIO	**c** EIN-PN	27-2176440-501
a Plan name	DIGILUBE SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIGILUBE SYSTEMS INC	**c** EIN-PN	31-1283966-501
a Plan name	DIGITAL DATA COMMUNICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	DIGITAL DATA COMMUNICATION	**c** EIN-PN	34-1967253-501

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	DILLS DIRT WORK AND DEMOLITIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	DILLS DIRT WORK AND DEMOLITIONS	**c** EIN-PN	45-4594078-502
a Plan name	DIMENSIONTEK SOCA BENEFIT PLAN		
b Name of plan sponsor	DIMENSIONTEK	**c** EIN-PN	81-0725590-501
a Plan name	DIMICHAELANGELO FAMILY SOCA BENEFIT PLAN		
b Name of plan sponsor	DIMICHAELANGELO FAMILY	**c** EIN-PN	31-1579874-501
a Plan name	DINERGY FINANCIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DINERGY FINANCIAL LLC	**c** EIN-PN	81-5062589-501
a Plan name	DINO PIERGALLINI & SONS EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	DINO PIERGALLINI & SONS EQUIPMENT	**c** EIN-PN	46-2191522-501
a Plan name	DINSMORE COMPLIANCE SRVS SOCA BENEFIT PLAN		
b Name of plan sponsor	DINSMORE COMPLIANCE SRVS	**c** EIN-PN	81-3105755-501
a Plan name	DIPIETRO LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIPIETRO LANDSCAPING LLC	**c** EIN-PN	81-1157954-501
a Plan name	DIRECTIONAL TECH SOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	DIRECTIONAL TECH SOLUTION	**c** EIN-PN	46-0979422-501
a Plan name	DIRT WORX CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	DIRT WORX CONSULTING	**c** EIN-PN	82-4034658-501
a Plan name	DISCHEM, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DISCHEM, INC.	**c** EIN-PN	46-0623347-502
a Plan name	DISHES BY DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	DISHES BY DESIGN	**c** EIN-PN	20-8381896-501
a Plan name	DISNEY MCLANE AND ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DISNEY MCLANE AND ASSOCIATES INC	**c** EIN-PN	31-0621280-501

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	DISTINCT VETERINARY SOCA BENEFIT PLAN		
b Name of plan sponsor	DISTINCT VETERINARY	**c** EIN-PN	83-3370062-501
a Plan name	DISTINCTIVE CONCRETE DESIGNS SOCA BENEFIT PLAN		
b Name of plan sponsor	DISTINCTIVE CONCRETE DESIGNS	**c** EIN-PN	20-5963316-501
a Plan name	DISTINCTIVE INTEGRATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DISTINCTIVE INTEGRATIONS LLC	**c** EIN-PN	84-2303484-501
a Plan name	DITTY PRINTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DITTY PRINTING LLC	**c** EIN-PN	81-1996456-501
a Plan name	DIVER STEEL CTY AUTO CRUSH SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVER STEEL CTY AUTO CRUSH	**c** EIN-PN	34-1092822-501
a Plan name	DIVERSE BUSINESS SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSE BUSINESS SYSTEMS	**c** EIN-PN	65-1188980-501
a Plan name	DIVERSIFIED GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED GRAPHICS	**c** EIN-PN	34-1863513-501
a Plan name	DIVERSIFIED LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED LOGISTICS	**c** EIN-PN	46-1673805-503
a Plan name	DIVERSIFIED LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED LOGISTICS LLC	**c** EIN-PN	20-5858943-501
a Plan name	DIVERSIFIED MOVE AND STOR SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED MOVE AND STOR	**c** EIN-PN	83-1029632-501
a Plan name	DIVERSIPAK SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVERSIPAK	**c** EIN-PN	31-1761458-501
a Plan name	DIVTECH EQUIPMENT CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	DIVTECH EQUIPMENT CO.	**c** EIN-PN	31-1399801-501

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	DIXIE VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	DIXIE VETERINARY CLINIC	**c** EIN-PN	36-4611083-501
a Plan name	DJ KAT SOCA BENEFIT PLAN		
b Name of plan sponsor	DJ KAT	**c** EIN-PN	83-0753935-501
a Plan name	DJD & C DEVELOPMENT, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DJD & C DEVELOPMENT, INC	**c** EIN-PN	34-1810101-501
a Plan name	DK HEATING & SONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DK HEATING & SONS, INC.	**c** EIN-PN	34-1753031-501
a Plan name	DKC ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	DKC ADVISORS	**c** EIN-PN	82-4457883-501
a Plan name	DL LYONS AND COMPANY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DL LYONS AND COMPANY INC.	**c** EIN-PN	31-1574627-501
a Plan name	DL STEINER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DL STEINER INC	**c** EIN-PN	34-1574340-501
a Plan name	DLC ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	DLC ELECTRIC	**c** EIN-PN	31-1467513-501
a Plan name	DLV REALTY SOCA BENEFIT PLAN		
b Name of plan sponsor	DLV REALTY	**c** EIN-PN	83-3482472-501
a Plan name	DMTCO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DMTCO, LLC	**c** EIN-PN	27-0928734-501
a Plan name	DO CUT SALES AND SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	DO CUT SALES AND SERVICE	**c** EIN-PN	34-1449455-501
a Plan name	DOAN BROOK WATERSHED PART SOCA BENEFIT PLAN		
b Name of plan sponsor	DOAN BROOK WATERSHED PART	**c** EIN-PN	04-3636350-501

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	DOBAMA THEATRE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOBAMA THEATRE INC	**c** EIN-PN	34-0943782-501
a Plan name	DOCUMENT TECHNOLOGY SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	DOCUMENT TECHNOLOGY SYSTEM	**c** EIN-PN	34-1842075-501
a Plan name	DODDS HEATING AND COOLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DODDS HEATING AND COOLING LLC	**c** EIN-PN	88-2434566-501
a Plan name	DOG DAYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOG DAYS LLC	**c** EIN-PN	26-2106182-501
a Plan name	DOGTOWN CINCINNATI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOGTOWN CINCINNATI LLC	**c** EIN-PN	90-0522331-501
a Plan name	DOHNER LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DOHNER LTD	**c** EIN-PN	45-2126586-501
a Plan name	DOLBEY SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DOLBEY SYSTEMS	**c** EIN-PN	34-1758542-501
a Plan name	DOLLY PACKAGING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOLLY PACKAGING, LLC	**c** EIN-PN	45-2732298-501
a Plan name	DOMINION BROADCASTING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DOMINION BROADCASTING, INC.	**c** EIN-PN	34-1676969-501
a Plan name	DOMINION LIQUID TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	DOMINION LIQUID TECHNOLOGIES	**c** EIN-PN	27-0606316-501
a Plan name	DON BASCH JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	DON BASCH JEWELERS	**c** EIN-PN	34-1528528-501
a Plan name	DON QUIJOTE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DON QUIJOTE LLC	**c** EIN-PN	83-2403113-501

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	DON R MANN DVM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DON R MANN DVM INC	**c** EIN-PN	31-1102909-501
a Plan name	DONAHUE IDEAS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DONAHUE IDEAS LLC	**c** EIN-PN	06-1716807-501
a Plan name	DONALDSON PLASTIC SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	DONALDSON PLASTIC SURGERY	**c** EIN-PN	26-2414897-501
a Plan name	DONLEY CONCRETE CUTTING CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	DONLEY CONCRETE CUTTING CO.	**c** EIN-PN	31-1509075-502
a Plan name	DONLEY GUTTER COMPANY LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DONLEY GUTTER COMPANY LTD	**c** EIN-PN	31-1585696-501
a Plan name	DONNELL THOMAS LAW SOCA BENEFIT PLAN		
b Name of plan sponsor	DONNELL THOMAS LAW	**c** EIN-PN	82-5091610-501
a Plan name	DONOHOO ACCOUNTING SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	DONOHOO ACCOUNTING SERVICE	**c** EIN-PN	31-1557661-502
a Plan name	DONS AUTOMOTIVE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	DONS AUTOMOTIVE GROUP	**c** EIN-PN	34-1910095-501
a Plan name	DOOLEY SERVICE PRO SOCA BENEFIT PLAN		
b Name of plan sponsor	DOOLEY SERVICE PRO	**c** EIN-PN	20-8667302-501
a Plan name	DORAN ENTERPRISES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DORAN ENTERPRISES, INC.	**c** EIN-PN	31-1365166-501
a Plan name	DORSKY YUE INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	DORSKY YUE INTERNATIONAL	**c** EIN-PN	27-1532615-501
a Plan name	DOT DASH SOCA BENEFIT PLAN		
b Name of plan sponsor	DOT DASH	**c** EIN-PN	27-0595412-501

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	DOT THE I CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	DOT THE I CREATIVE	**c** EIN-PN	27-2821830-501
a Plan name	DOTNET TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	DOTNET TECHNOLOGIES	**c** EIN-PN	27-2758641-501
a Plan name	DOUBLE A TRAILER SALES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE A TRAILER SALES, INC	**c** EIN-PN	34-1244189-501
a Plan name	DOUBLE DIAMOND LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE DIAMOND LANDSCAPING	**c** EIN-PN	90-0588666-501
a Plan name	DOUBLE EIGHT FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE EIGHT FIRE PROTECTION	**c** EIN-PN	27-2371968-501
a Plan name	DOUBLE EIGHT SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE EIGHT SERVICES, INC.	**c** EIN-PN	87-1062301-501
a Plan name	DOUBLE ENTERPRISES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE ENTERPRISES LTD	**c** EIN-PN	54-2127630-502
a Plan name	DOUBLE S CHILI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUBLE S CHILI INC	**c** EIN-PN	83-0388298-501
a Plan name	DOUCET GERLING CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUCET GERLING CO LPA	**c** EIN-PN	36-4747940-501
a Plan name	DOUG DAVIDSON TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUG DAVIDSON TRUCKING LLC	**c** EIN-PN	90-1112611-501
a Plan name	DOUG GREINER TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUG GREINER TRUCKING LLC	**c** EIN-PN	56-2560208-501
a Plan name	DOUGH BOYZ PIZZERIA, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUGH BOYZ PIZZERIA, LLC	**c** EIN-PN	46-1595095-501

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	DOUGHERTY & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUGHERTY & ASSOCIATES	**c** EIN-PN	92-2517434-501
a Plan name	DOUGLAS A. EMERY AGENCY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DOUGLAS A. EMERY AGENCY, INC.	**c** EIN-PN	34-1620260-501
a Plan name	DOWNING CRANE AND INDUSTRIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	DOWNING CRANE AND INDUSTRIAL SERVICES	**c** EIN-PN	81-1652051-501
a Plan name	DOWNTOWN AKRON PARTNERSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN AKRON PARTNERSHIP	**c** EIN-PN	34-1823835-501
a Plan name	DOWNTOWN JEWELERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN JEWELERS INC	**c** EIN-PN	34-1932242-501
a Plan name	DOWNTOWN REDEVELOPMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN REDEVELOPMENT SERVICES	**c** EIN-PN	82-3433016-501
a Plan name	DOWSCO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DOWSCO, INC.	**c** EIN-PN	31-0800743-501
a Plan name	DOYLE COMMERCIAL REFRIG SOCA BENEFIT PLAN		
b Name of plan sponsor	DOYLE COMMERCIAL REFRIG	**c** EIN-PN	46-3550602-501
a Plan name	DR ANNA HOPKINS AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	DR ANNA HOPKINS AND ASSOCIATES	**c** EIN-PN	46-4385041-501
a Plan name	DR ANTHONY ADORNETTO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DR ANTHONY ADORNETTO INC	**c** EIN-PN	31-0823728-501
a Plan name	DR BRIAN SHORT DPM SOCA BENEFIT PLAN		
b Name of plan sponsor	DR BRIAN SHORT DPM	**c** EIN-PN	20-3030905-501
a Plan name	DR DONALD K ALLEN SOCA BENEFIT PLAN		
b Name of plan sponsor	DR DONALD K ALLEN	**c** EIN-PN	34-1816474-501

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	DR GRADING AND EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	DR GRADING AND EXCAVATING	**c** EIN-PN	31-1207445-501
a Plan name	DR MARIA S JAMIOLKOWSKI SOCA BENEFIT PLAN		
b Name of plan sponsor	DR MARIA S JAMIOLKOWSKI	**c** EIN-PN	31-1699500-501
a Plan name	DR SINGHS ANIMAL MED CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	DR SINGHS ANIMAL MED CTR	**c** EIN-PN	34-1963664-501
a Plan name	DR THOMAS G PETERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DR THOMAS G PETERS LLC	**c** EIN-PN	81-3567948-501
a Plan name	DR TONYA D LINDSELL SOCA BENEFIT PLAN		
b Name of plan sponsor	DR TONYA D LINDSELL	**c** EIN-PN	20-4421032-501
a Plan name	DR. JENNIFER BULLOCK ALLERGY AND ASTHMA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DR. JENNIFER BULLOCK ALLERGY AND ASTHMA LLC	**c** EIN-PN	84-2930990-501
a Plan name	DR. MATTHEW MALEY SOCA BENEFIT PLAN		
b Name of plan sponsor	DR. MATTHEW MALEY	**c** EIN-PN	20-5025213-501
a Plan name	DR. WARREN GASE, DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	DR. WARREN GASE, DDS	**c** EIN-PN	31-1679821-501
a Plan name	DRACOOL USA SOCA BENEFIT PLAN		
b Name of plan sponsor	DRACOOL USA	**c** EIN-PN	05-0525700-501
a Plan name	DRAKE INVESTMENT GROUP II SOCA BENEFIT PLAN		
b Name of plan sponsor	DRAKE INVESTMENT GROUP II	**c** EIN-PN	87-3331898-501
a Plan name	DRAWBRIDGE MARINA, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DRAWBRIDGE MARINA, INC.	**c** EIN-PN	34-1541821-501
a Plan name	DRAWING DEPT SOCA BENEFIT PLAN		
b Name of plan sponsor	DRAWING DEPT	**c** EIN-PN	20-4380734-501

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	DRC HOLDINGS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DRC HOLDINGS, INC.	**c** EIN-PN	20-3592271-501
a Plan name	DRD AUTO SPECIALTY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRD AUTO SPECIALTY INC	**c** EIN-PN	83-0349584-501
a Plan name	DREAM FAMILY DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DREAM FAMILY DENTAL LLC	**c** EIN-PN	82-5108085-501
a Plan name	DRESS FOR SUCCESS CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	DRESS FOR SUCCESS CINCINNATI	**c** EIN-PN	31-1640182-501
a Plan name	DRIEKAST PIPING CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	DRIEKAST PIPING CORP	**c** EIN-PN	31-1202047-501
a Plan name	DRINK MODERN TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	DRINK MODERN TECHNOLOGIES	**c** EIN-PN	88-4099530-501
a Plan name	DRIVE LINE 1 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRIVE LINE 1 INC	**c** EIN-PN	31-1353823-501
a Plan name	DRIVE MY WAY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DRIVE MY WAY INC.	**c** EIN-PN	81-3186692-501
a Plan name	DRM PRODUCTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRM PRODUCTIONS INC	**c** EIN-PN	34-1443822-501
a Plan name	DRODER & MILLER CO., LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	DRODER & MILLER CO., LPA	**c** EIN-PN	31-0800937-501
a Plan name	DRP ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRP ENTERPRISES LLC	**c** EIN-PN	47-4547518-501
a Plan name	DRS COOKE LANDON & GRUTZMACHER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRS COOKE LANDON & GRUTZMACHER INC	**c** EIN-PN	31-1112412-501

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	DRS PHIPPS LEVIN HEBEKA SOCA BENEFIT PLAN		
b Name of plan sponsor	DRS PHIPPS LEVIN HEBEKA	**c** EIN-PN	03-0425127-501
a Plan name	DRS ROBERT L AND CHRISTOPHER J HARTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRS ROBERT L AND CHRISTOPHER J HARTER INC	**c** EIN-PN	34-1793230-501
a Plan name	DRS. GORMAN, COLACO, FLYNN, THOMPSON, BURKE & ROME SOCA BENEFIT PLAN		
b Name of plan sponsor	DRS. GORMAN, COLACO, FLYNN, THOMPSON, BURKE & ROME	**c** EIN-PN	34-1051610-501
a Plan name	DRS. GROSS MALCMACHER THALER AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRS. GROSS MALCMACHER THALER AND ASSOCIATES LLC	**c** EIN-PN	27-5286742-501
a Plan name	DRUND LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	DRUND LTD	**c** EIN-PN	46-2109273-501
a Plan name	DRURY INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	DRURY INSURANCE	**c** EIN-PN	46-2379381-501
a Plan name	DRWDMD, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRWDMD, LLC	**c** EIN-PN	85-2625289-501
a Plan name	DRYDEN BUILDERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DRYDEN BUILDERS INC	**c** EIN-PN	31-0866862-501
a Plan name	DSA REPS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DSA REPS LLC	**c** EIN-PN	26-1826409-501
a Plan name	DSI ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	DSI ARCHITECTS	**c** EIN-PN	31-1448162-501
a Plan name	DT FASHION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DT FASHION LLC	**c** EIN-PN	20-8200945-501
a Plan name	DTH FINANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	DTH FINANCE	**c** EIN-PN	86-3922739-501

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	DTROY ROOFING & CONSTRUCT SOCA BENEFIT PLAN		
b Name of plan sponsor	DTROY ROOFING & CONSTRUCT	**c** EIN-PN	82-5217334-501
a Plan name	DU ALL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DU ALL SERVICES LLC	**c** EIN-PN	83-2319394-501
a Plan name	DU MOR TRANSPORTATION, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DU MOR TRANSPORTATION, INC	**c** EIN-PN	34-1647636-501
a Plan name	DUBLIN ARTS COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	DUBLIN ARTS COUNCIL	**c** EIN-PN	31-1101457-501
a Plan name	DUBLIN METRO DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	DUBLIN METRO DENTAL	**c** EIN-PN	26-2230920-501
a Plan name	DUBLIN SOCCER LEAGUE SOCA BENEFIT PLAN		
b Name of plan sponsor	DUBLIN SOCCER LEAGUE	**c** EIN-PN	34-1627690-501
a Plan name	DUBLIN TECHNICAL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	DUBLIN TECHNICAL SYSTEMS	**c** EIN-PN	31-1141339-501
a Plan name	DUFFEY CONCRETE CUTTING & DRILLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DUFFEY CONCRETE CUTTING & DRILLING LLC	**c** EIN-PN	92-1210809-501
a Plan name	DUKE 03 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DUKE 03 LLC	**c** EIN-PN	83-2153001-501
a Plan name	DUKET ARCHITECTS PLANNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	DUKET ARCHITECTS PLANNERS	**c** EIN-PN	34-1266920-501
a Plan name	DUNCAN TOOL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DUNCAN TOOL, INC.	**c** EIN-PN	31-1512998-501
a Plan name	DUNKLEY ENTERPRISES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DUNKLEY ENTERPRISES, INC	**c** EIN-PN	31-1467097-501

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	DUNLAP-DUPONT AND O'DONNELL INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	DUNLAP-DUPONT AND ODONNELL INSURANCE	**c** EIN-PN	34-0879017-501
a Plan name	DUNN & TAYLOR CPA SOCA BENEFIT PLAN		
b Name of plan sponsor	DUNN & TAYLOR CPA	**c** EIN-PN	47-2349540-501
a Plan name	DUNSON AND ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	DUNSON AND ASSOCIATES, INC.	**c** EIN-PN	31-1444608-501
a Plan name	DURALINE MEDICAL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	DURALINE MEDICAL PRODUCTS	**c** EIN-PN	36-4057006-501
a Plan name	DURATERRAIN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DURATERRAIN LLC	**c** EIN-PN	47-2342604-501
a Plan name	DUTCH HARBOR, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DUTCH HARBOR, INC	**c** EIN-PN	34-1152078-501
a Plan name	DVUV LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DVUV LLC	**c** EIN-PN	20-2617848-501
a Plan name	DWM ENTERPRISES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DWM ENTERPRISES, LLC	**c** EIN-PN	27-1549574-501
a Plan name	DWYER INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	DWYER INSURANCE AGENCY	**c** EIN-PN	31-1271156-501
a Plan name	DXR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	DXR LLC	**c** EIN-PN	92-2797355-501
a Plan name	DYNAMIC DESIGNS AND SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC DESIGNS AND SYSTEM	**c** EIN-PN	34-1358280-501
a Plan name	DYNAMIC HYDRAULIC SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC HYDRAULIC SERVICE	**c** EIN-PN	45-4472295-503

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	DYNAMIC PENSION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC PENSION SERVICES	**c** EIN-PN	31-1585572-501
a Plan name	DYNAMIC SIGN CO SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC SIGN CO	**c** EIN-PN	34-1805463-501
a Plan name	DYNAMIC WELD CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC WELD CORP	**c** EIN-PN	34-1343656-501
a Plan name	DYNATECH SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	DYNATECH SYSTEMS INC	**c** EIN-PN	31-1194842-501
a Plan name	E AND S TRAILER REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	E AND S TRAILER REPAIR	**c** EIN-PN	81-2918754-501
a Plan name	E C NURRE FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	E C NURRE FUNERAL HOME	**c** EIN-PN	31-0622919-501
a Plan name	E E WARD MOVING AND STORAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	E E WARD MOVING AND STORAGE	**c** EIN-PN	31-1758323-501
a Plan name	E F MURPHY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	E F MURPHY, INC.	**c** EIN-PN	31-1109407-501
a Plan name	E GORMAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	E GORMAN INC	**c** EIN-PN	31-1334928-501
a Plan name	E&J TRAILER SALES & SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	E&J TRAILER SALES & SERVICES, INC	**c** EIN-PN	31-0892616-501
a Plan name	E&M INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	E&M INTERIORS	**c** EIN-PN	83-2765948-501
a Plan name	E.R. BOLIANTZ CO., INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	E.R. BOLIANTZ CO., INC.	**c** EIN-PN	34-1540242-501

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	EA ENERGY SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EA ENERGY SOLUTIONS LLC	**c** EIN-PN	81-2634536-501
a Plan name	EACH PLUS EVERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EACH PLUS EVERY LLC	**c** EIN-PN	45-1576072-501
a Plan name	EAGLE COMPOSITES SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE COMPOSITES	**c** EIN-PN	83-1913376-501
a Plan name	EAGLE CREEK SWINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE CREEK SWINE LLC	**c** EIN-PN	31-1758623-501
a Plan name	EAGLE ENVIRONMENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE ENVIRONMENTAL	**c** EIN-PN	74-3251773-501
a Plan name	EAGLE FORCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE FORCE INC	**c** EIN-PN	20-1149347-502
a Plan name	EAGLE PRO HOME SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE PRO HOME SOLUTIONS	**c** EIN-PN	84-4164616-501
a Plan name	EAGLE SPECIALTY REMODELING SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE SPECIALTY REMODELING	**c** EIN-PN	31-1450278-501
a Plan name	EAGLE WEALTH ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE WEALTH ADVISORS LLC	**c** EIN-PN	85-3367383-501
a Plan name	EAGLE WINGS ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGLE WINGS ACADEMY	**c** EIN-PN	45-2611492-501
a Plan name	EAGON AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	EAGON AND ASSOCIATES	**c** EIN-PN	31-1152778-502
a Plan name	EARLY ENTRY PRO CUTTING SOCA BENEFIT PLAN		
b Name of plan sponsor	EARLY ENTRY PRO CUTTING	**c** EIN-PN	26-1487671-501

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	EARLY EXPRESS MAIL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	EARLY EXPRESS MAIL SERVICE	**c** EIN-PN	31-1040253-501
a Plan name	EARLY STEPS LEARNING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	EARLY STEPS LEARNING CENTER	**c** EIN-PN	34-1950188-501
a Plan name	EAST HILLS VET CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	EAST HILLS VET CLINIC	**c** EIN-PN	27-3763003-501
a Plan name	EAST OH LUMBER CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EAST OH LUMBER CO LLC	**c** EIN-PN	34-1690407-501
a Plan name	EASTERN HILLS INTERNAL MED SOCA BENEFIT PLAN		
b Name of plan sponsor	EASTERN HILLS INTERNAL MED	**c** EIN-PN	31-1410217-502
a Plan name	EASTSIDE STORAGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EASTSIDE STORAGE LLC	**c** EIN-PN	20-0410660-501
a Plan name	EASTWIND CAPITAL WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	EASTWIND CAPITAL WEALTH MANAGEMENT	**c** EIN-PN	51-0669595-501
a Plan name	EASY STREET TAVERNS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EASY STREET TAVERNS, INC.	**c** EIN-PN	34-1830374-501
a Plan name	EBCO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EBCO INC	**c** EIN-PN	34-1118421-501
a Plan name	EBCON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EBCON INC	**c** EIN-PN	31-0801863-501
a Plan name	EBRIGHT FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	EBRIGHT FUNERAL HOME	**c** EIN-PN	31-1790784-501
a Plan name	ECHELLE RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	ECHELLE RESOURCES	**c** EIN-PN	82-4713728-501

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	ECKELS VENTURES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ECKELS VENTURES LLC	**c** EIN-PN	84-3102578-501
a Plan name	ECKSTEIN ROOFING SOCA BENEFIT PLAN		
b Name of plan sponsor	ECKSTEIN ROOFING	**c** EIN-PN	31-0741608-501
a Plan name	ECLIPSE COMMUNITY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	ECLIPSE COMMUNITY MANAGEMENT	**c** EIN-PN	32-0604171-501
a Plan name	ECLIPSE WINDOW TINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ECLIPSE WINDOW TINTING	**c** EIN-PN	26-2600386-501
a Plan name	ECO APPLICATORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ECO APPLICATORS LLC	**c** EIN-PN	45-3660473-501
a Plan name	ECONOMOU AND FLOOD PC SOCA BENEFIT PLAN		
b Name of plan sponsor	ECONOMOU AND FLOOD PC	**c** EIN-PN	31-1120201-501
a Plan name	ECONOMY DRAIN SERVICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ECONOMY DRAIN SERVICE, LLC	**c** EIN-PN	34-1906570-501
a Plan name	ECONOMY SERVICE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ECONOMY SERVICE CENTER	**c** EIN-PN	88-2777496-501
a Plan name	ECOPAC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ECOPAC LLC	**c** EIN-PN	88-0724825-501
a Plan name	ECOROLL CORP. TOOL TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	ECOROLL CORP. TOOL TECH	**c** EIN-PN	06-1656861-501
a Plan name	ED BROERMAN HEATING AND COOLING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ED BROERMAN HEATING AND COOLING, INC	**c** EIN-PN	34-1677477-501
a Plan name	ED WILSON AND SON TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	ED WILSON AND SON TRUCKING	**c** EIN-PN	34-1519245-501

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	EDC GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDC GROUP INC	**c** EIN-PN	14-1902846-501
a Plan name	EDCO OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	EDCO OF OHIO	**c** EIN-PN	31-0844293-501
a Plan name	EDDYS BIKE SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	EDDYS BIKE SHOP	**c** EIN-PN	34-1520846-501
a Plan name	EDGE WEBWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	EDGE WEBWARE	**c** EIN-PN	20-8083706-501
a Plan name	EDGECITY HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	EDGECITY HOLDINGS	**c** EIN-PN	87-2597917-501
a Plan name	EDINGTON HEATING & COOLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDINGTON HEATING & COOLING INC	**c** EIN-PN	31-1410481-501
a Plan name	EDISON LNDSCP & DECK LIGHT SOCA BENEFIT PLAN		
b Name of plan sponsor	EDISON LNDSCP & DECK LIGHT	**c** EIN-PN	32-0482119-501
a Plan name	EDMILLIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDMILLIO LLC	**c** EIN-PN	26-0455672-501
a Plan name	EDNA HOUSE FOR WOMEN SOCA BENEFIT PLAN		
b Name of plan sponsor	EDNA HOUSE FOR WOMEN	**c** EIN-PN	14-1912872-501
a Plan name	EDUMIND INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDUMIND INC	**c** EIN-PN	16-1701427-501
a Plan name	EDUSOURCED SOCA BENEFIT PLAN		
b Name of plan sponsor	EDUSOURCED	**c** EIN-PN	45-4834227-501
a Plan name	EDWARD AXLINE TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARD AXLINE TRUCKING INC	**c** EIN-PN	87-2531896-501

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	EDWARD B. MUELLER SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARD B. MUELLER	**c** EIN-PN	31-0735068-501
a Plan name	EDWARD F WHIPPS & ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARD F WHIPPS & ASSOCIATES LLC	**c** EIN-PN	84-3223950-501
a Plan name	EDWARD KELLY & SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARD KELLY & SONS INC	**c** EIN-PN	34-0973770-502
a Plan name	EDWARDS FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARDS FAMILY DENTAL	**c** EIN-PN	20-2286934-501
a Plan name	EDWARDS PRESS SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWARDS PRESS SERVICE	**c** EIN-PN	83-2993189-501
a Plan name	EDWIN F. NICKOL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EDWIN F. NICKOL, INC.	**c** EIN-PN	34-4315635-501
a Plan name	EFFECTIVE LEADERSHIP ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	EFFECTIVE LEADERSHIP ACADEMY	**c** EIN-PN	26-3385437-501
a Plan name	EGBERT LIVESTOCK SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	EGBERT LIVESTOCK SERVICES	**c** EIN-PN	81-4282593-501
a Plan name	EGG WEALTH MANAGEMENT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EGG WEALTH MANAGEMENT, LLC	**c** EIN-PN	82-4483976-501
a Plan name	EGYPT VALLEY STONE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EGYPT VALLEY STONE, LLC	**c** EIN-PN	75-3237892-501
a Plan name	EGYPTICANA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EGYPTICANA LLC	**c** EIN-PN	33-3900411-501
a Plan name	EHS TECHNOLOGY GROUP, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EHS TECHNOLOGY GROUP, LLC.	**c** EIN-PN	31-1590201-501

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	EICK GLOBAL STEM ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	EICK GLOBAL STEM ACADEMY	**c** EIN-PN	83-4496513-501
a Plan name	EK COMPUTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	EK COMPUTERS	**c** EIN-PN	34-1864194-501
a Plan name	EKDRK ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EKDRK ENTERPRISES INC	**c** EIN-PN	34-1776902-502
a Plan name	ELASTICIT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELASTICIT, LLC	**c** EIN-PN	83-3588192-501
a Plan name	ELCOR OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELCOR OHIO LLC	**c** EIN-PN	47-2415639-501
a Plan name	ELDERCARE CONNECTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ELDERCARE CONNECTIONS	**c** EIN-PN	46-3205302-501
a Plan name	ELEANOR B RAINEY MEMORIAL INDUSTRIAL INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEANOR B RAINEY MEMORIAL INDUSTRIAL INSTITUTE	**c** EIN-PN	34-6555952-501
a Plan name	ELECTRIC EYE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRIC EYE AGENCY LLC	**c** EIN-PN	81-4285362-501
a Plan name	ELECTRIC QUILT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRIC QUILT COMPANY	**c** EIN-PN	31-1516199-501
a Plan name	ELECTRIC SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRIC SOLUTIONS INC	**c** EIN-PN	31-1371831-501
a Plan name	ELECTRICAL DESIGN AND SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRICAL DESIGN AND SERVICE	**c** EIN-PN	31-1106986-501
a Plan name	ELECTRIFY CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRIFY CONSTRUCTION LLC	**c** EIN-PN	87-1244163-501

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	ELECTRO POLISH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRO POLISH COMPANY	**c** EIN-PN	80-0208385-501
a Plan name	ELECTRONIC DESIGN TO MARKET, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTRONIC DESIGN TO MARKET, INC.	**c** EIN-PN	34-1752024-501
a Plan name	ELECTROSHIELD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELECTROSHIELD INC	**c** EIN-PN	31-0906487-501
a Plan name	ELEGANCE ON LOAN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEGANCE ON LOAN LLC	**c** EIN-PN	01-8449798-501
a Plan name	ELEGANT FARE CATERING SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEGANT FARE CATERING	**c** EIN-PN	85-2980521-501
a Plan name	ELEMENTS IV INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEMENTS IV INTERIORS	**c** EIN-PN	31-1307343-501
a Plan name	ELEVATED GROWTH OH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEVATED GROWTH OH LLC	**c** EIN-PN	87-3616908-501
a Plan name	ELEVATED TITLE SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELEVATED TITLE SOLUTIONS LLC	**c** EIN-PN	99-0846216-501
a Plan name	ELITE AUTO EXCHANGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE AUTO EXCHANGE	**c** EIN-PN	81-2856930-502
a Plan name	ELITE COLLEGIATE APPAREL SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE COLLEGIATE APPAREL	**c** EIN-PN	81-1642506-501
a Plan name	ELITE COMPUTERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE COMPUTERS INC	**c** EIN-PN	46-2102168-501
a Plan name	ELITE FIRE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE FIRE SERVICES	**c** EIN-PN	20-8907984-501

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	ELITE INTERMODEL AND TRAILER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE INTERMODEL AND TRAILER LLC	**c** EIN-PN	83-1568927-501
a Plan name	ELITE MEDIA TEAM SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE MEDIA TEAM	**c** EIN-PN	82-1332619-501
a Plan name	ELITE OUTDOOR SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE OUTDOOR SOLUTIONS	**c** EIN-PN	85-0781638-501
a Plan name	ELITE PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE PHARMACY	**c** EIN-PN	87-3541306-501
a Plan name	ELITE PHYSICAL THERAPY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELITE PHYSICAL THERAPY LLC	**c** EIN-PN	26-3420228-501
a Plan name	ELIZABETH L OSTERDAY DDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELIZABETH L OSTERDAY DDS LLC	**c** EIN-PN	47-4171799-501
a Plan name	ELK BUILDING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ELK BUILDING SERVICES	**c** EIN-PN	82-1282915-501
a Plan name	ELKLICK CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ELKLICK CONSTRUCTION	**c** EIN-PN	82-3167077-501
a Plan name	ELLIOTT AND BRADLEY PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	ELLIOTT AND BRADLEY PLUMBING	**c** EIN-PN	31-0948444-501
a Plan name	ELLIOTT CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	ELLIOTT CARE	**c** EIN-PN	20-0445753-501
a Plan name	ELLIS SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELLIS SERVICES LLC	**c** EIN-PN	27-0633341-501
a Plan name	ELMORE CONCERNED CHRISTIANS SOCA BENEFIT PLAN		
b Name of plan sponsor	ELMORE CONCERNED CHRISTIANS	**c** EIN-PN	34-1218624-501

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	ELMWOOD CONSULTING LLC GSV SOCA BENEFIT PLAN		
b Name of plan sponsor	ELMWOOD CONSULTING LLC GSV	**c** EIN-PN	47-3090547-501
a Plan name	ELSASS HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	ELSASS HEATING AND COOLING	**c** EIN-PN	34-1439236-501
a Plan name	ELTOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	ELTOOL	**c** EIN-PN	31-1419044-501
a Plan name	ELY ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELY ENTERPRISES INC	**c** EIN-PN	34-1336808-501
a Plan name	ELZY MILLING & TRADE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ELZY MILLING & TRADE INC	**c** EIN-PN	45-2491394-501
a Plan name	EMERALD EXPEDITED CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERALD EXPEDITED CORP	**c** EIN-PN	27-2508952-502
a Plan name	EMERALD GLEN TITLE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERALD GLEN TITLE AGENCY	**c** EIN-PN	74-3140076-501
a Plan name	EMERGE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGE INC	**c** EIN-PN	34-1841483-501
a Plan name	EMERGE MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGE MANUFACTURING	**c** EIN-PN	31-1718329-501
a Plan name	EMERGE RECOVERY AND TRADES INITIATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGE RECOVERY AND TRADES INITIATIVE	**c** EIN-PN	87-0848322-501
a Plan name	EMERGENCY BILLING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGENCY BILLING SERVICES	**c** EIN-PN	34-1892187-501
a Plan name	EMERGENCY PHYSICIANS GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGENCY PHYSICIANS GROUP	**c** EIN-PN	85-0819902-501

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	EMERGENCY PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGENCY PLUMBING	**c** EIN-PN	26-0440097-501
a Plan name	EMERGENT ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERGENT ENTERPRISES	**c** EIN-PN	47-4877117-501
a Plan name	EMERICK CROWN & BRIDGE LAB INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERICK CROWN & BRIDGE LAB INC	**c** EIN-PN	31-1118965-501
a Plan name	EMERSION DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERSION DESIGN	**c** EIN-PN	26-0495991-501
a Plan name	EMERY COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	EMERY COMMUNICATIONS	**c** EIN-PN	31-1334765-501
a Plan name	EMILY GIBSON LPCC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMILY GIBSON LPCC	**c** EIN-PN	26-9683958-501
a Plan name	EMITTI SOCA BENEFIT PLAN		
b Name of plan sponsor	EMITTI	**c** EIN-PN	35-2479316-501
a Plan name	EMMA SCHMIDT AND ASSOCIATE SOCA BENEFIT PLAN		
b Name of plan sponsor	EMMA SCHMIDT AND ASSOCIATE	**c** EIN-PN	82-2844886-501
a Plan name	EMPIRE SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPIRE SYSTEMS INC	**c** EIN-PN	11-3702195-501
a Plan name	EMPLOYEE BENEFIT MANAGEMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPLOYEE BENEFIT MANAGEMENT CORP	**c** EIN-PN	31-0747539-504
a Plan name	EMPLOYMENT SCREENING ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPLOYMENT SCREENING ASSOCIATION	**c** EIN-PN	31-1571972-501
a Plan name	EMPOWER DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPOWER DDS	**c** EIN-PN	84-2477158-501

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	EMPOWER HOLDING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPOWER HOLDING COMPANY LLC	**c** EIN-PN	92-1205865-501
a Plan name	EMPOWER PSYCHOLOGY WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPOWER PSYCHOLOGY WELLNESS	**c** EIN-PN	81-2670678-501
a Plan name	EMPOWER SPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPOWER SPORTS	**c** EIN-PN	20-4449014-501
a Plan name	EMPOWERING TO ELEVATE SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPOWERING TO ELEVATE	**c** EIN-PN	88-3459138-501
a Plan name	EMPYRA SOCA BENEFIT PLAN		
b Name of plan sponsor	EMPYRA	**c** EIN-PN	34-1764602-501
a Plan name	EMSHOFF EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EMSHOFF EXCAVATING INC	**c** EIN-PN	34-0939201-501
a Plan name	ENCOMPASS ENGINEERS ARCH SOCA BENEFIT PLAN		
b Name of plan sponsor	ENCOMPASS ENGINEERS ARCH	**c** EIN-PN	31-1778291-501
a Plan name	ENCORE 360 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENCORE 360 LLC	**c** EIN-PN	93-3179789-501
a Plan name	ENCORE DERMATOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	ENCORE DERMATOLOGY	**c** EIN-PN	27-2046629-501
a Plan name	ENDLESS SUMMER POOL AND SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	ENDLESS SUMMER POOL AND SPA	**c** EIN-PN	73-1674210-501
a Plan name	ENDURANCE INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	ENDURANCE INDUSTRIES	**c** EIN-PN	82-0801166-501
a Plan name	ENERGILITY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENERGILITY LLC	**c** EIN-PN	47-3955614-501

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	ENERGY EFFICIENT EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	ENERGY EFFICIENT EQUIPMENT	**c** EIN-PN	20-1180388-501
a Plan name	ENGAGE ANALYTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGAGE ANALYTICS LLC	**c** EIN-PN	84-4294223-501
a Plan name	ENGELS AUTO SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGELS AUTO SERVICE	**c** EIN-PN	31-0789587-501
a Plan name	ENGINE BRANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGINE BRANDS LLC	**c** EIN-PN	95-0718115-501
a Plan name	ENGINEERED SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGINEERED SYSTEMS	**c** EIN-PN	31-1451710-501
a Plan name	ENGINEERED VISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGINEERED VISION INC	**c** EIN-PN	82-0962787-501
a Plan name	ENGLENDER SPER DRASNIN MD SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGLENDER SPER DRASNIN MD	**c** EIN-PN	31-0843308-501
a Plan name	ENGLEWOOD GLASS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENGLEWOOD GLASS, INC	**c** EIN-PN	31-0918617-501
a Plan name	ENTERPRISE ROOFING & SHEET METAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ENTERPRISE ROOFING & SHEET METAL	**c** EIN-PN	31-0569979-501
a Plan name	ENTING WATER CONDITIONING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENTING WATER CONDITIONING, INC	**c** EIN-PN	31-0709601-501
a Plan name	ENTREPRENEURIAL LEARNING SOCA BENEFIT PLAN		
b Name of plan sponsor	ENTREPRENEURIAL LEARNING	**c** EIN-PN	47-3015607-501
a Plan name	ENTROAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENTROAIR LLC	**c** EIN-PN	46-0633015-501

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	ENVELOPE MART OF N.E. OHIO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVELOPE MART OF N.E. OHIO INC	**c** EIN-PN	34-1459134-501
a Plan name	ENVIRO CONTROL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRO CONTROL SYSTEMS	**c** EIN-PN	65-1214212-501
a Plan name	ENVIRO MECHANICAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRO MECHANICAL SERVICES LLC	**c** EIN-PN	47-2497006-501
a Plan name	ENVIROCAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIROCAL INC	**c** EIN-PN	31-1685967-501
a Plan name	ENVIRONMENTAL AND SAFETY SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRONMENTAL AND SAFETY	**c** EIN-PN	01-0679319-501
a Plan name	ENVIRONMENTAL COMFORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRONMENTAL COMFORT LLC	**c** EIN-PN	52-2179737-501
a Plan name	ENVIRONMENTAL CONTROLS FIRE PROTECTION, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRONMENTAL CONTROLS FIRE PROTECTION, INC	**c** EIN-PN	34-1967424-501
a Plan name	ENVIRONMENTAL TRENCHING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ENVIRONMENTAL TRENCHING INC	**c** EIN-PN	26-2540737-501
a Plan name	EPIC FINANCIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EPIC FINANCIAL LLC	**c** EIN-PN	46-3728877-501
a Plan name	EPIC HOMES GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EPIC HOMES GROUP, LLC	**c** EIN-PN	85-3216937-501
a Plan name	EPICUREAN PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EPICUREAN PROPERTIES LLC	**c** EIN-PN	84-2883693-501
a Plan name	EPIPHEO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EPIPHEO, INC.	**c** EIN-PN	26-4253856-501

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	EPLING ESTATES SOCA BENEFIT PLAN		
b Name of plan sponsor	EPLING ESTATES	**c** EIN-PN	45-3971638-501
a Plan name	EQUINE AFFAIRE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EQUINE AFFAIRE INC	**c** EIN-PN	31-1374010-501
a Plan name	EQUIP MARKETING GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EQUIP MARKETING GROUP, LLC	**c** EIN-PN	93-2748745-501
a Plan name	EQUIPMENT MFR INTL SOCA BENEFIT PLAN		
b Name of plan sponsor	EQUIPMENT MFR INTL	**c** EIN-PN	34-1354742-501
a Plan name	EQUIPPED RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	EQUIPPED RENTALS	**c** EIN-PN	87-2332240-501
a Plan name	EQUIVA PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	EQUIVA PARTNERS	**c** EIN-PN	82-1682181-501
a Plan name	ERIC DOES DATA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIC DOES DATA LLC	**c** EIN-PN	85-0734956-501
a Plan name	ERIE COPPER WORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIE COPPER WORKS INC	**c** EIN-PN	99-3040696-501
a Plan name	ERIE OTTAWA REG AIRPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIE OTTAWA REG AIRPORT	**c** EIN-PN	34-1381673-501
a Plan name	ERIE VU MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIE VU MAINTENANCE	**c** EIN-PN	34-1025572-501
a Plan name	ERIEVIEW METAL TREATING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIEVIEW METAL TREATING CO	**c** EIN-PN	34-0892222-501
a Plan name	ERIEVIEW TITLE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ERIEVIEW TITLE AGENCY LLC	**c** EIN-PN	20-5453833-501

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	ERNST AND NGUYEN SOCA BENEFIT PLAN		
b Name of plan sponsor	ERNST AND NGUYEN	**c** EIN-PN	26-2909805-501
a Plan name	ERWIN CHRYSLER DODGE JEEP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ERWIN CHRYSLER DODGE JEEP INC	**c** EIN-PN	31-0620590-501
a Plan name	ES CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ES CONSULTING	**c** EIN-PN	34-1966842-501
a Plan name	ESCO CONTRACTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESCO CONTRACTORS LLC	**c** EIN-PN	82-3694713-501
a Plan name	ESCOTT AND COMPANY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESCOTT AND COMPANY, LLC	**c** EIN-PN	30-0220579-501
a Plan name	ESHBAUGH INSURANCE SVC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESHBAUGH INSURANCE SVC LLC	**c** EIN-PN	27-3210576-501
a Plan name	ESHELMAN LAW CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESHELMAN LAW CO LLC	**c** EIN-PN	20-5387930-501
a Plan name	ESOTERIC FINE AUTO SOCA BENEFIT PLAN		
b Name of plan sponsor	ESOTERIC FINE AUTO	**c** EIN-PN	82-3007307-501
a Plan name	ESP ELECTRICAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ESP ELECTRICAL CONTRACTING	**c** EIN-PN	20-2738058-501
a Plan name	ESPER COUNSELING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESPER COUNSELING, LLC	**c** EIN-PN	46-5381392-501
a Plan name	ESPORTS FOUNDRY SOCA BENEFIT PLAN		
b Name of plan sponsor	ESPORTS FOUNDRY	**c** EIN-PN	84-1884879-503
a Plan name	ESPORTS GEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	ESPORTS GEAR	**c** EIN-PN	84-3691123-501

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	ESS EQUIPMENT SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	ESS EQUIPMENT SALES	**c** EIN-PN	20-4870622-501
a Plan name	ESSENTIAL LANDSCAPING AND IRRIGATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ESSENTIAL LANDSCAPING AND IRRIGATION	**c** EIN-PN	26-3773910-501
a Plan name	ESSIX RESOURCES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESSIX RESOURCES INC	**c** EIN-PN	34-1742150-501
a Plan name	ESTES MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	ESTES MACHINE	**c** EIN-PN	31-1191340-501
a Plan name	ESTHETIC DIGITAL DENTAL LAB LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ESTHETIC DIGITAL DENTAL LAB LLC	**c** EIN-PN	85-3184943-501
a Plan name	ETC TECHSOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ETC TECHSOLUTIONS	**c** EIN-PN	26-1105657-501
a Plan name	ETCH SOCA BENEFIT PLAN		
b Name of plan sponsor	ETCH	**c** EIN-PN	83-1307316-501
a Plan name	ETL INNOVATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ETL INNOVATIONS	**c** EIN-PN	92-1860219-501
a Plan name	EUCLID FISH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	EUCLID FISH COMPANY	**c** EIN-PN	34-0810993-501
a Plan name	EUCLID SPRING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	EUCLID SPRING COMPANY	**c** EIN-PN	34-0771311-502
a Plan name	EUROPEAN AUTO SPECIALIST LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	EUROPEAN AUTO SPECIALIST LTD	**c** EIN-PN	20-0066475-501
a Plan name	EVANS CATTLE CO, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVANS CATTLE CO, INC	**c** EIN-PN	80-0808751-501

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	EVANS ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	EVANS ENGINEERING	**c** EIN-PN	81-0581371-501
a Plan name	EVANS VET SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVANS VET SERVICES LLC	**c** EIN-PN	84-4621960-501
a Plan name	EVE ENERGY NORTH AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	EVE ENERGY NORTH AMERICA	**c** EIN-PN	37-1888955-501
a Plan name	EVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVE INC	**c** EIN-PN	31-0972235-501
a Plan name	EVENBAY REAL ESTATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVENBAY REAL ESTATE LLC	**c** EIN-PN	47-2110368-501
a Plan name	EVENT 38 UNMANNED SYSTEMS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EVENT 38 UNMANNED SYSTEMS, INC.	**c** EIN-PN	46-1969429-501
a Plan name	EVENT MARKETING STRATEGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVENT MARKETING STRATEGIES INC	**c** EIN-PN	31-1351279-501
a Plan name	EVER FRESH DESIGN CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	EVER FRESH DESIGN CO.	**c** EIN-PN	20-2603679-501
a Plan name	EVERARBOR COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERARBOR COMPANY	**c** EIN-PN	47-5473666-501
a Plan name	EVERBRITE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERBRITE INC	**c** EIN-PN	34-1821630-501
a Plan name	EVERCLEAR OF OHIO LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERCLEAR OF OHIO LTD	**c** EIN-PN	34-1830523-501
a Plan name	EVERETT INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERETT INDUSTRIES LLC	**c** EIN-PN	82-2643196-502

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	EVERETTS FAMILY FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERETTS FAMILY FARM	**c** EIN-PN	46-1357837-501
a Plan name	EVERFLOW EASTERN INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERFLOW EASTERN INC.	**c** EIN-PN	16-1120624-501
a Plan name	EVERGREEN LAKE PARK SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERGREEN LAKE PARK	**c** EIN-PN	43-2072026-501
a Plan name	EVERGREEN VETERINARY HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERGREEN VETERINARY HOSPITAL	**c** EIN-PN	86-3650117-501
a Plan name	EVERJ ENGINEERING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERJ ENGINEERING INC	**c** EIN-PN	87-1091646-501
a Plan name	EVERMORE FINANCIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERMORE FINANCIAL SERVICES	**c** EIN-PN	81-4062065-501
a Plan name	EVERSCAPES LAWN & LANDSCAP SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERSCAPES LAWN & LANDSCAP	**c** EIN-PN	90-0958967-501
a Plan name	EVERTZ TECHNOLOGY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERTZ TECHNOLOGY SERVICES	**c** EIN-PN	04-3694118-501
a Plan name	EVERWILD SPIRITS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVERWILD SPIRITS, LLC	**c** EIN-PN	85-1589189-501
a Plan name	EVO ECO SOCA BENEFIT PLAN		
b Name of plan sponsor	EVO ECO	**c** EIN-PN	83-4205098-501
a Plan name	EVOLO DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	EVOLO DESIGN	**c** EIN-PN	20-0097651-501
a Plan name	EVOLVD CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EVOLVD CONSULTING LLC	**c** EIN-PN	93-3398306-501

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	EVOLVE AUTO SOCA BENEFIT PLAN		
b Name of plan sponsor	EVOLVE AUTO	**c** EIN-PN	92-0694244-501
a Plan name	EVUNITED SOCA BENEFIT PLAN		
b Name of plan sponsor	EVUNITED	**c** EIN-PN	83-3249924-501
a Plan name	EWERS UTILITY SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	EWERS UTILITY SERVICE	**c** EIN-PN	56-2668978-501
a Plan name	EWH SPECTRUM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EWH SPECTRUM LLC	**c** EIN-PN	76-0821249-501
a Plan name	EWING FLOOR MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	EWING FLOOR MAINTENANCE	**c** EIN-PN	31-1049397-501
a Plan name	EX CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	EX CONSTRUCTION SERVICES	**c** EIN-PN	26-2771697-502
a Plan name	EXCEL FABRIC CARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCEL FABRIC CARE LLC	**c** EIN-PN	26-2366452-501
a Plan name	EXCEL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCEL MANAGEMENT	**c** EIN-PN	84-4063220-501
a Plan name	EXCEL SUPPLEMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCEL SUPPLEMENTS LLC	**c** EIN-PN	47-3053711-501
a Plan name	EXCELSIOR ACCOUNTING SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCELSIOR ACCOUNTING SERVICES LLC	**c** EIN-PN	83-1681712-501
a Plan name	EXCITING TECHNOLOGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCITING TECHNOLOGY LLC	**c** EIN-PN	35-2338907-501
a Plan name	EXCLUSIVE TRAVEL PARTNERS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXCLUSIVE TRAVEL PARTNERS, LLC	**c** EIN-PN	20-2096926-501

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	EXECUTIVE IMAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	EXECUTIVE IMAGING	**c** EIN-PN	85-2050240-501
a Plan name	EXECUTIVE SECURITY SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	EXECUTIVE SECURITY SYSTEMS	**c** EIN-PN	37-1469141-501
a Plan name	EXECUTIVE STAFFING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	EXECUTIVE STAFFING SOLUTIONS	**c** EIN-PN	31-1735319-502
a Plan name	EXLINE SURVEYING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXLINE SURVEYING INC	**c** EIN-PN	31-1445073-503
a Plan name	EXOTIC SPORT PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXOTIC SPORT PRODUCTS INC	**c** EIN-PN	20-2631633-501
a Plan name	EXPERT SERVICE EXTERMINATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	EXPERT SERVICE EXTERMINATING INC	**c** EIN-PN	34-1368206-501
a Plan name	EYE CARE ON THE SQUARE SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE CARE ON THE SQUARE	**c** EIN-PN	46-1398192-501
a Plan name	EYE CARE OPTICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE CARE OPTICAL	**c** EIN-PN	31-1139539-501
a Plan name	EYE CENTERS OF NORTHWEST OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE CENTERS OF NORTHWEST OHIO	**c** EIN-PN	26-3012395-501
a Plan name	EYE DOCTORS OF MADISON, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE DOCTORS OF MADISON, LLC	**c** EIN-PN	27-0273382-501
a Plan name	EYE PHYSICIANS OF SPRINGFIELD SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE PHYSICIANS OF SPRINGFIELD	**c** EIN-PN	31-1011030-501
a Plan name	EYE SURGERY CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	EYE SURGERY CONSULTANTS	**c** EIN-PN	31-1488841-501

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	EYEMG.COM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EYEMG.COM LLC	**c** EIN-PN	20-2900317-501
a Plan name	EYES ON CHAGRIN SOCA BENEFIT PLAN		
b Name of plan sponsor	EYES ON CHAGRIN	**c** EIN-PN	45-5503018-501
a Plan name	EZ PAY BUILDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	EZ PAY BUILDINGS LLC	**c** EIN-PN	20-2434965-501
a Plan name	F & F MECHANICAL AND MATERIAL HANDLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	F & F MECHANICAL AND MATERIAL HANDLING LLC	**c** EIN-PN	93-1640377-501
a Plan name	F & W PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	F & W PROPERTIES	**c** EIN-PN	31-1440049-502
a Plan name	F LEO GROFF INC SOCA BENEFIT PLAN		
b Name of plan sponsor	F LEO GROFF INC	**c** EIN-PN	34-1027785-501
a Plan name	F.A. INTEGRATION SOCA BENEFIT PLAN		
b Name of plan sponsor	F.A. INTEGRATION	**c** EIN-PN	34-1851863-501
a Plan name	F1RST REALTY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	F1RST REALTY GROUP	**c** EIN-PN	20-4835513-501
a Plan name	F5 DESIGN/ARCHITECTURE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	F5 DESIGN/ARCHITECTURE INC	**c** EIN-PN	27-0000512-501
a Plan name	FABX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FABX LLC	**c** EIN-PN	85-3345927-501
a Plan name	FACADE GAMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FACADE GAMES LLC	**c** EIN-PN	47-4816110-501
a Plan name	FACKLER COUNTRY GARDENS SOCA BENEFIT PLAN		
b Name of plan sponsor	FACKLER COUNTRY GARDENS	**c** EIN-PN	31-1286436-501

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	FACKLER MONUMENT CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FACKLER MONUMENT CO INC	**c** EIN-PN	34-1788457-501
a Plan name	FACTEUR PR SOCA BENEFIT PLAN		
b Name of plan sponsor	FACTEUR PR	**c** EIN-PN	81-2602690-501
a Plan name	FACTS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FACTS INC.	**c** EIN-PN	34-1693974-501
a Plan name	FAGGIONATO INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAGGIONATO INSURANCE AGENCY INC	**c** EIN-PN	82-0902286-501
a Plan name	FAHLGREN RESTAURANT CONCEPTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAHLGREN RESTAURANT CONCEPTS LLC	**c** EIN-PN	83-2234860-501
a Plan name	FAIRFIELD AREA HUMANE SOC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAIRFIELD AREA HUMANE SOC	**c** EIN-PN	31-0952036-501
a Plan name	FAIRFIELD COUNTY FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	FAIRFIELD COUNTY FOUNDATION	**c** EIN-PN	34-1623983-501
a Plan name	FAIRFIELD FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	FAIRFIELD FAMILY DENTISTRY	**c** EIN-PN	92-2933689-501
a Plan name	FAIRLAWN DERMATOLOGY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAIRLAWN DERMATOLOGY, LLC	**c** EIN-PN	20-2865529-501
a Plan name	FAIRWHAY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	FAIRWHAY MANAGEMENT	**c** EIN-PN	45-1870777-501
a Plan name	FAISAL QUERESHY MD DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAISAL QUERESHY MD DDS INC	**c** EIN-PN	03-0383504-501
a Plan name	FALCON PHARMACY INVESTMENTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FALCON PHARMACY INVESTMENTS, LLC	**c** EIN-PN	81-2624457-501

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	FALL & STEBBINS AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	FALL & STEBBINS AUTOMOTIVE	**c** EIN-PN	34-1624099-501
a Plan name	FALLS FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	FALLS FAMILY DENTAL	**c** EIN-PN	34-1653947-501
a Plan name	FALLS ORAL SURGERY AND DENTAL IMPLANT CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	FALLS ORAL SURGERY AND DENTAL IMPLANT CENTER	**c** EIN-PN	34-1044046-502
a Plan name	FALLS RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	FALLS RECYCLING	**c** EIN-PN	26-0705901-501
a Plan name	FAMILY DENTISTRY ON THE SQUARE SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY DENTISTRY ON THE SQUARE	**c** EIN-PN	34-1290664-501
a Plan name	FAMILY ENTERTAINMENT HOLDINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY ENTERTAINMENT HOLDINGS, LLC	**c** EIN-PN	46-0091218-501
a Plan name	FAMILY HEAR AND BAL CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY HEAR AND BAL CENTER	**c** EIN-PN	31-1534810-501
a Plan name	FAMILY PRIDE OF NE OH SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY PRIDE OF NE OH	**c** EIN-PN	56-2412832-501
a Plan name	FAMILY SERVICES ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY SERVICES ASSOCIATION	**c** EIN-PN	31-0561485-501
a Plan name	FAMILY WALGREEN DRUG INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAMILY WALGREEN DRUG INC	**c** EIN-PN	34-1119630-501
a Plan name	FAR MOTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FAR MOTORS LLC	**c** EIN-PN	81-0945815-501
a Plan name	FARENHEIT 422 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FARENHEIT 422 LLC	**c** EIN-PN	97-1790487-501

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	FARINACCI PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	FARINACCI PIZZA	**c** EIN-PN	31-1498680-501
a Plan name	FARIS PLANNING AND DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FARIS PLANNING AND DESIGN LLC	**c** EIN-PN	01-0607632-501
a Plan name	FARM AND HOME HARDWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	FARM AND HOME HARDWARE	**c** EIN-PN	20-3878707-501
a Plan name	FARMERS AND MERCHANTS BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	FARMERS AND MERCHANTS BANK	**c** EIN-PN	31-1038216-501
a Plan name	FARRELLS LAWN AND GARDEN SOCA BENEFIT PLAN		
b Name of plan sponsor	FARRELLS LAWN AND GARDEN	**c** EIN-PN	26-1323590-501
a Plan name	FARUKI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FARUKI LLC	**c** EIN-PN	31-1278601-501
a Plan name	FASSCO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FASSCO INC	**c** EIN-PN	34-1333054-502
a Plan name	FAST SWITCH SOCA BENEFIT PLAN		
b Name of plan sponsor	FAST SWITCH	**c** EIN-PN	31-1486797-501
a Plan name	FAST TRAK CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	FAST TRAK CONSTRUCTION SERVICES	**c** EIN-PN	93-4024792-501
a Plan name	FASTEN PRO ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FASTEN PRO ROOFING INC	**c** EIN-PN	20-0396975-501
a Plan name	FASTRACK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FASTRACK LLC	**c** EIN-PN	35-2193751-501
a Plan name	FATHOM GEOPHYSICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FATHOM GEOPHYSICS LLC	**c** EIN-PN	26-1987258-501

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	FAYETTE VET HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	FAYETTE VET HOSPITAL	**c** EIN-PN	31-1162759-501
a Plan name	FAZIO COLOR SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	FAZIO COLOR SHOP	**c** EIN-PN	31-1813350-501
a Plan name	FB WRIGHT COMPANY OF CINCI SOCA BENEFIT PLAN		
b Name of plan sponsor	FB WRIGHT COMPANY OF CINCI	**c** EIN-PN	31-0782655-501
a Plan name	FBR INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	FBR INDUSTRIES	**c** EIN-PN	46-4274340-501
a Plan name	FD MACHINERY SOCA BENEFIT PLAN		
b Name of plan sponsor	FD MACHINERY	**c** EIN-PN	47-4056117-501
a Plan name	FEC HELIPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FEC HELIPORTS LLC	**c** EIN-PN	26-3741643-501
a Plan name	FECHTOR ADVERTISING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FECHTOR ADVERTISING LLC	**c** EIN-PN	02-0669261-501
a Plan name	FEDERAL AEROSPACE INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	FEDERAL AEROSPACE INSTITUTE	**c** EIN-PN	83-3785411-501
a Plan name	FEDERAL CARD SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	FEDERAL CARD SERVICES	**c** EIN-PN	46-5220499-501
a Plan name	FELLO ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	FELLO ELECTRIC	**c** EIN-PN	92-1229627-501
a Plan name	FELLOWSHIP OF PRAISE SOCA BENEFIT PLAN		
b Name of plan sponsor	FELLOWSHIP OF PRAISE	**c** EIN-PN	26-0034032-501
a Plan name	FELUX SOCA BENEFIT PLAN		
b Name of plan sponsor	FELUX	**c** EIN-PN	83-1489632-501

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	FENESTRATION EQUIPMENT SALES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FENESTRATION EQUIPMENT SALES LLC	**c** EIN-PN	26-1147532-501
a Plan name	FENIX FABRICATION INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FENIX FABRICATION INC.	**c** EIN-PN	26-1628738-501
a Plan name	FENIXPYRE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FENIXPYRE INC	**c** EIN-PN	83-2026131-501
a Plan name	FENTON RIGGING SOCA BENEFIT PLAN		
b Name of plan sponsor	FENTON RIGGING	**c** EIN-PN	31-0624074-501
a Plan name	FERSA-NKE BEARINGS NORTH SOCA BENEFIT PLAN		
b Name of plan sponsor	FERSA-NKE BEARINGS NORTH	**c** EIN-PN	47-1712716-501
a Plan name	FES FIRE AND SECURITY SOCA BENEFIT PLAN		
b Name of plan sponsor	FES FIRE AND SECURITY	**c** EIN-PN	45-2735848-501
a Plan name	FESTIVALS UNLIMITED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FESTIVALS UNLIMITED LLC	**c** EIN-PN	27-0462670-501
a Plan name	FETTER & SONS FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FETTER & SONS FARMS LLC	**c** EIN-PN	31-4422931-501
a Plan name	FETTER BROTHERS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	FETTER BROTHERS CONSTRUCTION	**c** EIN-PN	20-2246790-501
a Plan name	FIDATO WEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIDATO WEALTH LLC	**c** EIN-PN	26-3899181-501
a Plan name	FIDELITY BUILDERS SUPPLY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FIDELITY BUILDERS SUPPLY, INC.	**c** EIN-PN	34-4477025-502
a Plan name	FIDELITY LAWYERS TITLE AGENCY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIDELITY LAWYERS TITLE AGENCY, LLC	**c** EIN-PN	20-0550261-501

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	FIDES COMMUNICATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIDES COMMUNICATION LLC	**c** EIN-PN	85-2599196-501
a Plan name	FIERCE CREATIVE SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIERCE CREATIVE SOLUTIONS LLC	**c** EIN-PN	86-3105829-501
a Plan name	FIERON GROWTH PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	FIERON GROWTH PARTNERS	**c** EIN-PN	92-0534118-501
a Plan name	FIFE SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIFE SERVICES LLC	**c** EIN-PN	46-2952390-501
a Plan name	FIFTH ELEMENT MACHINE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIFTH ELEMENT MACHINE, LLC	**c** EIN-PN	27-1934736-501
a Plan name	FIKE ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	FIKE ADVISORS	**c** EIN-PN	27-2886029-501
a Plan name	FINAL TOUCH CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	FINAL TOUCH CONSTRUCTION	**c** EIN-PN	34-1814488-501
a Plan name	FINANCIAL ACHIEVEMENT SERVICES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL ACHIEVEMENT SERVICES INC.	**c** EIN-PN	31-1257937-501
a Plan name	FINANCIAL ADVISORS RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL ADVISORS RESOURCES	**c** EIN-PN	31-1624008-501
a Plan name	FINANCIAL FREEDOM, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL FREEDOM, LLC	**c** EIN-PN	32-0040202-501
a Plan name	FINANCIAL ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL ONE	**c** EIN-PN	31-1481059-501
a Plan name	FINANCIAL TECH RECRUITING SOCA BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL TECH RECRUITING	**c** EIN-PN	27-1701048-501

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	FINDLAY AMERICAN PROSTHETIC SOCA BENEFIT PLAN		
b Name of plan sponsor	FINDLAY AMERICAN PROSTHETIC	**c** EIN-PN	31-0865466-501
a Plan name	FINDLAY PLUMBING AND HEATING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FINDLAY PLUMBING AND HEATING INC.	**c** EIN-PN	34-1616748-501
a Plan name	FINELLI ORNAMENTAL IRON SOCA BENEFIT PLAN		
b Name of plan sponsor	FINELLI ORNAMENTAL IRON	**c** EIN-PN	34-0971421-501
a Plan name	FINKELMAN REAL ESTATE SOCA BENEFIT PLAN		
b Name of plan sponsor	FINKELMAN REAL ESTATE	**c** EIN-PN	31-0515030-501
a Plan name	FINTECH LAW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FINTECH LAW LLC	**c** EIN-PN	83-0681638-501
a Plan name	FIRE APPARATUS SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRE APPARATUS SERVICE	**c** EIN-PN	31-1661033-501
a Plan name	FIRE FOE CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRE FOE CORPORATION	**c** EIN-PN	34-1257202-501
a Plan name	FIRE FORCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRE FORCE INC	**c** EIN-PN	25-1463108-501
a Plan name	FIREFIGHTER SAFE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIREFIGHTER SAFE, LLC	**c** EIN-PN	45-5222162-501
a Plan name	FIREHOUSE INSURANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIREHOUSE INSURANCE LLC	**c** EIN-PN	84-4268967-501
a Plan name	FIREHOUSE PITMASTERS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	FIREHOUSE PITMASTERS LTD	**c** EIN-PN	27-2918998-501
a Plan name	FIRELANDS SYMPHONY SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRELANDS SYMPHONY	**c** EIN-PN	34-1573397-501

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	FIREWATCH DESIGN STUDIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIREWATCH DESIGN STUDIO LLC	**c** EIN-PN	93-1992232-501
a Plan name	FIRST CHOICE SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST CHOICE SOLUTIONS, LLC	**c** EIN-PN	47-5429914-501
a Plan name	FIRST DRIVE LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST DRIVE LOGISTICS LLC	**c** EIN-PN	84-1854204-501
a Plan name	FIRST FLOORING & TILE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST FLOORING & TILE INC	**c** EIN-PN	34-1000484-501
a Plan name	FIRST MASON FINANCIAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST MASON FINANCIAL, LLC	**c** EIN-PN	42-1737612-501
a Plan name	FIRST NETWORK GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST NETWORK GROUP INC	**c** EIN-PN	34-1806261-501
a Plan name	FIRST RATE INDUSTRIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST RATE INDUSTRIES LTD	**c** EIN-PN	31-1651575-501
a Plan name	FIRST STEP TELEHEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST STEP TELEHEALTH	**c** EIN-PN	88-4265337-501
a Plan name	FIRST TROY CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRST TROY CORP	**c** EIN-PN	31-1337135-501
a Plan name	FIRSTLIGHT HOME CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	FIRSTLIGHT HOME CARE	**c** EIN-PN	47-4612731-501
a Plan name	FISCHER ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	FISCHER ENGINEERING	**c** EIN-PN	85-1929598-501
a Plan name	FISCHER FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	FISCHER FUNERAL HOME	**c** EIN-PN	31-0841218-501

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	FISHER EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	FISHER EXCAVATING	**c** EIN-PN	34-1947019-501
a Plan name	FIT FRESH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIT FRESH LLC	**c** EIN-PN	85-0528887-501
a Plan name	FITNESS EVOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	FITNESS EVOLUTION	**c** EIN-PN	46-2007436-501
a Plan name	FITNESS GURUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FITNESS GURUS LLC	**c** EIN-PN	46-0896270-501
a Plan name	FIVE STAR MECHANICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIVE STAR MECHANICAL LLC	**c** EIN-PN	20-8670202-502
a Plan name	FIVE STAR PLUMBING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIVE STAR PLUMBING, LLC	**c** EIN-PN	46-1576997-501
a Plan name	FIVE VISUAL COMMUNICATION & DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FIVE VISUAL COMMUNICATION & DESIGN LLC	**c** EIN-PN	92-1107201-501
a Plan name	FLAG FOOTBALL FANATICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLAG FOOTBALL FANATICS LLC	**c** EIN-PN	61-1638666-501
a Plan name	FLAGEL & PAPAKIRK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLAGEL & PAPAKIRK LLC	**c** EIN-PN	20-8277066-501
a Plan name	FLANNERY GEORGALIS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLANNERY GEORGALIS, LLC	**c** EIN-PN	82-2131080-501
a Plan name	FLASHHOUSE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLASHHOUSE INC	**c** EIN-PN	86-3302608-501
a Plan name	FLATROCK PORK SOCA BENEFIT PLAN		
b Name of plan sponsor	FLATROCK PORK	**c** EIN-PN	45-3818545-501

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	FLAVORS UNITED SOCA BENEFIT PLAN		
b Name of plan sponsor	FLAVORS UNITED	**c** EIN-PN	47-3250246-501
a Plan name	FLECK MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	FLECK MANUFACTURING	**c** EIN-PN	26-4715674-501
a Plan name	FLEET FEET TOLEDO SOCA BENEFIT PLAN		
b Name of plan sponsor	FLEET FEET TOLEDO	**c** EIN-PN	92-2729898-501
a Plan name	FLEETRAC CONNECT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLEETRAC CONNECT LLC	**c** EIN-PN	83-4305211-501
a Plan name	FLEX RECRUITING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLEX RECRUITING LLC	**c** EIN-PN	99-1488414-501
a Plan name	FLOAGILITY SOCA BENEFIT PLAN		
b Name of plan sponsor	FLOAGILITY	**c** EIN-PN	81-1890919-501
a Plan name	FLOCO PROCESS SOCA BENEFIT PLAN		
b Name of plan sponsor	FLOCO PROCESS	**c** EIN-PN	88-1997265-501
a Plan name	FLOHR MACHINE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	FLOHR MACHINE COMPANY	**c** EIN-PN	34-1860947-501
a Plan name	FLOOD HELIARC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLOOD HELIARC INC	**c** EIN-PN	31-1581281-501
a Plan name	FLOUR, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLOUR, LLC	**c** EIN-PN	27-5022529-501
a Plan name	FLUENT & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	FLUENT & ASSOCIATES	**c** EIN-PN	45-2786187-501
a Plan name	FLUFF STUDIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLUFF STUDIO LLC	**c** EIN-PN	86-2414497-501

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	FLUID PROCESS AUTOMATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLUID PROCESS AUTOMATION LLC	**c** EIN-PN	46-2354774-501
a Plan name	FLUID TECHNOLOGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLUID TECHNOLOGY INC	**c** EIN-PN	31-1630649-501
a Plan name	FLYNN PY & KRUSE LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	FLYNN PY & KRUSE LPA	**c** EIN-PN	34-1114934-501
a Plan name	FLYNNSKI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FLYNNSKI LLC	**c** EIN-PN	82-1687235-501
a Plan name	FNA WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	FNA WEALTH MANAGEMENT	**c** EIN-PN	46-1704342-501
a Plan name	FOCAL POINT SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOCAL POINT SOLUTIONS LLC	**c** EIN-PN	45-4566871-501
a Plan name	FOCHT CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	FOCHT CONSTRUCTION	**c** EIN-PN	34-1307540-501
a Plan name	FOCUS ON YOUTH SOCA BENEFIT PLAN		
b Name of plan sponsor	FOCUS ON YOUTH	**c** EIN-PN	31-1346995-501
a Plan name	FOCUSED TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOCUSED TECHNOLOGIES INC	**c** EIN-PN	27-1715979-501
a Plan name	FOLLOW THE EYES SOCA BENEFIT PLAN		
b Name of plan sponsor	FOLLOW THE EYES	**c** EIN-PN	47-4272135-501
a Plan name	FOLLOWERS INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOLLOWERS INSURANCE AGENCY INC	**c** EIN-PN	26-0163770-501
a Plan name	FOMUSA SOCA BENEFIT PLAN		
b Name of plan sponsor	FOMUSA	**c** EIN-PN	26-1870628-501

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	FONTUSBLUE SOCA BENEFIT PLAN		
b Name of plan sponsor	FONTUSBLUE	**c** EIN-PN	46-4793259-501
a Plan name	FOODTASTIC MOM SOCA BENEFIT PLAN		
b Name of plan sponsor	FOODTASTIC MOM	**c** EIN-PN	27-3604109-501
a Plan name	FOOS & LENTZ LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	FOOS & LENTZ LLP	**c** EIN-PN	31-1551564-501
a Plan name	FOOT & ANKLE WELLNESS CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOOT & ANKLE WELLNESS CENTER INC	**c** EIN-PN	31-1118428-501
a Plan name	FORCAM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORCAM INC	**c** EIN-PN	99-0376480-501
a Plan name	FORD & ASSOCIATES ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	FORD & ASSOCIATES ARCHITECTS	**c** EIN-PN	31-1387579-501
a Plan name	FORD & SON ROOFING CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	FORD & SON ROOFING CORPORATION	**c** EIN-PN	31-1074968-501
a Plan name	FORESIGHT MARKETING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORESIGHT MARKETING LLC	**c** EIN-PN	46-0838344-501
a Plan name	FOREST CITY COMPANIES SOCA BENEFIT PLAN		
b Name of plan sponsor	FOREST CITY COMPANIES	**c** EIN-PN	34-1750987-501
a Plan name	FOREVERGREEN LAWN CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	FOREVERGREEN LAWN CARE	**c** EIN-PN	34-1795091-501
a Plan name	FORGE FIRE & COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	FORGE FIRE & COMPANY	**c** EIN-PN	87-1283950-501
a Plan name	FORGE LEADERSHIP NETWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	FORGE LEADERSHIP NETWORK	**c** EIN-PN	47-2275305-501

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	FORGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORGE LLC	**c** EIN-PN	26-3596935-501
a Plan name	FORGELINE MOTORSPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORGELINE MOTORSPORTS LLC	**c** EIN-PN	20-8426271-501
a Plan name	FORMAN AUTO SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	FORMAN AUTO SALES	**c** EIN-PN	82-0932942-501
a Plan name	FORMIDABLE ASSET MANAGEMNT SOCA BENEFIT PLAN		
b Name of plan sponsor	FORMIDABLE ASSET MANAGEMNT	**c** EIN-PN	46-2376509-501
a Plan name	FORPSYCH CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	FORPSYCH CORPORATION	**c** EIN-PN	31-0997015-501
a Plan name	FORRESTS GARAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	FORRESTS GARAGE	**c** EIN-PN	86-3983104-501
a Plan name	FORT DEFIANCE HUM SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	FORT DEFIANCE HUM SOCIETY	**c** EIN-PN	34-1008989-501
a Plan name	FORT RECOVERY INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	FORT RECOVERY INS AGENCY	**c** EIN-PN	34-1272232-502
a Plan name	FORT RECOVERY LUMBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	FORT RECOVERY LUMBER COMPANY	**c** EIN-PN	34-4235470-501
a Plan name	FORTALEZA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORTALEZA LLC	**c** EIN-PN	46-2529504-502
a Plan name	FORTKAMP ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	FORTKAMP ENTERPRISES	**c** EIN-PN	33-1195828-501
a Plan name	FORTY-TWO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FORTY-TWO, INC.	**c** EIN-PN	20-5726507-501

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	FORWARD HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FORWARD HEALTH LLC	**c** EIN-PN	86-1462609-501
a Plan name	FOSTER AND MOTLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	FOSTER AND MOTLEY	**c** EIN-PN	31-1482336-501
a Plan name	FOSTER'S PHARMACY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FOSTERS PHARMACY, INC.	**c** EIN-PN	31-0726044-501
a Plan name	FOSTERS TRAIN STOP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOSTERS TRAIN STOP LLC	**c** EIN-PN	81-2227927-501
a Plan name	FOTI CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	FOTI CONTRACTING	**c** EIN-PN	34-1972851-502
a Plan name	FOTOFOCUS SOCA BENEFIT PLAN		
b Name of plan sponsor	FOTOFOCUS	**c** EIN-PN	45-4228394-501
a Plan name	FOUNDATION ORTHOPEDICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUNDATION ORTHOPEDICS LLC	**c** EIN-PN	46-3193616-501
a Plan name	FOUNDATIONS WORLDWIDE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUNDATIONS WORLDWIDE, INC.	**c** EIN-PN	82-0563595-501
a Plan name	FOUR AMBITION SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUR AMBITION	**c** EIN-PN	26-4382758-501
a Plan name	FOUR G FINANCIAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUR G FINANCIAL SERVICES LLC	**c** EIN-PN	93-2874191-501
a Plan name	FOUR STAR TOOL RENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUR STAR TOOL RENTAL	**c** EIN-PN	31-0785077-501
a Plan name	FOURMAN INSURANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOURMAN INSURANCE LLC	**c** EIN-PN	81-1815695-501

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	FOUST PLUMBING AND HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	FOUST PLUMBING AND HEATING	**c** EIN-PN	46-5517421-501
a Plan name	FOX CYCLE SALES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOX CYCLE SALES LLC	**c** EIN-PN	46-1679562-501
a Plan name	FOX RUN APTS BOWLING GREEN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FOX RUN APTS BOWLING GREEN LLC	**c** EIN-PN	47-4843671-501
a Plan name	FOX TOWING & TRUCK SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	FOX TOWING & TRUCK SERVICE	**c** EIN-PN	02-0642583-501
a Plan name	FOXWERX SOCA BENEFIT PLAN		
b Name of plan sponsor	FOXWERX	**c** EIN-PN	83-3762972-501
a Plan name	FRANCIS SCHULZE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANCIS SCHULZE COMPANY	**c** EIN-PN	31-0706988-501
a Plan name	FRANCISCAN MINISTRIES,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANCISCAN MINISTRIES,INC	**c** EIN-PN	31-1346696-501
a Plan name	FRANCO & TORO ORAL HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANCO & TORO ORAL HEALTH	**c** EIN-PN	46-3263558-501
a Plan name	FRANK LUCCO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANK LUCCO INC	**c** EIN-PN	34-0664503-501
a Plan name	FRANKLIN HEALTH CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN HEALTH CARE INC	**c** EIN-PN	34-1899416-501
a Plan name	FRANKLIN MAIN CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN MAIN CORP	**c** EIN-PN	47-0989927-501
a Plan name	FRANKLIN PARK PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN PARK PEDIATRICS	**c** EIN-PN	34-1958943-501

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	FRANKS HEATING AND AC LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANKS HEATING AND AC LTD	**c** EIN-PN	88-0685535-501
a Plan name	FRANKS N BUTTS ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANKS N BUTTS ENTERPRISES	**c** EIN-PN	86-2518710-501
a Plan name	FRANZ CPA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRANZ CPA LLC	**c** EIN-PN	31-1477396-501
a Plan name	FRATERNAL ORDER OF EAGLES SOCA BENEFIT PLAN		
b Name of plan sponsor	FRATERNAL ORDER OF EAGLES	**c** EIN-PN	31-1030111-501
a Plan name	FRAYT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRAYT INC	**c** EIN-PN	82-2320483-501
a Plan name	FRAZIER MACHINE & PRODUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	FRAZIER MACHINE & PRODUCTION	**c** EIN-PN	34-1129256-501
a Plan name	FRED A NEMANN CO SOCA BENEFIT PLAN		
b Name of plan sponsor	FRED A NEMANN CO	**c** EIN-PN	31-0780410-501
a Plan name	FREDERICK & BERLER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREDERICK & BERLER LLC	**c** EIN-PN	46-3551995-501
a Plan name	FREDERICK AGENCY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FREDERICK AGENCY INC.	**c** EIN-PN	34-1137718-501
a Plan name	FREDE'S VILLAGE AUTO SOCA BENEFIT PLAN		
b Name of plan sponsor	FREDES VILLAGE AUTO	**c** EIN-PN	31-1402319-501
a Plan name	FREEDOM ALA CART SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOM ALA CART	**c** EIN-PN	26-3114093-501
a Plan name	FREEDOM EQUITY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOM EQUITY INC.	**c** EIN-PN	88-2726911-501

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	FREEDOM FREIGHT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOM FREIGHT INC	**c** EIN-PN	13-4294821-501
a Plan name	FREEDOM REAL ESTATE GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOM REAL ESTATE GROUP LLC	**c** EIN-PN	82-1598801-501
a Plan name	FREEDOM RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOM RECOVERY	**c** EIN-PN	81-4026953-501
a Plan name	FREEDOMLINX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEDOMLINX LLC	**c** EIN-PN	81-5422328-501
a Plan name	FREELANDS TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	FREELANDS TRANSPORT	**c** EIN-PN	56-2501015-502
a Plan name	FREEMAN BUILDING SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEMAN BUILDING SYSTEMS	**c** EIN-PN	34-1717533-501
a Plan name	FREEMAN HEYNE TOMA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREEMAN HEYNE TOMA LLC	**c** EIN-PN	82-2430308-501
a Plan name	FREIGHT TRAINS TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	FREIGHT TRAINS TRUCKING	**c** EIN-PN	34-1892777-501
a Plan name	FREIGHTLINE LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FREIGHTLINE LOGISTICS LLC	**c** EIN-PN	86-1959887-501
a Plan name	FREMONT FENCE AND GUARD RAIL SOCA BENEFIT PLAN		
b Name of plan sponsor	FREMONT FENCE AND GUARD RAIL	**c** EIN-PN	34-1088375-501
a Plan name	FRESH LOCAL PRODUCE OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	FRESH LOCAL PRODUCE OF OHIO	**c** EIN-PN	81-3268959-501
a Plan name	FRETBOARD BREWING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	FRETBOARD BREWING CO	**c** EIN-PN	35-2537602-502

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	FRIEDMAN GILBERT & GERHARDSTEIN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRIEDMAN GILBERT & GERHARDSTEIN LLC	**c** EIN-PN	34-1647133-501
a Plan name	FRIENDLY CANDLE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRIENDLY CANDLE LLC	**c** EIN-PN	47-3766331-501
a Plan name	FRIENDLY DENTAL CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	FRIENDLY DENTAL CARE	**c** EIN-PN	46-4087768-501
a Plan name	FRIENDS OF LEVITT PAVILION DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	FRIENDS OF LEVITT PAVILION DAYTON	**c** EIN-PN	81-0743640-501
a Plan name	FRIENDSHIP FITNESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRIENDSHIP FITNESS LLC	**c** EIN-PN	45-2051121-501
a Plan name	FRITZ BAUMANN AND SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRITZ BAUMANN AND SONS INC	**c** EIN-PN	31-4360489-501
a Plan name	FRONT PORCH MEDIA NETWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	FRONT PORCH MEDIA NETWORK	**c** EIN-PN	81-5147324-501
a Plan name	FRONTLINE FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	FRONTLINE FINANCIAL GROUP	**c** EIN-PN	83-3206826-501
a Plan name	FRONTPATH HEALTH COALITION SOCA BENEFIT PLAN		
b Name of plan sponsor	FRONTPATH HEALTH COALITION	**c** EIN-PN	34-1713951-501
a Plan name	FROST ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FROST ROOFING INC	**c** EIN-PN	30-0040717-501
a Plan name	FRYE MECHANICAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FRYE MECHANICAL INC	**c** EIN-PN	03-0374205-502
a Plan name	FSI GROUP, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FSI GROUP, INC.	**c** EIN-PN	31-1437546-501

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	FSM WEALTH ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FSM WEALTH ADVISORS LLC	**c** EIN-PN	83-2256400-501
a Plan name	FT STEUBEN MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	FT STEUBEN MANAGEMENT	**c** EIN-PN	34-1454755-501
a Plan name	FTK SOCA BENEFIT PLAN		
b Name of plan sponsor	FTK	**c** EIN-PN	81-3186316-501
a Plan name	FTM ANALYTICS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FTM ANALYTICS, INC	**c** EIN-PN	46-4910447-501
a Plan name	FUEL INDUSTRIAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FUEL INDUSTRIAL SERVICES LLC	**c** EIN-PN	81-1023147-501
a Plan name	FUERST TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FUERST TRUCKING LLC	**c** EIN-PN	87-2874648-501
a Plan name	FULFILLMENT CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FULFILLMENT CENTER INC	**c** EIN-PN	31-1142504-501
a Plan name	FULL CIRCLE MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	FULL CIRCLE MAINTENANCE	**c** EIN-PN	20-8218559-501
a Plan name	FULL DUPLEX MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FULL DUPLEX MEDIA LLC	**c** EIN-PN	87-3991443-501
a Plan name	FULL RANGE REHAB, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FULL RANGE REHAB, LLC	**c** EIN-PN	20-5902270-501
a Plan name	FULL SAIL LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	FULL SAIL LOGISTICS	**c** EIN-PN	84-4102337-501
a Plan name	FULLY ACCOUNTABLE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FULLY ACCOUNTABLE LLC	**c** EIN-PN	47-1426271-501

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	FUMA INTERNATIONAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	FUMA INTERNATIONAL LLC	**c** EIN-PN	27-0609374-501
a Plan name	FUN CENTER POOLS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FUN CENTER POOLS INC	**c** EIN-PN	01-0549958-501
a Plan name	FUNCTIONAL TRAINING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	FUNCTIONAL TRAINING SVS	**c** EIN-PN	31-1423913-501
a Plan name	FUND FOR OUR ECO FUTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	FUND FOR OUR ECO FUTURE	**c** EIN-PN	27-0606927-501
a Plan name	FUNKY S AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	FUNKY S AUTOMOTIVE	**c** EIN-PN	45-3784451-501
a Plan name	FUNTRAIL VANS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	FUNTRAIL VANS, INC.	**c** EIN-PN	31-1224828-501
a Plan name	FURNITURE CONCEPTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FURNITURE CONCEPTS INC	**c** EIN-PN	34-1695596-501
a Plan name	FUSCOS CUTTING EDGE SOCA BENEFIT PLAN		
b Name of plan sponsor	FUSCOS CUTTING EDGE	**c** EIN-PN	34-1734688-501
a Plan name	FUSION HCR SOCA BENEFIT PLAN		
b Name of plan sponsor	FUSION HCR	**c** EIN-PN	46-2480751-501
a Plan name	FUTURE PLANS SOCA BENEFIT PLAN		
b Name of plan sponsor	FUTURE PLANS	**c** EIN-PN	87-4152153-501
a Plan name	FUTUREREADY COLUMBUS SOCA BENEFIT PLAN		
b Name of plan sponsor	FUTUREREADY COLUMBUS	**c** EIN-PN	45-3819208-501
a Plan name	FUTURETY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	FUTURETY INC	**c** EIN-PN	47-2349892-501

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	FYVE MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	FYVE MARKETING	**c** EIN-PN	83-3757996-501
a Plan name	G & R VENTURES CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	G & R VENTURES CORP	**c** EIN-PN	82-2504501-501
a Plan name	G & R WIRELESS SOCA BENEFIT PLAN		
b Name of plan sponsor	G & R WIRELESS	**c** EIN-PN	82-4233280-501
a Plan name	G J BERDING SURVEYING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	G J BERDING SURVEYING INC	**c** EIN-PN	31-1326675-501
a Plan name	G R SMITH HARDWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	G R SMITH HARDWARE	**c** EIN-PN	31-1613406-501
a Plan name	G2 CAPITAL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	G2 CAPITAL MANAGEMENT	**c** EIN-PN	81-4912492-501
a Plan name	G2 PLANNING AND DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	G2 PLANNING AND DESIGN	**c** EIN-PN	46-0721549-501
a Plan name	GAINER AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	GAINER AUTO BODY	**c** EIN-PN	51-0490327-501
a Plan name	GAISER MANAGEMENT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	GAISER MANAGEMENT GROUP	**c** EIN-PN	82-4715709-501
a Plan name	GALEHOUSE CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	GALEHOUSE CONSTRUCTION CO	**c** EIN-PN	34-1032606-501
a Plan name	GALLAGHER GAMS TB & L SOCA BENEFIT PLAN		
b Name of plan sponsor	GALLAGHER GAMS TB & L	**c** EIN-PN	31-1481576-501
a Plan name	GALLAGHER PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	GALLAGHER PLUMBING	**c** EIN-PN	30-0411174-501

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	GALLIA MEIGS COMMUNITY ACTION AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	GALLIA MEIGS COMMUNITY ACTION AGENCY	**c** EIN-PN	31-6060696-502
a Plan name	GALLUS GUYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GALLUS GUYS LLC	**c** EIN-PN	92-0694724-501
a Plan name	GAMA PRESCRIPTION MANAGEMENT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GAMA PRESCRIPTION MANAGEMENT, LLC	**c** EIN-PN	27-2214470-501
a Plan name	GAME MANUFACTURERS ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	GAME MANUFACTURERS ASSOCIATION	**c** EIN-PN	86-0469430-501
a Plan name	GAME ON SOCA BENEFIT PLAN		
b Name of plan sponsor	GAME ON	**c** EIN-PN	82-1821943-501
a Plan name	GAME PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GAME PROPERTIES LLC	**c** EIN-PN	32-0012997-501
a Plan name	GAMMA FORCE SOCA BENEFIT PLAN		
b Name of plan sponsor	GAMMA FORCE	**c** EIN-PN	83-1090045-501
a Plan name	GANDEE AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	GANDEE AND ASSOCIATES	**c** EIN-PN	31-1080359-501
a Plan name	GARAGE FINISHER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GARAGE FINISHER INC	**c** EIN-PN	20-8629100-501
a Plan name	GARD FUNERAL HOME & CREMATION SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GARD FUNERAL HOME & CREMATION SERVICES, LLC	**c** EIN-PN	20-5645555-501
a Plan name	GARDEN DESIGN JOE DAUBEL SOCA BENEFIT PLAN		
b Name of plan sponsor	GARDEN DESIGN JOE DAUBEL	**c** EIN-PN	30-0229315-501
a Plan name	GARDENING INDOOR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GARDENING INDOOR LLC	**c** EIN-PN	45-4972752-501

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	GARFIELD LOGISTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GARFIELD LOGISTICS INC	**c** EIN-PN	14-1843525-501
a Plan name	GARSAN SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	GARSAN SOLUTIONS	**c** EIN-PN	81-4147777-501
a Plan name	GARSON JOHNSON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GARSON JOHNSON LLC	**c** EIN-PN	46-4992591-501
a Plan name	GARY A GIBSON INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	GARY A GIBSON INS AGENCY	**c** EIN-PN	20-5632558-501
a Plan name	GARY F. FRANKE CO. , L.P.A. SOCA BENEFIT PLAN		
b Name of plan sponsor	GARY F. FRANKE CO. , L.P.A.	**c** EIN-PN	31-1670626-501
a Plan name	GARY K SNOWDEN SOCA BENEFIT PLAN		
b Name of plan sponsor	GARY K SNOWDEN	**c** EIN-PN	31-1023615-501
a Plan name	GARY KAPLAN MD INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GARY KAPLAN MD INC.	**c** EIN-PN	20-2394753-501
a Plan name	GASTRO OFFICE SOCA BENEFIT PLAN		
b Name of plan sponsor	GASTRO OFFICE	**c** EIN-PN	82-2508798-501
a Plan name	GATEWAY CONCRETE FORMING SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GATEWAY CONCRETE FORMING SERVICES INC	**c** EIN-PN	31-0958608-501
a Plan name	GATEWAY INDUSTRIAL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	GATEWAY INDUSTRIAL PRODUCTS	**c** EIN-PN	34-1693925-501
a Plan name	GATEWAY LOGISTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GATEWAY LOGISTICS INC	**c** EIN-PN	39-2059617-501
a Plan name	GATEWAY MECHANICAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GATEWAY MECHANICAL INC	**c** EIN-PN	31-1594710-502

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	GATHERED GLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	GATHERED GLASS	**c** EIN-PN	81-0796551-501
a Plan name	GATTO FOOD SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	GATTO FOOD SERVICE	**c** EIN-PN	34-1775629-501
a Plan name	GAULT HEATING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GAULT HEATING, INC.	**c** EIN-PN	34-1744170-501
a Plan name	GAY FAD STUDIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	GAY FAD STUDIOS	**c** EIN-PN	87-4603670-501
a Plan name	GBRANDS SOCA BENEFIT PLAN		
b Name of plan sponsor	GBRANDS	**c** EIN-PN	27-1057576-501
a Plan name	GC AVIATION SERVICES 1 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GC AVIATION SERVICES 1 LLC	**c** EIN-PN	81-4279816-501
a Plan name	GD HOVANIC AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GD HOVANIC AGENCY INC	**c** EIN-PN	34-1611135-501
a Plan name	GEARIG FLOORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEARIG FLOORS LLC	**c** EIN-PN	47-5184834-501
a Plan name	GEARSTAR AMERICAN PERFORMANCE TRANSMISSIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEARSTAR AMERICAN PERFORMANCE TRANSMISSIONS	**c** EIN-PN	34-1970516-501
a Plan name	GEAUGA REHABILITATION ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	GEAUGA REHABILITATION ENGINEERING	**c** EIN-PN	34-1797385-501
a Plan name	GEAUGA VISION GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	GEAUGA VISION GROUP	**c** EIN-PN	34-1647254-501
a Plan name	GEBEN COMMUNICATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEBEN COMMUNICATION LLC	**c** EIN-PN	27-1395719-501

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	GEBHART COUNSELING SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEBHART COUNSELING SOLUTIONS, LLC	**c** EIN-PN	46-3404781-501
a Plan name	GEHLE TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	GEHLE TRANSPORT	**c** EIN-PN	34-1268656-501
a Plan name	GEHRING INSURANCE MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	GEHRING INSURANCE MARKETING	**c** EIN-PN	92-1213782-501
a Plan name	GEIGER CONSTRUCTION PROD SOCA BENEFIT PLAN		
b Name of plan sponsor	GEIGER CONSTRUCTION PROD	**c** EIN-PN	31-0734619-501
a Plan name	GEM AND CLAY INTERIORS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEM AND CLAY INTERIORS	**c** EIN-PN	82-5502966-501
a Plan name	GEM CITY BUSINESS SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEM CITY BUSINESS SOLUTIONS	**c** EIN-PN	46-2551849-501
a Plan name	GEM CITY TOOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEM CITY TOOLS	**c** EIN-PN	82-2004034-501
a Plan name	GEM YOUNG INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	GEM YOUNG INSURANCE	**c** EIN-PN	34-1094855-501
a Plan name	GEMCO AVIATION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GEMCO AVIATION SERVICES	**c** EIN-PN	34-1627014-501
a Plan name	GEN3 ADVISOR GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEN3 ADVISOR GROUP LLC	**c** EIN-PN	46-5378349-501
a Plan name	GENE TOLLIVER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GENE TOLLIVER INC	**c** EIN-PN	34-1691352-501
a Plan name	GENERAL CHAIN AND SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERAL CHAIN AND	**c** EIN-PN	31-0529018-501

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	GENERAL MAINTENANCE AND ENGINEERING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERAL MAINTENANCE AND ENGINEERING CO	**c** EIN-PN	31-4188545-501
a Plan name	GENERAL RESTORATION TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERAL RESTORATION TECH	**c** EIN-PN	47-4076905-501
a Plan name	GENERATIONS WOMENS HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERATIONS WOMENS HEALTH	**c** EIN-PN	20-5289057-501
a Plan name	GENERATOR SPECIALIST, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERATOR SPECIALIST, INC	**c** EIN-PN	34-1531323-501
a Plan name	GENERGY MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERGY MANUFACTURING	**c** EIN-PN	37-1434818-501
a Plan name	GENERIC SYSTEMS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GENERIC SYSTEMS, INC.	**c** EIN-PN	34-1827661-501
a Plan name	GENESIS AUDIO LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	GENESIS AUDIO LTD	**c** EIN-PN	31-1479763-501
a Plan name	GENESIS BUILDING SYSTEMS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	GENESIS BUILDING SYSTEMS LTD	**c** EIN-PN	16-1674810-501
a Plan name	GENESIS HYPERBARICS SOCA BENEFIT PLAN		
b Name of plan sponsor	GENESIS HYPERBARICS	**c** EIN-PN	84-3185332-501
a Plan name	GENESIS RETIREMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GENESIS RETIREMENT LLC	**c** EIN-PN	27-2835045-501
a Plan name	GENTILE PROPERTY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	GENTILE PROPERTY MANAGEMENT	**c** EIN-PN	83-3438607-501
a Plan name	GEOPETRO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEOPETRO LLC	**c** EIN-PN	31-1581343-501

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	GEORDIE INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEORDIE INVESTMENTS	**c** EIN-PN	84-2053706-501
a Plan name	GEORGE J HAYWARD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEORGE J HAYWARD INC	**c** EIN-PN	31-1145607-501
a Plan name	GEORGE ROMAN SOCA BENEFIT PLAN		
b Name of plan sponsor	GEORGE ROMAN	**c** EIN-PN	35-2160917-501
a Plan name	GEORGE V THOMAS AND SETH M GREENFIELD DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	GEORGE V THOMAS AND SETH M GREENFIELD DDS	**c** EIN-PN	34-1712682-501
a Plan name	GEOSTAR ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEOSTAR ENTERPRISES INC	**c** EIN-PN	27-4825344-501
a Plan name	GERACI FINE JEWELRY SOCA BENEFIT PLAN		
b Name of plan sponsor	GERACI FINE JEWELRY	**c** EIN-PN	31-1523858-501
a Plan name	GERACIS SLICE SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	GERACIS SLICE SHOP	**c** EIN-PN	92-1143723-501
a Plan name	GERDALIND B GATMAITAN DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	GERDALIND B GATMAITAN DDS	**c** EIN-PN	84-4738142-501
a Plan name	GEREDCO LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	GEREDCO LTD	**c** EIN-PN	34-1787759-501
a Plan name	GERMANTOWN OIL COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GERMANTOWN OIL COMPANY INC	**c** EIN-PN	31-1584523-501
a Plan name	GERSPACHER REAL ESTATE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	GERSPACHER REAL ESTATE GROUP	**c** EIN-PN	26-0314816-501
a Plan name	GERTSBURG LICATA CO., LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	GERTSBURG LICATA CO., LPA	**c** EIN-PN	86-2678097-501

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	GERWIG REAL ESTATE HOLDING SOCA BENEFIT PLAN		
b Name of plan sponsor	GERWIG REAL ESTATE HOLDING	**c** EIN-PN	47-4222517-501
a Plan name	GEYDE DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	GEYDE DEVELOPMENT	**c** EIN-PN	88-1697574-501
a Plan name	GEYER INSURANCE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GEYER INSURANCE, LLC	**c** EIN-PN	20-0050680-501
a Plan name	GEYGAN ENTERPRISES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GEYGAN ENTERPRISES, INC.	**c** EIN-PN	88-1649591-501
a Plan name	GH CUTTER SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GH CUTTER SERVICES	**c** EIN-PN	34-1792896-501
a Plan name	GIBBS EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBBS EXCAVATING	**c** EIN-PN	20-1200494-501
a Plan name	GIBBS INSURANCE ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBBS INSURANCE ASSOCIATES	**c** EIN-PN	20-2024682-501
a Plan name	GIBEYE PIZZA & ASHLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBEYE PIZZA & ASHLEY	**c** EIN-PN	85-1704666-501
a Plan name	GIBSON AND HETHERINGTON SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBSON AND HETHERINGTON	**c** EIN-PN	85-3495059-501
a Plan name	GIBSON BROTHERS SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBSON BROTHERS	**c** EIN-PN	31-6122122-501
a Plan name	GIBSON LAW, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBSON LAW, LLC	**c** EIN-PN	81-0816072-501
a Plan name	GIBSON MYERS AND ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	GIBSON MYERS AND ASSOC	**c** EIN-PN	34-1137362-501

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	GIESEKE ROSENTHAL ARCHITECTURE & DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GIESEKE ROSENTHAL ARCHITECTURE & DESIGN LLC	**c** EIN-PN	20-0566151-501
a Plan name	GIGANTIC MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GIGANTIC MEDIA LLC	**c** EIN-PN	37-1765856-501
a Plan name	GIGI S SHELTER FOR DOGS SOCA BENEFIT PLAN		
b Name of plan sponsor	GIGI S SHELTER FOR DOGS	**c** EIN-PN	81-4422755-501
a Plan name	GIGI'S MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GIGIS MEDICAL	**c** EIN-PN	45-5120767-501
a Plan name	GILES & HARPER SOCA BENEFIT PLAN		
b Name of plan sponsor	GILES & HARPER	**c** EIN-PN	83-2944848-501
a Plan name	GILLAM LAWNCARE AND LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GILLAM LAWNCARE AND LANDSCAPING LLC	**c** EIN-PN	45-0463850-501
a Plan name	GILLES SMITH PURDUM INSURANCE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GILLES SMITH PURDUM INSURANCE AGENCY LLC	**c** EIN-PN	46-1844042-501
a Plan name	GILLIGAN FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	GILLIGAN FUNERAL HOME	**c** EIN-PN	31-0787879-501
a Plan name	GILLIGANS CANDIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GILLIGANS CANDIES LLC	**c** EIN-PN	33-2654272-501
a Plan name	GIMBEL AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	GIMBEL AGENCY	**c** EIN-PN	20-3789647-501
a Plan name	GINGER SPICE ASIAN BISTRO SOCA BENEFIT PLAN		
b Name of plan sponsor	GINGER SPICE ASIAN BISTRO	**c** EIN-PN	47-1554693-501
a Plan name	GIORGIO VESCERA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GIORGIO VESCERA LLC	**c** EIN-PN	51-0518864-501

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	GIOVANETTI EYE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	GIOVANETTI EYE CARE	**c** EIN-PN	31-1441042-501
a Plan name	GIRARD COMMUNITY COMMITTEE SOCA BENEFIT PLAN		
b Name of plan sponsor	GIRARD COMMUNITY COMMITTEE	**c** EIN-PN	34-1937126-501
a Plan name	GIUSEPPE'S PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	GIUSEPPES PIZZA	**c** EIN-PN	34-1123425-501
a Plan name	GJC WESTLAKE SOCA BENEFIT PLAN		
b Name of plan sponsor	GJC WESTLAKE	**c** EIN-PN	34-1733474-502
a Plan name	GJP ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	GJP ENTERPRISES	**c** EIN-PN	34-1626479-501
a Plan name	GLADDEN COMMUNITY HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	GLADDEN COMMUNITY HOUSE	**c** EIN-PN	31-4379476-501
a Plan name	GLAESER INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GLAESER INC.	**c** EIN-PN	39-2077422-501
a Plan name	GLAS FUNDS SOCA BENEFIT PLAN		
b Name of plan sponsor	GLAS FUNDS	**c** EIN-PN	26-4096214-501
a Plan name	GLASGOW LANDSCAPES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GLASGOW LANDSCAPES, INC.	**c** EIN-PN	31-1455172-501
a Plan name	GLASS CITY FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	GLASS CITY FIRE PROTECTION	**c** EIN-PN	85-1699975-501
a Plan name	GLASS CITY HVAC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLASS CITY HVAC	**c** EIN-PN	34-1927309-501
a Plan name	GLASSFORYOU INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLASSFORYOU INC	**c** EIN-PN	99-3796401-501

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	GLAZING SYSTEMS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GLAZING SYSTEMS, INC.	**c** EIN-PN	34-1400789-502
a Plan name	GLC RENEW ADVISOR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLC RENEW ADVISOR LLC	**c** EIN-PN	82-3570021-501
a Plan name	GLEBUS ALLOYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLEBUS ALLOYS LLC	**c** EIN-PN	34-1964506-501
a Plan name	GLEESON CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	GLEESON CONSTRUCTION	**c** EIN-PN	34-1359786-501
a Plan name	GLENN J JIVIDEN JR DDS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLENN J JIVIDEN JR DDS, INC	**c** EIN-PN	31-1413490-501
a Plan name	GLOBAL AMBASSADORS LANGUAGE ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	GLOBAL AMBASSADORS LANGUAGE ACADEMY	**c** EIN-PN	46-1185217-501
a Plan name	GLOBAL METAL SERVICES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	GLOBAL METAL SERVICES LTD	**c** EIN-PN	36-4764647-501
a Plan name	GLOBAL UNDERWRITERS AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLOBAL UNDERWRITERS AGENCY INC	**c** EIN-PN	31-1428775-501
a Plan name	GLS ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GLS ELECTRIC INC	**c** EIN-PN	20-3683234-501
a Plan name	GMK LEGACY HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	GMK LEGACY HOLDINGS	**c** EIN-PN	93-3092466-501
a Plan name	GMSR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GMSR INC	**c** EIN-PN	84-4305390-501
a Plan name	GO FETCH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GO FETCH SERVICES	**c** EIN-PN	83-0479842-501

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	GO YOGA HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GO YOGA HOLDINGS LLC	**c** EIN-PN	82-3683467-501
a Plan name	GO2-PROS SOCA BENEFIT PLAN		
b Name of plan sponsor	GO2-PROS	**c** EIN-PN	31-0883593-501
a Plan name	GODDARD SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	GODDARD SCHOOL	**c** EIN-PN	84-1828702-501
a Plan name	GOFFENA FURNITURE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOFFENA FURNITURE INC	**c** EIN-PN	34-1000512-501
a Plan name	GOLD N TOUCH LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLD N TOUCH LANDSCAPING	**c** EIN-PN	31-1703400-501
a Plan name	GOLDEN BEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLDEN BEAR	**c** EIN-PN	83-1519682-501
a Plan name	GOLDEN EAGLE EXTRUSIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLDEN EAGLE EXTRUSIONS INC	**c** EIN-PN	31-1341036-501
a Plan name	GOLDEN ORTHODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLDEN ORTHODONTICS	**c** EIN-PN	45-3455925-501
a Plan name	GOLDSHOT, LAMB AND HOBBS CPA'S, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLDSHOT, LAMB AND HOBBS CPAS, INC.	**c** EIN-PN	31-0971691-501
a Plan name	GOLF LEGENDARY RUN OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLF LEGENDARY RUN OHIO LLC	**c** EIN-PN	82-4617379-501
a Plan name	GOLIATH CONSTRUCTION SVC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOLIATH CONSTRUCTION SVC	**c** EIN-PN	20-8440167-501
a Plan name	GONGWER NEWS SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GONGWER NEWS SERVICE INC	**c** EIN-PN	31-0645808-501

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	GOOD DEED ENTERTAINMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOOD DEED ENTERTAINMENT LLC	**c** EIN-PN	83-1816927-501
a Plan name	GOOD FEET STORE COLUMBUS SOCA BENEFIT PLAN		
b Name of plan sponsor	GOOD FEET STORE COLUMBUS	**c** EIN-PN	01-0590312-501
a Plan name	GOOD NIGHT INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOOD NIGHT INVESTMENTS LLC	**c** EIN-PN	81-1071961-501
a Plan name	GOOD WORKS VETERINARY HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GOOD WORKS VETERINARY HOSPITAL	**c** EIN-PN	81-1904166-501
a Plan name	GOODFELLOWS BARBERSHOP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOODFELLOWS BARBERSHOP LLC	**c** EIN-PN	47-2466011-501
a Plan name	GOODMAN AND MORRISROE SOCA BENEFIT PLAN		
b Name of plan sponsor	GOODMAN AND MORRISROE	**c** EIN-PN	81-2245158-501
a Plan name	GOODWIN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	GOODWIN COMPANY	**c** EIN-PN	92-1708314-501
a Plan name	GOOSEFOOT ACRES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GOOSEFOOT ACRES INC.	**c** EIN-PN	34-1606045-501
a Plan name	GOP LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	GOP LIMITED	**c** EIN-PN	31-0780100-501
a Plan name	GORE CONCRETE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GORE CONCRETE LLC	**c** EIN-PN	81-4134526-501
a Plan name	GORMAN RUPP & ASSOC CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	GORMAN RUPP & ASSOC CREDIT UNION	**c** EIN-PN	34-0905753-501
a Plan name	GOSSI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOSSI INC	**c** EIN-PN	20-0782823-501

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	GOSSING CONSTRUCTION CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GOSSING CONSTRUCTION CO INC	**c** EIN-PN	31-1224373-501
a Plan name	GRACE CROSSING SOCA BENEFIT PLAN		
b Name of plan sponsor	GRACE CROSSING	**c** EIN-PN	31-1574545-501
a Plan name	GRACELAND CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRACELAND CHIROPRACTIC	**c** EIN-PN	26-1142761-501
a Plan name	GRACO CONCRETE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRACO CONCRETE INC	**c** EIN-PN	26-4731704-501
a Plan name	GRAD CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAD CINCINNATI	**c** EIN-PN	31-1816376-501
a Plan name	GRAICI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAICI INC	**c** EIN-PN	87-0816339-501
a Plan name	GRAMMAS CAPITAL MNGT SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAMMAS CAPITAL MNGT	**c** EIN-PN	85-2284779-501
a Plan name	GRAMMAS PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAMMAS PIZZA	**c** EIN-PN	26-2585553-501
a Plan name	GRAMONT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAMONT, LLC	**c** EIN-PN	32-0619487-501
a Plan name	GRANDVIEW MERCANTILE SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANDVIEW MERCANTILE	**c** EIN-PN	31-1686159-501
a Plan name	GRANITE CAPITAL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANITE CAPITAL MANAGEMENT	**c** EIN-PN	20-5415545-501
a Plan name	GRANITE DIRECT SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANITE DIRECT	**c** EIN-PN	46-3526746-501

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	GRANITE EMPIRE OF CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANITE EMPIRE OF CINCINNATI	**c** EIN-PN	85-2555895-501
a Plan name	GRANITE STEEL AND PROCESSING SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANITE STEEL AND PROCESSING	**c** EIN-PN	34-1052850-501
a Plan name	GRANVILLE RECREATION DIST SOCA BENEFIT PLAN		
b Name of plan sponsor	GRANVILLE RECREATION DIST	**c** EIN-PN	27-0982031-501
a Plan name	GRAPHIC PRINT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAPHIC PRINT SOLUTIONS	**c** EIN-PN	82-2756428-501
a Plan name	GRAPHITE DESIGN + BUILD LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAPHITE DESIGN + BUILD LIMITED	**c** EIN-PN	45-4317719-501
a Plan name	GRASS ROOTS STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	GRASS ROOTS STUDIO	**c** EIN-PN	46-1548034-501
a Plan name	GRAY DATA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAY DATA INC	**c** EIN-PN	82-4637063-501
a Plan name	GRAYDIAN TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAYDIAN TECHNOLOGIES	**c** EIN-PN	06-1772625-501
a Plan name	GRAYSCALE BREW SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAYSCALE BREW	**c** EIN-PN	47-1789995-501
a Plan name	GRAYWACKE ENGINEERING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GRAYWACKE ENGINEERING, INC.	**c** EIN-PN	34-1943136-501
a Plan name	GREAT AMERICAN EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT AMERICAN EQUIPMENT	**c** EIN-PN	31-1106680-501
a Plan name	GREAT LAKES AUDIO VISUAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES AUDIO VISUAL	**c** EIN-PN	81-2709436-501

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	GREAT LAKES BILLING ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES BILLING ASSOCIATION	**c** EIN-PN	34-1886154-501
a Plan name	GREAT LAKES COMMUNICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES COMMUNICATION	**c** EIN-PN	20-0480111-501
a Plan name	GREAT LAKES CRUSHING SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES CRUSHING	**c** EIN-PN	34-1839641-501
a Plan name	GREAT LAKES DENTAL ARTS SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES DENTAL ARTS	**c** EIN-PN	20-3478948-501
a Plan name	GREAT LAKES EYE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES EYE CARE	**c** EIN-PN	20-4325103-501
a Plan name	GREAT LAKES INDUST CONT SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES INDUST CONT	**c** EIN-PN	84-2053303-502
a Plan name	GREAT LAKES MEDICAL WASTE SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES MEDICAL WASTE	**c** EIN-PN	20-3822908-501
a Plan name	GREAT LAKES RADIATION ONCO SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES RADIATION ONCO	**c** EIN-PN	83-4155161-501
a Plan name	GREAT LAKES TRANS CO SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT LAKES TRANS CO	**c** EIN-PN	93-1745727-501
a Plan name	GREAT NORTHERN FENCE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT NORTHERN FENCE, INC.	**c** EIN-PN	34-1637552-501
a Plan name	GREAT WESTERN RESERVE CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	GREAT WESTERN RESERVE CORP	**c** EIN-PN	34-1523572-501
a Plan name	GREATER CANTON PSYCHIATRY, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CANTON PSYCHIATRY, LLC.	**c** EIN-PN	46-5710656-501

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	GREATER CINCI INTERNAL MED SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CINCI INTERNAL MED	**c** EIN-PN	31-1302133-501
a Plan name	GREATER CINCINNATI CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CINCINNATI CHIROPRACTIC	**c** EIN-PN	46-2118199-501
a Plan name	GREATER CINCINNATI LIBRARY CONSORTIUM SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CINCINNATI LIBRARY CONSORTIUM	**c** EIN-PN	31-1063050-501
a Plan name	GREATER CINTI INS SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CINTI INS SERVICES	**c** EIN-PN	26-1317428-501
a Plan name	GREATER COLUMBUS ARTS COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER COLUMBUS ARTS COUNCIL	**c** EIN-PN	31-0833384-501
a Plan name	GREATER CURVE SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER CURVE	**c** EIN-PN	31-1210199-501
a Plan name	GREATER DAYTON SURGERY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER DAYTON SURGERY CENTER	**c** EIN-PN	20-2913367-501
a Plan name	GREATER HAMILTON COC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER HAMILTON COC	**c** EIN-PN	31-0237220-501
a Plan name	GREATER MEDINA COC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER MEDINA COC	**c** EIN-PN	34-0693547-501
a Plan name	GREATER TOMORROW HEALTH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREATER TOMORROW HEALTH, LLC	**c** EIN-PN	82-0791852-501
a Plan name	GREEN BUILDING CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN BUILDING CONSULTING	**c** EIN-PN	26-2085203-501
a Plan name	GREEN CHARGE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN CHARGE, INC	**c** EIN-PN	46-2745824-501

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	GREEN FIELD AG LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN FIELD AG LLC	**c** EIN-PN	46-1817340-501
a Plan name	GREEN HAINES SGAMBATI LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN HAINES SGAMBATI LPA	**c** EIN-PN	34-1224415-501
a Plan name	GREEN INNOVATIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN INNOVATIONS, LLC	**c** EIN-PN	26-4230720-501
a Plan name	GREEN LEGACY SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN LEGACY	**c** EIN-PN	85-2584608-501
a Plan name	GREEN LIGHTING WHOLESALE SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN LIGHTING WHOLESALE	**c** EIN-PN	82-3355783-501
a Plan name	GREEN MEADOWS VET HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GREEN MEADOWS VET HOSPITAL	**c** EIN-PN	31-1752794-501
a Plan name	GREENBERG FOOT AND ANKLE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENBERG FOOT AND ANKLE LLC	**c** EIN-PN	45-2758267-501
a Plan name	GREENBOARDIT SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENBOARDIT	**c** EIN-PN	86-3142166-501
a Plan name	GREENE GONE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENE GONE LLC	**c** EIN-PN	81-5075467-501
a Plan name	GREENE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENE INC	**c** EIN-PN	31-0828736-501
a Plan name	GREENE METROPOLITAN HOUSING AUTHORITY SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENE METROPOLITAN HOUSING AUTHORITY	**c** EIN-PN	31-0669308-501
a Plan name	GREENFIELD TALENT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENFIELD TALENT SOLUTIONS	**c** EIN-PN	82-2999737-501

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	GREENHILLS FOOD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENHILLS FOOD INC	**c** EIN-PN	88-1344551-501
a Plan name	GREENLEAF JOB TRAINING SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENLEAF JOB TRAINING	**c** EIN-PN	36-4984449-501
a Plan name	GREENLEAF LANDSCAPES SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENLEAF LANDSCAPES	**c** EIN-PN	31-0988356-501
a Plan name	GREENLINE CREATIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENLINE CREATIVE LLC	**c** EIN-PN	26-3237469-501
a Plan name	GREENLY MORTGAGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENLY MORTGAGE LLC	**c** EIN-PN	87-3280503-501
a Plan name	GREENSITE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENSITE LLC	**c** EIN-PN	27-2937469-501
a Plan name	GREENSPACE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENSPACE CONSTRUCTION	**c** EIN-PN	45-4065360-501
a Plan name	GREENSTAR HOOD CLEANING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENSTAR HOOD CLEANING SERVICES	**c** EIN-PN	45-2440215-501
a Plan name	GREENTEC PRECISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENTEC PRECISION INC	**c** EIN-PN	31-1537909-501
a Plan name	GREENTECH CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENTECH CORP	**c** EIN-PN	31-1252120-501
a Plan name	GREENTREE LEGAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENTREE LEGAL	**c** EIN-PN	47-2518642-501
a Plan name	GREENWOOD INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREENWOOD INSURANCE AGENCY INC	**c** EIN-PN	34-1135601-501

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	GREER COMMUNITIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREER COMMUNITIES LLC	**c** EIN-PN	99-3365898-502
a Plan name	GREG GATES ARCHITECT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREG GATES ARCHITECT LLC	**c** EIN-PN	47-4991977-501
a Plan name	GREG SWEET CHEVROLET BUICK SOCA BENEFIT PLAN		
b Name of plan sponsor	GREG SWEET CHEVROLET BUICK	**c** EIN-PN	34-1615763-501
a Plan name	GREGORY FORREST LESTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREGORY FORREST LESTER INC	**c** EIN-PN	31-0840087-501
a Plan name	GREGORY YOUNG SOCA BENEFIT PLAN		
b Name of plan sponsor	GREGORY YOUNG	**c** EIN-PN	31-1721742-501
a Plan name	GREIWE INTERIORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GREIWE INTERIORS INC	**c** EIN-PN	31-1495706-501
a Plan name	GRIDSTONE CONSTRUCTION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GRIDSTONE CONSTRUCTION, INC.	**c** EIN-PN	47-3188014-501
a Plan name	GRIFFITH ROOFING & REMODELING SOCA BENEFIT PLAN		
b Name of plan sponsor	GRIFFITH ROOFING & REMODELING	**c** EIN-PN	27-1810380-501
a Plan name	GRIPCO PRODUCTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GRIPCO PRODUCTS, INC.	**c** EIN-PN	34-1831828-501
a Plan name	GRISELLE ORTIZ RAMSEY DMD SOCA BENEFIT PLAN		
b Name of plan sponsor	GRISELLE ORTIZ RAMSEY DMD	**c** EIN-PN	27-1899696-501
a Plan name	GRIZZ CLEANING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GRIZZ CLEANING LLC	**c** EIN-PN	92-1212567-502
a Plan name	GROSE & MANZ BUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	GROSE & MANZ BUILDERS	**c** EIN-PN	92-2195872-501

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	GROSS DRAINAGE & EXCAVATION SOCA BENEFIT PLAN		
b Name of plan sponsor	GROSS DRAINAGE & EXCAVATION	**c** EIN-PN	81-1510130-501
a Plan name	GROUNDSMITH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROUNDSMITH LLC	**c** EIN-PN	82-2548663-501
a Plan name	GROUNDWORK GROUP SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROUNDWORK GROUP SOLUTIONS LLC	**c** EIN-PN	87-3820923-502
a Plan name	GROUNDWORK OHIO RIVER VALLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	GROUNDWORK OHIO RIVER VALLEY	**c** EIN-PN	84-2991804-501
a Plan name	GROUP ELEVEN CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROUP ELEVEN CONSULTING INC	**c** EIN-PN	20-0239867-501
a Plan name	GROUT SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROUT SYSTEMS INC	**c** EIN-PN	34-1481761-501
a Plan name	GROVE CITY FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	GROVE CITY FAMILY DENTISTRY	**c** EIN-PN	31-1663264-501
a Plan name	GROW OHIO AGRICULTURE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	GROW OHIO AGRICULTURE INC.	**c** EIN-PN	84-4958717-501
a Plan name	GROWTERRA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROWTERRA LLC	**c** EIN-PN	92-2256134-501
a Plan name	GROWTH OPPORTUNITY PARTNERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GROWTH OPPORTUNITY PARTNERS INC	**c** EIN-PN	47-4257622-501
a Plan name	GRYPHON FUND GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	GRYPHON FUND GROUP	**c** EIN-PN	87-2358621-501
a Plan name	GSC ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	GSC ENTERPRISES	**c** EIN-PN	34-1679468-501

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	GSCREG SOCA BENEFIT PLAN		
b Name of plan sponsor	GSCREG	**c** EIN-PN	84-4605366-501
a Plan name	GSP HALL OF FAME BATTING SOCA BENEFIT PLAN		
b Name of plan sponsor	GSP HALL OF FAME BATTING	**c** EIN-PN	45-2732821-501
a Plan name	GT TRADE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GT TRADE LLC	**c** EIN-PN	87-3671860-501
a Plan name	GTR CINCINNATI COM SHARES SOCA BENEFIT PLAN		
b Name of plan sponsor	GTR CINCINNATI COM SHARES	**c** EIN-PN	31-1445067-501
a Plan name	GUARANTEED FINISHING UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	GUARANTEED FINISHING UNLIMITED	**c** EIN-PN	34-1404711-501
a Plan name	GUARDIA PERFUSION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	GUARDIA PERFUSION SERVICES	**c** EIN-PN	47-5068912-501
a Plan name	GUARDIAN MEDICAL USA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GUARDIAN MEDICAL USA LLC	**c** EIN-PN	82-1919621-501
a Plan name	GUARDIAN QUALITY PAINTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	GUARDIAN QUALITY PAINTING LLC	**c** EIN-PN	99-1867205-501
a Plan name	GUILFORD GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GUILFORD GROUP INC	**c** EIN-PN	16-1661144-501
a Plan name	GULLCO INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	GULLCO INTERNATIONAL	**c** EIN-PN	34-9993334-501
a Plan name	GUNDRUM & ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GUNDRUM & ASSOCIATES INC	**c** EIN-PN	20-3012526-501
a Plan name	GUNZELMAN ARCHITECTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	GUNZELMAN ARCHITECTURE	**c** EIN-PN	27-1035166-501

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	GUSHEN AMERICA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	GUSHEN AMERICA INC	**c** EIN-PN	81-2763077-501
a Plan name	GUST GALLUCCI COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	GUST GALLUCCI COMPANY	**c** EIN-PN	34-0758817-501
a Plan name	GUTTER GUARDS OF AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	GUTTER GUARDS OF AMERICA	**c** EIN-PN	84-2736017-501
a Plan name	GWINS STEAM CLEANING SOCA BENEFIT PLAN		
b Name of plan sponsor	GWINS STEAM CLEANING	**c** EIN-PN	31-0874993-501
a Plan name	H AND M MACHINE AND TOOL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	H AND M MACHINE AND TOOL, LLC	**c** EIN-PN	26-2015129-501
a Plan name	H AND M MACHINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	H AND M MACHINE INC	**c** EIN-PN	86-3033964-501
a Plan name	H AND M PRECISION CONCRETE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	H AND M PRECISION CONCRETE, LLC	**c** EIN-PN	27-0941817-501
a Plan name	H AND S EXCAVATING AND TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	H AND S EXCAVATING AND TRUCKING	**c** EIN-PN	31-1578411-501
a Plan name	H AND T SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	H AND T SERVICES	**c** EIN-PN	45-5065523-501
a Plan name	H G VIOLET INC SOCA BENEFIT PLAN		
b Name of plan sponsor	H G VIOLET INC	**c** EIN-PN	34-1888736-501
a Plan name	H GLASGOW CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	H GLASGOW CONSTRUCTION	**c** EIN-PN	31-1025789-502
a Plan name	H&B WINDOW CLEANING SOCA BENEFIT PLAN		
b Name of plan sponsor	H&B WINDOW CLEANING	**c** EIN-PN	34-1178494-502

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&G EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	H&G EQUIPMENT	**c** EIN-PN	31-1054928-501
a Plan name	H.F. EVERETT GAS AND OIL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	H.F. EVERETT GAS AND OIL INC	**c** EIN-PN	34-1131536-501
a Plan name	H.J. BENKEN FLORIST AND GARDEN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	H.J. BENKEN FLORIST AND GARDEN CENTER	**c** EIN-PN	31-1151658-501
a Plan name	H.O.P.E. WORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	H.O.P.E. WORKS	**c** EIN-PN	84-4331153-501
a Plan name	HAAS BROTHERS EXCAVATING & SOCA BENEFIT PLAN		
b Name of plan sponsor	HAAS BROTHERS EXCAVATING &	**c** EIN-PN	83-3777513-501
a Plan name	HABER DERMATOLOGY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HABER DERMATOLOGY, INC.	**c** EIN-PN	02-0641311-501
a Plan name	HABITAT FOR EXCELLENCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HABITAT FOR EXCELLENCE LLC	**c** EIN-PN	81-3823355-501
a Plan name	HABITAT FOR HUMANITY SOCA BENEFIT PLAN		
b Name of plan sponsor	HABITAT FOR HUMANITY	**c** EIN-PN	31-1304319-501
a Plan name	HABITAT FOR HUMANITY FOR MEDINA COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	HABITAT FOR HUMANITY FOR MEDINA COUNTY	**c** EIN-PN	34-1658090-501
a Plan name	HABITAT FOR HUMANITY OF GD SOCA BENEFIT PLAN		
b Name of plan sponsor	HABITAT FOR HUMANITY OF GD	**c** EIN-PN	31-1104456-501
a Plan name	HACKMAN FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HACKMAN FINANCIAL GROUP	**c** EIN-PN	31-1463720-501
a Plan name	HAGEMAN TRUCKING SRVC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAGEMAN TRUCKING SRVC LLC	**c** EIN-PN	47-1736290-502

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	HAGEN DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	HAGEN DENTAL	**c** EIN-PN	31-0965791-501
a Plan name	HAGERTY AND MAZZOLA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAGERTY AND MAZZOLA, INC	**c** EIN-PN	31-1451581-501
a Plan name	HAGLAGE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	HAGLAGE CONSTRUCTION	**c** EIN-PN	31-1624074-501
a Plan name	HAGUE WATER CONDITIONING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAGUE WATER CONDITIONING INC	**c** EIN-PN	31-1379521-501
a Plan name	HAHLEN AND WATT PRODUCTS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAHLEN AND WATT PRODUCTS, INC	**c** EIN-PN	26-2264453-501
a Plan name	HAHLEN LINE SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAHLEN LINE SERVICES, LLC	**c** EIN-PN	82-4781914-501
a Plan name	HAIR ARTISTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAIR ARTISTS INC	**c** EIN-PN	31-0898301-501
a Plan name	HAIRE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	HAIRE CONSTRUCTION	**c** EIN-PN	82-2122226-501
a Plan name	HAIRLESS HARE BREWERY SOCA BENEFIT PLAN		
b Name of plan sponsor	HAIRLESS HARE BREWERY	**c** EIN-PN	46-2438381-501
a Plan name	HALCYON SOLUTIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HALCYON SOLUTIONS, INC	**c** EIN-PN	31-1343200-501
a Plan name	HALL AND PARLOR LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HALL AND PARLOR LTD	**c** EIN-PN	88-2558273-501
a Plan name	HALL FINANCIAL ADVISORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HALL FINANCIAL ADVISORS, LLC	**c** EIN-PN	20-1964545-501

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	HALLENROSS AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	HALLENROSS AND ASSOCIATES	**c** EIN-PN	73-1672208-501
a Plan name	HALLER WEALTH MANAGEMENT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HALLER WEALTH MANAGEMENT GROUP	**c** EIN-PN	31-1370315-501
a Plan name	HALLMARK STUDENT DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	HALLMARK STUDENT DEVELOPMENT	**c** EIN-PN	81-1972136-501
a Plan name	HALLS HVAC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HALLS HVAC LLC	**c** EIN-PN	47-3783954-501
a Plan name	HALLS SHEET METAL FABRICATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HALLS SHEET METAL FABRICATION INC	**c** EIN-PN	31-1437749-501
a Plan name	HAMILTON & RAPPOLD INDL SV SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON & RAPPOLD INDL SV	**c** EIN-PN	83-1824553-501
a Plan name	HAMILTON CONTRACTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON CONTRACTORS LLC	**c** EIN-PN	82-3128200-501
a Plan name	HAMILTON FENCE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON FENCE COMPANY	**c** EIN-PN	31-1429986-501
a Plan name	HAMILTON INDUSTRIAL GRINDING SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON INDUSTRIAL GRINDING	**c** EIN-PN	31-0630480-501
a Plan name	HAMILTON MACHINE SERVICES CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON MACHINE SERVICES CORP	**c** EIN-PN	05-0566255-501
a Plan name	HAMILTON RAYE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON RAYE LLC	**c** EIN-PN	81-3821139-501
a Plan name	HAMILTON SKY INVESTMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON SKY INVESTMENT	**c** EIN-PN	20-4413750-501

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	HAMILTON TELEPHONE ANSWERING SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMILTON TELEPHONE ANSWERING SERVICES INC	**c** EIN-PN	31-0917117-501
a Plan name	HAMMAKER-SCHUSTER SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMMAKER-SCHUSTER SOLUTIONS	**c** EIN-PN	61-1610294-501
a Plan name	HAMMETT ASPHALT PAVING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMMETT ASPHALT PAVING, INC	**c** EIN-PN	34-1084496-501
a Plan name	HAMMONTREE & ASSOCIATES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HAMMONTREE & ASSOCIATES LTD	**c** EIN-PN	34-1147301-501
a Plan name	HANCOCK COUNTY PERFORMING ARTS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	HANCOCK COUNTY PERFORMING ARTS CENTER	**c** EIN-PN	46-0912382-501
a Plan name	HANDYMAN AUSTINTOWN, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HANDYMAN AUSTINTOWN, INC.	**c** EIN-PN	51-0491950-501
a Plan name	HANKEN-WOLFE IMPORTS CO., INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HANKEN-WOLFE IMPORTS CO., INC	**c** EIN-PN	47-1419731-501
a Plan name	HANNAH NEWS SERVICE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HANNAH NEWS SERVICE, INC	**c** EIN-PN	31-1325117-501
a Plan name	HANNAHS HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	HANNAHS HOME	**c** EIN-PN	34-1869974-501
a Plan name	HANS TRUCK AND TRAILER SOCA BENEFIT PLAN		
b Name of plan sponsor	HANS TRUCK AND TRAILER	**c** EIN-PN	34-1165089-501
a Plan name	HANSEN ACTUARIAL AND RISK CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HANSEN ACTUARIAL AND RISK CONSULTING LLC	**c** EIN-PN	87-4746435-501
a Plan name	HARBAUGH MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	HARBAUGH MECHANICAL	**c** EIN-PN	34-1914131-502

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	HARBOR PARK MARINA SOCA BENEFIT PLAN		
b Name of plan sponsor	HARBOR PARK MARINA	**c** EIN-PN	81-1321948-501
a Plan name	HARCO INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	HARCO INDUSTRIES	**c** EIN-PN	51-3194100-501
a Plan name	HARCUM HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	HARCUM HOUSE	**c** EIN-PN	43-2113958-501
a Plan name	HARD ASSET SOCA BENEFIT PLAN		
b Name of plan sponsor	HARD ASSET	**c** EIN-PN	83-4717572-501
a Plan name	HARD EIGHT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HARD EIGHT LLC	**c** EIN-PN	27-3330102-501
a Plan name	HARD SURFACES SOCA BENEFIT PLAN		
b Name of plan sponsor	HARD SURFACES	**c** EIN-PN	81-2944740-501
a Plan name	HARDER RESTAURANT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HARDER RESTAURANT GROUP	**c** EIN-PN	83-1392299-501
a Plan name	HARDIN CREEK MACHINE AND TOOL, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HARDIN CREEK MACHINE AND TOOL, INC	**c** EIN-PN	34-1805084-501
a Plan name	HARKYS MOTORSPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	HARKYS MOTORSPORTS	**c** EIN-PN	45-4460579-501
a Plan name	HARLAN AUTO CARE LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HARLAN AUTO CARE LTD	**c** EIN-PN	27-1047149-501
a Plan name	HARLAN MILLER AND ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	HARLAN MILLER AND ASSOC	**c** EIN-PN	31-0903628-501
a Plan name	HARLOW BUILDERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HARLOW BUILDERS INC	**c** EIN-PN	31-1445453-501

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	HARMON FACIAL PLASTIC SURG SOCA BENEFIT PLAN		
b Name of plan sponsor	HARMON FACIAL PLASTIC SURG	**c** EIN-PN	85-1972135-501
a Plan name	HARMONY VILLAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	HARMONY VILLAGE	**c** EIN-PN	34-1296522-501
a Plan name	HAROLD JARNICKI & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	HAROLD JARNICKI & ASSOCIATES	**c** EIN-PN	31-1020612-501
a Plan name	HARPER & CO., CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	HARPER & CO., CPAS	**c** EIN-PN	81-2793035-501
a Plan name	HARRAL AND STEVENSON, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HARRAL AND STEVENSON, LLC.	**c** EIN-PN	46-2424137-501
a Plan name	HARRIS SEARCH ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	HARRIS SEARCH ASSOCIATES	**c** EIN-PN	31-1576181-501
a Plan name	HARRISON WEALTH MANAGEMENT GROUP LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	HARRISON WEALTH MANAGEMENT GROUP LTD.	**c** EIN-PN	81-4341519-502
a Plan name	HART CONSTRUCTION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HART CONSTRUCTION, INC.	**c** EIN-PN	20-2846946-501
a Plan name	HARTCO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HARTCO, INC.	**c** EIN-PN	31-1025113-501
a Plan name	HARTLEY OIL COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	HARTLEY OIL COMPANY	**c** EIN-PN	31-1003476-501
a Plan name	HARTNECK RD. LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HARTNECK RD. LLC	**c** EIN-PN	34-1955094-501
a Plan name	HARTUNG TITLE AGENCY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HARTUNG TITLE AGENCY, INC.	**c** EIN-PN	34-1601048-501

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	HARVARD STEEL SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	HARVARD STEEL SALES	**c** EIN-PN	34-1926390-501
a Plan name	HARVEST RIDGE ASSEMBLY SOCA BENEFIT PLAN		
b Name of plan sponsor	HARVEST RIDGE ASSEMBLY	**c** EIN-PN	34-1706737-501
a Plan name	HARVEY AND THERESA HOLT SOCA BENEFIT PLAN		
b Name of plan sponsor	HARVEY AND THERESA HOLT	**c** EIN-PN	47-4743317-501
a Plan name	HATHAWAY HILL SOCA BENEFIT PLAN		
b Name of plan sponsor	HATHAWAY HILL	**c** EIN-PN	82-5333666-501
a Plan name	HATHAWAY STAMP & IDENTIFICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	HATHAWAY STAMP & IDENTIFICATION	**c** EIN-PN	27-1384904-501
a Plan name	HAUBERT AND HOWE, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HAUBERT AND HOWE, LLC.	**c** EIN-PN	57-1199026-501
a Plan name	HAUCK BROTHERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAUCK BROTHERS, INC	**c** EIN-PN	31-0599870-501
a Plan name	HAUDENSCHILD INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	HAUDENSCHILD INSURANCE	**c** EIN-PN	34-1331527-501
a Plan name	HAUS STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	HAUS STUDIO	**c** EIN-PN	83-1976015-501
a Plan name	HAVENS FAMILY DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAVENS FAMILY DENTAL LLC	**c** EIN-PN	45-2884532-501
a Plan name	HAVENSAFE FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	HAVENSAFE FARM	**c** EIN-PN	26-0315381-501
a Plan name	HAWAIIAN POOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	HAWAIIAN POOLS	**c** EIN-PN	26-3953921-501

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	HAWKS AND ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAWKS AND ASSOCIATES INC	**c** EIN-PN	31-0854008-501
a Plan name	HAYDEN FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	HAYDEN FAMILY DENTAL	**c** EIN-PN	46-4289123-501
a Plan name	HAYES BROTHERS ORNAMENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	HAYES BROTHERS ORNAMENTAL	**c** EIN-PN	34-4451045-501
a Plan name	HAYES REFRIGERATION SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	HAYES REFRIGERATION SERV	**c** EIN-PN	57-1160917-501
a Plan name	HAYS ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAYS ENTERPRISES INC	**c** EIN-PN	34-1301479-501
a Plan name	HAZELWOOD FLOORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAZELWOOD FLOORS, LLC	**c** EIN-PN	47-1197071-501
a Plan name	HAZMO GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HAZMO GROUP, LLC	**c** EIN-PN	46-4112315-501
a Plan name	HB ELECTRIC AND CONST LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HB ELECTRIC AND CONST LLC	**c** EIN-PN	47-1503379-501
a Plan name	HBP STRONGSVILLE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HBP STRONGSVILLE LLC	**c** EIN-PN	93-1913541-501
a Plan name	HD MOVING SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HD MOVING SERVICES, LLC	**c** EIN-PN	83-2923511-501
a Plan name	HDA WEALTH MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HDA WEALTH MANAGEMENT LLC	**c** EIN-PN	87-2642493-501
a Plan name	HDTK MOTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HDTK MOTORS LLC	**c** EIN-PN	84-3428886-501

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	HEAL PALESTINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEAL PALESTINE INC	**c** EIN-PN	88-2454707-501
a Plan name	HEALTH AND HAPPINESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH AND HAPPINESS LLC	**c** EIN-PN	46-3361420-501
a Plan name	HEALTH CARE PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH CARE PRODUCTS INC	**c** EIN-PN	20-2810422-501
a Plan name	HEALTH CARE PROVIDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH CARE PROVIDERS	**c** EIN-PN	34-1708405-501
a Plan name	HEALTH CONNECTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH CONNECTIONS	**c** EIN-PN	26-1321915-501
a Plan name	HEALTH DATA INNOVATIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH DATA INNOVATIONS INC	**c** EIN-PN	27-1519811-501
a Plan name	HEALTH MARKETPLACE SOL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTH MARKETPLACE SOL LLC	**c** EIN-PN	83-2498037-501
a Plan name	HEALTHPLAN DATA SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHPLAN DATA SOLUTIONS	**c** EIN-PN	27-2317602-502
a Plan name	HEALTHSOURCE CHIROPRACTIC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHSOURCE CHIROPRACTIC, INC.	**c** EIN-PN	20-4064616-501
a Plan name	HEALTHTECH BIOACTIVES US INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHTECH BIOACTIVES US INC	**c** EIN-PN	87-0899242-502
a Plan name	HEALTHY MOMS & BABES SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHY MOMS & BABES	**c** EIN-PN	31-1155292-501
a Plan name	HEALTHY PETS OF ROME HILRD SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHY PETS OF ROME HILRD	**c** EIN-PN	31-1651746-501

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	HEALTHY ROSTER SOCA BENEFIT PLAN		
b Name of plan sponsor	HEALTHY ROSTER	**c** EIN-PN	47-4154256-501
a Plan name	HEARN'S PRECISION AUTOMOTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEARNS PRECISION AUTOMOTIVE LLC	**c** EIN-PN	34-1387231-501
a Plan name	HEART OF OHIO CLASSICAL ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	HEART OF OHIO CLASSICAL ACADEMY	**c** EIN-PN	93-2011911-501
a Plan name	HEARTLAND ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND ACADEMY	**c** EIN-PN	82-0951650-501
a Plan name	HEARTLAND BUILDING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND BUILDING GROUP	**c** EIN-PN	88-1407654-501
a Plan name	HEARTLAND EXCAVATING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND EXCAVATING LLC	**c** EIN-PN	31-1707316-501
a Plan name	HEAT ARCHIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEAT ARCHIVE LLC	**c** EIN-PN	83-3155110-501
a Plan name	HEATHER B MOORE SOCA BENEFIT PLAN		
b Name of plan sponsor	HEATHER B MOORE	**c** EIN-PN	11-3468983-501
a Plan name	HEATMAX HEATERS SOCA BENEFIT PLAN		
b Name of plan sponsor	HEATMAX HEATERS	**c** EIN-PN	34-0761701-501
a Plan name	HEATWAVE POOLS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEATWAVE POOLS, LLC	**c** EIN-PN	26-3185305-501
a Plan name	HEAVY CREAM SOCA BENEFIT PLAN		
b Name of plan sponsor	HEAVY CREAM	**c** EIN-PN	83-3914259-501
a Plan name	HEC DOUGH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEC DOUGH LLC	**c** EIN-PN	46-2859169-501

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	HEDGES DESIGNS SOCA BENEFIT PLAN		
b Name of plan sponsor	HEDGES DESIGNS	**c** EIN-PN	37-1442847-501
a Plan name	HEELS HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	HEELS HOME	**c** EIN-PN	82-1940771-501
a Plan name	HEETER INSURANCE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEETER INSURANCE AGENCY LLC	**c** EIN-PN	83-0621151-501
a Plan name	HEIRLOOM VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	HEIRLOOM VENTURES	**c** EIN-PN	88-2668965-501
a Plan name	HELICAL LINE PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HELICAL LINE PRODUCTS INC	**c** EIN-PN	34-0942155-501
a Plan name	HELIX CO SOCA BENEFIT PLAN		
b Name of plan sponsor	HELIX CO	**c** EIN-PN	85-0668070-501
a Plan name	HELMES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HELMES, INC.	**c** EIN-PN	20-3260221-501
a Plan name	HELMS FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	HELMS FOUNDATION	**c** EIN-PN	84-3735426-501
a Plan name	HELP HOTLINE CRISIS CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HELP HOTLINE CRISIS CENTER INC	**c** EIN-PN	34-1196630-501
a Plan name	HELPING HANDS MASSAGE THERAPY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HELPING HANDS MASSAGE THERAPY LLC	**c** EIN-PN	46-4327047-501
a Plan name	HELPLINE OF DELAWARE AND MORROW COUNTIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HELPLINE OF DELAWARE AND MORROW COUNTIES, INC.	**c** EIN-PN	31-0858350-501
a Plan name	HENDERSON, MOKHTARI AND WEATHERLY, CO. L.P.A. SOCA BENEFIT PLAN		
b Name of plan sponsor	HENDERSON, MOKHTARI AND WEATHERLY, CO. L.P.A.	**c** EIN-PN	20-4632078-501

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	HENDRICKS AND SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HENDRICKS AND SONS INC	**c** EIN-PN	47-4960655-501
a Plan name	HENDY ENTERPRISES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HENDY ENTERPRISES LTD	**c** EIN-PN	31-1437195-501
a Plan name	HENRY AND WRIGHT CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	HENRY AND WRIGHT CORPORATION	**c** EIN-PN	31-1502362-501
a Plan name	HENRY FENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	HENRY FENCE	**c** EIN-PN	47-2043893-501
a Plan name	HENRY W BERGMAN, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HENRY W BERGMAN, INC	**c** EIN-PN	34-4472276-501
a Plan name	HENTON & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	HENTON & ASSOCIATES	**c** EIN-PN	20-2026153-502
a Plan name	HENWAY TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	HENWAY TECHNOLOGIES	**c** EIN-PN	45-4529534-501
a Plan name	HEPOLA SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HEPOLA SYSTEMS INC	**c** EIN-PN	13-4220292-501
a Plan name	HERB KROMBHOLZ JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	HERB KROMBHOLZ JEWELERS	**c** EIN-PN	31-0716008-501
a Plan name	HERBERT AND ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERBERT AND ASSOCIATES INC	**c** EIN-PN	31-1621107-501
a Plan name	HERCULES CAR WASH ONE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERCULES CAR WASH ONE INC	**c** EIN-PN	92-3972366-501
a Plan name	HERCULES FIRE PROTECT PLUMB SOCA BENEFIT PLAN		
b Name of plan sponsor	HERCULES FIRE PROTECT PLUMB	**c** EIN-PN	38-3734395-502

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	HERCULES INDUSTRIAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERCULES INDUSTRIAL INC	**c** EIN-PN	31-1628248-501
a Plan name	HERCULES LED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERCULES LED LLC	**c** EIN-PN	46-5189144-501
a Plan name	HERITAGE FAMILY MEDICINE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HERITAGE FAMILY MEDICINE, INC.	**c** EIN-PN	51-0493514-501
a Plan name	HERITAGE FINANCIAL PLANNER SOCA BENEFIT PLAN		
b Name of plan sponsor	HERITAGE FINANCIAL PLANNER	**c** EIN-PN	87-3553495-501
a Plan name	HERITAGE INSURANCE ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERITAGE INSURANCE ADVISORS LLC	**c** EIN-PN	82-1631609-501
a Plan name	HERITAGE OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	HERITAGE OHIO	**c** EIN-PN	34-1845898-501
a Plan name	HERMES-PARKER CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	HERMES-PARKER CONCRETE	**c** EIN-PN	20-1697363-501
a Plan name	HERMIS CORPORATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HERMIS CORPORATION LLC	**c** EIN-PN	54-2187608-501
a Plan name	HERRINGTON ARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	HERRINGTON ARMS	**c** EIN-PN	83-3745151-501
a Plan name	HERSH PACKING AND RUBBER SOCA BENEFIT PLAN		
b Name of plan sponsor	HERSH PACKING AND RUBBER	**c** EIN-PN	31-0743184-501
a Plan name	HEULE TOOL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	HEULE TOOL CORP	**c** EIN-PN	38-2827502-501
a Plan name	HEYMAN TALENT AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	HEYMAN TALENT AGENCY	**c** EIN-PN	31-1343387-501

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	HF CONTROLS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HF CONTROLS LLC	**c** EIN-PN	81-1928981-501
a Plan name	HFS WEALTH ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	HFS WEALTH ADVISORS	**c** EIN-PN	20-8347798-501
a Plan name	HG INSURANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HG INSURANCE LLC	**c** EIN-PN	99-0831579-501
a Plan name	HGRM, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HGRM, LLC	**c** EIN-PN	38-3921339-501
a Plan name	HI STANDARD MACHINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HI STANDARD MACHINE LLC	**c** EIN-PN	47-1420460-501
a Plan name	HI TECH EXTRUSIONS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HI TECH EXTRUSIONS LTD	**c** EIN-PN	34-1872867-501
a Plan name	HICKMAN ORTHODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	HICKMAN ORTHODONTICS	**c** EIN-PN	80-0499430-501
a Plan name	HIGBEA EMBROIDERY SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGBEA EMBROIDERY	**c** EIN-PN	81-0951330-501
a Plan name	HIGH COTTON RENTALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH COTTON RENTALS LLC	**c** EIN-PN	47-3474152-501
a Plan name	HIGH ENROLL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH ENROLL, LLC	**c** EIN-PN	83-3702244-501
a Plan name	HIGH POINT ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH POINT ANIMAL HOSPITAL	**c** EIN-PN	34-1465861-501
a Plan name	HIGH POINT VENTURE LABS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH POINT VENTURE LABS, LLC	**c** EIN-PN	81-2949332-501

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	HIGH ROCK PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH ROCK PEST CONTROL	**c** EIN-PN	45-4100128-501
a Plan name	HIGH TECH SIGNS SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH TECH SIGNS	**c** EIN-PN	31-1285452-501
a Plan name	HIGH TEMPERATURE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGH TEMPERATURE SYSTEMS	**c** EIN-PN	34-1094235-501
a Plan name	HIGHER HEIGHTS FITNESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGHER HEIGHTS FITNESS LLC	**c** EIN-PN	86-2017175-501
a Plan name	HIGHFIELD DOOR SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGHFIELD DOOR SALES	**c** EIN-PN	30-0683595-501
a Plan name	HIGHLAND MAINTENANCE SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGHLAND MAINTENANCE SERV	**c** EIN-PN	47-4066695-501
a Plan name	HIGHLIFT EQUIPMENT LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGHLIFT EQUIPMENT LTD	**c** EIN-PN	20-5221018-501
a Plan name	HIGHLIFT OFFROAD SOCA BENEFIT PLAN		
b Name of plan sponsor	HIGHLIFT OFFROAD	**c** EIN-PN	47-2025180-501
a Plan name	HILL AND GRIFFITH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	HILL AND GRIFFITH COMPANY	**c** EIN-PN	93-3718453-501
a Plan name	HILL FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	HILL FUNERAL HOME	**c** EIN-PN	82-1000946-501
a Plan name	HILLCREST FAMILY VISION SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLCREST FAMILY VISION	**c** EIN-PN	59-3791264-501
a Plan name	HILLIARD VETERINARY HOSP SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLIARD VETERINARY HOSP	**c** EIN-PN	20-5090920-501

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	HILLMAN PRECISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLMAN PRECISION INC	**c** EIN-PN	34-1912428-501
a Plan name	HILLS SUPPLY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLS SUPPLY INC.	**c** EIN-PN	34-1283217-501
a Plan name	HILLSBORO TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLSBORO TRANSPORTATION	**c** EIN-PN	31-0522183-501
a Plan name	HILLTOP LAWN AND GARDEN SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLTOP LAWN AND GARDEN	**c** EIN-PN	34-1705337-501
a Plan name	HILLTOP OBSTETRICS AND GYNECOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLTOP OBSTETRICS AND GYNECOLOGY	**c** EIN-PN	31-1236707-502
a Plan name	HILLVIEW VETERINARY SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HILLVIEW VETERINARY SERVICES, INC	**c** EIN-PN	31-1411742-501
a Plan name	HILZINGER AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	HILZINGER AMERICA	**c** EIN-PN	47-4253285-501
a Plan name	HINKLE & KLATTE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HINKLE & KLATTE INC	**c** EIN-PN	31-1194035-501
a Plan name	HISPANIC UMADAOP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HISPANIC UMADAOP INC	**c** EIN-PN	34-1622274-501
a Plan name	HIT AND RUN SOCA BENEFIT PLAN		
b Name of plan sponsor	HIT AND RUN	**c** EIN-PN	20-2814746-501
a Plan name	HITCHCOCK CENTER FOR WOMEN SOCA BENEFIT PLAN		
b Name of plan sponsor	HITCHCOCK CENTER FOR WOMEN	**c** EIN-PN	34-1264097-501
a Plan name	HIVE NETWORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HIVE NETWORKS INC	**c** EIN-PN	83-2341873-501

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	HIVELY CONTRACTING CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	HIVELY CONTRACTING CO.	**c** EIN-PN	26-4309994-501
a Plan name	HOBBS LOCK AND KEY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOBBS LOCK AND KEY INC	**c** EIN-PN	34-4471332-501
a Plan name	HOCHMAN AND PLUNKETT CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	HOCHMAN AND PLUNKETT CO LPA	**c** EIN-PN	31-0962458-501
a Plan name	HOCKRAN EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOCKRAN EXCAVATING INC	**c** EIN-PN	34-1216406-501
a Plan name	HOCK'S PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	HOCKS PHARMACY	**c** EIN-PN	31-0730534-501
a Plan name	HOEY ENTERPRISES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOEY ENTERPRISES, INC	**c** EIN-PN	31-1313161-501
a Plan name	HOFFMAN AND KUHN, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HOFFMAN AND KUHN, INC.	**c** EIN-PN	31-4440850-501
a Plan name	HOKUTO USA SOCA BENEFIT PLAN		
b Name of plan sponsor	HOKUTO USA	**c** EIN-PN	26-0402173-501
a Plan name	HOLLINGER EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOLLINGER EXCAVATING INC	**c** EIN-PN	34-1819398-501
a Plan name	HOLLOWAY VENTURES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOLLOWAY VENTURES LLC	**c** EIN-PN	84-3239567-501
a Plan name	HOLT & REICHARD SOCA BENEFIT PLAN		
b Name of plan sponsor	HOLT & REICHARD	**c** EIN-PN	31-0992525-501
a Plan name	HOLTMEIER PLUMBING CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOLTMEIER PLUMBING CO INC	**c** EIN-PN	31-0605388-501

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	HOLZFASTER CECIL MCKNIGHT SOCA BENEFIT PLAN		
b Name of plan sponsor	HOLZFASTER CECIL MCKNIGHT	**c** EIN-PN	31-1630057-501
a Plan name	HOME FEDERAL SAVINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME FEDERAL SAVINGS	**c** EIN-PN	34-0295420-501
a Plan name	HOME IMPROVEMENT SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME IMPROVEMENT SYSTEMS INC	**c** EIN-PN	62-1827948-501
a Plan name	HOME IMPROVEMINT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME IMPROVEMINT LLC	**c** EIN-PN	84-4085934-501
a Plan name	HOME REPAIR RESOURCE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME REPAIR RESOURCE CENTER	**c** EIN-PN	23-7131204-501
a Plan name	HOME SAVINGS BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME SAVINGS BANK	**c** EIN-PN	34-4264429-501
a Plan name	HOME SERVICES ADVISORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME SERVICES ADVISORS, LLC	**c** EIN-PN	88-2572802-501
a Plan name	HOME SOURCE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOME SOURCE, LLC	**c** EIN-PN	87-1630766-501
a Plan name	HOMEBASE SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMEBASE	**c** EIN-PN	31-0973498-501
a Plan name	HOMECARE MATTRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMECARE MATTRESS	**c** EIN-PN	31-1339306-501
a Plan name	HOMELAND CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMELAND CONSTRUCTION SERVICES	**c** EIN-PN	26-2231496-502
a Plan name	HOMEMAKERS BAR SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMEMAKERS BAR	**c** EIN-PN	84-2245979-501

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	HOMES FOR CANINES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMES FOR CANINES LLC	**c** EIN-PN	47-4755033-501
a Plan name	HOMESTEAD INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMESTEAD INSURANCE AGENCY INC	**c** EIN-PN	34-1354043-501
a Plan name	HOMESTRETCH SERVICES II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMESTRETCH SERVICES II LLC	**c** EIN-PN	88-3719420-501
a Plan name	HOMETOWN APARTMENTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN APARTMENTS, LLC	**c** EIN-PN	46-2103951-501
a Plan name	HOMETOWN FLOORING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN FLOORING SOLUTIONS	**c** EIN-PN	47-4529251-501
a Plan name	HOMETOWN PRODUCE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN PRODUCE, INC.	**c** EIN-PN	82-0565077-501
a Plan name	HOMETOWN REAL ESTATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN REAL ESTATE LLC	**c** EIN-PN	47-5620693-501
a Plan name	HONARDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HONARDS LLC	**c** EIN-PN	88-1613399-501
a Plan name	HOOF HEARTED BREWERY SOCA BENEFIT PLAN		
b Name of plan sponsor	HOOF HEARTED BREWERY	**c** EIN-PN	45-2792612-501
a Plan name	HOON, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOON, INC	**c** EIN-PN	31-0718325-501
a Plan name	HOOVER KACYON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOOVER KACYON LLC	**c** EIN-PN	81-3277098-501
a Plan name	HOOVER ROAD FAMILY PRACTICE SOCA BENEFIT PLAN		
b Name of plan sponsor	HOOVER ROAD FAMILY PRACTICE	**c** EIN-PN	31-1120450-501

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	HOPE COUNSELING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	HOPE COUNSELING SERVICES	**c** EIN-PN	83-3187859-501
a Plan name	HOPE EVANGELICAL FREE CH SOCA BENEFIT PLAN		
b Name of plan sponsor	HOPE EVANGELICAL FREE CH	**c** EIN-PN	31-1313622-501
a Plan name	HOPE HOME CARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOPE HOME CARE LLC	**c** EIN-PN	45-4579917-501
a Plan name	HOPE LEARNING ACADEMY OF TOLEDO SOCA BENEFIT PLAN		
b Name of plan sponsor	HOPE LEARNING ACADEMY OF TOLEDO	**c** EIN-PN	46-2122868-501
a Plan name	HOPE RECOVERY COMMUNITY SOCA BENEFIT PLAN		
b Name of plan sponsor	HOPE RECOVERY COMMUNITY	**c** EIN-PN	83-2330980-501
a Plan name	HORENSTEIN, NICHOLSON, AND BLUMENTHAL, LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	HORENSTEIN, NICHOLSON, AND BLUMENTHAL, LPA	**c** EIN-PN	31-0981315-501
a Plan name	HORIZONS COMPANIES SOCA BENEFIT PLAN		
b Name of plan sponsor	HORIZONS COMPANIES	**c** EIN-PN	31-1077465-501
a Plan name	HORNBECK HOME RENOVATIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HORNBECK HOME RENOVATIONS INC	**c** EIN-PN	34-1938884-501
a Plan name	HORNER NETWORKS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HORNER NETWORKS, LLC	**c** EIN-PN	56-2404878-501
a Plan name	HORSE HAVEN STABLES SOCA BENEFIT PLAN		
b Name of plan sponsor	HORSE HAVEN STABLES	**c** EIN-PN	82-3354962-501
a Plan name	HOSANNA REVIVAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOSANNA REVIVAL LLC	**c** EIN-PN	81-2246204-501
a Plan name	HOSPICE CARE OF MIDDLETOWN SOCA BENEFIT PLAN		
b Name of plan sponsor	HOSPICE CARE OF MIDDLETOWN	**c** EIN-PN	74-3131974-501

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	HOTBED MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	HOTBED MEDIA	**c** EIN-PN	73-1684515-501
a Plan name	HOTY ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOTY ENTERPRISES INC	**c** EIN-PN	34-1241117-501
a Plan name	HOUCK ASPHALT MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUCK ASPHALT MAINTENANCE	**c** EIN-PN	81-4493788-501
a Plan name	HOUSE OF PIECES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUSE OF PIECES LLC	**c** EIN-PN	83-3754034-501
a Plan name	HOUSE OF SAMUEL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUSE OF SAMUEL INC	**c** EIN-PN	31-1647194-501
a Plan name	HOUSING SOLUTIONS OF GREENE COUNTY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUSING SOLUTIONS OF GREENE COUNTY INC	**c** EIN-PN	31-1605673-501
a Plan name	HOUSINGHOTLINK SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUSINGHOTLINK	**c** EIN-PN	31-1697090-501
a Plan name	HOUSTON BROS WATERPROOFING SOCA BENEFIT PLAN		
b Name of plan sponsor	HOUSTON BROS WATERPROOFING	**c** EIN-PN	31-1663758-501
a Plan name	HOWARD, NUNN & BLOOM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWARD, NUNN & BLOOM INC	**c** EIN-PN	31-1149489-501
a Plan name	HOWELL REHAB INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWELL REHAB INC	**c** EIN-PN	31-1373537-501
a Plan name	HOWELL RESCUE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWELL RESCUE SYSTEMS	**c** EIN-PN	31-1402133-501
a Plan name	HOWERTON CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWERTON CONSTRUCTION CO	**c** EIN-PN	31-1644392-501

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	HOWE'S HENS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWES HENS LLC	**c** EIN-PN	45-3620418-501
a Plan name	HOWLAND MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWLAND MACHINE	**c** EIN-PN	34-1634516-501
a Plan name	HOWLAND ORTHOPEDIC CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWLAND ORTHOPEDIC CENTER	**c** EIN-PN	34-1341850-502
a Plan name	HOWLAND S AUTOHAUS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWLAND S AUTOHAUS	**c** EIN-PN	82-3896418-501
a Plan name	HOWLAND VILLAGE II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWLAND VILLAGE II LLC	**c** EIN-PN	27-2829225-501
a Plan name	HOWLEY AND COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWLEY AND COMPANY INC	**c** EIN-PN	34-1346485-501
a Plan name	HOWMAN BROS ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HOWMAN BROS ELECTRIC LLC	**c** EIN-PN	47-1265667-501
a Plan name	HOYING & HOYING BUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	HOYING & HOYING BUILDERS	**c** EIN-PN	34-1311778-501
a Plan name	HPE GIBSON GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HPE GIBSON GROUP	**c** EIN-PN	31-1021571-501
a Plan name	HR ELEMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	HR ELEMENTS	**c** EIN-PN	47-4460648-501
a Plan name	HR INSIDERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HR INSIDERS LLC	**c** EIN-PN	27-2320962-501
a Plan name	HRABCAK & COMPANY LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	HRABCAK & COMPANY LPA	**c** EIN-PN	31-1491663-501

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	HRS AND S LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HRS AND S LLC	**c** EIN-PN	46-1633261-501
a Plan name	HSC CENTRAL OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HSC CENTRAL OHIO LLC	**c** EIN-PN	27-4265926-501
a Plan name	HSH DRYWALL AND PAINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	HSH DRYWALL AND PAINTING	**c** EIN-PN	45-3162883-501
a Plan name	HSP INVESTMENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HSP INVESTMENT GROUP LLC	**c** EIN-PN	83-2658316-502
a Plan name	HT VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	HT VENTURES	**c** EIN-PN	85-2387418-501
a Plan name	HUBER PROPERTY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HUBER PROPERTY GROUP	**c** EIN-PN	84-2511966-501
a Plan name	HUBSEARCH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUBSEARCH LLC	**c** EIN-PN	81-4580866-501
a Plan name	HUDEPOHL JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	HUDEPOHL JEWELERS	**c** EIN-PN	31-0935109-501
a Plan name	HUDNICH SOCA BENEFIT PLAN		
b Name of plan sponsor	HUDNICH	**c** EIN-PN	20-4878000-501
a Plan name	HUEBER HOMES SOCA BENEFIT PLAN		
b Name of plan sponsor	HUEBER HOMES	**c** EIN-PN	20-1204219-501
a Plan name	HUESMAN SCHMID INSURANCE AGENCY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HUESMAN SCHMID INSURANCE AGENCY, INC.	**c** EIN-PN	31-0939991-501
a Plan name	HUEY & WEPRIN MANAGEMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUEY & WEPRIN MANAGEMENT INC	**c** EIN-PN	99-4654993-501

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	HUFFMAN DENTISTRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUFFMAN DENTISTRY LLC	**c** EIN-PN	82-1177602-502
a Plan name	HUMANE SOCIETY GTR DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	HUMANE SOCIETY GTR DAYTON	**c** EIN-PN	31-0537073-501
a Plan name	HUMBLE CREATURES VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUMBLE CREATURES VETERINARY CLINIC	**c** EIN-PN	87-2775792-501
a Plan name	HUMONGOUS HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUMONGOUS HOLDINGS LLC	**c** EIN-PN	84-3861208-501
a Plan name	HUMPHREY ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUMPHREY ELECTRIC	**c** EIN-PN	77-0706827-501
a Plan name	HUNGRY TRAVELER LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	HUNGRY TRAVELER LTD	**c** EIN-PN	81-1220873-501
a Plan name	HUNTER MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	HUNTER MARKETING	**c** EIN-PN	85-2764489-501
a Plan name	HUNTER S FLOORING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUNTER S FLOORING LLC	**c** EIN-PN	86-1578553-501
a Plan name	HUNTER VALLEY COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HUNTER VALLEY COMPANY LLC	**c** EIN-PN	46-1321009-501
a Plan name	HUNTSMAN TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	HUNTSMAN TRUCKING	**c** EIN-PN	34-1144520-501
a Plan name	HUSS EQUIPMENT CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	HUSS EQUIPMENT CORP.	**c** EIN-PN	34-4443220-501
a Plan name	HUSTON CREEK MOBILE REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	HUSTON CREEK MOBILE REPAIR	**c** EIN-PN	86-1587776-501

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	HUWEL INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	HUWEL INSURANCE GROUP	**c** EIN-PN	46-3978551-501
a Plan name	HVAC TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HVAC TECHNOLOGIES INC	**c** EIN-PN	20-4060809-501
a Plan name	HY TECH CONTROLS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HY TECH CONTROLS INC	**c** EIN-PN	34-1386550-501
a Plan name	HYDE PARK LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	HYDE PARK LANDSCAPING	**c** EIN-PN	01-0829598-501
a Plan name	HYDE PARK PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	HYDE PARK PEDIATRICS	**c** EIN-PN	31-1478300-501
a Plan name	HYDRATECH ENGINEERED PROD SOCA BENEFIT PLAN		
b Name of plan sponsor	HYDRATECH ENGINEERED PROD	**c** EIN-PN	26-4011918-501
a Plan name	HYDROFORCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	HYDROFORCE INC	**c** EIN-PN	81-0557661-501
a Plan name	HYGGE BEHAVIOR HEALTH & WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	HYGGE BEHAVIOR HEALTH & WELLNESS	**c** EIN-PN	85-0511050-501
a Plan name	HYPER TECH RESEARCH, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HYPER TECH RESEARCH, INC.	**c** EIN-PN	31-1751734-501
a Plan name	HYPERCULTURE MARKETING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HYPERCULTURE MARKETING GROUP LLC	**c** EIN-PN	85-4285631-501
a Plan name	HYPERDRIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HYPERDRIVE LLC	**c** EIN-PN	27-4387923-501
a Plan name	HYPERPRODUCTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	HYPERPRODUCTIVE	**c** EIN-PN	27-1044698-501

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	HYPERTENSION NEPHROLOGY CONSULTANTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	HYPERTENSION NEPHROLOGY CONSULTANTS, INC.	**c** EIN-PN	31-1279911-501
a Plan name	HZRX LOCOMOTIVE LEASING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	HZRX LOCOMOTIVE LEASING LLC	**c** EIN-PN	46-5190871-501
a Plan name	I & R PUPPY SPA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	I & R PUPPY SPA LLC	**c** EIN-PN	82-2917955-501
a Plan name	I.A. LEWIN, P.E. AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	I.A. LEWIN, P.E. AND ASSOCIATES	**c** EIN-PN	34-1621476-501
a Plan name	IANIRO LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	IANIRO LANDSCAPING	**c** EIN-PN	34-1929605-501
a Plan name	IBISCUS CHILD CARE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	IBISCUS CHILD CARE CENTER	**c** EIN-PN	26-3138916-501
a Plan name	I-C AUTOMATION SOCA BENEFIT PLAN		
b Name of plan sponsor	I-C AUTOMATION	**c** EIN-PN	81-1954796-501
a Plan name	IC3D INC SOCA BENEFIT PLAN		
b Name of plan sponsor	IC3D INC	**c** EIN-PN	45-5526278-501
a Plan name	ICCRC INTER COMMUNITY CABLE REGULATORY COMMISSION SOCA BENEFIT PLAN		
b Name of plan sponsor	ICCRC INTER COMMUNITY CABLE REGULATORY COMMISSION	**c** EIN-PN	31-1005731-501
a Plan name	ICON TECH & PROC CONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ICON TECH & PROC CONS	**c** EIN-PN	46-0523504-501
a Plan name	IDEAL CONCRETE COATINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	IDEAL CONCRETE COATINGS	**c** EIN-PN	83-4258240-501
a Plan name	IDEAL PROPERTY MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	IDEAL PROPERTY MAINTENANCE	**c** EIN-PN	26-4060532-501

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	IDEAVATION PROPERTIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	IDEAVATION PROPERTIES, INC.	**c** EIN-PN	26-1447240-501
a Plan name	IEEFA SOCA BENEFIT PLAN		
b Name of plan sponsor	IEEFA	**c** EIN-PN	45-4244605-501
a Plan name	IF CONSULTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	IF CONSULTING SERVICES	**c** EIN-PN	82-2494074-502
a Plan name	IFLO MEDIA LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	IFLO MEDIA LTD	**c** EIN-PN	20-8235551-501
a Plan name	IGHNAT ENTERPRISES LLC PULP JUICE AND SMOOTHIE BAR SOCA BENEFIT PLAN		
b Name of plan sponsor	IGHNAT ENTERPRISES LLC PULP JUICE AND SMOOTHIE BAR	**c** EIN-PN	26-2568320-501
a Plan name	IGN MEDICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	IGN MEDICAL LLC	**c** EIN-PN	34-1893300-501
a Plan name	IKAZE EAST AFRICAN MARKET SOCA BENEFIT PLAN		
b Name of plan sponsor	IKAZE EAST AFRICAN MARKET	**c** EIN-PN	84-3738474-501
a Plan name	ILAMBDA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ILAMBDA INC	**c** EIN-PN	82-0874354-501
a Plan name	ILER NETWORKING AND COMPUTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ILER NETWORKING AND COMPUTING	**c** EIN-PN	30-0108815-501
a Plan name	IMAGE CONSULTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	IMAGE CONSULTING SERVICES	**c** EIN-PN	20-1551610-501
a Plan name	IMAGE GALLERY SOCA BENEFIT PLAN		
b Name of plan sponsor	IMAGE GALLERY	**c** EIN-PN	31-0952476-501
a Plan name	IMAGE PRINT SOCA BENEFIT PLAN		
b Name of plan sponsor	IMAGE PRINT	**c** EIN-PN	31-1692546-501

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	IMAGINOS PRODUCTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	IMAGINOS PRODUCTIONS LLC	**c** EIN-PN	47-2790354-501
a Plan name	IMBUS ENTERPRISE LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	IMBUS ENTERPRISE LLP	**c** EIN-PN	31-1409439-501
a Plan name	IMMIGRANT & REFUGEE LAW CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	IMMIGRANT & REFUGEE LAW CENTER	**c** EIN-PN	82-2744813-501
a Plan name	IMPACT FLEET SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	IMPACT FLEET SERVICES, INC	**c** EIN-PN	31-1630164-501
a Plan name	IMPERIAL COMMUNITIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	IMPERIAL COMMUNITIES, INC.	**c** EIN-PN	34-0861631-501
a Plan name	IMPERIAL HOME LOANS SOCA BENEFIT PLAN		
b Name of plan sponsor	IMPERIAL HOME LOANS	**c** EIN-PN	99-2087100-501
a Plan name	IMPERIAL ROOFING AND CONTRACTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	IMPERIAL ROOFING AND CONTRACTING LLC	**c** EIN-PN	92-1180810-501
a Plan name	IMS TECHNOLOGY & SECURITY SOCA BENEFIT PLAN		
b Name of plan sponsor	IMS TECHNOLOGY & SECURITY	**c** EIN-PN	81-3293957-501
a Plan name	IN CONTROL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	IN CONTROL INC	**c** EIN-PN	47-3375571-501
a Plan name	INCENTA REWARDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INCENTA REWARDS LLC	**c** EIN-PN	46-4091280-501
a Plan name	INCLUSIVE HOUSING RESOURCE SOCA BENEFIT PLAN		
b Name of plan sponsor	INCLUSIVE HOUSING RESOURCE	**c** EIN-PN	84-3657368-501
a Plan name	INCOM INTEGRATED COMPUTER SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INCOM INTEGRATED COMPUTER SYSTEMS INC	**c** EIN-PN	34-1800598-502

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	IND ELECTRICAL CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	IND ELECTRICAL CONTRACTORS	**c** EIN-PN	23-7399281-501
a Plan name	INDEPENDENT CAPITAL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT CAPITAL MANAGEMENT	**c** EIN-PN	26-3029556-501
a Plan name	INDEPENDENT ELECTRICAL CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT ELECTRICAL CONTRACTORS	**c** EIN-PN	31-1220611-501
a Plan name	INDEPENDENT EMPLOYMENT SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT EMPLOYMENT SERVICES LLC	**c** EIN-PN	82-2394368-501
a Plan name	INDIA GOSPEL LEAGUE NA SOCA BENEFIT PLAN		
b Name of plan sponsor	INDIA GOSPEL LEAGUE NA	**c** EIN-PN	31-1423556-501
a Plan name	INDIRECT LENDING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	INDIRECT LENDING SERVICES	**c** EIN-PN	46-1755951-501
a Plan name	INDIVIDUAL FITNESS SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	INDIVIDUAL FITNESS SOLUTIONS	**c** EIN-PN	31-1794474-501
a Plan name	INDROLECT CO SOCA BENEFIT PLAN		
b Name of plan sponsor	INDROLECT CO	**c** EIN-PN	31-0825005-501
a Plan name	INDUST MOLD AND MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUST MOLD AND MACHINE	**c** EIN-PN	34-1593083-501
a Plan name	INDUSTRIAL CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL CONTROL	**c** EIN-PN	20-1660211-501
a Plan name	INDUSTRIAL HYDRAULIC SERVICES, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL HYDRAULIC SERVICES, LTD	**c** EIN-PN	34-1960572-501
a Plan name	INDUSTRIAL MANAGEMENT AND ENGINEERING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL MANAGEMENT AND ENGINEERING GROUP LLC	**c** EIN-PN	20-5630862-501

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	INDUSTRIAL PHYSICAL CAPABILITY SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL PHYSICAL CAPABILITY SERVICES INC	**c** EIN-PN	34-1871840-501
a Plan name	INDUSTRIAL REPAIR AND MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL REPAIR AND MANUFACTURING	**c** EIN-PN	34-1818693-501
a Plan name	INDUSTRIAL SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL SOLUTIONS, LLC	**c** EIN-PN	45-4356385-501
a Plan name	INDUSTRIAL TOTE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL TOTE SERVICES	**c** EIN-PN	34-1851620-501
a Plan name	INDUSTRIAL WASTE CONTROL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL WASTE CONTROL INC	**c** EIN-PN	34-1752923-501
a Plan name	INDUSTRIAL WIRELESS SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL WIRELESS	**c** EIN-PN	84-2579750-501
a Plan name	INDUSTRY INSIGHTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INDUSTRY INSIGHTS INC	**c** EIN-PN	31-1028984-501
a Plan name	INFINITE HELPING HANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INFINITE HELPING HANDS LLC	**c** EIN-PN	85-1059908-501
a Plan name	INFINITI DIALYSIS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	INFINITI DIALYSIS CENTER	**c** EIN-PN	47-1891764-502
a Plan name	INFINITY EYE CARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INFINITY EYE CARE LLC	**c** EIN-PN	85-0933391-501
a Plan name	INFINITY TITLE SOCA BENEFIT PLAN		
b Name of plan sponsor	INFINITY TITLE	**c** EIN-PN	35-2630483-501
a Plan name	INGLE BARR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INGLE BARR INC	**c** EIN-PN	31-1034799-501

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	INGRAM DISNEY INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	INGRAM DISNEY INSURANCE	**c** EIN-PN	31-1006514-501
a Plan name	INKLINE PRINTING & FULFILL SOCA BENEFIT PLAN		
b Name of plan sponsor	INKLINE PRINTING & FULFILL	**c** EIN-PN	85-2721345-501
a Plan name	INLAND MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	INLAND MANAGEMENT	**c** EIN-PN	31-0922562-501
a Plan name	INLAND PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INLAND PRODUCTS INC	**c** EIN-PN	31-4372115-502
a Plan name	INLINE UNDERGROUND HDD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INLINE UNDERGROUND HDD LLC	**c** EIN-PN	47-3529499-501
a Plan name	INNER PEACE CLEVELAND LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNER PEACE CLEVELAND LLC	**c** EIN-PN	83-3983037-501
a Plan name	INNERVIEW TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNERVIEW TECHNOLOGIES LLC	**c** EIN-PN	83-0915893-501
a Plan name	INNOVATIVE CARD SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE CARD SOLUTIONS, LLC	**c** EIN-PN	74-3254340-501
a Plan name	INNOVATIVE OFFICE SOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE OFFICE SOLUTION	**c** EIN-PN	34-1958147-501
a Plan name	INNOVATIVE PIXEL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE PIXEL LLC	**c** EIN-PN	46-4835286-501
a Plan name	INNOVATIVE PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE PRODUCTS INC	**c** EIN-PN	38-3847858-501
a Plan name	INNOVATIVE WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE WELLNESS	**c** EIN-PN	85-1804415-501

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	INNOVATIVE WOODWORKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE WOODWORKING INC	**c** EIN-PN	31-1081977-501
a Plan name	INNOVISION AUTOMATION SOCA BENEFIT PLAN		
b Name of plan sponsor	INNOVISION AUTOMATION	**c** EIN-PN	34-1928282-501
a Plan name	INSCORE R W AND E SOCA BENEFIT PLAN		
b Name of plan sponsor	INSCORE R W AND E	**c** EIN-PN	34-1195377-501
a Plan name	INSIGHT BEHAVIORAL CONSULT SOCA BENEFIT PLAN		
b Name of plan sponsor	INSIGHT BEHAVIORAL CONSULT	**c** EIN-PN	84-4784630-501
a Plan name	INSIGNIA DISPLAY GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	INSIGNIA DISPLAY GRAPHICS	**c** EIN-PN	46-4545454-501
a Plan name	INSIVIA TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INSIVIA TECHNOLOGIES LLC	**c** EIN-PN	14-1843281-502
a Plan name	INSOURCE SOLUTIONS GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	INSOURCE SOLUTIONS GROUP	**c** EIN-PN	20-1400008-501
a Plan name	INSPIRE PR GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INSPIRE PR GROUP LLC	**c** EIN-PN	47-1101618-501
a Plan name	INSPIRED EDU PLANNING SOCA BENEFIT PLAN		
b Name of plan sponsor	INSPIRED EDU PLANNING	**c** EIN-PN	86-1775000-501
a Plan name	INSPIRING MINDS YOUTH.ORG SOCA BENEFIT PLAN		
b Name of plan sponsor	INSPIRING MINDS YOUTH.ORG	**c** EIN-PN	26-1429323-501
a Plan name	INSPLUS INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	INSPLUS INSURANCE AGENCY	**c** EIN-PN	46-3475841-501
a Plan name	INSTITUTIONAL PRESCRIPTION SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	INSTITUTIONAL PRESCRIPTION SVS	**c** EIN-PN	34-1399956-501

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	INSURANCE CENTER AGENCY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	INSURANCE CENTER AGENCY, INC.	**c** EIN-PN	31-1107445-501
a Plan name	INSURANCE CONSULTANTS GRP SOCA BENEFIT PLAN		
b Name of plan sponsor	INSURANCE CONSULTANTS GRP	**c** EIN-PN	36-4550650-501
a Plan name	INTEGRATED DERMATOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED DERMATOLOGY	**c** EIN-PN	46-2746957-501
a Plan name	INTEGRATED FINISHES SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED FINISHES	**c** EIN-PN	47-1986102-501
a Plan name	INTEGRATED IT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED IT GROUP	**c** EIN-PN	27-1980637-502
a Plan name	INTEGRATED SURGICAL SOL SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED SURGICAL SOL	**c** EIN-PN	46-4188271-501
a Plan name	INTEGRATED TRADE SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED TRADE SERVICES LLC	**c** EIN-PN	84-3868008-501
a Plan name	INTEGRATED VASCULAR SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATED VASCULAR SERVICES, LLC	**c** EIN-PN	20-8968671-501
a Plan name	INTEGRATIVE WELLNESS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRATIVE WELLNESS CENTER	**c** EIN-PN	85-3485622-501
a Plan name	INTEGRITY APPRAISAL SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY APPRAISAL SVS	**c** EIN-PN	34-1679969-501
a Plan name	INTEGRITY BOOKKEEPING SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY BOOKKEEPING	**c** EIN-PN	26-1102770-501
a Plan name	INTEGRITY FOUR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY FOUR LLC	**c** EIN-PN	82-2523788-501

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	INTEGRITY INTEGRATORS,LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY INTEGRATORS,LLC	**c** EIN-PN	83-1081869-501
a Plan name	INTEGRITY MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY MANUFACTURING	**c** EIN-PN	31-0916525-501
a Plan name	INTEGRITY OF SALEM SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY OF SALEM	**c** EIN-PN	47-4933486-501
a Plan name	INTEGRITY PAVING AND SEALING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY PAVING AND SEALING LLC	**c** EIN-PN	88-0881973-501
a Plan name	INTEGRITY PAYROLL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY PAYROLL LLC	**c** EIN-PN	45-3567312-501
a Plan name	INTEGRITY PLUMBING SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY PLUMBING SOLUTIONS INC	**c** EIN-PN	45-3704940-501
a Plan name	INTEGRITY PLUMBING SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY PLUMBING SYSTEMS	**c** EIN-PN	31-1678360-501
a Plan name	INTEGRITY RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY RESTORATION	**c** EIN-PN	81-3499227-501
a Plan name	INTEGRITY SERVICE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY SERVICE GROUP	**c** EIN-PN	45-5000050-501
a Plan name	INTEGRITY TECHNICAL SVCS SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY TECHNICAL SVCS	**c** EIN-PN	34-1845651-501
a Plan name	INTEK, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	INTEK, INC.	**c** EIN-PN	31-0873918-501
a Plan name	INTELLI-SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	INTELLI-SHOP	**c** EIN-PN	34-1896916-501

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	INTELLITECH CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	INTELLITECH CORPORATION	**c** EIN-PN	34-1853744-501
a Plan name	INTELLIX SOFTWARE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	INTELLIX SOFTWARE, INC.	**c** EIN-PN	20-2006503-501
a Plan name	INTERA COUNSELING AND WELLNESS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERA COUNSELING AND WELLNESS, LLC	**c** EIN-PN	86-3941556-501
a Plan name	INTERACT FOR HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERACT FOR HEALTH	**c** EIN-PN	31-0932681-501
a Plan name	INTERCONTINENTAL CHEMICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERCONTINENTAL CHEMICAL	**c** EIN-PN	93-0900466-501
a Plan name	INTERLINK CLOUD ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERLINK CLOUD ADVISORS	**c** EIN-PN	45-2641405-502
a Plan name	INTERNATIONAL BELT SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL BELT SALES	**c** EIN-PN	81-1241138-501
a Plan name	INTERNATIONAL COUNTERTOP CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL COUNTERTOP CONSULTANTS	**c** EIN-PN	34-1670206-501
a Plan name	INTERNATIONAL DISPLAY SYSTEMS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL DISPLAY SYSTEMS, INC.	**c** EIN-PN	31-1039481-501
a Plan name	INTERNATIONAL INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL INSURANCE	**c** EIN-PN	01-0811391-501
a Plan name	INTERNATIONAL MACHINING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL MACHINING INC	**c** EIN-PN	34-1404447-501
a Plan name	INTERNATIONAL METAL SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL METAL SUPPLY	**c** EIN-PN	38-3971848-501

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	INTERNATIONAL THEME PARK SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL THEME PARK	**c** EIN-PN	31-1127847-501
a Plan name	INTERSTATE BATTERY SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	INTERSTATE BATTERY SYSTEM	**c** EIN-PN	82-0566492-501
a Plan name	INTO GREAT BRANDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTO GREAT BRANDS INC	**c** EIN-PN	20-0287753-501
a Plan name	INTWINE CONNECT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INTWINE CONNECT LLC	**c** EIN-PN	80-0954170-501
a Plan name	INVESTEK MGMT SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INVESTEK MGMT SERVICES LLC	**c** EIN-PN	34-1916494-501
a Plan name	INVESTOR'S DIVERSIFIED REALTY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	INVESTORS DIVERSIFIED REALTY, LLC	**c** EIN-PN	20-4958765-501
a Plan name	INVIRSA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INVIRSA INC	**c** EIN-PN	81-2215595-501
a Plan name	INVIZIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	INVIZIONS INC	**c** EIN-PN	20-3927083-501
a Plan name	INVOLVE SOCA BENEFIT PLAN		
b Name of plan sponsor	INVOLVE	**c** EIN-PN	27-2945776-501
a Plan name	IPRECHECK SOCA BENEFIT PLAN		
b Name of plan sponsor	IPRECHECK	**c** EIN-PN	46-4649152-501
a Plan name	IQ LOGISTICS SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	IQ LOGISTICS SOLUTIONS	**c** EIN-PN	82-3671125-501
a Plan name	IRONGATE WEDDING VENUE SOCA BENEFIT PLAN		
b Name of plan sponsor	IRONGATE WEDDING VENUE	**c** EIN-PN	82-5119099-501

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	IRONICS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	IRONICS INC.	**c** EIN-PN	34-1149169-501
a Plan name	IRVIN PUBLIC RELATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	IRVIN PUBLIC RELATIONS	**c** EIN-PN	26-0099080-501
a Plan name	IRWIN ENGRAVING AND PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	IRWIN ENGRAVING AND PRINTING	**c** EIN-PN	34-0975817-501
a Plan name	ISAIAHS PLACE SOCA BENEFIT PLAN		
b Name of plan sponsor	ISAIAHS PLACE	**c** EIN-PN	01-0779327-501
a Plan name	ISLERCREST FARM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ISLERCREST FARM INC	**c** EIN-PN	31-1312840-501
a Plan name	ISNER INSURANCE ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	ISNER INSURANCE ASSOCIATES	**c** EIN-PN	31-0814001-501
a Plan name	ISOLNET INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ISOLNET INDUSTRIES LLC	**c** EIN-PN	45-2847508-501
a Plan name	ISW CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ISW CORPORATION	**c** EIN-PN	27-4044991-501
a Plan name	ISYNERGY SOCA BENEFIT PLAN		
b Name of plan sponsor	ISYNERGY	**c** EIN-PN	27-5373006-501
a Plan name	IT EXCHANGENET SOCA BENEFIT PLAN		
b Name of plan sponsor	IT EXCHANGENET	**c** EIN-PN	46-4873852-501
a Plan name	IVERY AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	IVERY AND ASSOCIATES LLC	**c** EIN-PN	81-2040125-501
a Plan name	J & L TRUCKING & EXCAVATIN SOCA BENEFIT PLAN		
b Name of plan sponsor	J & L TRUCKING & EXCAVATIN	**c** EIN-PN	26-1462992-501

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	J & S DAYCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	J & S DAYCARE	**c** EIN-PN	26-2755840-501
a Plan name	J & S MAINTENANCE CO. LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J & S MAINTENANCE CO. LLC	**c** EIN-PN	20-8492853-501
a Plan name	J A RUEHLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	J A RUEHLING INC	**c** EIN-PN	34-1657420-502
a Plan name	J AND B STEEL ERECTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND B STEEL ERECTORS INC	**c** EIN-PN	31-1620504-501
a Plan name	J AND J TRANSPORTATION SPECIALISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND J TRANSPORTATION SPECIALISTS	**c** EIN-PN	30-0083987-501
a Plan name	J AND L FARM BUTCHER SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND L FARM BUTCHER SHOP	**c** EIN-PN	92-1132164-502
a Plan name	J AND L PRECISION MFG LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND L PRECISION MFG LLC	**c** EIN-PN	27-0139049-501
a Plan name	J AND M RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND M RECYCLING	**c** EIN-PN	45-2548585-501
a Plan name	J AND R TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND R TRANSPORTATION	**c** EIN-PN	46-5239751-501
a Plan name	J AND W ROTO FILM SOCA BENEFIT PLAN		
b Name of plan sponsor	J AND W ROTO FILM	**c** EIN-PN	34-1232765-501
a Plan name	J CLAYTON EXCAVATION SOCA BENEFIT PLAN		
b Name of plan sponsor	J CLAYTON EXCAVATION	**c** EIN-PN	31-1224614-501
a Plan name	J COYNE DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	J COYNE DDS	**c** EIN-PN	27-2503781-501

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	J CROMPTON PROJECTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J CROMPTON PROJECTS LLC	**c** EIN-PN	82-4699206-501
a Plan name	J DWIGHT THOMPSON CO SOCA BENEFIT PLAN		
b Name of plan sponsor	J DWIGHT THOMPSON CO	**c** EIN-PN	31-1120312-501
a Plan name	J F LYDON M.D. LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J F LYDON M.D. LLC	**c** EIN-PN	34-2458365-502
a Plan name	J GOETZ FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J GOETZ FARMS LLC	**c** EIN-PN	84-2687520-501
a Plan name	J HENSLEY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	J HENSLEY SERVICES	**c** EIN-PN	46-4222141-501
a Plan name	J HERSHEY ARCHITECTURE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	J HERSHEY ARCHITECTURE INC	**c** EIN-PN	27-0956977-501
a Plan name	J HWANG INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	J HWANG INC.	**c** EIN-PN	31-1547768-501
a Plan name	J KAPELA CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	J KAPELA CONSTRUCTION	**c** EIN-PN	81-2685865-501
a Plan name	J M GAMING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J M GAMING LLC	**c** EIN-PN	41-2215046-501
a Plan name	J MILLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	J MILLING INC	**c** EIN-PN	47-2963308-501
a Plan name	J O S CONTRACTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J O S CONTRACTING LLC	**c** EIN-PN	27-3012436-501
a Plan name	J SQUARED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J SQUARED LLC	**c** EIN-PN	37-1796210-501

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	J W MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	J W MANAGEMENT	**c** EIN-PN	31-1499023-501
a Plan name	J WHEATLEY CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	J WHEATLEY CONSTRUCTION LLC	**c** EIN-PN	81-3988413-501
a Plan name	J&J AUTO UPHOLSTERY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	J&J AUTO UPHOLSTERY INC	**c** EIN-PN	31-1480123-501
a Plan name	J&R PUTNAM FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	J&R PUTNAM FARMS	**c** EIN-PN	82-0834997-501
a Plan name	J.K., INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	J.K., INC.	**c** EIN-PN	31-1376344-501
a Plan name	JABBY COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	JABBY COMMUNICATIONS	**c** EIN-PN	26-4438592-501
a Plan name	JACCO AND ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JACCO AND ASSOCIATES, INC.	**c** EIN-PN	34-1034670-501
a Plan name	JACK ANDERSON RUNION SOCA BENEFIT PLAN		
b Name of plan sponsor	JACK ANDERSON RUNION	**c** EIN-PN	34-1370644-501
a Plan name	JACK JOSEPH MORTON MANDEL SOCA BENEFIT PLAN		
b Name of plan sponsor	JACK JOSEPH MORTON MANDEL	**c** EIN-PN	34-6546418-501
a Plan name	JACK P. STEWART, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JACK P. STEWART, INC.	**c** EIN-PN	74-3237252-501
a Plan name	JACK ROUSE ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	JACK ROUSE ASSOCIATES	**c** EIN-PN	31-1220353-501
a Plan name	JACK SAM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JACK SAM LLC	**c** EIN-PN	20-5775248-501

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	JACKSON COUNTY WATER CO SOCA BENEFIT PLAN		
b Name of plan sponsor	JACKSON COUNTY WATER CO	**c** EIN-PN	31-0807291-501
a Plan name	JACO ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JACO ENTERPRISES INC	**c** EIN-PN	31-1604634-501
a Plan name	JACOB AND SONS MEATS SOCA BENEFIT PLAN		
b Name of plan sponsor	JACOB AND SONS MEATS	**c** EIN-PN	26-3891078-501
a Plan name	JACOBS KLEINMAN SEIBEL & MCNALLY LAW FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	JACOBS KLEINMAN SEIBEL & MCNALLY LAW FIRM	**c** EIN-PN	31-1395286-501
a Plan name	JACOBS TOWING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JACOBS TOWING INC	**c** EIN-PN	26-0033534-501
a Plan name	JADGANG, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JADGANG, INC	**c** EIN-PN	30-0048200-501
a Plan name	JAGAT PETROLEUM SOCA BENEFIT PLAN		
b Name of plan sponsor	JAGAT PETROLEUM	**c** EIN-PN	82-1669529-501
a Plan name	JAGS MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	JAGS MECHANICAL	**c** EIN-PN	20-5972613-502
a Plan name	JAGWAY PROPERTIES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JAGWAY PROPERTIES, LLC	**c** EIN-PN	45-4145544-501
a Plan name	JAH PHARMACIES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JAH PHARMACIES, INC	**c** EIN-PN	65-1310852-501
a Plan name	JAKES AUTO SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	JAKES AUTO SERVICE	**c** EIN-PN	31-1477408-501
a Plan name	JALFCO TOO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JALFCO TOO LLC	**c** EIN-PN	85-3375518-501

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	JAMES AR SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES AR	**c** EIN-PN	84-3240236-501
a Plan name	JAMES C PERRILL SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES C PERRILL	**c** EIN-PN	31-1137072-501
a Plan name	JAMES COE WOOD PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES COE WOOD PRODUCTS	**c** EIN-PN	20-4732806-501
a Plan name	JAMES CONSTRUCTION & RENOVATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES CONSTRUCTION & RENOVATION LLC	**c** EIN-PN	27-0781292-501
a Plan name	JAMES F DENNY & SONS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES F DENNY & SONS LTD	**c** EIN-PN	34-1277084-501
a Plan name	JAMES M SHEPLER III SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES M SHEPLER III	**c** EIN-PN	36-4483303-501
a Plan name	JAMES PHARMACY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMES PHARMACY, INC.	**c** EIN-PN	34-1106381-501
a Plan name	JAMIE TURK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMIE TURK INC	**c** EIN-PN	40-2151017-501
a Plan name	JAMISON CONSTRUCTION SOL SOCA BENEFIT PLAN		
b Name of plan sponsor	JAMISON CONSTRUCTION SOL	**c** EIN-PN	32-0357874-501
a Plan name	JANAM LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	JANAM LIMITED	**c** EIN-PN	30-0149108-501
a Plan name	JANI-KING OF CLEVELAND SOCA BENEFIT PLAN		
b Name of plan sponsor	JANI-KING OF CLEVELAND	**c** EIN-PN	51-0455033-501
a Plan name	JANITOR EQUIPMENT CO SOCA BENEFIT PLAN		
b Name of plan sponsor	JANITOR EQUIPMENT CO	**c** EIN-PN	31-0725491-501

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	JANSON INDUSTRIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	JANSON INDUSTRIES LTD	**c** EIN-PN	55-0808814-501
a Plan name	JARED WHEELER SEPTIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JARED WHEELER SEPTIC LLC	**c** EIN-PN	88-1265338-501
a Plan name	JARRETT TRUCKING AND GRADING SOCA BENEFIT PLAN		
b Name of plan sponsor	JARRETT TRUCKING AND GRADING	**c** EIN-PN	90-0933146-501
a Plan name	JARVIS MECHANICAL CONSTRUC SOCA BENEFIT PLAN		
b Name of plan sponsor	JARVIS MECHANICAL CONSTRUC	**c** EIN-PN	31-1323707-501
a Plan name	JASON A BUEHNER SOCA BENEFIT PLAN		
b Name of plan sponsor	JASON A BUEHNER	**c** EIN-PN	46-1844326-501
a Plan name	JASON CARR ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JASON CARR ELECTRIC LLC	**c** EIN-PN	81-1321475-501
a Plan name	JAWORSKI PHYSICAL THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	JAWORSKI PHYSICAL THERAPY	**c** EIN-PN	31-1490517-501
a Plan name	JAY HEALTHCARE MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JAY HEALTHCARE MANAGEMENT LLC	**c** EIN-PN	46-3756749-501
a Plan name	JAY SPRINGER INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	JAY SPRINGER INS AGENCY	**c** EIN-PN	99-2138707-501
a Plan name	JAYS HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	JAYS HEATING AND COOLING	**c** EIN-PN	84-4056535-501
a Plan name	JAYS METAL CRAFTING SOCA BENEFIT PLAN		
b Name of plan sponsor	JAYS METAL CRAFTING	**c** EIN-PN	82-0685880-501
a Plan name	JAZ PROPERTIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	JAZ PROPERTIES LTD	**c** EIN-PN	34-1937458-501

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	JB ACCOUNTING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	JB ACCOUNTING COMPANY	**c** EIN-PN	93-3583780-501
a Plan name	JB ELITE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	JB ELITE CONSTRUCTION	**c** EIN-PN	27-4772733-501
a Plan name	JB MATRN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JB MATRN INC	**c** EIN-PN	91-2091863-501
a Plan name	JBIT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JBIT LLC	**c** EIN-PN	84-4923585-501
a Plan name	JBL ROOFING AND CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JBL ROOFING AND CONSTRUCTION INC	**c** EIN-PN	46-1007735-501
a Plan name	JBM CORPORATE HOLDINGS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JBM CORPORATE HOLDINGS INC	**c** EIN-PN	56-2624904-502
a Plan name	JB'S HOME ENERGY SOCA BENEFIT PLAN		
b Name of plan sponsor	JBS HOME ENERGY	**c** EIN-PN	47-4295422-501
a Plan name	JC AUTO BODY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JC AUTO BODY INC	**c** EIN-PN	34-1432820-501
a Plan name	JC MANAGEMENT OF CINCINNATI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JC MANAGEMENT OF CINCINNATI LLC	**c** EIN-PN	84-5106917-501
a Plan name	JCC MILES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JCC MILES INC	**c** EIN-PN	34-1607290-501
a Plan name	JCI CONTRACTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JCI CONTRACTORS INC	**c** EIN-PN	45-3909482-501
a Plan name	JCM MAINTENANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JCM MAINTENANCE LLC	**c** EIN-PN	27-1188863-501

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	JCRANE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JCRANE, INC.	**c** EIN-PN	31-1689937-501
a Plan name	JD BYRIDER SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	JD BYRIDER SALES	**c** EIN-PN	06-1669009-501
a Plan name	JD PIZZA OF FINDLAY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JD PIZZA OF FINDLAY, INC.	**c** EIN-PN	32-0082656-501
a Plan name	JDD INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JDD INC.	**c** EIN-PN	34-1762401-501
a Plan name	JDD LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	JDD LANDSCAPING	**c** EIN-PN	04-3840006-501
a Plan name	JEAN LUTZ NORTH AMERICA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JEAN LUTZ NORTH AMERICA LLC	**c** EIN-PN	45-3806072-501
a Plan name	JEB FRANCHISE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	JEB FRANCHISE GROUP	**c** EIN-PN	83-0621366-501
a Plan name	JED M KOOPS DMD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JED M KOOPS DMD LLC	**c** EIN-PN	83-4506753-501
a Plan name	JEFF BERNHARDT PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFF BERNHARDT PLUMBING	**c** EIN-PN	26-1468245-501
a Plan name	JEFF BONN ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFF BONN ENTERPRISES INC	**c** EIN-PN	47-5043275-501
a Plan name	JEFFERSON ER RESCUE DIST SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON ER RESCUE DIST	**c** EIN-PN	34-1178258-501
a Plan name	JEFFERSON WATER AND SEWER SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON WATER AND SEWER	**c** EIN-PN	31-1230414-501

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	JEFFREY R SCHONING, DDS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFREY R SCHONING, DDS, INC	**c** EIN-PN	31-1422091-501
a Plan name	JEFFREY S CREEGER SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFREY S CREEGER	**c** EIN-PN	34-1927720-501
a Plan name	JEFFREY WILSON DDS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFREY WILSON DDS, INC	**c** EIN-PN	06-1796881-501
a Plan name	JEFF'S AUTOMOTIVE REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFS AUTOMOTIVE REPAIR	**c** EIN-PN	13-4351871-501
a Plan name	JEFFS UNDERGROUND SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	JEFFS UNDERGROUND SERVICE	**c** EIN-PN	32-0199922-501
a Plan name	JENNASIS & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	JENNASIS & ASSOCIATES	**c** EIN-PN	45-2011671-501
a Plan name	JENNIFER M RIDGE SOCA BENEFIT PLAN		
b Name of plan sponsor	JENNIFER M RIDGE	**c** EIN-PN	31-1422528-502
a Plan name	JENNIFER R SOGAN DDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JENNIFER R SOGAN DDS LLC	**c** EIN-PN	92-2417639-501
a Plan name	JENT MECHANICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JENT MECHANICAL LLC	**c** EIN-PN	46-0646498-501
a Plan name	JEREZ LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JEREZ LLC	**c** EIN-PN	46-4750503-501
a Plan name	JERICHO FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	JERICHO FINANCIAL	**c** EIN-PN	82-1254829-501
a Plan name	JERNIGAN TRANSPORT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JERNIGAN TRANSPORT INC	**c** EIN-PN	47-2609121-501

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	JERRY HAAG MOTORS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JERRY HAAG MOTORS, INC.	**c** EIN-PN	31-0925010-501
a Plan name	JERRY HEFLIN AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	JERRY HEFLIN AUTOMOTIVE	**c** EIN-PN	31-0792095-501
a Plan name	JERRY SPEARS FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	JERRY SPEARS FUNERAL HOME	**c** EIN-PN	31-4366760-501
a Plan name	JERRYS TRANSMISSIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	JERRYS TRANSMISSIONS	**c** EIN-PN	31-1628722-501
a Plan name	JESSICA A BORZA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JESSICA A BORZA LLC	**c** EIN-PN	81-5118951-501
a Plan name	JEWELRY ART SOCA BENEFIT PLAN		
b Name of plan sponsor	JEWELRY ART	**c** EIN-PN	34-1228933-501
a Plan name	JEZERINAC GEERS AND ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JEZERINAC GEERS AND ASSOCIATES, INC.	**c** EIN-PN	31-0998276-501
a Plan name	JFK WINDOW & DOOR SOCA BENEFIT PLAN		
b Name of plan sponsor	JFK WINDOW & DOOR	**c** EIN-PN	31-1393943-501
a Plan name	JFP SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	JFP SALES	**c** EIN-PN	31-1329972-501
a Plan name	JIM CARVER AND SONS SOCA BENEFIT PLAN		
b Name of plan sponsor	JIM CARVER AND SONS	**c** EIN-PN	03-0440205-501
a Plan name	JIM NIER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	JIM NIER CONSTRUCTION	**c** EIN-PN	31-1280508-501
a Plan name	JIM OSBORNE & SON TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	JIM OSBORNE & SON TRUCKING	**c** EIN-PN	83-4594963-501

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	JIMMYS LAWN SERVICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JIMMYS LAWN SERVICE, LLC	**c** EIN-PN	40-0015624-501
a Plan name	JIMS AUTO CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	JIMS AUTO CLINIC	**c** EIN-PN	82-0549049-501
a Plan name	JIVA MED SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	JIVA MED SPA	**c** EIN-PN	45-3691433-501
a Plan name	JJ MINK INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	JJ MINK INCORPORATED	**c** EIN-PN	46-1654010-501
a Plan name	JJK AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JJK AND ASSOCIATES LLC	**c** EIN-PN	47-1706054-501
a Plan name	JJMM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JJMM LLC	**c** EIN-PN	85-2679988-501
a Plan name	JKG AUTO TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JKG AUTO TRANSPORT LLC	**c** EIN-PN	86-3208629-501
a Plan name	JKJT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JKJT GROUP LLC	**c** EIN-PN	81-2675657-501
a Plan name	JL JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	JL JEWELERS	**c** EIN-PN	31-1725633-501
a Plan name	JLC BUSINESS SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JLC BUSINESS SOLUTIONS, LLC	**c** EIN-PN	26-8506999-501
a Plan name	JLD CONSTRUCTION SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JLD CONSTRUCTION SERVICES, LLC	**c** EIN-PN	87-3440747-501
a Plan name	JLK JEWELS SOCA BENEFIT PLAN		
b Name of plan sponsor	JLK JEWELS	**c** EIN-PN	87-2210076-501

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	JLS EDUCATION GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JLS EDUCATION GROUP LLC	**c** EIN-PN	96-3969125-501
a Plan name	JM ARCHITECTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JM ARCHITECTS LLC	**c** EIN-PN	27-4587389-501
a Plan name	JM SUNBURY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JM SUNBURY LLC	**c** EIN-PN	81-2228766-501
a Plan name	JM VEROSTKO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JM VEROSTKO INC	**c** EIN-PN	31-1489037-501
a Plan name	JMAC ARCHITECTS AND PLANNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	JMAC ARCHITECTS AND PLANNERS	**c** EIN-PN	46-1715792-501
a Plan name	JME MAVERICK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JME MAVERICK INC	**c** EIN-PN	31-1398299-501
a Plan name	JMF, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JMF, LLC	**c** EIN-PN	82-5344025-501
a Plan name	JMI RECRUITING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	JMI RECRUITING SERVICES	**c** EIN-PN	87-2705060-501
a Plan name	JMM ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	JMM ARCHITECTS	**c** EIN-PN	31-1334908-501
a Plan name	JMW PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	JMW PLUMBING	**c** EIN-PN	38-3986325-501
a Plan name	JMWP SOCA BENEFIT PLAN		
b Name of plan sponsor	JMWP	**c** EIN-PN	20-3847731-501
a Plan name	JNJ FABRICATION AND WELDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JNJ FABRICATION AND WELDING LLC	**c** EIN-PN	81-3872884-501

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	JOBES INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	JOBES INSURANCE AGENCY	**c** EIN-PN	20-3195807-501
a Plan name	JODY JUBACH REALTOR SOCA BENEFIT PLAN		
b Name of plan sponsor	JODY JUBACH REALTOR	**c** EIN-PN	81-2910509-501
a Plan name	JODY ZINK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JODY ZINK LLC	**c** EIN-PN	46-2623267-501
a Plan name	JOE FINK CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	JOE FINK CONSTRUCTION CO	**c** EIN-PN	31-1129705-501
a Plan name	JOE KLOSTERMAN PLUMBING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOE KLOSTERMAN PLUMBING INC	**c** EIN-PN	31-1359148-501
a Plan name	JOE MINEO CREATIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOE MINEO CREATIVE LLC	**c** EIN-PN	81-1152901-501
a Plan name	JOE'S DRAIN CLEANING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOES DRAIN CLEANING LLC	**c** EIN-PN	82-1870071-501
a Plan name	JOE'S FISHMARKET, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JOES FISHMARKET, INC.	**c** EIN-PN	34-1961884-501
a Plan name	JOES LEGENDARY LOOKS SOCA BENEFIT PLAN		
b Name of plan sponsor	JOES LEGENDARY LOOKS	**c** EIN-PN	45-2651535-501
a Plan name	JOHN & ELYSE ENTERPRISES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN & ELYSE ENTERPRISES LTD	**c** EIN-PN	99-0423713-501
a Plan name	JOHN ANTALIS MD SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN ANTALIS MD	**c** EIN-PN	31-1430733-501
a Plan name	JOHN BOSU INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN BOSU INSURANCE AGENCY INC	**c** EIN-PN	34-1681126-501

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	JOHN BROWN FURNITURE SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN BROWN FURNITURE	**c** EIN-PN	34-1570647-501
a Plan name	JOHN C. WHITE DDS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN C. WHITE DDS, INC.	**c** EIN-PN	45-5307640-501
a Plan name	JOHN DSUBAN SPRING SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN DSUBAN SPRING SERVICE	**c** EIN-PN	31-1452799-501
a Plan name	JOHN F KILFOIL COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN F KILFOIL COMPANY	**c** EIN-PN	31-0716122-501
a Plan name	JOHN F MESSINA, D D S, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN F MESSINA, D D S, INC	**c** EIN-PN	34-1854848-501
a Plan name	JOHN FLECK AND SONS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN FLECK AND SONS INC.	**c** EIN-PN	34-1152373-501
a Plan name	JOHN GISSER CONSULT SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN GISSER CONSULT SVS	**c** EIN-PN	46-4200669-501
a Plan name	JOHN MUGAVIN AUTO BODY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN MUGAVIN AUTO BODY LLC	**c** EIN-PN	47-2543985-501
a Plan name	JOHN P. ROSE JR. TRUCKING AND EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN P. ROSE JR. TRUCKING AND EXCAVATING	**c** EIN-PN	30-0024251-501
a Plan name	JOHN R STRIEBEL DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN R STRIEBEL DDS INC	**c** EIN-PN	26-2320951-501
a Plan name	JOHN ROSE LAW OFFICE SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN ROSE LAW OFFICE	**c** EIN-PN	31-1054724-501
a Plan name	JOHN ROTHRAUFF DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN ROTHRAUFF DDS INC	**c** EIN-PN	20-8715057-501

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	JOHN TISDEL DISTRIBUTING SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHN TISDEL DISTRIBUTING	**c** EIN-PN	31-1202705-501
a Plan name	JOHNS TOWING & REPAIR SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHNS TOWING & REPAIR SERVICE	**c** EIN-PN	34-1456250-501
a Plan name	JOHN'S WELDING AND TOWING SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHNS WELDING AND TOWING	**c** EIN-PN	34-1792255-501
a Plan name	JOHNSON-NASH METAL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	JOHNSON-NASH METAL PRODUCTS	**c** EIN-PN	31-1222505-501
a Plan name	JOI DE VIVRE MED SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	JOI DE VIVRE MED SPA	**c** EIN-PN	82-4724182-501
a Plan name	JON THOMAS CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	JON THOMAS CONSULTING	**c** EIN-PN	46-4899610-501
a Plan name	JONES-GRIMES-LONG SNIDER SOCA BENEFIT PLAN		
b Name of plan sponsor	JONES-GRIMES-LONG SNIDER	**c** EIN-PN	31-0745051-501
a Plan name	JONMAR GEAR AND MACHINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JONMAR GEAR AND MACHINE INC	**c** EIN-PN	34-1918197-501
a Plan name	JORDAN CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JORDAN CONSTRUCTION INC	**c** EIN-PN	34-1788299-501
a Plan name	JORDAN M JOB DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JORDAN M JOB DDS INC	**c** EIN-PN	34-1252916-501
a Plan name	JOS BERNING PRINTING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	JOS BERNING PRINTING CO	**c** EIN-PN	31-1313468-501
a Plan name	JOSEPH D CARNEY & ASSOCS SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPH D CARNEY & ASSOCS	**c** EIN-PN	34-1884166-501

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 DAY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPH DAY, INC.	**c** EIN-PN	31-0256805-501
a Plan name	JOSEPH ROSSI FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPH ROSSI FUNERAL HOME	**c** EIN-PN	20-8120027-501
a Plan name	JOSEPH SERVICES, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPH SERVICES, LLC.	**c** EIN-PN	20-4474445-501
a Plan name	JOSEPH T JOSEPH JR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPH T JOSEPH JR LLC	**c** EIN-PN	77-0618185-501
a Plan name	JOSEPPIS PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSEPPIS PIZZA	**c** EIN-PN	46-2444424-501
a Plan name	JOSHUA ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSHUA ONE	**c** EIN-PN	02-0741300-501
a Plan name	JOSNICK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOSNICK INC	**c** EIN-PN	34-1862115-501
a Plan name	JOURNAY FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	JOURNAY FAMILY DENTAL	**c** EIN-PN	86-2168050-501
a Plan name	JOYCE FAMILY PARTNERSHIPS SOCA BENEFIT PLAN		
b Name of plan sponsor	JOYCE FAMILY PARTNERSHIPS	**c** EIN-PN	34-1668624-501
a Plan name	JOYRIDE TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JOYRIDE TRANSPORT LLC	**c** EIN-PN	47-2753099-501
a Plan name	JP MOHLER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JP MOHLER LLC	**c** EIN-PN	46-0795659-501
a Plan name	JP OUTFITTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	JP OUTFITTERS	**c** EIN-PN	92-1684639-501

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	JP TRANSPORTATION CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JP TRANSPORTATION CO INC	**c** EIN-PN	31-6043251-501
a Plan name	JPA ENTERTAINMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JPA ENTERTAINMENT INC	**c** EIN-PN	87-2651232-501
a Plan name	JR LUMBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	JR LUMBER COMPANY	**c** EIN-PN	02-0613365-501
a Plan name	JS FABRICATIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JS FABRICATIONS INC	**c** EIN-PN	34-1953159-501
a Plan name	J'S MULCH AND LANDSCAPE SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	JS MULCH AND LANDSCAPE SUPPLY	**c** EIN-PN	31-1463793-501
a Plan name	JS SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	JS SERVICES	**c** EIN-PN	46-1411053-501
a Plan name	JT DILLARD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JT DILLARD LLC	**c** EIN-PN	38-3685424-501
a Plan name	JT&M RESTAURANT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JT&M RESTAURANT LLC	**c** EIN-PN	45-3023327-501
a Plan name	JTJ FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	JTJ FINANCIAL	**c** EIN-PN	47-2911185-501
a Plan name	JTL CONTRACTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JTL CONTRACTING LLC	**c** EIN-PN	81-1245597-502
a Plan name	JT'S PIZZA AND PUB SOCA BENEFIT PLAN		
b Name of plan sponsor	JTS PIZZA AND PUB	**c** EIN-PN	27-3121724-501
a Plan name	JUGENHEIMER INDUSTRIAL SUPPLY, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUGENHEIMER INDUSTRIAL SUPPLY, INC	**c** EIN-PN	34-1197678-501

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	JUGGERBOT 3D LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUGGERBOT 3D LLC	**c** EIN-PN	47-1505953-501
a Plan name	JULIANI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JULIANI LLC	**c** EIN-PN	26-1260480-501
a Plan name	JUNKBOX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUNKBOX INC	**c** EIN-PN	47-5508578-501
a Plan name	JUNO DTS SOCA BENEFIT PLAN		
b Name of plan sponsor	JUNO DTS	**c** EIN-PN	81-5079712-501
a Plan name	JUST BUSINESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUST BUSINESS INC	**c** EIN-PN	31-1798673-501
a Plan name	JUST PAINT IT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUST PAINT IT LLC	**c** EIN-PN	26-1877349-501
a Plan name	JUST SMILES SOCA BENEFIT PLAN		
b Name of plan sponsor	JUST SMILES	**c** EIN-PN	20-8383383-501
a Plan name	JUSTICE LAW FIRM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JUSTICE LAW FIRM LLC	**c** EIN-PN	86-1517250-501
a Plan name	JW CIN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	JW CIN INC	**c** EIN-PN	31-1440239-501
a Plan name	JW DEVERS AND SON SOCA BENEFIT PLAN		
b Name of plan sponsor	JW DEVERS AND SON	**c** EIN-PN	31-0527598-501
a Plan name	JWI CAPITAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	JWI CAPITAL, LLC	**c** EIN-PN	27-1826733-501
a Plan name	K & C RESTAURANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	K & C RESTAURANTS	**c** EIN-PN	83-2139017-501

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	K & E PLASTIC PIPE & TRAILER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K & E PLASTIC PIPE & TRAILER LLC	**c** EIN-PN	83-3272101-501
a Plan name	K & K MECHANICAL INSULATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K & K MECHANICAL INSULATION LLC	**c** EIN-PN	83-0936417-502
a Plan name	K A MENENDIAN ORIENTAL RUGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K A MENENDIAN ORIENTAL RUGS LLC	**c** EIN-PN	01-0939588-501
a Plan name	K A SIMS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	K A SIMS CONSTRUCTION	**c** EIN-PN	31-1646959-501
a Plan name	K A SIMS ENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K A SIMS ENT LLC	**c** EIN-PN	46-1892523-501
a Plan name	K AND A WEALTH ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	K AND A WEALTH ADVISORS	**c** EIN-PN	82-2300429-501
a Plan name	K AND H TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	K AND H TRUCKING INC	**c** EIN-PN	34-1494498-501
a Plan name	K AND K HEATING AND COOLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K AND K HEATING AND COOLING LLC	**c** EIN-PN	46-2329990-501
a Plan name	K D H CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K D H CONSTRUCTION LLC	**c** EIN-PN	45-1967067-502
a Plan name	K WM BEACH MFG CO SOCA BENEFIT PLAN		
b Name of plan sponsor	K WM BEACH MFG CO	**c** EIN-PN	31-0589095-501
a Plan name	K Z MARTIN INVESTMENT,LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K Z MARTIN INVESTMENT,LLC	**c** EIN-PN	27-3753937-501
a Plan name	K&A POOL RESTORATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	K&A POOL RESTORATION LLC	**c** EIN-PN	88-2397176-501

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	K. W. SERVICE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	K. W. SERVICE, INC.	**c** EIN-PN	34-1670205-501
a Plan name	KAGAY & SCHELLHAAS CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	KAGAY & SCHELLHAAS CPAS	**c** EIN-PN	31-0919888-501
a Plan name	KAHLE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	KAHLE ELECTRIC	**c** EIN-PN	34-1279444-501
a Plan name	KAHN AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KAHN AND ASSOCIATES	**c** EIN-PN	34-1850078-501
a Plan name	KAIRAE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KAIRAE LLC	**c** EIN-PN	82-1441441-501
a Plan name	KAL SOFTWARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KAL SOFTWARE INC	**c** EIN-PN	26-2409468-501
a Plan name	KAM MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	KAM MANUFACTURING	**c** EIN-PN	34-1867044-501
a Plan name	KANE PAINTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KANE PAINTING LLC	**c** EIN-PN	82-1153541-501
a Plan name	KANECT RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	KANECT RECYCLING	**c** EIN-PN	81-2384865-501
a Plan name	KAPOR DAVIS & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KAPOR DAVIS & ASSOCIATES	**c** EIN-PN	47-2652833-501
a Plan name	KAPP CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	KAPP CONSTRUCTION	**c** EIN-PN	31-1146641-501
a Plan name	KAPTAIN AND KIM ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	KAPTAIN AND KIM ENTERPRISES	**c** EIN-PN	31-2378555-501

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	KAREN WELLINGTON FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	KAREN WELLINGTON FOUNDATION	**c** EIN-PN	26-3768567-501
a Plan name	KARING 4 KIDS SOCA BENEFIT PLAN		
b Name of plan sponsor	KARING 4 KIDS	**c** EIN-PN	30-0462370-501
a Plan name	KARSHNER SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	KARSHNER SALES	**c** EIN-PN	20-5525686-501
a Plan name	KASA WORKS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KASA WORKS LLC	**c** EIN-PN	45-3793541-501
a Plan name	KASHMIRY AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KASHMIRY AND ASSOCIATES	**c** EIN-PN	20-3753015-501
a Plan name	KASKELL MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	KASKELL MANUFACTURING	**c** EIN-PN	31-1471933-501
a Plan name	KASTNER WESTMAN & WILKINS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KASTNER WESTMAN & WILKINS, LLC	**c** EIN-PN	34-1912196-501
a Plan name	KATHERINE A CLEGG CR CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	KATHERINE A CLEGG CR CONCRETE	**c** EIN-PN	47-2737047-501
a Plan name	KAUFMAN & FLORENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	KAUFMAN & FLORENCE	**c** EIN-PN	31-1059408-501
a Plan name	KBD TECHNIC SOCA BENEFIT PLAN		
b Name of plan sponsor	KBD TECHNIC	**c** EIN-PN	45-3713932-501
a Plan name	KC FIELDS AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KC FIELDS AND ASSOCIATES	**c** EIN-PN	31-1439965-501
a Plan name	KC MARKETING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KC MARKETING LLC	**c** EIN-PN	92-0673789-501

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	KC ROOFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KC ROOFING LLC	**c** EIN-PN	83-3123174-501
a Plan name	KCR CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	KCR CONSTRUCTION	**c** EIN-PN	20-2370506-501
a Plan name	KD VOCATIONAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KD VOCATIONAL SERVICES LLC	**c** EIN-PN	47-3842390-501
a Plan name	KD YODER & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KD YODER & ASSOCIATES	**c** EIN-PN	20-4686523-501
a Plan name	KDP HOME SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KDP HOME SOLUTIONS LLC	**c** EIN-PN	27-1388455-502
a Plan name	KEB INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEB INDUSTRIES INC	**c** EIN-PN	43-2020824-501
a Plan name	KEENEY SAND & STONE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEENEY SAND & STONE, INC	**c** EIN-PN	34-1634572-501
a Plan name	KEEP CINCINNATI BEAUTIFUL INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KEEP CINCINNATI BEAUTIFUL INC.	**c** EIN-PN	31-0948219-501
a Plan name	KEEP FINANCIALS SOCA BENEFIT PLAN		
b Name of plan sponsor	KEEP FINANCIALS	**c** EIN-PN	81-1152924-501
a Plan name	KEEP IT SIMPLE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	KEEP IT SIMPLE SOLUTIONS	**c** EIN-PN	84-1924439-501
a Plan name	KEG N CORK BEVERAGE DOCK SOCA BENEFIT PLAN		
b Name of plan sponsor	KEG N CORK BEVERAGE DOCK	**c** EIN-PN	47-2671087-501
a Plan name	KEITH D. JACKSON, DDS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KEITH D. JACKSON, DDS, INC.	**c** EIN-PN	83-2831552-501

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	KEITH'S TRUCK AND TRAILER SOCA BENEFIT PLAN		
b Name of plan sponsor	KEITHS TRUCK AND TRAILER	**c** EIN-PN	31-1546070-501
a Plan name	KELDEN EQUIPMENT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KELDEN EQUIPMENT INC.	**c** EIN-PN	31-1272692-501
a Plan name	KELLER FARMS II SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLER FARMS II	**c** EIN-PN	81-0890235-501
a Plan name	KELLER HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLER HOLDINGS LLC	**c** EIN-PN	37-1902446-501
a Plan name	KELLERMAN BY K2 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLERMAN BY K2 LLC	**c** EIN-PN	47-4620218-501
a Plan name	KELLERMAN CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLERMAN CONSULTING LLC	**c** EIN-PN	81-4833756-501
a Plan name	KELLERMAN HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLERMAN HEATING & COOLING	**c** EIN-PN	46-1130094-501
a Plan name	KELLEY REAL ESTATE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLEY REAL ESTATE GROUP	**c** EIN-PN	81-4564558-501
a Plan name	KELLOGG CABINETS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLOGG CABINETS, INC	**c** EIN-PN	31-1038823-501
a Plan name	KELLY CLARK DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLY CLARK DESIGN LLC	**c** EIN-PN	45-5617390-501
a Plan name	KELLY LAW OFFICE SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLY LAW OFFICE	**c** EIN-PN	31-1430142-501
a Plan name	KELLY OIL PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	KELLY OIL PRODUCTS	**c** EIN-PN	30-0075193-501

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	KELSEY APPLE CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	KELSEY APPLE CONSULTING	**c** EIN-PN	27-0523643-501
a Plan name	KEMP ELECTRIC SUPPLY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEMP ELECTRIC SUPPLY INC	**c** EIN-PN	31-0338502-501
a Plan name	KEMPER POND DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	KEMPER POND DENTAL	**c** EIN-PN	31-1475201-501
a Plan name	KEMPF SURGICAL APPLIANCES SOCA BENEFIT PLAN		
b Name of plan sponsor	KEMPF SURGICAL APPLIANCES	**c** EIN-PN	31-0667874-501
a Plan name	KEMSHIRER PROPERTIES LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	KEMSHIRER PROPERTIES LTD	**c** EIN-PN	27-2546557-501
a Plan name	KEN DAVIS AND SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEN DAVIS AND SONS INC	**c** EIN-PN	31-0803948-501
a Plan name	KENDALWOOD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KENDALWOOD LLC	**c** EIN-PN	46-5355755-501
a Plan name	KENNEDY CONSULTING & TRAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	KENNEDY CONSULTING & TRAIN	**c** EIN-PN	45-4906175-501
a Plan name	KENTNER SELLERS LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	KENTNER SELLERS LLP	**c** EIN-PN	31-0787612-501
a Plan name	KENWAL RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	KENWAL RESTORATION	**c** EIN-PN	84-4722886-501
a Plan name	KENZSPEN AUTOMOTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KENZSPEN AUTOMOTIVE LLC	**c** EIN-PN	83-0754277-501
a Plan name	KEPICH TRANSPORTATION INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KEPICH TRANSPORTATION INC.	**c** EIN-PN	34-1964108-501

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	KERR'S AUTOMOTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KERRS AUTOMOTIVE LLC	**c** EIN-PN	84-4395595-501
a Plan name	KESSLER HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	KESSLER HEATING & COOLING	**c** EIN-PN	31-1362132-502
a Plan name	KET-MOY PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	KET-MOY PRINTING	**c** EIN-PN	31-1104865-501
a Plan name	KETTERING ANESTHESIA ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	KETTERING ANESTHESIA ASSOC	**c** EIN-PN	31-0798550-501
a Plan name	KEVIN FLORY LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	KEVIN FLORY LANDSCAPING	**c** EIN-PN	34-1771678-501
a Plan name	KEY CABLE AND SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	KEY CABLE AND SUPPLY	**c** EIN-PN	20-2347525-501
a Plan name	KEY DYNAMICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEY DYNAMICS LLC	**c** EIN-PN	84-3509298-501
a Plan name	KEY POINTE MEDICAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEY POINTE MEDICAL, LLC	**c** EIN-PN	90-0803477-501
a Plan name	KEYS FOR SUCCESS SOCA BENEFIT PLAN		
b Name of plan sponsor	KEYS FOR SUCCESS	**c** EIN-PN	26-3779797-501
a Plan name	KEYSTONE VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	KEYSTONE VETERINARY CLINIC	**c** EIN-PN	03-0489859-501
a Plan name	KH CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	KH CREDIT UNION	**c** EIN-PN	31-0714622-501
a Plan name	KICK START ACCOUNTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KICK START ACCOUNTING INC	**c** EIN-PN	47-2823013-501

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	KICKDRUM STRATEGY & CREATIVE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KICKDRUM STRATEGY & CREATIVE, LLC	**c** EIN-PN	47-4933440-501
a Plan name	KICKTRAQ INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KICKTRAQ INC	**c** EIN-PN	47-1724188-501
a Plan name	KIDNEY CARE SPECIALISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	KIDNEY CARE SPECIALISTS	**c** EIN-PN	27-0698423-502
a Plan name	KIDSMILE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIDSMILE INC	**c** EIN-PN	27-3163809-501
a Plan name	KIESLER-GARRISON, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIESLER-GARRISON, LLC	**c** EIN-PN	92-1321795-501
a Plan name	KIGER AND KIGER LAWYERS SOCA BENEFIT PLAN		
b Name of plan sponsor	KIGER AND KIGER LAWYERS	**c** EIN-PN	31-1210695-501
a Plan name	KILBARGER LANE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KILBARGER LANE LLC	**c** EIN-PN	82-2455711-501
a Plan name	KILELE HEALTH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KILELE HEALTH INC	**c** EIN-PN	87-2923309-501
a Plan name	KILL AGRI SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	KILL AGRI SERVICE	**c** EIN-PN	32-8849647-501
a Plan name	KILTEX CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	KILTEX CORPORATION	**c** EIN-PN	34-1379667-501
a Plan name	KIM SUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIM SUPPLY LLC	**c** EIN-PN	83-2829748-501
a Plan name	KIMBERLEY TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	KIMBERLEY TRANSPORT	**c** EIN-PN	47-4916794-502

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	KIMPTON PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	KIMPTON PRINTING	**c** EIN-PN	31-1215754-501
a Plan name	KINCAIDS IS MUSIC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINCAIDS IS MUSIC, INC	**c** EIN-PN	31-0836534-501
a Plan name	KIND OF ONE CONCEPTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIND OF ONE CONCEPTS LLC	**c** EIN-PN	82-4661098-501
a Plan name	KINETIC NETWORKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINETIC NETWORKING LLC	**c** EIN-PN	20-4589674-501
a Plan name	KING HAULING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KING HAULING LLC	**c** EIN-PN	47-5059506-502
a Plan name	KING KOLD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KING KOLD INC	**c** EIN-PN	31-0739945-501
a Plan name	KING LIGHTING SOCA BENEFIT PLAN		
b Name of plan sponsor	KING LIGHTING	**c** EIN-PN	31-0625885-501
a Plan name	KING MEMORY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KING MEMORY LLC	**c** EIN-PN	27-0725065-501
a Plan name	KING PRODUCTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	KING PRODUCTIONS	**c** EIN-PN	45-4657365-501
a Plan name	KINGDOM FAMILY DENTISTRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGDOM FAMILY DENTISTRY LLC	**c** EIN-PN	31-1664871-501
a Plan name	KINGDOM HOME BUILDERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGDOM HOME BUILDERS LLC	**c** EIN-PN	20-2019124-501
a Plan name	KINGDOM TITLE SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGDOM TITLE SOLUTIONS INC	**c** EIN-PN	20-8646472-501

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	KINGS FURNITURE AND MATTRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGS FURNITURE AND MATTRESS	**c** EIN-PN	30-0628443-501
a Plan name	KINGS MEDICAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGS MEDICAL GROUP	**c** EIN-PN	34-1908992-501
a Plan name	KINGS OF VAPOR SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGS OF VAPOR	**c** EIN-PN	46-5218036-501
a Plan name	KINGS TABLE VENTURES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGS TABLE VENTURES, LLC	**c** EIN-PN	71-1037441-501
a Plan name	KINGSLEY CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINGSLEY CONSULTING LLC	**c** EIN-PN	61-1756990-501
a Plan name	KINSMAN FREE PUBLIC LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	KINSMAN FREE PUBLIC LIBRARY	**c** EIN-PN	34-6001580-501
a Plan name	KINZUA ENVIRONMENTAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KINZUA ENVIRONMENTAL INC	**c** EIN-PN	34-1528632-501
a Plan name	KIRK AND COMPANY JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	KIRK AND COMPANY JEWELERS	**c** EIN-PN	42-1712361-501
a Plan name	KIRKBRIDE LAND AND SNOW MG SOCA BENEFIT PLAN		
b Name of plan sponsor	KIRKBRIDE LAND AND SNOW MG	**c** EIN-PN	83-3579639-501
a Plan name	KIRKHAM BUILDING SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIRKHAM BUILDING SYSTEMS INC	**c** EIN-PN	31-1108179-501
a Plan name	KIRT INVESTMENTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KIRT INVESTMENTS INC	**c** EIN-PN	04-3621008-501
a Plan name	KISSEL LANDSCAPING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	KISSEL LANDSCAPING CO	**c** EIN-PN	27-5371244-501

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	KISTLER ENGINES SOCA BENEFIT PLAN		
b Name of plan sponsor	KISTLER ENGINES	**c** EIN-PN	34-1925391-501
a Plan name	KITCHENABZ SOCA BENEFIT PLAN		
b Name of plan sponsor	KITCHENABZ	**c** EIN-PN	81-3181473-501
a Plan name	KITSIS CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	KITSIS CORP.	**c** EIN-PN	45-4135041-501
a Plan name	KJ HOLDCO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KJ HOLDCO, LLC	**c** EIN-PN	93-3009265-501
a Plan name	KL SCHULTE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	KL SCHULTE CONSTRUCTION	**c** EIN-PN	80-0837175-501
a Plan name	KLABEN MOTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KLABEN MOTORS LLC	**c** EIN-PN	27-4379879-501
a Plan name	KLB PROUD, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KLB PROUD, INC	**c** EIN-PN	31-1584360-501
a Plan name	KLB STEEL SOCA BENEFIT PLAN		
b Name of plan sponsor	KLB STEEL	**c** EIN-PN	27-2796332-501
a Plan name	KLEEBERGER CONTRACTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	KLEEBERGER CONTRACTING SERVICES	**c** EIN-PN	83-3094927-501
a Plan name	KLEIN HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	KLEIN HEATING AND COOLING	**c** EIN-PN	27-1251199-501
a Plan name	KLEIN MANAGEMENT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	KLEIN MANAGEMENT COMPANY	**c** EIN-PN	34-1143353-501
a Plan name	KLEINHENZ LANDSCAPE SOCA BENEFIT PLAN		
b Name of plan sponsor	KLEINHENZ LANDSCAPE	**c** EIN-PN	20-2323290-501

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	KLENKE S TRASH SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	KLENKE S TRASH SERVICE	**c** EIN-PN	26-4538138-501
a Plan name	KLIMER PLATFORMS SOCA BENEFIT PLAN		
b Name of plan sponsor	KLIMER PLATFORMS	**c** EIN-PN	98-0363426-501
a Plan name	KLUSTY SIGN ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	KLUSTY SIGN ASSOCIATES	**c** EIN-PN	37-1488798-501
a Plan name	KM ELECTRIC COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	KM ELECTRIC COMPANY	**c** EIN-PN	34-1845114-501
a Plan name	KMAK GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KMAK GROUP, LLC	**c** EIN-PN	26-3998063-501
a Plan name	KNAPP ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	KNAPP ELECTRIC	**c** EIN-PN	31-1791814-501
a Plan name	KNEFLIN DILLHOFF HILS & KRUSE INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	KNEFLIN DILLHOFF HILS & KRUSE INSURANCE AGENCY	**c** EIN-PN	31-1367536-501
a Plan name	KNIGHT INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	KNIGHT INSURANCE GROUP	**c** EIN-PN	34-4277105-501
a Plan name	KNIPPEN CHRYSLERDODGE JEEP SOCA BENEFIT PLAN		
b Name of plan sponsor	KNIPPEN CHRYSLERDODGE JEEP	**c** EIN-PN	34-1340113-501
a Plan name	KNK MOBILE TRUCK AND TRAILER REPAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KNK MOBILE TRUCK AND TRAILER REPAIR LLC	**c** EIN-PN	85-2592170-501
a Plan name	KNOCKOUT BRANDING SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOCKOUT BRANDING	**c** EIN-PN	47-3046067-501
a Plan name	KNOSE CONCRETE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOSE CONCRETE CONSTRUCTION	**c** EIN-PN	46-4642675-501

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	KNOUS TOOL & MACHINE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOUS TOOL & MACHINE INC	**c** EIN-PN	34-1652362-501
a Plan name	KNOWLTON FORD MERCURY INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOWLTON FORD MERCURY INCORPORATED	**c** EIN-PN	34-1053251-501
a Plan name	KNOWLTON MACHINE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOWLTON MACHINE, INC.	**c** EIN-PN	34-1832140-501
a Plan name	KNOWLTON MANUFACTURING, CO. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KNOWLTON MANUFACTURING, CO. INC.	**c** EIN-PN	27-1060438-501
a Plan name	KNUEVE & SONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KNUEVE & SONS, INC.	**c** EIN-PN	34-1677300-501
a Plan name	KNUEVE, SAHLOFF & WILDENHAUS SOCA BENEFIT PLAN		
b Name of plan sponsor	KNUEVE, SAHLOFF & WILDENHAUS	**c** EIN-PN	83-2917208-501
a Plan name	KNUTH SOCA BENEFIT PLAN		
b Name of plan sponsor	KNUTH	**c** EIN-PN	34-0892778-501
a Plan name	KOBOLT DESIGN STUDIOS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOBOLT DESIGN STUDIOS INC	**c** EIN-PN	31-1766338-501
a Plan name	KOHART SURPLUS & SALVAGE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOHART SURPLUS & SALVAGE INC	**c** EIN-PN	20-0731750-501
a Plan name	KOHL & COOK LAW FIRM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOHL & COOK LAW FIRM LLC	**c** EIN-PN	83-4121635-501
a Plan name	KOHLER COATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOHLER COATING INC	**c** EIN-PN	34-1961927-501
a Plan name	KOHR ROYER GRIFFITH SOCA BENEFIT PLAN		
b Name of plan sponsor	KOHR ROYER GRIFFITH	**c** EIN-PN	31-1045933-501

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	KOHUT PETE CZARUK DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOHUT PETE CZARUK DDS INC	**c** EIN-PN	31-1421884-501
a Plan name	KOMAN ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	KOMAN ENTERPRISES	**c** EIN-PN	26-2050648-501
a Plan name	KOMARA JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	KOMARA JEWELERS	**c** EIN-PN	34-1251156-501
a Plan name	KOMAR-ANCHOR PLUMBING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	KOMAR-ANCHOR PLUMBING CO	**c** EIN-PN	47-3985041-501
a Plan name	KOMBI HOLDING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOMBI HOLDING COMPANY LLC	**c** EIN-PN	04-3746101-501
a Plan name	KONA CRAFT KITCHEN SOCA BENEFIT PLAN		
b Name of plan sponsor	KONA CRAFT KITCHEN	**c** EIN-PN	85-3986791-501
a Plan name	KONDAS DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	KONDAS DENTAL GROUP	**c** EIN-PN	20-1353259-501
a Plan name	KOOP DIAMOND CUTTERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOOP DIAMOND CUTTERS INC	**c** EIN-PN	31-0902753-501
a Plan name	KOR SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KOR SERVICES LLC	**c** EIN-PN	83-2346164-501
a Plan name	KORBONO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KORBONO LLC	**c** EIN-PN	87-3358183-501
a Plan name	KORMAN CONSTRUCTION CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	KORMAN CONSTRUCTION CORP	**c** EIN-PN	31-1488068-501
a Plan name	KOSADA INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	KOSADA INCORPORATED	**c** EIN-PN	30-0238470-501

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	KOST ELECTRIC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KOST ELECTRIC, INC.	**c** EIN-PN	02-0743662-501
a Plan name	KRAFT CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	KRAFT CONSTRUCTION CO	**c** EIN-PN	31-0808592-501
a Plan name	KRAKOWSKI TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRAKOWSKI TRUCKING INC	**c** EIN-PN	34-1835937-502
a Plan name	KRAMER PLUMBING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRAMER PLUMBING, INC	**c** EIN-PN	31-1025967-501
a Plan name	KRAZY DAZE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	KRAZY DAZE INC.	**c** EIN-PN	83-4708040-501
a Plan name	KRESHCO PEST CONTROL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRESHCO PEST CONTROL LLC	**c** EIN-PN	83-4151868-501
a Plan name	KRINSKYS TAEKWONDO ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	KRINSKYS TAEKWONDO ACADEMY	**c** EIN-PN	87-2001679-501
a Plan name	KRISE PROPERTY GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRISE PROPERTY GROUP LLC	**c** EIN-PN	85-2870174-501
a Plan name	KRISTY I BOWLING AAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRISTY I BOWLING AAL INC	**c** EIN-PN	84-4502623-501
a Plan name	KRONER ANIMAL CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRONER ANIMAL CARE INC	**c** EIN-PN	51-0562814-501
a Plan name	KRONER DRY CLEANERS SOCA BENEFIT PLAN		
b Name of plan sponsor	KRONER DRY CLEANERS	**c** EIN-PN	31-1211808-501
a Plan name	KRUEGER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	KRUEGER CONSTRUCTION	**c** EIN-PN	34-1483875-501

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	KRUGER AND HODGES SOCA BENEFIT PLAN		
b Name of plan sponsor	KRUGER AND HODGES	**c** EIN-PN	83-0995692-501
a Plan name	KRUZNER ADVISORY PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	KRUZNER ADVISORY PARTNERS	**c** EIN-PN	82-3830437-501
a Plan name	KRYSTYS CONCRETE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KRYSTYS CONCRETE LLC	**c** EIN-PN	51-0634691-501
a Plan name	KTL PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KTL PROPERTIES LLC	**c** EIN-PN	46-3908667-501
a Plan name	KTSDI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KTSDI LLC	**c** EIN-PN	20-8991130-501
a Plan name	KTW INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KTW INC	**c** EIN-PN	31-1321822-501
a Plan name	KUHL OUTDOOR DESIGNS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KUHL OUTDOOR DESIGNS INC	**c** EIN-PN	34-1920050-501
a Plan name	KUHN FABRICATING SOCA BENEFIT PLAN		
b Name of plan sponsor	KUHN FABRICATING	**c** EIN-PN	34-1280981-501
a Plan name	KUHNS GROUP, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KUHNS GROUP, INC	**c** EIN-PN	31-1736223-501
a Plan name	KULKARNI ORTHODONTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	KULKARNI ORTHODONTICS INC	**c** EIN-PN	20-0693443-501
a Plan name	KUNTZ TRUCK & REPAIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KUNTZ TRUCK & REPAIR LLC	**c** EIN-PN	83-3312371-501
a Plan name	KURTZMAN LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KURTZMAN LOGISTICS LLC	**c** EIN-PN	47-2122577-501

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	KUZMA INDUSTRIES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KUZMA INDUSTRIES, LLC	**c** EIN-PN	86-2100219-501
a Plan name	KW URBAN LIVING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KW URBAN LIVING LLC	**c** EIN-PN	92-1121640-501
a Plan name	KWG WORKS,LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	KWG WORKS,LLC	**c** EIN-PN	83-3679075-501
a Plan name	KYNTRONICS SOCA BENEFIT PLAN		
b Name of plan sponsor	KYNTRONICS	**c** EIN-PN	81-5259836-501
a Plan name	L AND J MASONRY SOCA BENEFIT PLAN		
b Name of plan sponsor	L AND J MASONRY	**c** EIN-PN	83-3552288-501
a Plan name	L AND K AUTO AND TRUCK SER SOCA BENEFIT PLAN		
b Name of plan sponsor	L AND K AUTO AND TRUCK SER	**c** EIN-PN	82-4345540-501
a Plan name	L K HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	L K HEATING & COOLING	**c** EIN-PN	46-1256541-501
a Plan name	L PACE ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	L PACE ENTERPRISES INC	**c** EIN-PN	20-0349254-501
a Plan name	L&A PLUMBING AND HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	L&A PLUMBING AND HEATING	**c** EIN-PN	87-2800047-501
a Plan name	L&M AUTO SPECIALTY, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	L&M AUTO SPECIALTY, LLC.	**c** EIN-PN	27-3983795-501
a Plan name	L. A. SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	L. A. SERVICES	**c** EIN-PN	84-3959026-501
a Plan name	L. HABERNY COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	L. HABERNY COMPANY	**c** EIN-PN	34-1395076-501

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	L2 ENGINEERING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	L2 ENGINEERING LLC	**c** EIN-PN	81-2339471-501
a Plan name	L2 SOURCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	L2 SOURCE LLC	**c** EIN-PN	82-4554553-501
a Plan name	LA BAMBA FOODS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LA BAMBA FOODS, INC	**c** EIN-PN	90-0998981-503
a Plan name	LA SOUPE SOCA BENEFIT PLAN		
b Name of plan sponsor	LA SOUPE	**c** EIN-PN	47-4452384-501
a Plan name	LAB VETERINARY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	LAB VETERINARY SERVICES	**c** EIN-PN	82-3194291-501
a Plan name	LACE BRIDAL COUTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	LACE BRIDAL COUTURE	**c** EIN-PN	45-3667413-501
a Plan name	LADY LUCKS HAIR PARLOR SOCA BENEFIT PLAN		
b Name of plan sponsor	LADY LUCKS HAIR PARLOR	**c** EIN-PN	47-5652195-501
a Plan name	LAINE GABRIEL SOCA BENEFIT PLAN		
b Name of plan sponsor	LAINE GABRIEL	**c** EIN-PN	20-5813626-501
a Plan name	LAIRDS TAX AND ACCOUNTING SOCA BENEFIT PLAN		
b Name of plan sponsor	LAIRDS TAX AND ACCOUNTING	**c** EIN-PN	82-3608116-501
a Plan name	LAKE COUNTY FREE CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE COUNTY FREE CLINIC	**c** EIN-PN	34-1081191-501
a Plan name	LAKE ERIE GOLF CARS SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE ERIE GOLF CARS	**c** EIN-PN	34-1880513-501
a Plan name	LAKE ERIE INTERLOCK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE ERIE INTERLOCK INC	**c** EIN-PN	80-0076282-501

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	LAKE ERIE INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE ERIE INTERNATIONAL	**c** EIN-PN	61-1409704-501
a Plan name	LAKE ERIE SHORES AND ISLANDS SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE ERIE SHORES AND ISLANDS	**c** EIN-PN	83-2141410-501
a Plan name	LAKE ERIE SHORES CONTRACT SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE ERIE SHORES CONTRACT	**c** EIN-PN	46-4009502-502
a Plan name	LAKE MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE MANAGEMENT	**c** EIN-PN	31-1541730-501
a Plan name	LAKE PARK CEMETERY ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE PARK CEMETERY ASSOCIATION	**c** EIN-PN	34-0347880-501
a Plan name	LAKE PARK TOOL & MACHINE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE PARK TOOL & MACHINE, LLC	**c** EIN-PN	81-0727155-501
a Plan name	LAKE STAR BUILD & REMODEL SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE STAR BUILD & REMODEL	**c** EIN-PN	20-3999008-501
a Plan name	LAKE TO RIVER FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE TO RIVER FOUNDATION	**c** EIN-PN	99-0785502-501
a Plan name	LAKE WAYNOKA PROPERTY OWNERS ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKE WAYNOKA PROPERTY OWNERS ASSOC	**c** EIN-PN	23-7124540-501
a Plan name	LAKEFRONT CARGO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKEFRONT CARGO, LLC	**c** EIN-PN	46-3029344-501
a Plan name	LAKESIDE YACHT SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKESIDE YACHT SERVICE	**c** EIN-PN	27-5198563-501
a Plan name	LAKEWOOD DENTAL SMITH DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKEWOOD DENTAL SMITH DDS	**c** EIN-PN	45-2960580-501

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	LAKOTA FAMILY YMCA SOCA BENEFIT PLAN		
b Name of plan sponsor	LAKOTA FAMILY YMCA	**c** EIN-PN	31-1223296-501
a Plan name	LAMARSH GLOBAL CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	LAMARSH GLOBAL CONSULTING	**c** EIN-PN	88-2058707-501
a Plan name	LAMPLIGHT COUNSELING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	LAMPLIGHT COUNSELING SVS	**c** EIN-PN	47-1313153-501
a Plan name	LANCASTER GREENHOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	LANCASTER GREENHOUSE	**c** EIN-PN	31-1679271-501
a Plan name	LANCASTER PHASE 1 GROUP PLL SOCA BENEFIT PLAN		
b Name of plan sponsor	LANCASTER PHASE 1 GROUP PLL	**c** EIN-PN	31-1451467-502
a Plan name	LANCOR PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	LANCOR PARTNERS	**c** EIN-PN	01-0945957-501
a Plan name	LAND SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAND SOLUTIONS, LLC	**c** EIN-PN	85-1275132-501
a Plan name	LANDAKER AND ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LANDAKER AND ASSOCIATES INC	**c** EIN-PN	31-1016505-501
a Plan name	LANDERHAVEN DENTAL ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	LANDERHAVEN DENTAL ASSOCIATES	**c** EIN-PN	34-1334819-501
a Plan name	LANDSCAPES BY TERRA SOCA BENEFIT PLAN		
b Name of plan sponsor	LANDSCAPES BY TERRA	**c** EIN-PN	46-2160668-501
a Plan name	LANDWORX SOCA BENEFIT PLAN		
b Name of plan sponsor	LANDWORX	**c** EIN-PN	83-2973982-501
a Plan name	LANG'S LAWN AND GARDEN, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LANGS LAWN AND GARDEN, INC.	**c** EIN-PN	34-1797449-501

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	LAPE, MANSFIELD & NAKASIAN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAPE, MANSFIELD & NAKASIAN, LLC	**c** EIN-PN	46-0590576-501
a Plan name	LAPLANTE REAL ESTATE SOCA BENEFIT PLAN		
b Name of plan sponsor	LAPLANTE REAL ESTATE	**c** EIN-PN	83-2987219-501
a Plan name	LARMANN FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LARMANN FINANCIAL	**c** EIN-PN	31-0740466-501
a Plan name	LARODA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LARODA LLC	**c** EIN-PN	81-3263908-501
a Plan name	LARR POLICY CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LARR POLICY CONSULTING INC	**c** EIN-PN	45-3950568-501
a Plan name	LARRY FOUSS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	LARRY FOUSS CONSTRUCTION	**c** EIN-PN	31-1019848-501
a Plan name	LARRY'S SUNOCO SOCA BENEFIT PLAN		
b Name of plan sponsor	LARRYS SUNOCO	**c** EIN-PN	34-1726435-501
a Plan name	LASER WEB DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	LASER WEB DAYTON	**c** EIN-PN	81-4345602-501
a Plan name	LASERFAB TECHNOLOGIES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LASERFAB TECHNOLOGIES, INC	**c** EIN-PN	20-0629757-501
a Plan name	LASERLINC SOCA BENEFIT PLAN		
b Name of plan sponsor	LASERLINC	**c** EIN-PN	31-1408890-501
a Plan name	LASH CHEVROLET SOCA BENEFIT PLAN		
b Name of plan sponsor	LASH CHEVROLET	**c** EIN-PN	20-2939711-501
a Plan name	LAST MILE FOOD RESCUE SOCA BENEFIT PLAN		
b Name of plan sponsor	LAST MILE FOOD RESCUE	**c** EIN-PN	83-4495745-501

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	LASTING FINISH SOCA BENEFIT PLAN		
b Name of plan sponsor	LASTING FINISH	**c** EIN-PN	47-4330796-501
a Plan name	LASTING IMPRESSIONS HARDWOOD FLOORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LASTING IMPRESSIONS HARDWOOD FLOORS LLC	**c** EIN-PN	34-2116360-501
a Plan name	LATTUADA NORTH AMERICA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LATTUADA NORTH AMERICA INC	**c** EIN-PN	82-1007889-501
a Plan name	LAU & ASSOCIATES CO SOCA BENEFIT PLAN		
b Name of plan sponsor	LAU & ASSOCIATES CO	**c** EIN-PN	27-1899147-501
a Plan name	LAUBACHER & CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	LAUBACHER & CO.	**c** EIN-PN	06-1766037-501
a Plan name	LAUBER AND WILL INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	LAUBER AND WILL INSURANCE	**c** EIN-PN	20-3771653-501
a Plan name	LAULETTA FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LAULETTA FINANCIAL	**c** EIN-PN	26-1528894-501
a Plan name	LAUNCH SCOUT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAUNCH SCOUT LLC	**c** EIN-PN	81-5124383-501
a Plan name	LAUREL RESIDENTIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LAUREL RESIDENTIAL	**c** EIN-PN	81-3982738-501
a Plan name	LAUREN A WANOSKY FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	LAUREN A WANOSKY FAMILY DENTISTRY	**c** EIN-PN	26-3859225-501
a Plan name	LAW BIRD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW BIRD LLC	**c** EIN-PN	83-2044573-501
a Plan name	LAW OFFICE OF DMITRIY SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF DMITRIY	**c** EIN-PN	81-4366044-501

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	LAW OFFICE OF NAZLY MAMEDOVA SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF NAZLY MAMEDOVA	**c** EIN-PN	47-5447172-501
a Plan name	LAW OFFICE OF PHILIP A KING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF PHILIP A KING LLC	**c** EIN-PN	46-3241518-501
a Plan name	LAW OFFICE OF ROBERT ADELMAN SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF ROBERT ADELMAN	**c** EIN-PN	54-1984910-501
a Plan name	LAW OFFICES JOHN CAMILLUS SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICES JOHN CAMILLUS	**c** EIN-PN	27-2029270-501
a Plan name	LAW OFFICES SAIA MARROCCO & JENSEN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICES SAIA MARROCCO & JENSEN INC	**c** EIN-PN	26-2237406-502
a Plan name	LAWLER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	LAWLER CONSTRUCTION	**c** EIN-PN	20-4377632-501
a Plan name	LAWN DOCTOR SOCA BENEFIT PLAN		
b Name of plan sponsor	LAWN DOCTOR	**c** EIN-PN	46-4174647-501
a Plan name	LAYH & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	LAYH & ASSOCIATES	**c** EIN-PN	31-1515374-501
a Plan name	LCD DISCOUNTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	LCD DISCOUNTERS	**c** EIN-PN	26-3803808-501
a Plan name	LDA BUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	LDA BUILDERS	**c** EIN-PN	34-1670118-501
a Plan name	LDK VENTURES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LDK VENTURES, LLC	**c** EIN-PN	81-3432712-501
a Plan name	LEAD OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	LEAD OHIO	**c** EIN-PN	47-3665908-501

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	LEAD TO CONVERSION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEAD TO CONVERSION, LLC	**c** EIN-PN	20-5936832-501
a Plan name	LEADERSHIP EXCELLERATION SOCA BENEFIT PLAN		
b Name of plan sponsor	LEADERSHIP EXCELLERATION	**c** EIN-PN	31-1626685-501
a Plan name	LEADING EDGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEADING EDGE LLC	**c** EIN-PN	85-4064591-501
a Plan name	LEADING LADY FOUNDATIONS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LEADING LADY FOUNDATIONS INC.	**c** EIN-PN	34-0811678-501
a Plan name	LEARN21 SOCA BENEFIT PLAN		
b Name of plan sponsor	LEARN21	**c** EIN-PN	27-2826976-501
a Plan name	LEARNING FORWARD SOCA BENEFIT PLAN		
b Name of plan sponsor	LEARNING FORWARD	**c** EIN-PN	31-0955962-501
a Plan name	LEASING TEMPORARIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEASING TEMPORARIES LLC	**c** EIN-PN	85-3809653-501
a Plan name	LE-AX WATER DISTRICT SOCA BENEFIT PLAN		
b Name of plan sponsor	LE-AX WATER DISTRICT	**c** EIN-PN	31-1050626-501
a Plan name	LEBANON BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	LEBANON BREWING COMPANY	**c** EIN-PN	87-1216735-501
a Plan name	LEBANON ELECTRIC SUPPLY CO SOCA BENEFIT PLAN		
b Name of plan sponsor	LEBANON ELECTRIC SUPPLY CO	**c** EIN-PN	31-0716605-501
a Plan name	LEDGESTONE ROOFING SOCA BENEFIT PLAN		
b Name of plan sponsor	LEDGESTONE ROOFING	**c** EIN-PN	86-3159610-501
a Plan name	LEE & JACKS TV & APPLIANCES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEE & JACKS TV & APPLIANCES, LLC	**c** EIN-PN	31-0995271-501

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	LEE M SMITH AND ASSOC CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	LEE M SMITH AND ASSOC CO LPA	**c** EIN-PN	31-1395402-501
a Plan name	LEE PLUMBING SUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEE PLUMBING SUPPLY LLC	**c** EIN-PN	87-3013834-501
a Plan name	LEEBAW INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEEBAW INC	**c** EIN-PN	34-0673894-501
a Plan name	LEEUWENBURG CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEEUWENBURG CONSULTING LLC	**c** EIN-PN	85-3584175-501
a Plan name	LEEVER GLASS SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	LEEVER GLASS SALES	**c** EIN-PN	34-1147666-501
a Plan name	LEFKE TREE EXPERTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEFKE TREE EXPERTS, LLC	**c** EIN-PN	32-0459402-501
a Plan name	LEGACY CONSTRUCTION SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY CONSTRUCTION SVS	**c** EIN-PN	30-0024583-501
a Plan name	LEGACY FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY FAMILY DENTAL	**c** EIN-PN	45-3557212-501
a Plan name	LEGACY HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY HEATING & COOLING	**c** EIN-PN	82-4873939-501
a Plan name	LEGACY LAW GROUP LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY LAW GROUP LTD	**c** EIN-PN	26-0231625-501
a Plan name	LEGACY PIPELINE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY PIPELINE SERVICES	**c** EIN-PN	30-0568604-501
a Plan name	LEGACY WEALTH PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGACY WEALTH PARTNERS	**c** EIN-PN	47-2019286-501

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	LEGEND DELIVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGEND DELIVERY	**c** EIN-PN	03-0386513-501
a Plan name	LEGENDS LANE REPRODUCTIVE SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEGENDS LANE REPRODUCTIVE SERVICES INC	**c** EIN-PN	34-1927237-501
a Plan name	LEI HOME ENHANCEMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	LEI HOME ENHANCEMENTS	**c** EIN-PN	81-1388753-501
a Plan name	LEIBERS GARAGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEIBERS GARAGE LLC	**c** EIN-PN	82-1105735-501
a Plan name	LEIGHTEY PROVISION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	LEIGHTEY PROVISION CO	**c** EIN-PN	82-1235606-501
a Plan name	LEIMEISTER CRANE SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEIMEISTER CRANE SERVICE INC	**c** EIN-PN	31-1517675-501
a Plan name	LEIST MERCANTILE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEIST MERCANTILE INC	**c** EIN-PN	31-1310172-501
a Plan name	LELAND FREIGHT DELIVERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LELAND FREIGHT DELIVERY LLC	**c** EIN-PN	88-4343223-501
a Plan name	LEMONGRENADE CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	LEMONGRENADE CREATIVE	**c** EIN-PN	46-4797882-501
a Plan name	LENTECHS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LENTECHS LLC	**c** EIN-PN	82-3083601-501
a Plan name	LEO BRIELMAIER SOCA BENEFIT PLAN		
b Name of plan sponsor	LEO BRIELMAIER	**c** EIN-PN	31-1394264-501
a Plan name	LEONARD CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEONARD CHIROPRACTIC	**c** EIN-PN	20-1566196-501

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	LEONHARDT PLATING SOCA BENEFIT PLAN		
b Name of plan sponsor	LEONHARDT PLATING	**c** EIN-PN	31-0972688-501
a Plan name	LEPPERT MACHINE CO. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LEPPERT MACHINE CO. INC.	**c** EIN-PN	34-1003225-501
a Plan name	LESWEGO CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	LESWEGO CORP	**c** EIN-PN	84-3558285-501
a Plan name	LETS GET PHYSICAL THERAPY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	LETS GET PHYSICAL THERAPY GROUP	**c** EIN-PN	11-3745899-501
a Plan name	LETTERNINE INTERNET ACCESS CO, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LETTERNINE INTERNET ACCESS CO, INC	**c** EIN-PN	01-0688209-501
a Plan name	LEVEL 6 HOLDINGS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEVEL 6 HOLDINGS INC	**c** EIN-PN	88-1173407-501
a Plan name	LEVEL DI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEVEL DI LLC	**c** EIN-PN	84-3421132-501
a Plan name	LEVEL GROUND LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEVEL GROUND LLC	**c** EIN-PN	26-2415030-501
a Plan name	LEVEL MEDICAL BILLING SOCA BENEFIT PLAN		
b Name of plan sponsor	LEVEL MEDICAL BILLING	**c** EIN-PN	46-1218184-501
a Plan name	LEVY LAW GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEVY LAW GROUP LLC	**c** EIN-PN	87-4678311-501
a Plan name	LEWIS UNLIMITED INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LEWIS UNLIMITED INC	**c** EIN-PN	34-1873347-501
a Plan name	LEXINGTON MANAGEMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	LEXINGTON MANAGEMENT CORP	**c** EIN-PN	31-1442208-501

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	LEXTANT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	LEXTANT CORP	**c** EIN-PN	31-1732945-501
a Plan name	LFB ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	LFB ENTERPRISES	**c** EIN-PN	88-1379764-501
a Plan name	LIBB COMPANY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBB COMPANY, INC.	**c** EIN-PN	34-1115976-501
a Plan name	LIBBEE LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBBEE LANDSCAPING	**c** EIN-PN	30-0627070-501
a Plan name	LIBERTAS WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTAS WEALTH MANAGEMENT	**c** EIN-PN	20-2766535-501
a Plan name	LIBERTY AVIATION MUSEUM SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY AVIATION MUSEUM	**c** EIN-PN	37-3994236-501
a Plan name	LIBERTY COMMUNITY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY COMMUNITY CENTER	**c** EIN-PN	31-0649479-501
a Plan name	LIBERTY ELECTRIC COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY ELECTRIC COMPANY	**c** EIN-PN	61-1441794-501
a Plan name	LIBERTY HILLS GOLF CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY HILLS GOLF CLUB	**c** EIN-PN	34-1903098-501
a Plan name	LIBERTY INDUSTRIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY INDUSTRIAL SERVICES	**c** EIN-PN	83-1001535-502
a Plan name	LIBERTY MAINTENANCE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY MAINTENANCE, INC.	**c** EIN-PN	34-1535734-501
a Plan name	LIBERTY ROOFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY ROOFING LLC	**c** EIN-PN	84-4992975-501

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	LIBERTY ST DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	LIBERTY ST DEVELOPMENT	**c** EIN-PN	82-5011441-501
a Plan name	LICKING CNTY COALITION FOR HOUSING SOCA BENEFIT PLAN		
b Name of plan sponsor	LICKING CNTY COALITION FOR HOUSING	**c** EIN-PN	31-1369756-501
a Plan name	LIFE CHANGERS MINISTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFE CHANGERS MINISTRIES INC	**c** EIN-PN	27-3428194-501
a Plan name	LIFE FORWARD PREGNANCY SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFE FORWARD PREGNANCY	**c** EIN-PN	31-1113258-501
a Plan name	LIFE IS SWEET LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFE IS SWEET LLC	**c** EIN-PN	83-2583841-501
a Plan name	LIFEACT SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFEACT	**c** EIN-PN	34-1724365-501
a Plan name	LIFEQUEST STUDIOS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFEQUEST STUDIOS LLC	**c** EIN-PN	46-5417924-501
a Plan name	LIFESTYLE HOUSING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFESTYLE HOUSING INC	**c** EIN-PN	14-4355484-501
a Plan name	LIFETIME FINANCIAL ADVISOR SOCA BENEFIT PLAN		
b Name of plan sponsor	LIFETIME FINANCIAL ADVISOR	**c** EIN-PN	34-1959040-501
a Plan name	LIGHTBORNE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTBORNE INC	**c** EIN-PN	31-1143911-501
a Plan name	LIGHTGOV LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTGOV LLC	**c** EIN-PN	34-1945858-501
a Plan name	LIGHTHOUSE AGENCY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTHOUSE AGENCY, INC.	**c** EIN-PN	31-1457503-501

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	LIGHTHOUSE TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTHOUSE TECHNOLOGIES	**c** EIN-PN	31-1743846-501
a Plan name	LIGHTING AND CONTROLS SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTING AND CONTROLS	**c** EIN-PN	34-1746907-501
a Plan name	LIGHTN UP OHIO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTN UP OHIO, LLC	**c** EIN-PN	87-2223050-501
a Plan name	LIGHTNESS1ALL SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTNESS1ALL	**c** EIN-PN	27-9469466-501
a Plan name	LIGHTSTANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIGHTSTANCE LLC	**c** EIN-PN	82-1441959-501
a Plan name	LILLIE & CO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LILLIE & CO, LLC	**c** EIN-PN	45-4083650-501
a Plan name	LILLY INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LILLY INDUSTRIES INC	**c** EIN-PN	31-0865440-501
a Plan name	LIMA ALLEN COUNTY CHAMBER OF COMMERCE SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMA ALLEN COUNTY CHAMBER OF COMMERCE	**c** EIN-PN	34-4179070-501
a Plan name	LIMA TRUCK BROKERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMA TRUCK BROKERS LLC	**c** EIN-PN	82-1133828-501
a Plan name	LIMES PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMES PLUMBING	**c** EIN-PN	31-1449296-501
a Plan name	LIMINAL ESPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMINAL ESPORTS LLC	**c** EIN-PN	83-3999495-501
a Plan name	LIMINAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMINAL LLC	**c** EIN-PN	85-1381364-501

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	LIMITLESS EXPRESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIMITLESS EXPRESS LLC	**c** EIN-PN	45-5555925-501
a Plan name	LINCOLN DOUGLAS INVEST SOCA BENEFIT PLAN		
b Name of plan sponsor	LINCOLN DOUGLAS INVEST	**c** EIN-PN	27-3459194-501
a Plan name	LINCOLN STORAGE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LINCOLN STORAGE INC.	**c** EIN-PN	31-0655962-501
a Plan name	LIND MEDIA COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	LIND MEDIA COMPANY	**c** EIN-PN	34-1683431-501
a Plan name	LINDA & CAMERON, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LINDA & CAMERON, INC.	**c** EIN-PN	27-3503684-501
a Plan name	LINECRAFT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LINECRAFT LLC	**c** EIN-PN	88-0632902-501
a Plan name	LINER LEGAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LINER LEGAL LLC	**c** EIN-PN	46-3179047-501
a Plan name	LINGARO, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LINGARO, INC.	**c** EIN-PN	32-0567838-501
a Plan name	LINKHORN INSPECTION GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	LINKHORN INSPECTION GROUP	**c** EIN-PN	81-0853807-501
a Plan name	LINSLEY-ROYAL FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	LINSLEY-ROYAL FUNERAL HOME	**c** EIN-PN	81-2760885-501
a Plan name	LINTECH SOCA BENEFIT PLAN		
b Name of plan sponsor	LINTECH	**c** EIN-PN	31-1580083-501
a Plan name	LION AND PANDA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LION AND PANDA LLC	**c** EIN-PN	46-3581015-501

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	LION CREATIVE STUDIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	LION CREATIVE STUDIOS	**c** EIN-PN	82-3342078-501
a Plan name	LIPPS ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIPPS ELECTRIC	**c** EIN-PN	85-4131118-501
a Plan name	LISA G SPEAKS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LISA G SPEAKS LLC	**c** EIN-PN	87-0942393-501
a Plan name	LISA RUDOLPH DMD, MPH, LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	LISA RUDOLPH DMD, MPH, LLP	**c** EIN-PN	85-3243798-501
a Plan name	LISBON VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	LISBON VETERINARY CLINIC	**c** EIN-PN	34-1441437-501
a Plan name	LISSO CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LISSO CO LLC	**c** EIN-PN	51-0516040-501
a Plan name	LITTLE BROTHERS FRIENDS OF THE ELDERLY SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLE BROTHERS FRIENDS OF THE ELDERLY	**c** EIN-PN	20-5751773-501
a Plan name	LITTLE CEASARS SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLE CEASARS	**c** EIN-PN	46-4521351-501
a Plan name	LITTLE HOCKING WATER ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLE HOCKING WATER ASSOC	**c** EIN-PN	31-0791098-501
a Plan name	LITTLE LEGENDS PEDIATRICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLE LEGENDS PEDIATRICS LLC	**c** EIN-PN	93-3611728-501
a Plan name	LITTLEJOHN LAW, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLEJOHN LAW, LLC	**c** EIN-PN	30-0834853-501
a Plan name	LITTLETON & RUE FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	LITTLETON & RUE FUNERAL HOME	**c** EIN-PN	31-0828132-501

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	LITY SCRAP SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	LITY SCRAP SERVICE	**c** EIN-PN	38-3650601-501
a Plan name	LIVING STREAM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LIVING STREAM INC	**c** EIN-PN	31-1510391-501
a Plan name	LIZARD APPAREL SOCA BENEFIT PLAN		
b Name of plan sponsor	LIZARD APPAREL	**c** EIN-PN	46-1986738-501
a Plan name	LIZZIE MAE'S BIRDSEED & DRY GOODS SOCA BENEFIT PLAN		
b Name of plan sponsor	LIZZIE MAES BIRDSEED & DRY GOODS	**c** EIN-PN	26-4789317-501
a Plan name	LJSB SOCA BENEFIT PLAN		
b Name of plan sponsor	LJSB	**c** EIN-PN	31-1358288-501
a Plan name	LJW INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LJW INDUSTRIES LLC	**c** EIN-PN	32-0377685-501
a Plan name	LK TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LK TECHNOLOGIES INC	**c** EIN-PN	20-2103679-501
a Plan name	LLOYD LIBRARY & MUSEUM SOCA BENEFIT PLAN		
b Name of plan sponsor	LLOYD LIBRARY & MUSEUM	**c** EIN-PN	31-0597995-501
a Plan name	LLOYD REBAR CO SOCA BENEFIT PLAN		
b Name of plan sponsor	LLOYD REBAR CO	**c** EIN-PN	46-2481256-501
a Plan name	LMD MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	LMD MANAGEMENT	**c** EIN-PN	85-3547052-501
a Plan name	LMP MACHINE SHOP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LMP MACHINE SHOP LLC	**c** EIN-PN	20-2791101-501
a Plan name	LNE GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LNE GROUP, LLC	**c** EIN-PN	80-0029109-501

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	LOCAL MATTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	LOCAL MATTERS	**c** EIN-PN	06-1819644-501
a Plan name	LOCHER, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOCHER, INC	**c** EIN-PN	31-1393102-501
a Plan name	LODGING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LODGING, LLC	**c** EIN-PN	83-2714081-501
a Plan name	LOGAN CLUTCH CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	LOGAN CLUTCH CORP	**c** EIN-PN	34-1372299-501
a Plan name	LOGAN FAMILY CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOGAN FAMILY CHIROPRACTIC	**c** EIN-PN	11-3660053-501
a Plan name	LOGICAL TALENT MGMT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOGICAL TALENT MGMT LLC	**c** EIN-PN	84-2727894-501
a Plan name	LOMBARDO & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	LOMBARDO & ASSOCIATES	**c** EIN-PN	27-2219088-501
a Plan name	LONE MOUNTAIN AIRCRAFT SOCA BENEFIT PLAN		
b Name of plan sponsor	LONE MOUNTAIN AIRCRAFT	**c** EIN-PN	46-2903235-501
a Plan name	LONG ELECTRIC SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LONG ELECTRIC SERVICES LLC	**c** EIN-PN	30-0705611-501
a Plan name	LONGFELLOW BAR SOCA BENEFIT PLAN		
b Name of plan sponsor	LONGFELLOW BAR	**c** EIN-PN	47-4767568-501
a Plan name	LONGSTRETH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LONGSTRETH INC	**c** EIN-PN	02-0672733-501
a Plan name	LONGWOODS INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	LONGWOODS INTERNATIONAL	**c** EIN-PN	61-1738073-501

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	LONICERA MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LONICERA MANAGEMENT LLC	**c** EIN-PN	83-4420176-501
a Plan name	LOOK COMMUNICATIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LOOK COMMUNICATIONS, INC.	**c** EIN-PN	31-1410369-501
a Plan name	LOOKOUT JOE COFFEE ROASTER SOCA BENEFIT PLAN		
b Name of plan sponsor	LOOKOUT JOE COFFEE ROASTER	**c** EIN-PN	31-1447820-501
a Plan name	LORAIN OHIO KARTPLEX SOCA BENEFIT PLAN		
b Name of plan sponsor	LORAIN OHIO KARTPLEX	**c** EIN-PN	87-0979642-501
a Plan name	LORAIN TOOL ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LORAIN TOOL ENTERPRISES INC	**c** EIN-PN	34-0863165-501
a Plan name	LOREN LYNN SOCA BENEFIT PLAN		
b Name of plan sponsor	LOREN LYNN	**c** EIN-PN	31-1044516-501
a Plan name	LORI ROAD HOUSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LORI ROAD HOUSE LLC	**c** EIN-PN	86-3023786-501
a Plan name	LOST & FOUND OTR SOCA BENEFIT PLAN		
b Name of plan sponsor	LOST & FOUND OTR	**c** EIN-PN	81-2188844-501
a Plan name	LOTO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOTO INC	**c** EIN-PN	31-0909803-501
a Plan name	LOU SEVERINO CONSTRUCTION, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	LOU SEVERINO CONSTRUCTION, LLC.	**c** EIN-PN	81-2176409-501
a Plan name	LOUIES LEGACY ANIMAL RESCUE SOCA BENEFIT PLAN		
b Name of plan sponsor	LOUIES LEGACY ANIMAL RESCUE	**c** EIN-PN	27-0805279-501
a Plan name	LOUIS FOODS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOUIS FOODS INC	**c** EIN-PN	31-1530270-501

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	LOUIS LEEPER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	LOUIS LEEPER COMPANY	**c** EIN-PN	34-0341920-501
a Plan name	LOUIS STILE CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOUIS STILE CONSTRUCTION INC	**c** EIN-PN	34-0766260-501
a Plan name	LOUISA RIDGE ADULT DAY CARE SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LOUISA RIDGE ADULT DAY CARE SERVICES INC	**c** EIN-PN	76-0790063-501
a Plan name	LOWE SCOTT FISHER CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	LOWE SCOTT FISHER CO LPA	**c** EIN-PN	34-1862671-502
a Plan name	LOX BAGEL SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	LOX BAGEL SHOP	**c** EIN-PN	82-4062280-501
a Plan name	LRC REALTY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LRC REALTY INC	**c** EIN-PN	34-1274045-501
a Plan name	LRI ASSOCIATES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LRI ASSOCIATES, LLC	**c** EIN-PN	45-5256032-501
a Plan name	LS ARCHITECTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LS ARCHITECTS INC	**c** EIN-PN	83-0892169-501
a Plan name	LTI POWER SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	LTI POWER SYSTEMS	**c** EIN-PN	34-1812568-501
a Plan name	LTS PARTNERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LTS PARTNERS INC	**c** EIN-PN	99-2635974-501
a Plan name	LUBE DEPOT TIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	LUBE DEPOT TIRE	**c** EIN-PN	38-3696970-501
a Plan name	LUCAS J GREVE ELECTRICAL & PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	LUCAS J GREVE ELECTRICAL & PLUMBING	**c** EIN-PN	45-1554864-501

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	LUCENT DERMATOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	LUCENT DERMATOLOGY	**c** EIN-PN	82-4435822-501
a Plan name	LUCKY LIMO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUCKY LIMO LLC	**c** EIN-PN	27-0816368-501
a Plan name	LUGGEN WORK FORCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUGGEN WORK FORCE INC	**c** EIN-PN	31-1334348-501
a Plan name	LULU PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LULU PROPERTIES LLC	**c** EIN-PN	42-1564698-501
a Plan name	LUMINA IMAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	LUMINA IMAGING	**c** EIN-PN	84-2196750-501
a Plan name	LUNCH OWL CLEVELAND LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUNCH OWL CLEVELAND LLC	**c** EIN-PN	46-1833818-501
a Plan name	LUPER, NEIDENTHAL & LOGAN SOCA BENEFIT PLAN		
b Name of plan sponsor	LUPER, NEIDENTHAL & LOGAN	**c** EIN-PN	31-0928310-501
a Plan name	LUTHER LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUTHER LANDSCAPING LLC	**c** EIN-PN	30-1050855-501
a Plan name	LUTZ FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	LUTZ FARM	**c** EIN-PN	83-4580121-501
a Plan name	LUVA BELLA WINERY SOCA BENEFIT PLAN		
b Name of plan sponsor	LUVA BELLA WINERY	**c** EIN-PN	20-4639166-501
a Plan name	LUX BUILDERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUX BUILDERS LLC	**c** EIN-PN	92-1346924-501
a Plan name	LUXE BRIDAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LUXE BRIDAL LLC	**c** EIN-PN	26-3049329-501

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	LUXENBERG PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	LUXENBERG PROPERTIES	**c** EIN-PN	20-3319512-501
a Plan name	LWS TAX & ACCOUNTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	LWS TAX & ACCOUNTING SERVICES	**c** EIN-PN	26-4075881-501
a Plan name	LXU LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	LXU LTD	**c** EIN-PN	46-3911535-501
a Plan name	LYKENS COMPANIES SOCA BENEFIT PLAN		
b Name of plan sponsor	LYKENS COMPANIES	**c** EIN-PN	26-1823672-501
a Plan name	LYMANS RAIL CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LYMANS RAIL CONSULTING LLC	**c** EIN-PN	26-0399480-501
a Plan name	LYNX FIN GRP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LYNX FIN GRP LLC	**c** EIN-PN	31-1770092-501
a Plan name	LYNX TELEMATICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	LYNX TELEMATICS LLC	**c** EIN-PN	45-3989173-501
a Plan name	M & M HEALTH CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	M & M HEALTH CARE INC	**c** EIN-PN	61-1728144-501
a Plan name	M & S FLOORING SOCA BENEFIT PLAN		
b Name of plan sponsor	M & S FLOORING	**c** EIN-PN	31-1397684-501
a Plan name	M & T TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	M & T TRUCKING	**c** EIN-PN	16-1688400-501
a Plan name	M ALAN ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	M ALAN ASSOCIATES LLC	**c** EIN-PN	20-4377810-501
a Plan name	M AND C SIDING AND ROOFING SOCA BENEFIT PLAN		
b Name of plan sponsor	M AND C SIDING AND ROOFING	**c** EIN-PN	27-1438880-501

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	M AND G POOLS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	M AND G POOLS LLC	**c** EIN-PN	45-4664042-501
a Plan name	M AND K REAL ESTATE MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	M AND K REAL ESTATE MGMT	**c** EIN-PN	26-4123142-501
a Plan name	M AND M CONSTRUCTION AND MECHANICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	M AND M CONSTRUCTION AND MECHANICAL LLC	**c** EIN-PN	47-3080026-501
a Plan name	M AND M FASTENERS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	M AND M FASTENERS LTD	**c** EIN-PN	31-1557492-501
a Plan name	M C LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	M C LOGISTICS LLC	**c** EIN-PN	47-4959013-501
a Plan name	M E CLARKE CONSULTING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	M E CLARKE CONSULTING, LLC	**c** EIN-PN	27-2138572-501
a Plan name	M J DESIGN ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	M J DESIGN ASSOCIATES	**c** EIN-PN	31-1585133-501
a Plan name	M M INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	M M INDUSTRIES INC	**c** EIN-PN	34-1039609-501
a Plan name	M ROY COLEMAN, DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	M ROY COLEMAN, DDS	**c** EIN-PN	45-4793307-501
a Plan name	M SMITH ROOFING LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	M SMITH ROOFING LTD	**c** EIN-PN	34-1915067-501
a Plan name	M&B ASPHALT SOCA BENEFIT PLAN		
b Name of plan sponsor	M&B ASPHALT	**c** EIN-PN	34-4471771-501
a Plan name	M&M AMERICAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	M&M AMERICAN INC	**c** EIN-PN	31-1534521-501

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	M.C. SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	M.C. SYSTEMS INC	**c** EIN-PN	31-1458705-501
a Plan name	M.T. SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	M.T. SERVICES, INC.	**c** EIN-PN	34-1723223-501
a Plan name	M-A BUILDING & MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	M-A BUILDING & MAINTENANCE	**c** EIN-PN	34-1036444-503
a Plan name	MA SOUDERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MA SOUDERS INC	**c** EIN-PN	31-1692431-501
a Plan name	MAAKIL GROUP LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	MAAKIL GROUP LTD	**c** EIN-PN	47-4083987-502
a Plan name	MAB ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	MAB ENGINEERING	**c** EIN-PN	84-2935264-501
a Plan name	MAC CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAC CONSTRUCTION INC	**c** EIN-PN	31-1101302-501
a Plan name	MAC MURRAY & SHUSTER LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	MAC MURRAY & SHUSTER LLP	**c** EIN-PN	20-8539334-501
a Plan name	MACALUSO REALTY SOCA BENEFIT PLAN		
b Name of plan sponsor	MACALUSO REALTY	**c** EIN-PN	46-4155915-501
a Plan name	MACI FABRICATORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MACI FABRICATORS, LLC	**c** EIN-PN	87-0989563-501
a Plan name	MACK WRIGHT DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	MACK WRIGHT DDS	**c** EIN-PN	34-1853649-501
a Plan name	MACKS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MACKS, INC.	**c** EIN-PN	34-0688891-501

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	MACPHERSON ENGINEERING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MACPHERSON ENGINEERING INC	**c** EIN-PN	31-1572814-502
a Plan name	MAC'S PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	MACS PIZZA	**c** EIN-PN	46-3406490-501
a Plan name	MAD JIM , INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MAD JIM , INC.	**c** EIN-PN	41-9522089-501
a Plan name	MAD RIVER MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MAD RIVER MANAGEMENT	**c** EIN-PN	47-3557377-501
a Plan name	MAD SCIENTIST ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MAD SCIENTIST ASSOCIATES	**c** EIN-PN	20-1126855-501
a Plan name	MADDEN DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MADDEN DEVELOPMENT	**c** EIN-PN	88-2810294-501
a Plan name	MADDEN FH AND CREAMATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MADDEN FH AND CREAMATION	**c** EIN-PN	83-0707266-501
a Plan name	MADEIRA INDIAN HILL FIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	MADEIRA INDIAN HILL FIRE	**c** EIN-PN	31-1123229-501
a Plan name	MADHOUSE MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MADHOUSE MEDIA LLC	**c** EIN-PN	45-4594285-501
a Plan name	MADISON AND ROSAN LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON AND ROSAN LLP	**c** EIN-PN	20-3316059-501
a Plan name	MADISON EYE CARE ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON EYE CARE ASSOCIATES	**c** EIN-PN	34-1749707-501
a Plan name	MADISON MEDICAL ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON MEDICAL ASSOCIATES	**c** EIN-PN	92-1688583-501

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	MADISON MOTOR SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON MOTOR SERVICE	**c** EIN-PN	83-3321361-501
a Plan name	MADISON OPPORTUNITY FUND SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON OPPORTUNITY FUND	**c** EIN-PN	83-2993260-501
a Plan name	MADISON WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISON WEALTH MANAGEMENT	**c** EIN-PN	31-1725548-501
a Plan name	MADISONVILLE EDUCATION & ASSISTANCE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	MADISONVILLE EDUCATION & ASSISTANCE CENTER	**c** EIN-PN	31-1218223-502
a Plan name	MAEMIE CHAN DMD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAEMIE CHAN DMD LLC	**c** EIN-PN	47-3409293-501
a Plan name	MAGIC MARKETING & GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MAGIC MARKETING & GRAPHICS	**c** EIN-PN	34-1480073-502
a Plan name	MAGNEFORCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAGNEFORCE INC	**c** EIN-PN	34-1531630-501
a Plan name	MAGNEXT LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	MAGNEXT LTD	**c** EIN-PN	43-2097085-501
a Plan name	MAGNOLIAS ON THE GREEN SOCA BENEFIT PLAN		
b Name of plan sponsor	MAGNOLIAS ON THE GREEN	**c** EIN-PN	32-0602613-501
a Plan name	MAGULACS TIRE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MAGULACS TIRE SERVICE	**c** EIN-PN	35-2165548-501
a Plan name	MAHER CONCRETE CUTTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHER CONCRETE CUTTING INC	**c** EIN-PN	31-1169309-501
a Plan name	MAHONEY REAL ESTATE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONEY REAL ESTATE GROUP	**c** EIN-PN	83-3027540-501

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	MAHONING COUNTY LAND BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONING COUNTY LAND BANK	**c** EIN-PN	45-1793612-501
a Plan name	MAHONING PROPERTY SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONING PROPERTY	**c** EIN-PN	83-1445339-501
a Plan name	MAHONING VALLEY HISTORICAL SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONING VALLEY HISTORICAL SOCIETY	**c** EIN-PN	34-0872868-501
a Plan name	MAHONING VALLEY IMAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONING VALLEY IMAGING	**c** EIN-PN	34-1843192-501
a Plan name	MAHONING VALLEY VETERINARY CENTRE SOCA BENEFIT PLAN		
b Name of plan sponsor	MAHONING VALLEY VETERINARY CENTRE	**c** EIN-PN	27-1472935-501
a Plan name	MAIBACH TRACTOR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAIBACH TRACTOR LLC	**c** EIN-PN	26-4488679-501
a Plan name	MAIN SAIL PRODUCTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MAIN SAIL PRODUCTIONS	**c** EIN-PN	31-1246578-501
a Plan name	MAIN STREET HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAIN STREET HEALTH LLC	**c** EIN-PN	82-3639918-501
a Plan name	MAINSTAY ACCOUNTING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MAINSTAY ACCOUNTING SOLUTIONS	**c** EIN-PN	93-4874732-501
a Plan name	MAINSTREAM WATERJET SOCA BENEFIT PLAN		
b Name of plan sponsor	MAINSTREAM WATERJET	**c** EIN-PN	20-1725365-502
a Plan name	MAINTAIN DEVELOP BUILD CO SOCA BENEFIT PLAN		
b Name of plan sponsor	MAINTAIN DEVELOP BUILD CO	**c** EIN-PN	31-1655600-501
a Plan name	MAIZE VALLEY FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	MAIZE VALLEY FARM	**c** EIN-PN	34-1936518-501

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	MAJESTIC SOTERIA USA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAJESTIC SOTERIA USA LLC	**c** EIN-PN	85-0699982-501
a Plan name	MAJIK PROPERTY 2, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAJIK PROPERTY 2, LLC	**c** EIN-PN	46-5488622-501
a Plan name	MAJKUT CPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MAJKUT CPA	**c** EIN-PN	34-1789797-501
a Plan name	MAKERGEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	MAKERGEAR	**c** EIN-PN	45-3750230-501
a Plan name	MAKERS BAKERS CO, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	MAKERS BAKERS CO, LTD	**c** EIN-PN	83-2738780-501
a Plan name	MAKERS SUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAKERS SUPPLY LLC	**c** EIN-PN	87-4013961-501
a Plan name	MAKO POWER SOCA BENEFIT PLAN		
b Name of plan sponsor	MAKO POWER	**c** EIN-PN	05-0632427-501
a Plan name	MAKRIS FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	MAKRIS FINANCIAL GROUP	**c** EIN-PN	31-1509031-501
a Plan name	MALASHA TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	MALASHA TECHNOLOGIES	**c** EIN-PN	26-3145470-501
a Plan name	MALETZ ARCHITECTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MALETZ ARCHITECTS INC	**c** EIN-PN	81-4944154-501
a Plan name	MALOTT AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	MALOTT AUTOMOTIVE	**c** EIN-PN	20-1599222-501
a Plan name	MAMA JO PIES SOCA BENEFIT PLAN		
b Name of plan sponsor	MAMA JO PIES	**c** EIN-PN	34-1733543-501

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	MAMMANA CUSTOM WOODWORKING SOCA BENEFIT PLAN		
b Name of plan sponsor	MAMMANA CUSTOM WOODWORKING	**c** EIN-PN	34-1886067-501
a Plan name	MAN ON THE MOON, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAN ON THE MOON, LLC	**c** EIN-PN	45-5508788-501
a Plan name	MANAGEMENT ESSENTIALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MANAGEMENT ESSENTIALS LLC	**c** EIN-PN	83-2708620-501
a Plan name	MANDAMUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MANDAMUS LLC	**c** EIN-PN	34-1964117-501
a Plan name	MANGANO LAW OFFICES CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MANGANO LAW OFFICES CO LPA	**c** EIN-PN	20-5460196-501
a Plan name	MANGIARELLI REHABILITATION, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MANGIARELLI REHABILITATION, LLC.	**c** EIN-PN	27-2080561-501
a Plan name	MANN AND CARDUCCI CO., LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MANN AND CARDUCCI CO., LPA	**c** EIN-PN	26-1984805-501
a Plan name	MANNING CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	MANNING CONTRACTING	**c** EIN-PN	83-0927882-502
a Plan name	MANSFIELD GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MANSFIELD GRAPHICS	**c** EIN-PN	34-1692259-501
a Plan name	MANSFIELD PLASTIC SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	MANSFIELD PLASTIC SURGERY	**c** EIN-PN	26-4755838-501
a Plan name	MANTEY MACHINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MANTEY MACHINE LLC	**c** EIN-PN	82-2290511-502
a Plan name	MANUEL GARCIA PROSTHETICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MANUEL GARCIA PROSTHETICS	**c** EIN-PN	34-1266528-501

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	MAPLE ORTHODONTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAPLE ORTHODONTICS INC	**c** EIN-PN	26-2092857-501
a Plan name	MAPLE TREE CANCER ALLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MAPLE TREE CANCER ALLIANCE	**c** EIN-PN	27-4113397-501
a Plan name	MAPVISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAPVISION INC	**c** EIN-PN	32-0540033-501
a Plan name	MARATHON FINANCIAL SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	MARATHON FINANCIAL SVS	**c** EIN-PN	26-4784946-501
a Plan name	MARBLE CLIFF CAPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MARBLE CLIFF CAPITAL	**c** EIN-PN	84-5028825-501
a Plan name	MARCA SOCA BENEFIT PLAN		
b Name of plan sponsor	MARCA	**c** EIN-PN	35-2826182-501
a Plan name	MARCANTONIO MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARCANTONIO MANAGEMENT LLC	**c** EIN-PN	99-2627916-501
a Plan name	MARETT HOLDINGS CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARETT HOLDINGS CO INC	**c** EIN-PN	46-1644085-501
a Plan name	MARGARET K GRENDELL SOCA BENEFIT PLAN		
b Name of plan sponsor	MARGARET K GRENDELL	**c** EIN-PN	30-2709256-501
a Plan name	MARGARET T KARL SOCA BENEFIT PLAN		
b Name of plan sponsor	MARGARET T KARL	**c** EIN-PN	46-2588750-501
a Plan name	MARIAS TECHNOLOGY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MARIAS TECHNOLOGY INC.	**c** EIN-PN	31-0972651-501
a Plan name	MARIES HOUSE OF HOPE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARIES HOUSE OF HOPE	**c** EIN-PN	46-1691910-502

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	MARIETTA SILOS SOCA BENEFIT PLAN		
b Name of plan sponsor	MARIETTA SILOS	**c** EIN-PN	52-2455990-501
a Plan name	MARIK HOLLAND LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	MARIK HOLLAND LANDSCAPING	**c** EIN-PN	31-1457055-501
a Plan name	MARION CRAWFORD PREVENTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MARION CRAWFORD PREVENTION	**c** EIN-PN	27-1358339-501
a Plan name	MARION FAMILY CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARION FAMILY CARE	**c** EIN-PN	92-3816619-501
a Plan name	MARJET ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	MARJET ENTERPRISES	**c** EIN-PN	34-1533948-501
a Plan name	MARK A FOGLIETTI DO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK A FOGLIETTI DO INC	**c** EIN-PN	34-1850741-501
a Plan name	MARK BEEBE & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK BEEBE & ASSOCIATES	**c** EIN-PN	84-3181374-501
a Plan name	MARK F. SHOREMAN, MD, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK F. SHOREMAN, MD, LLC	**c** EIN-PN	81-3762297-502
a Plan name	MARK KLAUS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK KLAUS, LLC	**c** EIN-PN	65-1316857-501
a Plan name	MARK LEVY DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK LEVY DDS INC	**c** EIN-PN	46-4391240-501
a Plan name	MARK MANDELL BROWN MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK MANDELL BROWN MD INC	**c** EIN-PN	31-1293339-501
a Plan name	MARK ONE MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK ONE MANUFACTURING	**c** EIN-PN	47-3582799-501

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	MARK SMITH ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK SMITH ELECTRIC INC	**c** EIN-PN	04-3700882-501
a Plan name	MARK SWEENEY BUICK PONTIAC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARK SWEENEY BUICK PONTIAC	**c** EIN-PN	31-1319586-501
a Plan name	MARKET GROUP ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARKET GROUP ONE	**c** EIN-PN	31-1082729-501
a Plan name	MARKETING DIRECTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MARKETING DIRECTIONS	**c** EIN-PN	34-1326955-501
a Plan name	MARK'S MOBILE HOME SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARKS MOBILE HOME SERVICE	**c** EIN-PN	34-1897738-501
a Plan name	MARKSMAN AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	MARKSMAN AUTO BODY	**c** EIN-PN	84-2493447-501
a Plan name	MARLAN GARY FUNERAL HOME THE CHAPEL OF PEACE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARLAN GARY FUNERAL HOME THE CHAPEL OF PEACE	**c** EIN-PN	81-2102524-501
a Plan name	MARLBORO SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	MARLBORO SUPPLY	**c** EIN-PN	27-1316325-501
a Plan name	MARLOWES PREMIUM COFFEE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARLOWES PREMIUM COFFEE	**c** EIN-PN	34-1693718-501
a Plan name	MARRIK DISH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	MARRIK DISH COMPANY	**c** EIN-PN	34-1913709-501
a Plan name	MARS AUTO AND TRUCK PARTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MARS AUTO AND TRUCK PARTS	**c** EIN-PN	34-1052491-501
a Plan name	MARSINOS COSTUMES AND NOVELTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARSINOS COSTUMES AND NOVELTIES LLC	**c** EIN-PN	26-2274009-501

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	MARSOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARSOLUTIONS LLC	**c** EIN-PN	45-5272871-501
a Plan name	MARTIN CARPET CLEANING SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTIN CARPET CLEANING	**c** EIN-PN	31-0855980-501
a Plan name	MARTIN DIESEL SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTIN DIESEL	**c** EIN-PN	34-0940597-501
a Plan name	MARTIN MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTIN MACHINE	**c** EIN-PN	83-3409500-501
a Plan name	MARTINI BROS. YTOWN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTINI BROS. YTOWN LLC	**c** EIN-PN	47-3400423-501
a Plan name	MARTINI ON ICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTINI ON ICE, LLC	**c** EIN-PN	61-1384255-501
a Plan name	MARTYS PERSONAL CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARTYS PERSONAL CARE	**c** EIN-PN	87-4216538-501
a Plan name	MARVATEX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARVATEX INC	**c** EIN-PN	31-1752671-501
a Plan name	MARY BROWN MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARY BROWN MANAGEMENT LLC	**c** EIN-PN	47-5630562-501
a Plan name	MARY MAGDALEN HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	MARY MAGDALEN HOUSE	**c** EIN-PN	31-1182978-501
a Plan name	MARY'S PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	MARYS PIZZA	**c** EIN-PN	34-1462383-501
a Plan name	MARYSVILLE ANIMAL CARE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MARYSVILLE ANIMAL CARE CENTER INC	**c** EIN-PN	81-3135636-501

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	MAS RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MAS RESTORATION	**c** EIN-PN	92-3899985-501
a Plan name	MASSACHUSETTS LABORATORIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MASSACHUSETTS LABORATORIES, INC.	**c** EIN-PN	86-1580372-501
a Plan name	MASSATI ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	MASSATI ENTERPRISES	**c** EIN-PN	45-3358737-501
a Plan name	MAST GROUP ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	MAST GROUP ENTERPRISES	**c** EIN-PN	83-3019714-501
a Plan name	MAST LEPLEY STORAGE STRUCTURES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAST LEPLEY STORAGE STRUCTURES INC	**c** EIN-PN	34-1938849-501
a Plan name	MASTER CLEANING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTER CLEANING LLC	**c** EIN-PN	83-1909753-501
a Plan name	MASTER GROUP ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTER GROUP ENTERPRISES	**c** EIN-PN	27-4870578-501
a Plan name	MASTER MACHINE REBUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTER MACHINE REBUILDERS	**c** EIN-PN	34-1371037-501
a Plan name	MASTERSONS VET CLINIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTERSONS VET CLINIC INC	**c** EIN-PN	31-1193315-502
a Plan name	MASTERTECH AUTO CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTERTECH AUTO CARE INC	**c** EIN-PN	34-1884197-501
a Plan name	MASTERY PORTFOLIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTERY PORTFOLIO LLC	**c** EIN-PN	84-3307658-501
a Plan name	MASTRO DEVELOPMENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MASTRO DEVELOPMENT GROUP LLC	**c** EIN-PN	47-5177020-501

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	MATCHMD, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MATCHMD, INC.	**c** EIN-PN	74-2972570-501
a Plan name	MATERION FEDERAL CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	MATERION FEDERAL CREDIT UNION	**c** EIN-PN	34-1085454-501
a Plan name	MATIJEVICH FLOOR COVERING SOCA BENEFIT PLAN		
b Name of plan sponsor	MATIJEVICH FLOOR COVERING	**c** EIN-PN	34-1299239-501
a Plan name	MATRIX MKTG LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATRIX MKTG LLC	**c** EIN-PN	85-2123630-501
a Plan name	MATRIX TELECOM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATRIX TELECOM LLC	**c** EIN-PN	92-2895883-501
a Plan name	MATT AND JACE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATT AND JACE LLC	**c** EIN-PN	85-1196817-501
a Plan name	MATTER FABS SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTER FABS	**c** EIN-PN	84-3088700-501
a Plan name	MATTES LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTES LANDSCAPING	**c** EIN-PN	34-1827430-501
a Plan name	MATTHEW A MISHAK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTHEW A MISHAK LLC	**c** EIN-PN	81-4643247-501
a Plan name	MATTHEW L SPROWL MD SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTHEW L SPROWL MD	**c** EIN-PN	31-1460495-501
a Plan name	MATTHEW P ORLANDO DMD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTHEW P ORLANDO DMD LLC	**c** EIN-PN	99-4959892-501
a Plan name	MATTHEW ZECHMAN COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTHEW ZECHMAN COMPANY INC	**c** EIN-PN	34-1298690-501

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	MATTY, HENRIKSON & GREVE SOCA BENEFIT PLAN		
b Name of plan sponsor	MATTY, HENRIKSON & GREVE	**c** EIN-PN	34-1457900-501
a Plan name	MAUCH FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAUCH FARMS INC	**c** EIN-PN	34-1216906-501
a Plan name	MAURER PHOTOGRAPHY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAURER PHOTOGRAPHY LLC	**c** EIN-PN	34-1867385-501
a Plan name	MAVILLINO CUSTOM HOMES SOCA BENEFIT PLAN		
b Name of plan sponsor	MAVILLINO CUSTOM HOMES	**c** EIN-PN	47-4107798-501
a Plan name	MAWORKWEAR SOCA BENEFIT PLAN		
b Name of plan sponsor	MAWORKWEAR	**c** EIN-PN	46-1721334-501
a Plan name	MAXILL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAXILL INC	**c** EIN-PN	46-4711406-501
a Plan name	MAXIMUM FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MAXIMUM FIRE PROTECTION	**c** EIN-PN	46-2066767-501
a Plan name	MAXWELL FINANCIAL MGT SOCA BENEFIT PLAN		
b Name of plan sponsor	MAXWELL FINANCIAL MGT	**c** EIN-PN	20-4156790-502
a Plan name	MAY CUSTOM MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	MAY CUSTOM MANUFACTURING	**c** EIN-PN	31-1547617-501
a Plan name	MAYFIELD FLORAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MAYFIELD FLORAL	**c** EIN-PN	82-2619759-501
a Plan name	MAYFIELD TAX ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MAYFIELD TAX ADVISORS LLC	**c** EIN-PN	20-2226534-501
a Plan name	MAYS CONSULTING AND EVALUATION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MAYS CONSULTING AND EVALUATION SERVICES	**c** EIN-PN	31-1359732-501

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	MAZDA OF KENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MAZDA OF KENT	**c** EIN-PN	27-0365707-501
a Plan name	MAZZ AND RUSSELL TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	MAZZ AND RUSSELL TRUCKING	**c** EIN-PN	84-5048649-501
a Plan name	MBL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MBL MANAGEMENT	**c** EIN-PN	34-1962175-501
a Plan name	MC B PAVING SOCA BENEFIT PLAN		
b Name of plan sponsor	MC B PAVING	**c** EIN-PN	27-4526318-501
a Plan name	MC3 PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	MC3 PARTNERS	**c** EIN-PN	26-2448690-501
a Plan name	MCALPINE AUTOMOTIVE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCALPINE AUTOMOTIVE, LLC	**c** EIN-PN	45-4481638-501
a Plan name	MCATTACK MACHINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCATTACK MACHINE LLC	**c** EIN-PN	26-2141025-501
a Plan name	MCAULIFFE BROTHERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCAULIFFE BROTHERS INC	**c** EIN-PN	31-4402201-501
a Plan name	MCBRIDE BROTHERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCBRIDE BROTHERS INC	**c** EIN-PN	34-0759526-501
a Plan name	MCBS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCBS LLC	**c** EIN-PN	84-4494685-501
a Plan name	MCCABE CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCABE CONTRACTORS	**c** EIN-PN	27-3254414-501
a Plan name	MCCAFFREY INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCAFFREY INSURANCE AGENCY	**c** EIN-PN	31-0713695-501

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	MCCANE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCANE CONSTRUCTION	**c** EIN-PN	31-1387105-501
a Plan name	MCCARLEY & COOK SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCARLEY & COOK	**c** EIN-PN	85-1434931-501
a Plan name	MCCARTHY TAX PREPARATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCARTHY TAX PREPARATION LLC	**c** EIN-PN	81-3555810-501
a Plan name	MCCARTY GARDENS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCARTY GARDENS, LLC	**c** EIN-PN	31-1453023-501
a Plan name	MCCAULEY FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCAULEY FINANCIAL	**c** EIN-PN	82-2944568-501
a Plan name	MCCHESNEY FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCHESNEY FARMS INC	**c** EIN-PN	34-1797041-501
a Plan name	MCCONNELL'S FARM MARKET LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCONNELLS FARM MARKET LLC	**c** EIN-PN	34-1495600-501
a Plan name	MCCOOL PLASTER & DRYWALL SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCOOL PLASTER & DRYWALL	**c** EIN-PN	02-0691942-501
a Plan name	MCCRATE DELAET AND CO SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCRATE DELAET AND CO	**c** EIN-PN	34-1205613-501
a Plan name	MCCULLOUGHS LS AND NURSERY SOCA BENEFIT PLAN		
b Name of plan sponsor	MCCULLOUGHS LS AND NURSERY	**c** EIN-PN	34-8075654-501
a Plan name	MCDONALD STEEL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	MCDONALD STEEL CORP	**c** EIN-PN	34-1321932-501
a Plan name	MCDONALDS CONSTRUCTION D&B LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCDONALDS CONSTRUCTION D&B LLC	**c** EIN-PN	93-4971090-501

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	MCELHENEY LOCKSMITH S INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCELHENEY LOCKSMITH S INC	**c** EIN-PN	34-1113698-501
a Plan name	MCFADDEN BUSHNELL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCFADDEN BUSHNELL LLC	**c** EIN-PN	81-3157499-501
a Plan name	MCFADDEN INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MCFADDEN INSURANCE	**c** EIN-PN	31-1227971-501
a Plan name	MCGARVEY HEATING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MCGARVEY HEATING INC.	**c** EIN-PN	34-1711064-501
a Plan name	MCGOFF FRAME CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MCGOFF FRAME CONSTRUCTION	**c** EIN-PN	85-1114447-501
a Plan name	MCHENRY & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MCHENRY & ASSOCIATES	**c** EIN-PN	34-1154346-501
a Plan name	MCHENRY ADVISERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCHENRY ADVISERS INC	**c** EIN-PN	20-4243624-501
a Plan name	MCKEE DOOR SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKEE DOOR SALES	**c** EIN-PN	31-0938547-501
a Plan name	MCKENZIE MEDICAL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKENZIE MEDICAL CORP	**c** EIN-PN	01-0820101-501
a Plan name	MCKENZIE'S CONCRETE CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKENZIES CONCRETE CONSTRUCTION INC	**c** EIN-PN	47-4034958-501
a Plan name	MCKIBBEN ENTERPRISES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKIBBEN ENTERPRISES, LLC	**c** EIN-PN	86-1885711-501
a Plan name	MCKINLAY LAW OFFICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKINLAY LAW OFFICES LLC	**c** EIN-PN	47-3128892-501

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	MCKINNEY & NAMEI CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MCKINNEY & NAMEI CO LPA	**c** EIN-PN	31-1281338-501
a Plan name	MCM COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCM COMPANY INC	**c** EIN-PN	34-1703466-501
a Plan name	MCMAHON DEGULIS LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	MCMAHON DEGULIS LLP	**c** EIN-PN	34-1764792-501
a Plan name	MCMASTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCMASTER LLC	**c** EIN-PN	26-4637072-501
a Plan name	MCNAMEE FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	MCNAMEE FARMS	**c** EIN-PN	31-1544065-501
a Plan name	MCS MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	MCS MANUFACTURING	**c** EIN-PN	37-1563776-501
a Plan name	MCSUNLEY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCSUNLEY, LLC	**c** EIN-PN	47-4570565-501
a Plan name	MCV PROPERTIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MCV PROPERTIES INC	**c** EIN-PN	31-1443295-501
a Plan name	MD ELECTRIC OF OHIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MD ELECTRIC OF OHIO LLC	**c** EIN-PN	26-2370646-501
a Plan name	MDA ENGINEERING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MDA ENGINEERING, INC.	**c** EIN-PN	34-1208334-501
a Plan name	MDG FLOORING WHOLESALERS SOCA BENEFIT PLAN		
b Name of plan sponsor	MDG FLOORING WHOLESALERS	**c** EIN-PN	34-1962169-501
a Plan name	MDG MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MDG MAINTENANCE	**c** EIN-PN	83-1837473-501

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	MDSOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MDSOLUTIONS INC	**c** EIN-PN	31-1804276-501
a Plan name	MEANDER HOSPITALITY SOCA BENEFIT PLAN		
b Name of plan sponsor	MEANDER HOSPITALITY	**c** EIN-PN	20-1500944-501
a Plan name	MEANS CO II SOCA BENEFIT PLAN		
b Name of plan sponsor	MEANS CO II	**c** EIN-PN	84-4934423-501
a Plan name	MEARLS ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEARLS ENTERPRISES LLC	**c** EIN-PN	81-4648305-501
a Plan name	MECC USA, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MECC USA, LLC	**c** EIN-PN	31-1604044-501
a Plan name	MECHANICAL AUTOMATION COMPONENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MECHANICAL AUTOMATION COMPONENTS	**c** EIN-PN	82-5076548-502
a Plan name	MECHANITECHS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MECHANITECHS LLC	**c** EIN-PN	83-1615057-501
a Plan name	MEDALLION LIGHTING SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDALLION LIGHTING	**c** EIN-PN	34-1356651-501
a Plan name	MEDASYNC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDASYNC INC	**c** EIN-PN	99-1239529-501
a Plan name	MEDGAS ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDGAS ASSOCIATES LLC	**c** EIN-PN	92-2315824-501
a Plan name	MEDI RX PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDI RX PHARMACY	**c** EIN-PN	34-1702585-501
a Plan name	MEDIA 144 SECURITY SOLN SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDIA 144 SECURITY SOLN	**c** EIN-PN	27-4196721-501

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	MEDIA LINK SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDIA LINK	**c** EIN-PN	27-1697366-501
a Plan name	MEDICAL ASSOCIATES OF WARREN SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDICAL ASSOCIATES OF WARREN	**c** EIN-PN	34-1907605-501
a Plan name	MEDICAL HUMAN FACTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDICAL HUMAN FACTORS LLC	**c** EIN-PN	37-1948246-501
a Plan name	MEDICAL RESTORATION SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDICAL RESTORATION SOLUTIONS	**c** EIN-PN	26-4431958-501
a Plan name	MEDICINE INPATIENT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDICINE INPATIENT GROUP	**c** EIN-PN	20-5137082-501
a Plan name	MEDINA COUNTY AGRICULTURAL SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDINA COUNTY AGRICULTURAL SOCIETY	**c** EIN-PN	34-1006456-501
a Plan name	MEDINA COUNTY ECONOMIC DEVELOPMENT CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDINA COUNTY ECONOMIC DEVELOPMENT CORP.	**c** EIN-PN	34-1512809-501
a Plan name	MEDINA COUNTY FEDERAL CU SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDINA COUNTY FEDERAL CU	**c** EIN-PN	34-0869210-501
a Plan name	MEDINA FARMERS EXCHANGE SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDINA FARMERS EXCHANGE	**c** EIN-PN	34-0394480-501
a Plan name	MEDSHIP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDSHIP LLC	**c** EIN-PN	86-3867651-501
a Plan name	MEDURE VARRATI INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MEDURE VARRATI INSURANCE	**c** EIN-PN	26-2285484-501
a Plan name	MEEKERS VENUE SOCA BENEFIT PLAN		
b Name of plan sponsor	MEEKERS VENUE	**c** EIN-PN	81-1007267-501

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	MEG SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MEG SERVICES, INC.	**c** EIN-PN	20-1900006-501
a Plan name	MEGA KLEEN JANITORIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MEGA KLEEN JANITORIAL	**c** EIN-PN	26-3907941-501
a Plan name	MEGAN L MILLER APRN CNP DIRECT PRIMARY CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MEGAN L MILLER APRN CNP DIRECT PRIMARY CARE	**c** EIN-PN	86-1446998-501
a Plan name	MEHAN EYE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEHAN EYE INC	**c** EIN-PN	26-4530868-501
a Plan name	MEIERJOHAN BUILDING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEIERJOHAN BUILDING GROUP LLC	**c** EIN-PN	26-3835304-501
a Plan name	MEIGS COUNTY GENERAL HEALTH DIST SOCA BENEFIT PLAN		
b Name of plan sponsor	MEIGS COUNTY GENERAL HEALTH DIST	**c** EIN-PN	26-0700301-501
a Plan name	MEINEKE ELECTRONICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEINEKE ELECTRONICS LLC	**c** EIN-PN	32-0396653-501
a Plan name	MEISTER DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	MEISTER DENTAL GROUP	**c** EIN-PN	38-3785420-501
a Plan name	MEKAEV, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEKAEV, INC	**c** EIN-PN	35-2254863-501
a Plan name	MEL LANZER CO SOCA BENEFIT PLAN		
b Name of plan sponsor	MEL LANZER CO	**c** EIN-PN	34-0965107-501
a Plan name	MELCAP PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MELCAP PARTNERS LLC	**c** EIN-PN	34-1911529-501
a Plan name	MELDRUM MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MELDRUM MECHANICAL	**c** EIN-PN	34-1973261-501

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	MEMMO CONTRACTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MEMMO CONTRACTING INC	**c** EIN-PN	25-1881092-501
a Plan name	MENKE POURED WALLS SOCA BENEFIT PLAN		
b Name of plan sponsor	MENKE POURED WALLS	**c** EIN-PN	83-2653071-501
a Plan name	MENSCH CAPITAL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MENSCH CAPITAL MANAGEMENT	**c** EIN-PN	47-1513529-501
a Plan name	MENTAL HEALTH & RECOVERY SERVICES BOARD SOCA BENEFIT PLAN		
b Name of plan sponsor	MENTAL HEALTH & RECOVERY SERVICES BOARD	**c** EIN-PN	34-6400019-501
a Plan name	MENTAL HEALTH AMERICA OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	MENTAL HEALTH AMERICA OF OHIO	**c** EIN-PN	31-4412697-501
a Plan name	MENTAL HLTH AND RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	MENTAL HLTH AND RECOVERY	**c** EIN-PN	34-6401331-501
a Plan name	MENTOR HOSPITALITY SOCA BENEFIT PLAN		
b Name of plan sponsor	MENTOR HOSPITALITY	**c** EIN-PN	81-3212247-501
a Plan name	MENTOR PEDIATRIC DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	MENTOR PEDIATRIC DENTISTRY	**c** EIN-PN	20-0176330-501
a Plan name	MERANDA LAW FIRM LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	MERANDA LAW FIRM LTD	**c** EIN-PN	27-4623750-501
a Plan name	MERCHANT FOCUS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MERCHANT FOCUS, INC.	**c** EIN-PN	20-5109235-501
a Plan name	MERCY MONTESSORI SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	MERCY MONTESSORI SCHOOL	**c** EIN-PN	31-1578538-501
a Plan name	MEREDITH PARTY RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	MEREDITH PARTY RENTALS	**c** EIN-PN	34-1554546-501

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	MERIDIAN CAPSTONE SOCA BENEFIT PLAN		
b Name of plan sponsor	MERIDIAN CAPSTONE	**c** EIN-PN	26-1511364-501
a Plan name	MERILLAT RACING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MERILLAT RACING LLC	**c** EIN-PN	46-5511092-501
a Plan name	MERIT ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MERIT ADVISORS LLC	**c** EIN-PN	30-1304644-501
a Plan name	MERIT REAL ESTATE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MERIT REAL ESTATE, LLC	**c** EIN-PN	34-6642535-501
a Plan name	MERKEL FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MERKEL FINANCIAL	**c** EIN-PN	31-1438651-501
a Plan name	MERLIN PACKAGING TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	MERLIN PACKAGING TECHNOLOGIES	**c** EIN-PN	31-1651605-501
a Plan name	MERRELL PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	MERRELL PLUMBING	**c** EIN-PN	61-8277110-501
a Plan name	MERRICK HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	MERRICK HOUSE	**c** EIN-PN	34-0714463-501
a Plan name	MERTZ DESIGNS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MERTZ DESIGNS, INC.	**c** EIN-PN	42-1697237-501
a Plan name	MESO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MESO INC	**c** EIN-PN	46-4527547-501
a Plan name	METAL CRAFT DOCKS SOCA BENEFIT PLAN		
b Name of plan sponsor	METAL CRAFT DOCKS	**c** EIN-PN	45-1034495-501
a Plan name	METAL RESOURCE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	METAL RESOURCE SOLUTIONS	**c** EIN-PN	55-0788206-501

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	METALS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	METALS INC	**c** EIN-PN	34-1242216-501
a Plan name	METALWORKS OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	METALWORKS OF OHIO	**c** EIN-PN	75-3232884-501
a Plan name	METHOD TOOL LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	METHOD TOOL LIMITED	**c** EIN-PN	46-5428528-501
a Plan name	METRO PSYCHIATRY SOCA BENEFIT PLAN		
b Name of plan sponsor	METRO PSYCHIATRY	**c** EIN-PN	27-0811341-501
a Plan name	METTLER FOOTWEAR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	METTLER FOOTWEAR INC	**c** EIN-PN	93-2405334-501
a Plan name	METZCOR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	METZCOR LLC	**c** EIN-PN	81-2403126-501
a Plan name	METZGER'S APPLIANCE SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	METZGERS APPLIANCE SERVICES, LLC	**c** EIN-PN	46-4499365-501
a Plan name	MEYER CAPITAL MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MEYER CAPITAL MANAGEMENT	**c** EIN-PN	31-1455157-501
a Plan name	MEYER RESTORATION INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MEYER RESTORATION INC.	**c** EIN-PN	81-3678724-501
a Plan name	MEYER WILSON CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MEYER WILSON CO LPA	**c** EIN-PN	31-1485082-501
a Plan name	MG ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MG ELECTRIC LLC	**c** EIN-PN	45-4556771-501
a Plan name	MHS AND CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MHS AND CONSTRUCTION	**c** EIN-PN	46-3407458-501

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	MHTL, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MHTL, INC	**c** EIN-PN	99-1159034-501
a Plan name	MIAKAN INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAKAN INDUSTRIES LLC	**c** EIN-PN	85-0661868-501
a Plan name	MIAMI HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI HEATING AND COOLING	**c** EIN-PN	26-0607439-502
a Plan name	MIAMI INDUSTRIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI INDUSTRIAL	**c** EIN-PN	31-0920388-501
a Plan name	MIAMI MONTESSORI SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI MONTESSORI SCHOOL	**c** EIN-PN	31-1171979-501
a Plan name	MIAMI VALLEY HOMEWORX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI VALLEY HOMEWORX INC	**c** EIN-PN	86-2909571-501
a Plan name	MIAMI VALLEY INTERPRETERS SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI VALLEY INTERPRETERS	**c** EIN-PN	31-1774134-501
a Plan name	MIAMI-CAST INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMI-CAST INC.	**c** EIN-PN	31-1379313-501
a Plan name	MIAMIVILLE TRAILYARD, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIAMIVILLE TRAILYARD, LLC	**c** EIN-PN	83-3273049-501
a Plan name	MIC MONITOR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIC MONITOR LLC	**c** EIN-PN	85-0849805-501
a Plan name	MICHAEL A. ROLF CPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL A. ROLF CPA	**c** EIN-PN	31-1394621-501
a Plan name	MICHAEL ALBERINIS RESTAURANT AND WINE SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL ALBERINIS RESTAURANT AND WINE SHOP	**c** EIN-PN	27-0453578-501

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	MICHAEL CORNA AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL CORNA AGENCY	**c** EIN-PN	26-0617987-501
a Plan name	MICHAEL CULLOP'S ROOFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL CULLOPS ROOFING LLC	**c** EIN-PN	74-3068339-501
a Plan name	MICHAEL J FOY SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL J FOY	**c** EIN-PN	31-1230561-501
a Plan name	MICHAEL KRUMNAUER DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL KRUMNAUER DDS	**c** EIN-PN	31-0991242-501
a Plan name	MICHAEL L. WRIGHT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL L. WRIGHT, INC.	**c** EIN-PN	27-5545464-501
a Plan name	MICHAEL LICHTENBERG & SONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL LICHTENBERG & SONS	**c** EIN-PN	31-0944106-502
a Plan name	MICHAEL T. BURNS, DMD SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL T. BURNS, DMD	**c** EIN-PN	83-0776430-501
a Plan name	MICHAEL T. SULENS, DDS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHAEL T. SULENS, DDS, LLC	**c** EIN-PN	46-2256818-501
a Plan name	MICHELI BALDWIN MORTIMER SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHELI BALDWIN MORTIMER	**c** EIN-PN	05-0613935-501
a Plan name	MICHELLE HOWELL O.D. INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MICHELLE HOWELL O.D. INC.	**c** EIN-PN	31-1662319-501
a Plan name	MICKUNAS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICKUNAS, LLC	**c** EIN-PN	20-4279697-501
a Plan name	MICROMERCH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICROMERCH, LLC	**c** EIN-PN	87-4678850-502

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	MICROPLEX PRINTWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MICROPLEX PRINTWARE	**c** EIN-PN	34-1856574-501
a Plan name	MICROPOWER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICROPOWER LLC	**c** EIN-PN	61-2024641-501
a Plan name	MICROTEK FINISHING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MICROTEK FINISHING LLC	**c** EIN-PN	26-4742066-501
a Plan name	MID AMERICA BUSINESS SYS SOCA BENEFIT PLAN		
b Name of plan sponsor	MID AMERICA BUSINESS SYS	**c** EIN-PN	31-1779285-501
a Plan name	MID AMERICAN VENTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	MID AMERICAN VENTURES	**c** EIN-PN	34-1827895-501
a Plan name	MID OHIO BUSINESS MACHINES SOCA BENEFIT PLAN		
b Name of plan sponsor	MID OHIO BUSINESS MACHINES	**c** EIN-PN	31-0968035-501
a Plan name	MID OHIO FLOORING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MID OHIO FLOORING LLC	**c** EIN-PN	27-2286461-501
a Plan name	MID OHIO LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	MID OHIO LANDSCAPING	**c** EIN-PN	32-0518061-501
a Plan name	MID OHIO MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MID OHIO MECHANICAL	**c** EIN-PN	31-0846700-501
a Plan name	MID OHIO RADIOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	MID OHIO RADIOLOGY	**c** EIN-PN	31-1253448-502
a Plan name	MID-AMERICAN THERAPY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MID-AMERICAN THERAPY INC	**c** EIN-PN	34-1346410-501
a Plan name	MIDDLE BASS GENERAL STORE SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLE BASS GENERAL STORE	**c** EIN-PN	45-0930526-501

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	MIDDLE MILE EXPRESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLE MILE EXPRESS LLC	**c** EIN-PN	84-2425592-501
a Plan name	MIDDLETON TWP COLUMBIANA SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLETON TWP COLUMBIANA	**c** EIN-PN	34-1027822-501
a Plan name	MIDDLETOWN COLLISION CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLETOWN COLLISION CENTER LLC	**c** EIN-PN	83-4272633-501
a Plan name	MIDDLETOWN LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLETOWN LOGISTICS	**c** EIN-PN	82-3708442-501
a Plan name	MIDDLETOWN SECURITY SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDDLETOWN SECURITY SYSTEM	**c** EIN-PN	31-0747063-501
a Plan name	MIDLAND ATLANTIC DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDLAND ATLANTIC DEVELOPMENT	**c** EIN-PN	31-1626890-501
a Plan name	MID-OHIO UTILITIES, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MID-OHIO UTILITIES, LLC.	**c** EIN-PN	37-1847939-501
a Plan name	MIDSOLE MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDSOLE MARKETING	**c** EIN-PN	93-2042628-501
a Plan name	MIDSTATES RECREATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDSTATES RECREATION	**c** EIN-PN	11-3732875-501
a Plan name	MIDTOWN CLEVELAND, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDTOWN CLEVELAND, INC.	**c** EIN-PN	34-1381334-501
a Plan name	MID-TOWNE AUTO CENTER INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MID-TOWNE AUTO CENTER INC.	**c** EIN-PN	31-1427783-501
a Plan name	MID-VALLEY GASTRO ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	MID-VALLEY GASTRO ASSOC	**c** EIN-PN	01-0598427-501

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	MIDWAY GARAGE DOORS SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWAY GARAGE DOORS	**c** EIN-PN	38-3780882-501
a Plan name	MIDWEST ACCESSIBILITY PROD SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST ACCESSIBILITY PROD	**c** EIN-PN	26-3853979-501
a Plan name	MIDWEST ACCURATE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST ACCURATE SERVICES	**c** EIN-PN	84-3745618-501
a Plan name	MIDWEST AERIAL PHOTOGRAPHY SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST AERIAL PHOTOGRAPHY	**c** EIN-PN	27-2518602-501
a Plan name	MIDWEST AMMUNITION SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST AMMUNITION	**c** EIN-PN	46-4003694-501
a Plan name	MIDWEST BREAST AND AESTHETIC SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST BREAST AND AESTHETIC SURGERY	**c** EIN-PN	46-3686619-501
a Plan name	MIDWEST CONVEYING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST CONVEYING SOLUTIONS	**c** EIN-PN	20-3985930-501
a Plan name	MIDWEST GROUNDSCAPES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST GROUNDSCAPES LLC	**c** EIN-PN	82-2348936-501
a Plan name	MIDWEST MAINTENANCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST MAINTENANCE INC	**c** EIN-PN	81-1860018-501
a Plan name	MIDWEST PAINTING AND CONTRACTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST PAINTING AND CONTRACTING LLC	**c** EIN-PN	46-3283855-501
a Plan name	MIDWEST RETAIL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST RETAIL SERVICES	**c** EIN-PN	26-3645283-501
a Plan name	MIDWEST SECURITY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MIDWEST SECURITY SERVICES	**c** EIN-PN	45-4840955-501

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	MIG CHRYSLER DODGE JEEP RAM SOCA BENEFIT PLAN		
b Name of plan sponsor	MIG CHRYSLER DODGE JEEP RAM	**c** EIN-PN	45-5319570-502
a Plan name	MIGHTY MAC INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MIGHTY MAC INVESTMENTS	**c** EIN-PN	31-1007351-501
a Plan name	MII ASSET MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MII ASSET MANAGEMENT LLC	**c** EIN-PN	82-4380868-501
a Plan name	MIKE ALLEN HOME IMPROVEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIKE ALLEN HOME IMPROVEMENT LLC	**c** EIN-PN	87-3822533-501
a Plan name	MIKE FARM ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIKE FARM ENTERPRISES INC	**c** EIN-PN	31-1014302-501
a Plan name	MIKE'S LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIKES LANDSCAPING LLC	**c** EIN-PN	45-4213331-501
a Plan name	MIKE'S MOBILE VETERINARY SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MIKES MOBILE VETERINARY SERVICE	**c** EIN-PN	31-1672144-501
a Plan name	MILAMS TAX SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILAMS TAX SERVICE INC	**c** EIN-PN	83-2795635-501
a Plan name	MILANO HOSPITALITY SOCA BENEFIT PLAN		
b Name of plan sponsor	MILANO HOSPITALITY	**c** EIN-PN	93-1922827-501
a Plan name	MILE HIGH PIZZA CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILE HIGH PIZZA CO LLC	**c** EIN-PN	82-0957675-501
a Plan name	MILESTONE MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILESTONE MEDIA LLC	**c** EIN-PN	20-8611273-501
a Plan name	MILFORD ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MILFORD ANIMAL HOSPITAL	**c** EIN-PN	84-3439098-501

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	MILFORD COMMUNITY FIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	MILFORD COMMUNITY FIRE	**c** EIN-PN	31-0992725-501
a Plan name	MILL CREEK ALLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MILL CREEK ALLIANCE	**c** EIN-PN	13-1465290-501
a Plan name	MILL CREEK INSURANCE & FINANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILL CREEK INSURANCE & FINANCE LLC	**c** EIN-PN	47-4597076-501
a Plan name	MILL DISTRIBUTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	MILL DISTRIBUTORS	**c** EIN-PN	34-0673660-501
a Plan name	MILL MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MILL MECHANICAL	**c** EIN-PN	27-3626749-501
a Plan name	MILLBRIDGE METALS SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLBRIDGE METALS	**c** EIN-PN	46-4360207-501
a Plan name	MILLCREEK GARDENS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLCREEK GARDENS LLC	**c** EIN-PN	31-0966214-501
a Plan name	MILLER AND SONS CONST SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER AND SONS CONST	**c** EIN-PN	34-1657423-501
a Plan name	MILLER BAHNSON LAW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER BAHNSON LAW LLC	**c** EIN-PN	83-1210081-501
a Plan name	MILLER BODY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER BODY SHOP	**c** EIN-PN	84-2915760-501
a Plan name	MILLER BROTHERS SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER BROTHERS	**c** EIN-PN	34-1728348-501
a Plan name	MILLER DB INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER DB INVESTMENTS	**c** EIN-PN	82-1477456-501

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	MILLER HEATING & COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER HEATING & COOLING	**c** EIN-PN	46-1442043-501
a Plan name	MILLER WALKER BRUSH LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLER WALKER BRUSH LLP	**c** EIN-PN	47-3478473-501
a Plan name	MILLIKIN AND FITTON LAW FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLIKIN AND FITTON LAW FIRM	**c** EIN-PN	31-1424224-501
a Plan name	MILLSPAW ELECTRONICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLSPAW ELECTRONICS	**c** EIN-PN	84-2160097-501
a Plan name	MILLWORK ELEMENTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLWORK ELEMENTS, LLC	**c** EIN-PN	81-4307122-501
a Plan name	MILLWRIGHT INDUSTRIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MILLWRIGHT INDUSTRIAL SERVICES	**c** EIN-PN	45-2677753-501
a Plan name	MILTON MATERIALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MILTON MATERIALS LLC	**c** EIN-PN	13-4301001-501
a Plan name	MINC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MINC LLC	**c** EIN-PN	82-2524012-501
a Plan name	MINDFORGE SOCA BENEFIT PLAN		
b Name of plan sponsor	MINDFORGE	**c** EIN-PN	84-2589140-501
a Plan name	MINDWARE TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	MINDWARE TECHNOLOGIES	**c** EIN-PN	31-1773551-501
a Plan name	MINFORD EMERGENCY AMBULANCE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MINFORD EMERGENCY AMBULANCE SERVICE	**c** EIN-PN	31-0904414-501
a Plan name	MINSTER CONCRETE COATINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	MINSTER CONCRETE COATINGS	**c** EIN-PN	46-1576635-501

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	MINT HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	MINT HOLDINGS	**c** EIN-PN	46-4367716-501
a Plan name	MINUTEMAN PRESS DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	MINUTEMAN PRESS DAYTON	**c** EIN-PN	92-2701939-501
a Plan name	MIRA & KOLENA SOCA BENEFIT PLAN		
b Name of plan sponsor	MIRA & KOLENA	**c** EIN-PN	34-1840794-501
a Plan name	MIRUS ADAPTED TECH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MIRUS ADAPTED TECH, LLC	**c** EIN-PN	45-4583953-501
a Plan name	MISSING FALLS BREWERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MISSING FALLS BREWERY LLC	**c** EIN-PN	81-0974459-501
a Plan name	MISSING LINK TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	MISSING LINK TRANSPORT	**c** EIN-PN	81-1069374-501
a Plan name	MITOSIS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MITOSIS LLC	**c** EIN-PN	47-3483346-501
a Plan name	MJA INTERIORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MJA INTERIORS LLC	**c** EIN-PN	81-4954485-501
a Plan name	MJMA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MJMA INC	**c** EIN-PN	86-3309437-501
a Plan name	MK EXTERIORS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MK EXTERIORS, INC	**c** EIN-PN	20-1391518-501
a Plan name	MK HAULING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MK HAULING LLC	**c** EIN-PN	46-2319874-501
a Plan name	MK PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	MK PLUMBING	**c** EIN-PN	46-1759347-501

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	MKCIE ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MKCIE ENTERPRISES LLC	**c** EIN-PN	87-2643818-501
a Plan name	MKDF ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	MKDF ENTERPRISES	**c** EIN-PN	31-1632833-501
a Plan name	MLB MOLDED URETHANE PROD SOCA BENEFIT PLAN		
b Name of plan sponsor	MLB MOLDED URETHANE PROD	**c** EIN-PN	84-1648814-501
a Plan name	MLG AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MLG AND ASSOCIATES	**c** EIN-PN	46-1222014-501
a Plan name	MLH CINCINNATI OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	MLH CINCINNATI OHIO	**c** EIN-PN	27-0852776-501
a Plan name	MMA INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MMA INSURANCE	**c** EIN-PN	56-2416978-501
a Plan name	MMP PRINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	MMP PRINTING	**c** EIN-PN	61-1441666-502
a Plan name	MMW GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MMW GROUP LLC	**c** EIN-PN	87-2890207-501
a Plan name	MODEL LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MODEL LOGISTICS LLC	**c** EIN-PN	87-1647738-501
a Plan name	MODENE INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	MODENE INSURANCE AGENCY	**c** EIN-PN	34-1868084-501
a Plan name	MODERN ALLERGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MODERN ALLERGY LLC	**c** EIN-PN	87-4418060-501
a Plan name	MODERN DENTAL CONCEPTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MODERN DENTAL CONCEPTS	**c** EIN-PN	34-1863406-501

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	MODERN MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	MODERN MANUFACTURING	**c** EIN-PN	31-1742924-501
a Plan name	MODLICH MONUMENT COMPANY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MODLICH MONUMENT COMPANY, INC.	**c** EIN-PN	31-0995848-501
a Plan name	MOES BODY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	MOES BODY SHOP	**c** EIN-PN	46-5502215-501
a Plan name	MOGADORE FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	MOGADORE FAMILY DENTISTRY	**c** EIN-PN	34-1696017-501
a Plan name	MOHICAN VALLEY EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	MOHICAN VALLEY EQUIPMENT	**c** EIN-PN	20-3140169-501
a Plan name	MOJOS COFFEE AND MORE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOJOS COFFEE AND MORE INC	**c** EIN-PN	20-5084682-501
a Plan name	MOLD SURFACE TEXTURES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MOLD SURFACE TEXTURES, INC.	**c** EIN-PN	20-1508983-501
a Plan name	MOLDERS WORLD SOCA BENEFIT PLAN		
b Name of plan sponsor	MOLDERS WORLD	**c** EIN-PN	31-1758827-501
a Plan name	MOLLARD CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOLLARD CONSULTING	**c** EIN-PN	20-4518496-501
a Plan name	MOMENTUM CI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOMENTUM CI LLC	**c** EIN-PN	34-1969442-501
a Plan name	MOMENTUM GROUPS SOCA BENEFIT PLAN		
b Name of plan sponsor	MOMENTUM GROUPS	**c** EIN-PN	04-3826922-502
a Plan name	MONARCH ENDEAVORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONARCH ENDEAVORS LLC	**c** EIN-PN	81-1976522-501

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	MONARCH LATHES LP SOCA BENEFIT PLAN		
b Name of plan sponsor	MONARCH LATHES LP	**c** EIN-PN	31-1544352-501
a Plan name	MONARCH TITLE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	MONARCH TITLE SERVICES	**c** EIN-PN	20-5307084-501
a Plan name	MONDE HOME IMPROVEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONDE HOME IMPROVEMENT LLC	**c** EIN-PN	80-0590720-501
a Plan name	MONICA HOSKINS AGENCY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONICA HOSKINS AGENCY, LLC	**c** EIN-PN	82-3708548-501
a Plan name	MONICA L STOMPS CPA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONICA L STOMPS CPA INC	**c** EIN-PN	31-1461191-501
a Plan name	MONIQUE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MONIQUE INC.	**c** EIN-PN	85-0577579-501
a Plan name	MONITORING CONTROL AND COMPLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MONITORING CONTROL AND COMPLIANCE	**c** EIN-PN	20-2993848-501
a Plan name	MONNIN CERVICAL CHIROPRACTIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONNIN CERVICAL CHIROPRACTIC LLC	**c** EIN-PN	26-4392904-501
a Plan name	MONOGRAM HOMES SOCA BENEFIT PLAN		
b Name of plan sponsor	MONOGRAM HOMES	**c** EIN-PN	20-0439631-501
a Plan name	MONREAL COMPANY FH SOCA BENEFIT PLAN		
b Name of plan sponsor	MONREAL COMPANY FH	**c** EIN-PN	34-0409370-501
a Plan name	MONROE EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MONROE EXCAVATING INC	**c** EIN-PN	39-1693370-501
a Plan name	MONROE FAMILY PET HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MONROE FAMILY PET HOSPITAL	**c** EIN-PN	26-3803978-501

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	MONROE GROUNDS MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	MONROE GROUNDS MAINTENANCE	**c** EIN-PN	45-4337520-501
a Plan name	MONROE SOIL AND WATER CONSERVATION DISTRICT SOCA BENEFIT PLAN		
b Name of plan sponsor	MONROE SOIL AND WATER CONSERVATION DISTRICT	**c** EIN-PN	34-1366620-501
a Plan name	MONTGOMERY 7875 INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY 7875 INC.	**c** EIN-PN	81-3985240-501
a Plan name	MONTGOMERY INSURANCE AND INVESTMENTS AGENCY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY INSURANCE AND INVESTMENTS AGENCY INC.	**c** EIN-PN	31-1304722-501
a Plan name	MONTGOMERY PALLET SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY PALLET SERVICE	**c** EIN-PN	03-0429186-501
a Plan name	MONTGOMERY TRUCKING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY TRUCKING COMPANY	**c** EIN-PN	31-0958028-501
a Plan name	MONTGOMERY VISION CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY VISION CARE	**c** EIN-PN	26-1094296-501
a Plan name	MOODY PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOODY PLUMBING	**c** EIN-PN	34-1729956-501
a Plan name	MOONLIGHT N STUFF SOCA BENEFIT PLAN		
b Name of plan sponsor	MOONLIGHT N STUFF	**c** EIN-PN	83-0699382-501
a Plan name	MOORE BROTHERS LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOORE BROTHERS LANDSCAPING	**c** EIN-PN	47-3331928-501
a Plan name	MOORE COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOORE COUNSELING	**c** EIN-PN	74-2977597-501
a Plan name	MOORE DEV STRATEGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	MOORE DEV STRATEGIES	**c** EIN-PN	27-3610512-501

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	MOORE FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	MOORE FINANCIAL GROUP	**c** EIN-PN	34-1950181-501
a Plan name	MOORE MANUFACTURING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOORE MANUFACTURING LLC	**c** EIN-PN	33-2292473-502
a Plan name	MOOSE EYE CAPITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOOSE EYE CAPITAL LLC	**c** EIN-PN	47-1048070-501
a Plan name	MORAN REFRIGERATION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MORAN REFRIGERATION, INC.	**c** EIN-PN	34-0934850-501
a Plan name	MORELAND COURTS CONDOMINIUMS SOCA BENEFIT PLAN		
b Name of plan sponsor	MORELAND COURTS CONDOMINIUMS	**c** EIN-PN	34-1261206-501
a Plan name	MORGAN AUTO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MORGAN AUTO LLC	**c** EIN-PN	46-1211193-501
a Plan name	MORGAN COUNTY HERALD SOCA BENEFIT PLAN		
b Name of plan sponsor	MORGAN COUNTY HERALD	**c** EIN-PN	31-0675699-501
a Plan name	MORGAN FAMILY FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MORGAN FAMILY FOUNDATION	**c** EIN-PN	30-0205024-501
a Plan name	MORLOCK ASPHALT, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	MORLOCK ASPHALT, LTD	**c** EIN-PN	31-1646633-502
a Plan name	MORRIS FLOORING & DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	MORRIS FLOORING & DESIGN	**c** EIN-PN	47-1204707-503
a Plan name	MORRIS GROUP CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	MORRIS GROUP CONSULTING	**c** EIN-PN	83-0777296-501
a Plan name	MORRISON FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	MORRISON FARMS	**c** EIN-PN	34-6720278-501

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	MORRISON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MORRISON INC	**c** EIN-PN	31-0641103-501
a Plan name	MORROW AND MEYER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MORROW AND MEYER LLC	**c** EIN-PN	27-0881493-501
a Plan name	MORTON AND WHETSTONE FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	MORTON AND WHETSTONE FUNERAL HOME	**c** EIN-PN	31-1407745-501
a Plan name	MOSAIC CLINICAL COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOSAIC CLINICAL COUNSELING	**c** EIN-PN	81-3625967-501
a Plan name	MOTE & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MOTE & ASSOCIATES	**c** EIN-PN	31-0924639-501
a Plan name	MOTION SPECIALISTS INTERNATIONAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOTION SPECIALISTS INTERNATIONAL LLC	**c** EIN-PN	84-1564800-501
a Plan name	MOTZ ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	MOTZ ENGINEERING	**c** EIN-PN	31-0997126-501
a Plan name	MOTZ ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOTZ ENTERPRISES INC	**c** EIN-PN	31-1439282-501
a Plan name	MOUND MANUFACTURING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	MOUND MANUFACTURING CENTER	**c** EIN-PN	31-1408215-501
a Plan name	MOVE EASY SOCA BENEFIT PLAN		
b Name of plan sponsor	MOVE EASY	**c** EIN-PN	46-2517755-501
a Plan name	MOVE IN MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	MOVE IN MEDIA	**c** EIN-PN	20-3705333-501
a Plan name	MOVING FORWARD RESIDENTIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MOVING FORWARD RESIDENTIAL	**c** EIN-PN	81-3886329-501

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	MOWERY YOUELL AND GALEANO SOCA BENEFIT PLAN		
b Name of plan sponsor	MOWERY YOUELL AND GALEANO	**c** EIN-PN	31-1106846-501
a Plan name	MOYER INDUSTRIES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOYER INDUSTRIES, INC	**c** EIN-PN	31-1333942-501
a Plan name	MOYER LAW OFFICE LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	MOYER LAW OFFICE LPA	**c** EIN-PN	46-3238044-501
a Plan name	MOZIKA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MOZIKA, INC	**c** EIN-PN	20-5324915-502
a Plan name	MP COMBUSTION SOCA BENEFIT PLAN		
b Name of plan sponsor	MP COMBUSTION	**c** EIN-PN	83-2917196-501
a Plan name	MPATH PUBLIC RELATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MPATH PUBLIC RELATIONS LLC	**c** EIN-PN	84-2807061-501
a Plan name	MPH BREW SOCA BENEFIT PLAN		
b Name of plan sponsor	MPH BREW	**c** EIN-PN	83-3811053-501
a Plan name	MPI-BCP ACQUISITION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	MPI-BCP ACQUISITION CO	**c** EIN-PN	92-2439423-501
a Plan name	MPKD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MPKD INC	**c** EIN-PN	82-3482508-501
a Plan name	MR FELIX FLOOR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MR FELIX FLOOR INC	**c** EIN-PN	31-1463190-501
a Plan name	MR KRINGLE AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	MR KRINGLE AND COMPANY	**c** EIN-PN	81-4127976-501
a Plan name	MR ROGERS AUTO CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MR ROGERS AUTO CARE	**c** EIN-PN	86-3496465-501

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	MR.T PAINTING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	MR.T PAINTING CO	**c** EIN-PN	34-1034505-501
a Plan name	MRS ELECTRONIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MRS ELECTRONIC INC	**c** EIN-PN	30-0865384-501
a Plan name	MS RHONDA LOGISTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MS RHONDA LOGISTICS INC	**c** EIN-PN	88-4298356-501
a Plan name	MSCBJ OPERATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSCBJ OPERATIONS LLC	**c** EIN-PN	86-2496788-501
a Plan name	MSD ENVIRONMENTAL SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSD ENVIRONMENTAL SERVICES INC	**c** EIN-PN	31-1757760-501
a Plan name	MSI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSI INC	**c** EIN-PN	42-1545917-501
a Plan name	MSI UTILITIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSI UTILITIES INC	**c** EIN-PN	87-0712213-501
a Plan name	MSJ ALLEN SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSJ ALLEN SERVICES, LLC	**c** EIN-PN	82-5224565-501
a Plan name	MSL HOLDINGS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSL HOLDINGS INC	**c** EIN-PN	31-1286042-501
a Plan name	MSR TRANSPORTATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MSR TRANSPORTATION LLC	**c** EIN-PN	20-5496928-501
a Plan name	MT AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MT AND ASSOCIATES	**c** EIN-PN	84-4550269-501
a Plan name	MT PLEASANT BLACKTOPPING CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MT PLEASANT BLACKTOPPING CO INC	**c** EIN-PN	31-0654767-501

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	MT SINAI HEALTH CARE FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MT SINAI HEALTH CARE FOUNDATION	**c** EIN-PN	34-1777878-502
a Plan name	MT. HOLLY FARMS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	MT. HOLLY FARMS, INC.	**c** EIN-PN	31-0998837-501
a Plan name	MTH TALL TIMBERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MTH TALL TIMBERS INC	**c** EIN-PN	87-2024662-501
a Plan name	MUDDY CREEK CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUDDY CREEK CONSTRUCTION LLC	**c** EIN-PN	42-3403648-501
a Plan name	MUDDY CREEK PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MUDDY CREEK PEDIATRICS	**c** EIN-PN	38-3679196-501
a Plan name	MUDGETTS MONUMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	MUDGETTS MONUMENTS	**c** EIN-PN	46-2210263-501
a Plan name	MUENNICH CAR CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	MUENNICH CAR CARE	**c** EIN-PN	82-1962420-501
a Plan name	MUFFLER AND TIRE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUFFLER AND TIRE CENTER INC	**c** EIN-PN	31-0907322-501
a Plan name	MULLEN PAINTING & REMODELING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MULLEN PAINTING & REMODELING LLC	**c** EIN-PN	86-2819024-501
a Plan name	MULLENBROCK & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	MULLENBROCK & ASSOCIATES	**c** EIN-PN	92-1490954-501
a Plan name	MULTI AMUSEMENT CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	MULTI AMUSEMENT CENTER	**c** EIN-PN	45-5031961-501
a Plan name	MULTIEMPLOYER.COM SOCA BENEFIT PLAN		
b Name of plan sponsor	MULTIEMPLOYER.COM	**c** EIN-PN	94-3378692-501

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	MULTIVARIOUS GAMES SOCA BENEFIT PLAN		
b Name of plan sponsor	MULTIVARIOUS GAMES	**c** EIN-PN	27-4142383-501
a Plan name	MUNSTER FINANCIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUNSTER FINANCIAL LLC	**c** EIN-PN	46-4980289-501
a Plan name	MURDOCK ORTHODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	MURDOCK ORTHODONTICS	**c** EIN-PN	31-1378744-501
a Plan name	MURPHY TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	MURPHY TRANSPORTATION	**c** EIN-PN	31-1190302-501
a Plan name	MURPHYS AUTOCARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MURPHYS AUTOCARE INC	**c** EIN-PN	31-1420322-501
a Plan name	MURRAY HILL DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	MURRAY HILL DENTAL	**c** EIN-PN	27-4738069-501
a Plan name	MURRAY MURPHY MOUL AND BASIL SOCA BENEFIT PLAN		
b Name of plan sponsor	MURRAY MURPHY MOUL AND BASIL	**c** EIN-PN	31-1650843-501
a Plan name	MURRVOX VOICE IMAGING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MURRVOX VOICE IMAGING LLC	**c** EIN-PN	26-1316987-501
a Plan name	MUSE CONTENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUSE CONTENT GROUP LLC	**c** EIN-PN	45-2406075-501
a Plan name	MUSE MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	MUSE MACHINE	**c** EIN-PN	31-1028673-501
a Plan name	MUSICOLOGIE SOCA BENEFIT PLAN		
b Name of plan sponsor	MUSICOLOGIE	**c** EIN-PN	83-1251849-501
a Plan name	MUSTANG EXPRESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUSTANG EXPRESS LLC	**c** EIN-PN	81-3568761-501

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	MUTH & COMPANY ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MUTH & COMPANY ROOFING INC	**c** EIN-PN	22-3887745-501
a Plan name	MVA DIAGNOSTICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MVA DIAGNOSTICS INC	**c** EIN-PN	46-5068572-501
a Plan name	MVD & ASSOCIATES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MVD & ASSOCIATES, INC	**c** EIN-PN	31-1568259-501
a Plan name	MVM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MVM INC	**c** EIN-PN	31-0785835-501
a Plan name	MW SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MW SOLUTIONS LLC	**c** EIN-PN	46-0794241-501
a Plan name	MY BUSINESS RESOURCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MY BUSINESS RESOURCE LLC	**c** EIN-PN	84-3555788-501
a Plan name	MY DIGITAL ADVERTISING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MY DIGITAL ADVERTISING LLC	**c** EIN-PN	47-2921664-501
a Plan name	MYCOMPUTERSTORE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MYCOMPUTERSTORE LLC	**c** EIN-PN	81-1556107-501
a Plan name	MYERS AUTOMOTIVE AND PERFORMANCE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MYERS AUTOMOTIVE AND PERFORMANCE, LLC	**c** EIN-PN	27-2584139-501
a Plan name	MYERS PRECISION GRINDING SOCA BENEFIT PLAN		
b Name of plan sponsor	MYERS PRECISION GRINDING	**c** EIN-PN	34-1128950-501
a Plan name	MYERS SURVEYING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	MYERS SURVEYING COMPANY	**c** EIN-PN	31-1038480-501
a Plan name	MYRA INSTALLATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	MYRA INSTALLATIONS	**c** EIN-PN	35-2368816-501

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	MYRIAD ENERGY SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	MYRIAD ENERGY SOLUTIONS LLC	**c** EIN-PN	82-3955551-501
a Plan name	MZ-RUSSELL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	MZ-RUSSELL INC	**c** EIN-PN	82-3152113-502
a Plan name	N 2 NET SOCA BENEFIT PLAN		
b Name of plan sponsor	N 2 NET	**c** EIN-PN	34-1846059-501
a Plan name	N J HOGENKAMP SONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	N J HOGENKAMP SONS INC	**c** EIN-PN	34-1015780-501
a Plan name	N P LIMITED PARTNERSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	N P LIMITED PARTNERSHIP	**c** EIN-PN	31-1198545-501
a Plan name	N8 FAMILY CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	N8 FAMILY CHIROPRACTIC	**c** EIN-PN	31-1584974-501
a Plan name	NAFEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	NAFEMS	**c** EIN-PN	98-1153037-501
a Plan name	NAIBLE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NAIBLE INC	**c** EIN-PN	93-3428286-501
a Plan name	NAMI CLARK GREENE MADISON SOCA BENEFIT PLAN		
b Name of plan sponsor	NAMI CLARK GREENE MADISON	**c** EIN-PN	31-1301239-501
a Plan name	NAMI GREATER CLEVELAND SOCA BENEFIT PLAN		
b Name of plan sponsor	NAMI GREATER CLEVELAND	**c** EIN-PN	20-2254626-501
a Plan name	NANCY ALKIRE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NANCY ALKIRE LLC	**c** EIN-PN	26-4796688-501
a Plan name	NANCYS GROOMING SOCA BENEFIT PLAN		
b Name of plan sponsor	NANCYS GROOMING	**c** EIN-PN	34-1868645-501

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	NANODETECTION TECHNOLOGY, IN.C SOCA BENEFIT PLAN		
b Name of plan sponsor	NANODETECTION TECHNOLOGY, IN.C	**c** EIN-PN	26-3677005-501
a Plan name	NAPOLEON PUBLIC LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	NAPOLEON PUBLIC LIBRARY	**c** EIN-PN	34-6400257-501
a Plan name	NARGON COMPANIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NARGON COMPANIES INC	**c** EIN-PN	34-1770491-501
a Plan name	NASH IMAGING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NASH IMAGING LLC	**c** EIN-PN	45-4742046-501
a Plan name	NATALIE BRADY CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	NATALIE BRADY CONSULTING	**c** EIN-PN	36-5092553-501
a Plan name	NATION ENVIRONMENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATION ENVIRONMENTAL LLC	**c** EIN-PN	88-0773082-503
a Plan name	NATION PUB LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATION PUB LLC	**c** EIN-PN	46-4529035-501
a Plan name	NATIONAL AUTO LUBE 1 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL AUTO LUBE 1 LLC	**c** EIN-PN	47-3998517-501
a Plan name	NATIONAL BEAUTY SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL BEAUTY SYSTEMS	**c** EIN-PN	34-1022080-501
a Plan name	NATIONAL COUNCIL OF JEWISH WOMEN SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL COUNCIL OF JEWISH WOMEN	**c** EIN-PN	34-0714651-501
a Plan name	NATIONAL DIGITAL INCLUSION SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL DIGITAL INCLUSION	**c** EIN-PN	82-2753773-501
a Plan name	NATIONAL FEEDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL FEEDS INC	**c** EIN-PN	26-3273726-501

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	NATIONAL FIRST LADIES LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL FIRST LADIES LIBRARY	**c** EIN-PN	31-1576332-501
a Plan name	NATIONAL K-9 SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL K-9	**c** EIN-PN	31-0949319-501
a Plan name	NATIONAL MOLDED PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL MOLDED PRODUCTS	**c** EIN-PN	34-1681381-501
a Plan name	NATIONAL POLYMER LABS SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL POLYMER LABS	**c** EIN-PN	45-3019097-501
a Plan name	NATIONAL PROPERTY CONSULTING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL PROPERTY CONSULTING GROUP	**c** EIN-PN	20-0758339-501
a Plan name	NATIONAL SECURITY SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL SECURITY SERVICES INC	**c** EIN-PN	45-4147308-501
a Plan name	NATIONAL TIRE AND RUBBER SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL TIRE AND RUBBER	**c** EIN-PN	34-1764580-501
a Plan name	NATIONAL TRAILER SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL TRAILER SERVICE	**c** EIN-PN	46-4765550-501
a Plan name	NATIONAL WELDING & TANK REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL WELDING & TANK REPAIR	**c** EIN-PN	46-5363225-501
a Plan name	NATIONAL WHITETAIL DEER EDUCATION FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NATIONAL WHITETAIL DEER EDUCATION FOUNDATION	**c** EIN-PN	34-1821699-501
a Plan name	NATL PUMP AND PROCESS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NATL PUMP AND PROCESS, INC.	**c** EIN-PN	34-1262577-501
a Plan name	NATURE'S WAY SOCA BENEFIT PLAN		
b Name of plan sponsor	NATURES WAY	**c** EIN-PN	31-1413813-501

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	NATURESCAPE OF SOLON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NATURESCAPE OF SOLON INC	**c** EIN-PN	34-1611124-501
a Plan name	NAVIDEA BIOPHARMACEUTICALS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NAVIDEA BIOPHARMACEUTICALS, INC	**c** EIN-PN	31-1080091-501
a Plan name	NAVIGATE COUNSELING SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	NAVIGATE COUNSELING SVS	**c** EIN-PN	85-3633974-501
a Plan name	NBW, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NBW, INC.	**c** EIN-PN	34-0921652-501
a Plan name	NCJC HOUSING AND DEV FDN SOCA BENEFIT PLAN		
b Name of plan sponsor	NCJC HOUSING AND DEV FDN	**c** EIN-PN	26-3022138-501
a Plan name	NDC HEATING AND COOLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NDC HEATING AND COOLING LLC	**c** EIN-PN	40-0013395-501
a Plan name	NE DEVELOPMENTAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	NE DEVELOPMENTAL SERVICES	**c** EIN-PN	34-1965098-502
a Plan name	NE SURGICAL WOUND CARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NE SURGICAL WOUND CARE INC	**c** EIN-PN	34-1873218-501
a Plan name	NECO OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	NECO OHIO	**c** EIN-PN	87-0749519-501
a Plan name	NEEOO W CHIN MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEEOO W CHIN MD INC	**c** EIN-PN	35-1758766-501
a Plan name	NEERS SAND AND GRAVEL SOCA BENEFIT PLAN		
b Name of plan sponsor	NEERS SAND AND GRAVEL	**c** EIN-PN	13-4348669-501
a Plan name	NEFF HOME IMPROVEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	NEFF HOME IMPROVEMENT	**c** EIN-PN	31-1267757-502

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	NEIGHBORHOOD DESIGN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	NEIGHBORHOOD DESIGN CENTER	**c** EIN-PN	31-1049478-501
a Plan name	NEIGHBORHOOD LEADERSHIP INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	NEIGHBORHOOD LEADERSHIP INSTITUTE	**c** EIN-PN	01-0621494-501
a Plan name	NEIGHBORHOOD PROGRESS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NEIGHBORHOOD PROGRESS INC.	**c** EIN-PN	34-1611055-501
a Plan name	NEIHEISEL STEEL CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NEIHEISEL STEEL CORPORATION	**c** EIN-PN	27-1923185-501
a Plan name	NELSON DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NELSON DENTAL LLC	**c** EIN-PN	88-2366088-501
a Plan name	NELTNER INVESTMENTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NELTNER INVESTMENTS, LLC	**c** EIN-PN	83-2753574-501
a Plan name	NEO HISPANIC CENTER FOR ECON DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	NEO HISPANIC CENTER FOR ECON DEVELOPMENT	**c** EIN-PN	34-1805510-501
a Plan name	NEO3 SOCA BENEFIT PLAN		
b Name of plan sponsor	NEO3	**c** EIN-PN	34-1905822-501
a Plan name	NEPHROCEUTICALS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEPHROCEUTICALS	**c** EIN-PN	80-0276038-501
a Plan name	NEPHROLOGY ASSOC OF DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	NEPHROLOGY ASSOC OF DAYTON	**c** EIN-PN	31-1360333-501
a Plan name	NESBITT LAW FIRM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NESBITT LAW FIRM LLC	**c** EIN-PN	26-4179171-501
a Plan name	NESTRS SOCA BENEFIT PLAN		
b Name of plan sponsor	NESTRS	**c** EIN-PN	47-1784855-501

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	NET REVENUE SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NET REVENUE SERVICES, INC	**c** EIN-PN	20-4599446-501
a Plan name	NET X COMPUTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	NET X COMPUTERS	**c** EIN-PN	27-4975721-501
a Plan name	NETHERLAND RUBBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	NETHERLAND RUBBER COMPANY	**c** EIN-PN	31-0389600-501
a Plan name	NETWORK LAND TITLE AGCY SOCA BENEFIT PLAN		
b Name of plan sponsor	NETWORK LAND TITLE AGCY	**c** EIN-PN	87-1633915-501
a Plan name	NETWORK USER GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NETWORK USER GROUP INC	**c** EIN-PN	83-4567431-501
a Plan name	NEUROS MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	NEUROS MEDICAL	**c** EIN-PN	26-3646315-501
a Plan name	NEUSOLE GLASSWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEUSOLE GLASSWORKS	**c** EIN-PN	26-1895274-501
a Plan name	NEW AGE EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW AGE EQUIPMENT	**c** EIN-PN	84-3907484-501
a Plan name	NEW AMERICA INSURANCE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW AMERICA INSURANCE AGENCY LLC	**c** EIN-PN	47-4577541-501
a Plan name	NEW BEYBRIDGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW BEYBRIDGE LLC	**c** EIN-PN	84-1969370-501
a Plan name	NEW BUSINESS FILING SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW BUSINESS FILING	**c** EIN-PN	84-3601227-501
a Plan name	NEW CARLISLE FAMILY PRAC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW CARLISLE FAMILY PRAC	**c** EIN-PN	36-4531765-502

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

a Plan name	NEW DAWN LABS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW DAWN LABS LLC	**c** EIN-PN	84-3132638-501
a Plan name	NEW ERA LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW ERA LOGISTICS	**c** EIN-PN	47-4601619-501
a Plan name	NEW ERA TECHNOLOGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW ERA TECHNOLOGY INC	**c** EIN-PN	61-1491265-501
a Plan name	NEW HEIGHTS AND SMALL BUS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW HEIGHTS AND SMALL BUS	**c** EIN-PN	20-3013175-501
a Plan name	NEW LIFE HEARING AID CENTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW LIFE HEARING AID CENTER, INC.	**c** EIN-PN	34-1765190-501
a Plan name	NEW LONDON FOUNDRY SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW LONDON FOUNDRY	**c** EIN-PN	34-1011884-501
a Plan name	NEW METHOD PACKAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW METHOD PACKAGING	**c** EIN-PN	31-1453598-501
a Plan name	NEW MIDDLETON ACE HARDWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW MIDDLETON ACE HARDWARE	**c** EIN-PN	46-3475471-501
a Plan name	NEW PATHWAYS CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW PATHWAYS CLINIC	**c** EIN-PN	86-2775973-501
a Plan name	NEW PERSPECTIVE ASSET MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW PERSPECTIVE ASSET MANAGEMENT	**c** EIN-PN	27-3333664-501
a Plan name	NEW REPUBLIC ARCHITECTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW REPUBLIC ARCHITECTURE	**c** EIN-PN	46-5060153-501
a Plan name	NEW ROCKY VALLEY FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW ROCKY VALLEY FARMS INC	**c** EIN-PN	34-1638055-501

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

a Plan name	NEW SOLUTIONS N AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	NEW SOLUTIONS N AMERICA	**c** EIN-PN	88-3813467-501
a Plan name	NEWARK MIDLAND THEATRE ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWARK MIDLAND THEATRE ASSOCIATION	**c** EIN-PN	31-1734034-502
a Plan name	NEWBERRY LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWBERRY LANDSCAPING LLC	**c** EIN-PN	82-4185850-501
a Plan name	NEWBURY BUILDERS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWBURY BUILDERS	**c** EIN-PN	31-1797768-501
a Plan name	NEWBURY TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWBURY TECHNOLOGIES	**c** EIN-PN	26-1920965-501
a Plan name	NEWBURY TIRE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWBURY TIRE COMPANY	**c** EIN-PN	47-2405650-501
a Plan name	NEWLAND-HEYDINGER INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWLAND-HEYDINGER INSURANCE AGENCY	**c** EIN-PN	31-1108333-501
a Plan name	NEWLON TIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWLON TIRE	**c** EIN-PN	31-1017754-501
a Plan name	NEWTREND RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	NEWTREND RESTAURANT	**c** EIN-PN	26-4226036-501
a Plan name	NEXA SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEXA SYSTEMS	**c** EIN-PN	25-9113543-501
a Plan name	NEXT DIMENSION-STEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NEXT DIMENSION-STEALTH LLC	**c** EIN-PN	93-2446996-501
a Plan name	NEXT GENERATION CHILD CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	NEXT GENERATION CHILD CARE	**c** EIN-PN	27-1960269-501

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	NEXTEC INTEGRATED SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEXTEC INTEGRATED SYSTEMS	**c** EIN-PN	83-2210519-501
a Plan name	NEYER HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	NEYER HOLDINGS	**c** EIN-PN	30-0172986-501
a Plan name	NGC224 SOCA BENEFIT PLAN		
b Name of plan sponsor	NGC224	**c** EIN-PN	82-2234257-501
a Plan name	NICALMAS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NICALMAS LLC	**c** EIN-PN	20-8908814-501
a Plan name	NICHOLAS A NUTILE DMD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NICHOLAS A NUTILE DMD LLC	**c** EIN-PN	87-2489529-501
a Plan name	NICHOLAS KITCHEN DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	NICHOLAS KITCHEN DESIGN	**c** EIN-PN	86-1538289-501
a Plan name	NICHOLS AND CO SOCA BENEFIT PLAN		
b Name of plan sponsor	NICHOLS AND CO	**c** EIN-PN	31-1258790-501
a Plan name	NICK KOSTECKI EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	NICK KOSTECKI EXCAVATING	**c** EIN-PN	20-5950772-501
a Plan name	NICKAL INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NICKAL INC.	**c** EIN-PN	31-1627594-501
a Plan name	NICKELS LAWN AND LANDSCAP SOCA BENEFIT PLAN		
b Name of plan sponsor	NICKELS LAWN AND LANDSCAP	**c** EIN-PN	47-1233439-501
a Plan name	NICK'S PLATING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	NICKS PLATING CO	**c** EIN-PN	31-0887590-501
a Plan name	NICOLA GUDBRANSON COOPER SOCA BENEFIT PLAN		
b Name of plan sponsor	NICOLA GUDBRANSON COOPER	**c** EIN-PN	34-0670388-501

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	NIELSEN MODERNE SOCA BENEFIT PLAN		
b Name of plan sponsor	NIELSEN MODERNE	**c** EIN-PN	83-4158570-501
a Plan name	NIGHTINGALE MONTESSORI SOCA BENEFIT PLAN		
b Name of plan sponsor	NIGHTINGALE MONTESSORI	**c** EIN-PN	31-1016926-501
a Plan name	NIKKIS COLLAR CLUB LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NIKKIS COLLAR CLUB LLC	**c** EIN-PN	81-2162300-501
a Plan name	NIKOS BAR AND GYROS SOCA BENEFIT PLAN		
b Name of plan sponsor	NIKOS BAR AND GYROS	**c** EIN-PN	46-2174097-501
a Plan name	NILES SUNSHINE RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	NILES SUNSHINE RENTALS	**c** EIN-PN	46-1093933-501
a Plan name	NINETEEN SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NINETEEN SERVICES, INC.	**c** EIN-PN	31-1386208-501
a Plan name	NIOBIUM MICROSYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	NIOBIUM MICROSYSTEMS	**c** EIN-PN	86-2681226-501
a Plan name	NO LIMIT GAMING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NO LIMIT GAMING LLC	**c** EIN-PN	45-5397968-501
a Plan name	NO LIMITS LANDSCAPING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NO LIMITS LANDSCAPING INC	**c** EIN-PN	20-0845240-501
a Plan name	NOBIS INDUSTRIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	NOBIS INDUSTRIAL	**c** EIN-PN	26-3988142-501
a Plan name	NOLIMITS ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NOLIMITS ENTERPRISES INC	**c** EIN-PN	46-2441107-502
a Plan name	NOLL FISHER INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NOLL FISHER INC.	**c** EIN-PN	31-1098448-501

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	NONFICTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NONFICTION LLC	**c** EIN-PN	82-3601024-501
a Plan name	NORRIS MILK HAULING LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	NORRIS MILK HAULING LTD	**c** EIN-PN	34-1875567-501
a Plan name	NORSTAR INTERNATIONAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORSTAR INTERNATIONAL, LLC	**c** EIN-PN	20-2174412-501
a Plan name	NORTH AMERICAN BROADCASTING COMPANY, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH AMERICAN BROADCASTING COMPANY, INC	**c** EIN-PN	31-4420684-501
a Plan name	NORTH AMERICAN ENVIRONMENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH AMERICAN ENVIRONMENTAL	**c** EIN-PN	81-0584090-501
a Plan name	NORTH AMERICAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH AMERICAN INC	**c** EIN-PN	61-0870057-501
a Plan name	NORTH AMERICAN SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH AMERICAN SOLUTIONS LLC	**c** EIN-PN	45-2336799-501
a Plan name	NORTH AMERICAN UTILITY SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH AMERICAN UTILITY SOLUTIONS LLC	**c** EIN-PN	81-0873580-501
a Plan name	NORTH BEACH HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH BEACH HOLDINGS LLC	**c** EIN-PN	85-0764374-501
a Plan name	NORTH BROADWAY CHILDRENS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH BROADWAY CHILDRENS CENTER	**c** EIN-PN	31-0823799-501
a Plan name	NORTH CENTRAL PROCESSING SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH CENTRAL PROCESSING	**c** EIN-PN	34-1663790-501
a Plan name	NORTH COAST ATHLETIC CONF SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST ATHLETIC CONF	**c** EIN-PN	34-1427138-501

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	NORTH COAST CONCRETE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST CONCRETE, INC.	**c** EIN-PN	34-1459825-502
a Plan name	NORTH COAST DESIGN BUILD SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST DESIGN BUILD	**c** EIN-PN	47-5575987-501
a Plan name	NORTH COAST DIRECT TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST DIRECT TRANSPORTATION	**c** EIN-PN	20-2732428-501
a Plan name	NORTH COAST ENTERPRISE PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST ENTERPRISE PARTNERS LLC	**c** EIN-PN	87-3788671-501
a Plan name	NORTH COAST EYE SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST EYE SURGERY	**c** EIN-PN	47-1970404-501
a Plan name	NORTH COAST TAPE AND LABEL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH COAST TAPE AND LABEL, INC.	**c** EIN-PN	34-1341637-501
a Plan name	NORTH DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH DESIGN LLC	**c** EIN-PN	56-2287447-501
a Plan name	NORTH END PRESS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH END PRESS INC	**c** EIN-PN	31-0916827-501
a Plan name	NORTH HIGH BREWING SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH HIGH BREWING	**c** EIN-PN	83-2973229-501
a Plan name	NORTH MAIN MOTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH MAIN MOTORS	**c** EIN-PN	31-1211358-501
a Plan name	NORTH MARKET DEVELOPMENT AUTHORITY SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH MARKET DEVELOPMENT AUTHORITY	**c** EIN-PN	31-1039842-501
a Plan name	NORTH SHORE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH SHORE CONSTRUCTION	**c** EIN-PN	81-1338412-501

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	NORTH STAR ADVISORY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTH STAR ADVISORY GROUP	**c** EIN-PN	46-2178223-501
a Plan name	NORTHEAST OHIO AREA CHAMBERS OF COMMERCE SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST OHIO AREA CHAMBERS OF COMMERCE	**c** EIN-PN	34-1817370-501
a Plan name	NORTHEAST OHIO REALTY SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST OHIO REALTY	**c** EIN-PN	27-1175951-501
a Plan name	NORTHEASTERN REFRIGERATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHEASTERN REFRIGERATION	**c** EIN-PN	34-1191731-501
a Plan name	NORTHERN ANESTHESIA PROVIDERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHERN ANESTHESIA PROVIDERS LLC	**c** EIN-PN	47-1503874-501
a Plan name	NORTHERN OH RECOVERY ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHERN OH RECOVERY ASSOC	**c** EIN-PN	34-1836284-501
a Plan name	NORTHERN OHIO ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHERN OHIO ELECTRIC	**c** EIN-PN	46-3620490-501
a Plan name	NORTHERN OHIO PROVISIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHERN OHIO PROVISIONS	**c** EIN-PN	51-0439842-501
a Plan name	NORTHFIELD COLLISION SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHFIELD COLLISION SERV	**c** EIN-PN	34-1720599-501
a Plan name	NORTHFIELD NORTH CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHFIELD NORTH CORP	**c** EIN-PN	34-1354860-501
a Plan name	NORTHLAND REFRIGERATION SALES AND SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHLAND REFRIGERATION SALES AND SERVICE	**c** EIN-PN	31-0833729-501
a Plan name	NORTHMONT ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHMONT ANIMAL CLINIC	**c** EIN-PN	31-1216561-501

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	NORTHPOINTE VETERINARY CARE,LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHPOINTE VETERINARY CARE,LLC	**c** EIN-PN	88-1836156-501
a Plan name	NORTHRIDGE AUTOMOTIVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHRIDGE AUTOMOTIVE INC	**c** EIN-PN	34-1651487-501
a Plan name	NORTHSIDE ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHSIDE ANIMAL CLINIC	**c** EIN-PN	34-1305280-501
a Plan name	NORTHSIDE YACHT CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHSIDE YACHT CLUB	**c** EIN-PN	47-2985170-501
a Plan name	NORTHTOWNE HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHTOWNE HEATING	**c** EIN-PN	31-1320210-501
a Plan name	NORTHVIEW EXPRESS LAUNDRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHVIEW EXPRESS LAUNDRY LLC	**c** EIN-PN	83-1377038-501
a Plan name	NORTHWEST ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWEST ANIMAL HOSPITAL	**c** EIN-PN	32-0592735-501
a Plan name	NORTHWEST EYE CARE PROFESSIONALS SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWEST EYE CARE PROFESSIONALS	**c** EIN-PN	26-4056440-501
a Plan name	NORTHWEST WORKSITE MARKETING CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWEST WORKSITE MARKETING CORP.	**c** EIN-PN	76-0729016-501
a Plan name	NORTHWESTERN OHIO GRAIN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWESTERN OHIO GRAIN INC	**c** EIN-PN	34-1746912-501
a Plan name	NORTHWESTERN TOOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWESTERN TOOLS	**c** EIN-PN	31-0598158-501
a Plan name	NORTHWOODS APT MANAGER SOCA BENEFIT PLAN		
b Name of plan sponsor	NORTHWOODS APT MANAGER	**c** EIN-PN	85-3357364-501

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	NORWALK RACEWAY PARK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORWALK RACEWAY PARK INC	**c** EIN-PN	34-1229848-501
a Plan name	NORWELL SOURCING SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NORWELL SOURCING SOLUTIONS LLC	**c** EIN-PN	37-1879706-501
a Plan name	NOSCHANG AND ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	NOSCHANG AND ASSOC	**c** EIN-PN	31-1417708-501
a Plan name	NOTIFY TECHNOLOGY CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	NOTIFY TECHNOLOGY CORPORATION	**c** EIN-PN	81-0737657-501
a Plan name	NOURA PREMIER SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	NOURA PREMIER SERVICES	**c** EIN-PN	47-4566734-501
a Plan name	NOVA VISION CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVA VISION CARE	**c** EIN-PN	31-1467395-501
a Plan name	NOVACURA NORTH AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVACURA NORTH AMERICA	**c** EIN-PN	30-0934614-501
a Plan name	NOVALINE INDUSTRIAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVALINE INDUSTRIAL SOLUTIONS	**c** EIN-PN	99-2545614-501
a Plan name	NOVEX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVEX INC	**c** EIN-PN	34-1571480-501
a Plan name	NOVICKY CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVICKY CHIROPRACTIC	**c** EIN-PN	34-1599080-501
a Plan name	NOVO STAFFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NOVO STAFFING LLC	**c** EIN-PN	86-2460091-501
a Plan name	NOW MARKETING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	NOW MARKETING GROUP	**c** EIN-PN	27-3110452-501

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	NPAS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NPAS INC	**c** EIN-PN	87-0945348-501
a Plan name	NSI- NEIGHBORHOOD SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NSI- NEIGHBORHOOD SERVICES INC	**c** EIN-PN	31-0842947-501
a Plan name	NUESSE HEALTH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	NUESSE HEALTH SERVICES	**c** EIN-PN	46-2508326-501
a Plan name	NURSE PRACTITIONER HEALTH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	NURSE PRACTITIONER HEALTH SERVICES	**c** EIN-PN	45-4366630-501
a Plan name	NUTRO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	NUTRO INC	**c** EIN-PN	26-1649135-501
a Plan name	NVIRONMENT ARCHITECTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	NVIRONMENT ARCHITECTURE	**c** EIN-PN	46-0719479-501
a Plan name	NW ACQUISITION COMPANY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NW ACQUISITION COMPANY, LLC	**c** EIN-PN	87-1179946-501
a Plan name	NZDOTECH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	NZDOTECH LLC	**c** EIN-PN	83-1790445-501
a Plan name	O CONNOR HOSO AND LOREE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	O CONNOR HOSO AND LOREE LLC	**c** EIN-PN	56-2470951-501
a Plan name	O MEDIA GROUP, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	O MEDIA GROUP, INC.	**c** EIN-PN	20-1816451-501
a Plan name	O.D. MILLER CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	O.D. MILLER CO INC	**c** EIN-PN	34-1616567-501
a Plan name	OAK ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	OAK ASSOCIATES	**c** EIN-PN	34-1818085-501

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	OAKBROOK MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OAKBROOK MANAGEMENT LLC	**c** EIN-PN	26-2970615-501
a Plan name	OAKMONT INVESTMENT PROP SOCA BENEFIT PLAN		
b Name of plan sponsor	OAKMONT INVESTMENT PROP	**c** EIN-PN	46-1336081-501
a Plan name	OAKWOOD COUNSELING CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OAKWOOD COUNSELING CENTER LLC	**c** EIN-PN	34-1848432-501
a Plan name	OAKWOOD PLUMBING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	OAKWOOD PLUMBING COMPANY	**c** EIN-PN	83-2020775-501
a Plan name	OAREX CAPITAL MARKETS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OAREX CAPITAL MARKETS, INC	**c** EIN-PN	46-1376401-501
a Plan name	OASIS AVIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OASIS AVIATION	**c** EIN-PN	47-1104570-501
a Plan name	OASIS BUILDING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	OASIS BUILDING SERVICES	**c** EIN-PN	86-3658522-501
a Plan name	OBERLIN EARLY CHILDHOOD SOCA BENEFIT PLAN		
b Name of plan sponsor	OBERLIN EARLY CHILDHOOD	**c** EIN-PN	23-7313925-501
a Plan name	OBERLIN-TURNBALL FUNERAL SOCA BENEFIT PLAN		
b Name of plan sponsor	OBERLIN-TURNBALL FUNERAL	**c** EIN-PN	34-1918591-501
a Plan name	O'BRIEN'S SAFETY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	OBRIENS SAFETY SERVICES	**c** EIN-PN	20-0391826-501
a Plan name	OBTAIN TRACTION SOCA BENEFIT PLAN		
b Name of plan sponsor	OBTAIN TRACTION	**c** EIN-PN	84-3966534-501
a Plan name	OCEAN BLUE SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	OCEAN BLUE SOLUTIONS	**c** EIN-PN	46-3380276-501

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	ODELL CONSTRUCTION INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ODELL CONSTRUCTION INC.	**c** EIN-PN	80-0613329-501
a Plan name	OEM AUTO RECYCLERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OEM AUTO RECYCLERS LLC	**c** EIN-PN	45-4029593-501
a Plan name	OFFICE AID LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFICE AID LLC	**c** EIN-PN	84-3935867-501
a Plan name	OFFICE FIRST SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFICE FIRST SOLUTIONS LLC	**c** EIN-PN	85-3806222-501
a Plan name	OFFICE FURNITURE CONNECTN SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFICE FURNITURE CONNECTN	**c** EIN-PN	31-1696252-501
a Plan name	OFFICE FURNITURE SOURCE SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFICE FURNITURE SOURCE	**c** EIN-PN	31-1675251-501
a Plan name	OFFICE OF THE CHAPTER 13 TRUSTEE SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFICE OF THE CHAPTER 13 TRUSTEE	**c** EIN-PN	82-2523731-501
a Plan name	OFFSHORE EXPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	OFFSHORE EXPRESS	**c** EIN-PN	26-3147956-501
a Plan name	OH MOTORSPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OH MOTORSPORTS LLC	**c** EIN-PN	85-2584342-501
a Plan name	OH STATEWIDE IND LIVING SOCA BENEFIT PLAN		
b Name of plan sponsor	OH STATEWIDE IND LIVING	**c** EIN-PN	31-1445823-501
a Plan name	OH VICTIM WITNESS ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OH VICTIM WITNESS ASSOCIATION	**c** EIN-PN	34-1371196-501
a Plan name	OHC HOLDINGS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHC HOLDINGS, INC	**c** EIN-PN	81-4930253-501

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	OHI ELECTRIC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHI ELECTRIC, INC	**c** EIN-PN	26-0407691-501
a Plan name	OHIO ASPHALTIC LIMESTONE SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ASPHALTIC LIMESTONE	**c** EIN-PN	31-0743105-501
a Plan name	OHIO ASSOCIATION OF COUNTY BOARDS OF DD SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ASSOCIATION OF COUNTY BOARDS OF DD	**c** EIN-PN	31-1392869-501
a Plan name	OHIO ASSOCIATION OF FOODBANKS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ASSOCIATION OF FOODBANKS	**c** EIN-PN	34-1677838-501
a Plan name	OHIO ASSOCIATION OF HEALTH PLANS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ASSOCIATION OF HEALTH PLANS	**c** EIN-PN	31-1001446-501
a Plan name	OHIO BEAUTY CUT STONE II SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO BEAUTY CUT STONE II	**c** EIN-PN	34-1935677-502
a Plan name	OHIO BUSINESS SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO BUSINESS SYSTEMS	**c** EIN-PN	31-0813080-501
a Plan name	OHIO CDC ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO CDC ASSOCIATION	**c** EIN-PN	31-1109984-501
a Plan name	OHIO CENTER FOR LAW RELATED EDUCATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO CENTER FOR LAW RELATED EDUCATION	**c** EIN-PN	31-1124428-501
a Plan name	OHIO CHAPTER AMERICAN ACADEMY OF PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO CHAPTER AMERICAN ACADEMY OF PEDIATRICS	**c** EIN-PN	23-7126379-501
a Plan name	OHIO CHEST PHYSICIANS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO CHEST PHYSICIANS LTD	**c** EIN-PN	34-1840815-501
a Plan name	OHIO CITIZEN ADVOCATES FOR ADDICTION RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO CITIZEN ADVOCATES FOR ADDICTION RECOVERY	**c** EIN-PN	31-1102079-502

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	OHIO COMMERCIAL DOOR SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO COMMERCIAL DOOR	**c** EIN-PN	31-0877503-501
a Plan name	OHIO COMMUNITY HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO COMMUNITY HEALTH	**c** EIN-PN	88-1456639-501
a Plan name	OHIO ENDOVASCULAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ENDOVASCULAR LLC	**c** EIN-PN	47-4700902-501
a Plan name	OHIO FAMILY REALTY SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO FAMILY REALTY	**c** EIN-PN	42-1552978-501
a Plan name	OHIO FEDERATION OF TEACHERS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO FEDERATION OF TEACHERS	**c** EIN-PN	31-4269484-501
a Plan name	OHIO FIRE CHIEFS' ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO FIRE CHIEFS ASSOCIATION	**c** EIN-PN	31-0888822-501
a Plan name	OHIO FOOT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO FOOT INC.	**c** EIN-PN	32-0063683-501
a Plan name	OHIO GENEALOGICAL SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO GENEALOGICAL SOCIETY	**c** EIN-PN	34-6555678-501
a Plan name	OHIO GRAVURE TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO GRAVURE TECHNOLOGIES	**c** EIN-PN	26-1444636-501
a Plan name	OHIO HEALTH BENEFITS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO HEALTH BENEFITS	**c** EIN-PN	20-1257317-501
a Plan name	OHIO HEALTH CARE ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO HEALTH CARE ASSOCIATION	**c** EIN-PN	31-6056295-501
a Plan name	OHIO HEALTHCARE FED CU SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO HEALTHCARE FED CU	**c** EIN-PN	23-7251402-501

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	OHIO HUMANITIES COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO HUMANITIES COUNCIL	**c** EIN-PN	31-0901572-501
a Plan name	OHIO INSULATION & MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO INSULATION & MANUFACTURING	**c** EIN-PN	26-3922697-501
a Plan name	OHIO JUNK FORCE SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO JUNK FORCE	**c** EIN-PN	27-2310435-501
a Plan name	OHIO MOBILE SHREDDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO MOBILE SHREDDING LLC	**c** EIN-PN	45-4965706-501
a Plan name	OHIO NETWORK FOR INNOVATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO NETWORK FOR INNOVATION	**c** EIN-PN	83-0704194-501
a Plan name	OHIO ORGANIZING COLLAB SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO ORGANIZING COLLAB	**c** EIN-PN	26-1601472-501
a Plan name	OHIO PAIN AND REHAB SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PAIN AND REHAB	**c** EIN-PN	30-0024250-501
a Plan name	OHIO PARKS AND RECREATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PARKS AND RECREATION	**c** EIN-PN	34-6556126-501
a Plan name	OHIO PEDIATRIC RESEARCH ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PEDIATRIC RESEARCH ASSOCIATION	**c** EIN-PN	26-0854377-501
a Plan name	OHIO PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PEDIATRICS	**c** EIN-PN	31-1170398-501
a Plan name	OHIO PEER RECOVERY ORGANIZATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PEER RECOVERY ORGANIZATIONS	**c** EIN-PN	84-4561840-501
a Plan name	OHIO PHYSICIANS HEALTH PROGRAM SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PHYSICIANS HEALTH PROGRAM	**c** EIN-PN	34-1817218-501

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	OHIO PIE COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PIE COMPANY LLC	**c** EIN-PN	83-2155557-501
a Plan name	OHIO PLASTIC AND RECONSTRUCTIVE SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PLASTIC AND RECONSTRUCTIVE SURGERY	**c** EIN-PN	87-0901709-501
a Plan name	OHIO PSYCHIATRIC SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO PSYCHIATRIC SERVICES LLC	**c** EIN-PN	81-2810137-501
a Plan name	OHIO RECOVERY HOUSING SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO RECOVERY HOUSING	**c** EIN-PN	99-1884930-501
a Plan name	OHIO RECYCLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO RECYCLING INC	**c** EIN-PN	34-1513920-502
a Plan name	OHIO REGIONAL DEVELOPMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO REGIONAL DEVELOPMENT CORP	**c** EIN-PN	31-1443536-501
a Plan name	OHIO REHAB CENTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO REHAB CENTER, INC.	**c** EIN-PN	34-1898905-501
a Plan name	OHIO RIVER FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO RIVER FOUNDATION	**c** EIN-PN	31-1704768-501
a Plan name	OHIO SKIN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO SKIN CENTER	**c** EIN-PN	84-3828529-501
a Plan name	OHIO SLEEP TREATMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO SLEEP TREATMENT	**c** EIN-PN	82-3466784-501
a Plan name	OHIO STATE BAR FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO STATE BAR FOUNDATION	**c** EIN-PN	31-6054093-501
a Plan name	OHIO STATE PAIN MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO STATE PAIN MANAGEMENT	**c** EIN-PN	01-0839259-501

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	OHIO STATE UNIVERSITY FACULTY CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO STATE UNIVERSITY FACULTY CLUB	**c** EIN-PN	31-4176230-501
a Plan name	OHIO STATEWIDE DEVELOPMENT CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO STATEWIDE DEVELOPMENT CORPORATION	**c** EIN-PN	31-1088697-501
a Plan name	OHIO SUICIDE PREVENTION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO SUICIDE PREVENTION	**c** EIN-PN	20-3476310-501
a Plan name	OHIO TEMP HEAT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO TEMP HEAT INC	**c** EIN-PN	46-5072082-501
a Plan name	OHIO TILE & MARBLE SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO TILE & MARBLE	**c** EIN-PN	31-0789309-501
a Plan name	OHIO TRUCKING ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO TRUCKING ASSOCIATION	**c** EIN-PN	31-4268450-501
a Plan name	OHIO VALLEY ADULT DAYCARE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VALLEY ADULT DAYCARE SERVICES	**c** EIN-PN	46-1036422-501
a Plan name	OHIO VALLEY ARCHAEOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VALLEY ARCHAEOLOGY	**c** EIN-PN	20-4043164-501
a Plan name	OHIO VALLEY COMMUNITY FEDERAL CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VALLEY COMMUNITY FEDERAL CREDIT UNION	**c** EIN-PN	34-0871103-501
a Plan name	OHIO VALLEY FEDERAL CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VALLEY FEDERAL CREDIT UNION	**c** EIN-PN	31-6189634-501
a Plan name	OHIO VALLEY TRUSS CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VALLEY TRUSS CO.	**c** EIN-PN	31-0961563-501
a Plan name	OHIO VETERINARY MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO VETERINARY MEDICAL	**c** EIN-PN	31-4425770-502

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	OHIO WATER HEATERS SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO WATER HEATERS	**c** EIN-PN	84-2397535-501
a Plan name	OHIO WILDLIFE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO WILDLIFE CENTER	**c** EIN-PN	31-1182372-501
a Plan name	OHIO WIRE FORM AND SPRING SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO WIRE FORM AND SPRING	**c** EIN-PN	31-1423671-501
a Plan name	OHIO WOMEN S ALLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIO WOMEN S ALLIANCE	**c** EIN-PN	83-4095206-501
a Plan name	OHIODERM HOLDING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OHIODERM HOLDING INC	**c** EIN-PN	93-1827588-501
a Plan name	OHLINGER PUBLISHING SOCA BENEFIT PLAN		
b Name of plan sponsor	OHLINGER PUBLISHING	**c** EIN-PN	31-1773884-501
a Plan name	OKL ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	OKL ENGINEERING	**c** EIN-PN	61-1888989-501
a Plan name	OLD HILLIARD PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	OLD HILLIARD PLUMBING	**c** EIN-PN	31-1440842-501
a Plan name	OLD NORTH ARCADE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OLD NORTH ARCADE LLC	**c** EIN-PN	46-5492527-501
a Plan name	OLD RIVER BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	OLD RIVER BREWING COMPANY	**c** EIN-PN	81-4048884-501
a Plan name	OLD TROY PIKE VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	OLD TROY PIKE VETERINARY CLINIC	**c** EIN-PN	31-0887149-501
a Plan name	OLENTANGY RIVER CABINETS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OLENTANGY RIVER CABINETS LLC	**c** EIN-PN	99-3189072-501

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	OLES AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OLES AND ASSOCIATES LLC	**c** EIN-PN	31-1232195-501
a Plan name	OLIES 24 HR MOBILE TRUCK REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	OLIES 24 HR MOBILE TRUCK REPAIR	**c** EIN-PN	86-1421542-501
a Plan name	OLIVER LAW OFFICES SOCA BENEFIT PLAN		
b Name of plan sponsor	OLIVER LAW OFFICES	**c** EIN-PN	20-0246781-501
a Plan name	OLWIN METAL FABRICATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OLWIN METAL FABRICATION LLC	**c** EIN-PN	45-2708962-501
a Plan name	OM OIL COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OM OIL COLUMBUS LLC	**c** EIN-PN	86-3152570-501
a Plan name	OMAC CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	OMAC CONSTRUCTION	**c** EIN-PN	85-0868293-501
a Plan name	OMEGA MUSIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OMEGA MUSIC LLC	**c** EIN-PN	46-2115171-501
a Plan name	OMEGA RENOVATIONS/FUSION HOME BUYERS SOCA BENEFIT PLAN		
b Name of plan sponsor	OMEGA RENOVATIONS/FUSION HOME BUYERS	**c** EIN-PN	93-2394293-501
a Plan name	OME-RESA SOCA BENEFIT PLAN		
b Name of plan sponsor	OME-RESA	**c** EIN-PN	27-2621471-501
a Plan name	OMNI FIREPROOFING SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	OMNI FIREPROOFING SYSTEMS	**c** EIN-PN	87-4074212-501
a Plan name	OMNI MEDICAL TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	OMNI MEDICAL TRANSPORT	**c** EIN-PN	27-1246798-501
a Plan name	OMNI PROPERTY MANAGEMENT GROUP, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	OMNI PROPERTY MANAGEMENT GROUP, LTD.	**c** EIN-PN	20-3478108-501

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	ON DEMAND CARE CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	ON DEMAND CARE CORP.	**c** EIN-PN	81-1891790-501
a Plan name	ON PAR ENTERTAINMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ON PAR ENTERTAINMENT LLC	**c** EIN-PN	88-1037713-501
a Plan name	ON POWER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ON POWER INC	**c** EIN-PN	31-1782923-501
a Plan name	ON SITE MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ON SITE MANAGEMENT LLC	**c** EIN-PN	26-2347459-501
a Plan name	ON THE GO SUPPORT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ON THE GO SUPPORT SERVICES	**c** EIN-PN	27-1187583-501
a Plan name	ONCAC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONCAC	**c** EIN-PN	27-3125616-501
a Plan name	ONDA LABUHN ERNSBERGER AND BOGGS CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	ONDA LABUHN ERNSBERGER AND BOGGS CO LPA	**c** EIN-PN	31-1328166-501
a Plan name	ONE BODY PHYSICAL THERAPY AND SPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE BODY PHYSICAL THERAPY AND SPORTS	**c** EIN-PN	92-1003164-501
a Plan name	ONE CHOICE RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE CHOICE RECOVERY	**c** EIN-PN	31-1710056-501
a Plan name	ONE MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE MANAGEMENT LLC	**c** EIN-PN	38-4286844-501
a Plan name	ONE MOMENT STORES SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE MOMENT STORES	**c** EIN-PN	26-4143756-501
a Plan name	ONE ORIJIN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE ORIJIN LLC	**c** EIN-PN	82-3301045-501

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	ONE STOP INTERIOR DESIGN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE STOP INTERIOR DESIGN CENTER	**c** EIN-PN	20-5579828-501
a Plan name	ONE YOU FEED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONE YOU FEED LLC	**c** EIN-PN	47-4335993-501
a Plan name	ONEFIFTEEN SOCA BENEFIT PLAN		
b Name of plan sponsor	ONEFIFTEEN	**c** EIN-PN	83-3504845-501
a Plan name	ONELINK TECHNICAL SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONELINK TECHNICAL SERVICES LLC	**c** EIN-PN	20-2866464-501
a Plan name	ONEVUE CAPITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ONEVUE CAPITAL LLC	**c** EIN-PN	36-4584578-502
a Plan name	ONWARD DESIGN COLLABORATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	ONWARD DESIGN COLLABORATIVE	**c** EIN-PN	86-3184234-501
a Plan name	OPC CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	OPC CONTRACTING	**c** EIN-PN	45-1443140-502
a Plan name	OPEN OPTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	OPEN OPTIONS	**c** EIN-PN	31-1211402-501
a Plan name	OPERATION KEEPSAKE SOCA BENEFIT PLAN		
b Name of plan sponsor	OPERATION KEEPSAKE	**c** EIN-PN	34-1700757-501
a Plan name	OPEX STEEL PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPEX STEEL PRODUCTS LLC	**c** EIN-PN	86-1487624-501
a Plan name	OPM SERVICES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	OPM SERVICES INC.	**c** EIN-PN	31-1443669-501
a Plan name	OPPGENETIX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPPGENETIX LLC	**c** EIN-PN	47-2176005-501

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	OPTICA CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTICA CONSULTING INC	**c** EIN-PN	52-2436353-501
a Plan name	OPTICARE VISION CENTERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTICARE VISION CENTERS LLC	**c** EIN-PN	31-1074300-501
a Plan name	OPTICS CONSULTING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTICS CONSULTING, LLC	**c** EIN-PN	86-2249594-501
a Plan name	OPTICS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTICS INC.	**c** EIN-PN	34-6527531-501
a Plan name	OPTIM ENVIRONMENTAL RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTIM ENVIRONMENTAL RESOURCES	**c** EIN-PN	31-1447921-501
a Plan name	OPTIMAL FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTIMAL FAMILY DENTAL	**c** EIN-PN	26-3780106-501
a Plan name	OPTIMED RESEARCH SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTIMED RESEARCH	**c** EIN-PN	20-8106368-501
a Plan name	OPTITECH, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTITECH, INC.	**c** EIN-PN	87-0786952-501
a Plan name	OPTI-VISE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OPTI-VISE, LLC	**c** EIN-PN	20-8254305-501
a Plan name	ORA MGMT AND DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	ORA MGMT AND DEVELOPMENT	**c** EIN-PN	82-3275258-501
a Plan name	ORANGE GROVE BIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ORANGE GROVE BIO LLC	**c** EIN-PN	84-3312683-501
a Plan name	ORANGE ONIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	ORANGE ONIONS	**c** EIN-PN	20-8409046-501

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	ORANGE THEORY FITNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	ORANGE THEORY FITNESS	**c** EIN-PN	47-2467311-501
a Plan name	ORAZEN EXTRUDED POLYMERS SOCA BENEFIT PLAN		
b Name of plan sponsor	ORAZEN EXTRUDED POLYMERS	**c** EIN-PN	45-0830121-501
a Plan name	ORCHARD ACCOUNTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ORCHARD ACCOUNTING	**c** EIN-PN	47-1879965-501
a Plan name	ORCHARD HOLDINGS MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ORCHARD HOLDINGS MANAGEMENT LLC	**c** EIN-PN	93-4593620-501
a Plan name	ORCHARD VETERINARY CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	ORCHARD VETERINARY CARE	**c** EIN-PN	85-1050174-501
a Plan name	ORCHESTRA MGMT SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ORCHESTRA MGMT SOLUTIONS INC	**c** EIN-PN	22-3737010-501
a Plan name	OREILLY PRECISION PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	OREILLY PRECISION PRODUCTS	**c** EIN-PN	20-0277513-501
a Plan name	OREO TEAM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OREO TEAM LLC	**c** EIN-PN	83-3498104-501
a Plan name	ORG HOLDINGS LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	ORG HOLDINGS LIMITED	**c** EIN-PN	34-1923981-501
a Plan name	ORGAN LAW LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	ORGAN LAW LLP	**c** EIN-PN	27-1374397-501
a Plan name	ORGANIC SPA MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	ORGANIC SPA MEDIA	**c** EIN-PN	56-2624575-501
a Plan name	ORIGIN MALTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ORIGIN MALTS	**c** EIN-PN	81-3715993-501

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	ORION SPORTS MEDICINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ORION SPORTS MEDICINE LLC	**c** EIN-PN	82-4884507-501
a Plan name	ORPHAN FOUNDATION AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	ORPHAN FOUNDATION AMERICA	**c** EIN-PN	52-1238437-501
a Plan name	ORRS AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	ORRS AUTO BODY	**c** EIN-PN	31-1172968-501
a Plan name	ORTHO ADVANTAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ORTHO ADVANTAGE	**c** EIN-PN	02-0596128-501
a Plan name	ORTHOBRAIN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ORTHOBRAIN INC	**c** EIN-PN	87-3478984-501
a Plan name	ORTHOPEDIC ASSOCIATES OF DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	ORTHOPEDIC ASSOCIATES OF DAYTON	**c** EIN-PN	31-0895186-501
a Plan name	ORTHOWEST SOCA BENEFIT PLAN		
b Name of plan sponsor	ORTHOWEST	**c** EIN-PN	34-1972292-502
a Plan name	OSA TECHNOLOGY PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OSA TECHNOLOGY PARTNERS LLC	**c** EIN-PN	47-5145474-501
a Plan name	OSCAR GIOVANNI SALON SOCA BENEFIT PLAN		
b Name of plan sponsor	OSCAR GIOVANNI SALON	**c** EIN-PN	81-4838380-502
a Plan name	OSI CSP SOCA BENEFIT PLAN		
b Name of plan sponsor	OSI CSP	**c** EIN-PN	34-1966747-501
a Plan name	OTP HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OTP HOLDINGS LLC	**c** EIN-PN	46-3356006-501
a Plan name	OTR BAGELRY SOCA BENEFIT PLAN		
b Name of plan sponsor	OTR BAGELRY	**c** EIN-PN	88-3150255-501

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	OTR CHAMBER OF COMMERCE SOCA BENEFIT PLAN		
b Name of plan sponsor	OTR CHAMBER OF COMMERCE	**c** EIN-PN	31-1300658-502
a Plan name	OTTAWA PARK AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	OTTAWA PARK AUTOMOTIVE	**c** EIN-PN	34-1720229-502
a Plan name	OTTAWA RUBBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	OTTAWA RUBBER COMPANY	**c** EIN-PN	34-4404788-501
a Plan name	OTTO INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	OTTO INSURANCE GROUP	**c** EIN-PN	45-4519438-501
a Plan name	OUTDOOR ENHANCEMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	OUTDOOR ENHANCEMENTS	**c** EIN-PN	87-3079446-501
a Plan name	OUTLAW FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	OUTLAW FIRE PROTECTION	**c** EIN-PN	87-2683267-501
a Plan name	OUTSTANDING HEAT AND COOL SOCA BENEFIT PLAN		
b Name of plan sponsor	OUTSTANDING HEAT AND COOL	**c** EIN-PN	27-3379885-501
a Plan name	OVERBECK AUTO SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	OVERBECK AUTO SERVICE	**c** EIN-PN	31-0923462-501
a Plan name	OVERFIELD LEARNING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	OVERFIELD LEARNING CENTER	**c** EIN-PN	31-1088546-501
a Plan name	OVERLOAD FITNESS - WESTLAKE SOCA BENEFIT PLAN		
b Name of plan sponsor	OVERLOAD FITNESS - WESTLAKE	**c** EIN-PN	20-5084636-501
a Plan name	OVERSTOCK GUYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OVERSTOCK GUYS LLC	**c** EIN-PN	81-5321469-501
a Plan name	OWENS ARK VETERINARY SOCA BENEFIT PLAN		
b Name of plan sponsor	OWENS ARK VETERINARY	**c** EIN-PN	06-1832170-501

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	OWEN'S ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	OWENS ELECTRIC	**c** EIN-PN	34-1230748-501
a Plan name	OWENSVILLE ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	OWENSVILLE ANIMAL HOSPITAL	**c** EIN-PN	84-3200624-501
a Plan name	OXFORD COPY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	OXFORD COPY SHOP	**c** EIN-PN	31-1303883-501
a Plan name	OXFORD MEDICAL HEALTH AND WELLNESS CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	OXFORD MEDICAL HEALTH AND WELLNESS CENTER LLC	**c** EIN-PN	31-1643924-502
a Plan name	OXFORD REAL ESTATE SOCA BENEFIT PLAN		
b Name of plan sponsor	OXFORD REAL ESTATE	**c** EIN-PN	31-1296957-501
a Plan name	P AND S EQUITIES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	P AND S EQUITIES INC.	**c** EIN-PN	34-1557511-501
a Plan name	P T BITOUNIS CPA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	P T BITOUNIS CPA LLC	**c** EIN-PN	46-4192693-501
a Plan name	P. BRIAN SMALDINO DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	P. BRIAN SMALDINO DDS INC	**c** EIN-PN	34-1650945-501
a Plan name	PA TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PA TECHNOLOGIES	**c** EIN-PN	83-2516466-501
a Plan name	PACE AVIATION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PACE AVIATION, INC.	**c** EIN-PN	47-4770425-501
a Plan name	PACIFIC HIGHWAY PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PACIFIC HIGHWAY PRODUCTS LLC	**c** EIN-PN	82-4564792-501
a Plan name	PACIFIC POOLS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PACIFIC POOLS INC	**c** EIN-PN	31-1163161-501

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	PACK POWER SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PACK POWER SERVICES INC	**c** EIN-PN	83-3230219-501
a Plan name	PACKAGE BOILER SYSTEMS AND HVAC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PACKAGE BOILER SYSTEMS AND HVAC, INC	**c** EIN-PN	34-1868198-501
a Plan name	PACLINE CONVEYORS SOCA BENEFIT PLAN		
b Name of plan sponsor	PACLINE CONVEYORS	**c** EIN-PN	16-1393347-501
a Plan name	PAGANIS DOWNTOWN CAR CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	PAGANIS DOWNTOWN CAR CARE	**c** EIN-PN	47-1268451-501
a Plan name	PAGE'S FLOORING SOCA BENEFIT PLAN		
b Name of plan sponsor	PAGES FLOORING	**c** EIN-PN	20-2013467-501
a Plan name	PAIT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PAIT GROUP	**c** EIN-PN	46-2599194-501
a Plan name	PAKRITE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAKRITE INC	**c** EIN-PN	34-1384458-501
a Plan name	PALADIN PROTECTIVE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	PALADIN PROTECTIVE SYSTEMS	**c** EIN-PN	34-1634525-501
a Plan name	PALMER BOLT & SUPPLY CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PALMER BOLT & SUPPLY CO	**c** EIN-PN	31-1272239-501
a Plan name	PALMER MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	PALMER MANUFACTURING	**c** EIN-PN	31-0901016-501
a Plan name	PAMER FAMILY CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAMER FAMILY CHIROPRACTIC	**c** EIN-PN	31-1789005-501
a Plan name	PANACEA LUXURY SPA BOUTIQUE SOCA BENEFIT PLAN		
b Name of plan sponsor	PANACEA LUXURY SPA BOUTIQUE	**c** EIN-PN	86-2608325-501

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	PANDORA FLOORING & SUPPLY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PANDORA FLOORING & SUPPLY INC	**c** EIN-PN	27-2556911-501
a Plan name	PANEL BARN,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PANEL BARN,INC	**c** EIN-PN	26-3254932-501
a Plan name	PANEL TOWN OF COLUMBUS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PANEL TOWN OF COLUMBUS INC	**c** EIN-PN	31-1588952-503
a Plan name	PANINI NORTH AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	PANINI NORTH AMERICA	**c** EIN-PN	31-1484268-501
a Plan name	PAP OIL COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	PAP OIL COMPANY	**c** EIN-PN	26-1467229-501
a Plan name	PAPER PRODUCTS COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	PAPER PRODUCTS COMPANY	**c** EIN-PN	31-0552272-501
a Plan name	PAPER SERVICE CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAPER SERVICE CO INC	**c** EIN-PN	34-1100002-501
a Plan name	PAPPAS GIBSON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAPPAS GIBSON LLC	**c** EIN-PN	46-0811832-501
a Plan name	PARADIGM INDUSTRIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARADIGM INDUSTRIAL LLC	**c** EIN-PN	38-3907747-501
a Plan name	PARADISE CAR CARE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PARADISE CAR CARE INC.	**c** EIN-PN	46-2467985-501
a Plan name	PARADISE GARAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	PARADISE GARAGE	**c** EIN-PN	36-4624207-501
a Plan name	PARAGON PRINCIPAL CAPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PARAGON PRINCIPAL CAPITAL	**c** EIN-PN	85-1998399-501

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	PARAMOUNT LAWN AND LANDSCAPE SOCA BENEFIT PLAN		
b Name of plan sponsor	PARAMOUNT LAWN AND LANDSCAPE	**c** EIN-PN	31-1248983-501
a Plan name	PARAWARE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARAWARE, LLC	**c** EIN-PN	04-3673297-501
a Plan name	PARK CLUB ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	PARK CLUB ASSOCIATES	**c** EIN-PN	43-3823343-501
a Plan name	PARK EDGE ADVISORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARK EDGE ADVISORS, LLC	**c** EIN-PN	87-3440073-501
a Plan name	PARK PLAZA ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PARK PLAZA ANIMAL HOSPITAL	**c** EIN-PN	31-1593861-501
a Plan name	PARKER MACMILLAN ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARKER MACMILLAN ASSOCIATES LLC	**c** EIN-PN	92-1581442-501
a Plan name	PARKMONT WEALTH ADVISORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARKMONT WEALTH ADVISORS LLC	**c** EIN-PN	82-3623504-501
a Plan name	PARKVIEW PARTNERS CAP MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	PARKVIEW PARTNERS CAP MGMT	**c** EIN-PN	81-2060504-501
a Plan name	PARMINDER B SINGH MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARMINDER B SINGH MD INC	**c** EIN-PN	81-1421178-501
a Plan name	PARNELL & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	PARNELL & ASSOCIATES	**c** EIN-PN	31-0821255-501
a Plan name	PARNELL FAMILY EYE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	PARNELL FAMILY EYE CARE	**c** EIN-PN	85-1701288-501
a Plan name	PARRISH FRYMAN AND MARCUM SOCA BENEFIT PLAN		
b Name of plan sponsor	PARRISH FRYMAN AND MARCUM	**c** EIN-PN	31-1039429-501

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	PARTNERS ENVIRONMENTAL CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	PARTNERS ENVIRONMENTAL CONSULTING	**c** EIN-PN	34-1886393-501
a Plan name	PARTNERSHIP PROPERTY SERVS SOCA BENEFIT PLAN		
b Name of plan sponsor	PARTNERSHIP PROPERTY SERVS	**c** EIN-PN	46-3514543-501
a Plan name	PARTS CONSULTING GROUP, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PARTS CONSULTING GROUP, INC	**c** EIN-PN	37-1464568-501
a Plan name	PASSION WORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	PASSION WORKS	**c** EIN-PN	82-2288880-501
a Plan name	PAT SCALES REMODELING SOCA BENEFIT PLAN		
b Name of plan sponsor	PAT SCALES REMODELING	**c** EIN-PN	45-3715798-501
a Plan name	PATASKALA FLOWERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATASKALA FLOWERS LLC	**c** EIN-PN	31-1749654-501
a Plan name	PATASKALA VISION CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	PATASKALA VISION CENTER	**c** EIN-PN	47-3500722-501
a Plan name	PATHFINDER REALTY SOCA BENEFIT PLAN		
b Name of plan sponsor	PATHFINDER REALTY	**c** EIN-PN	74-3192415-501
a Plan name	PATHWAYS COMMUNITY HUB SOCA BENEFIT PLAN		
b Name of plan sponsor	PATHWAYS COMMUNITY HUB	**c** EIN-PN	81-3738049-501
a Plan name	PATHWAYS OF CENTRAL OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PATHWAYS OF CENTRAL OHIO	**c** EIN-PN	31-0836725-501
a Plan name	PATHWAYS WEALTH MANAGEMENT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATHWAYS WEALTH MANAGEMENT, LLC	**c** EIN-PN	27-2829122-501
a Plan name	PATIENTSYNC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATIENTSYNC	**c** EIN-PN	88-4328079-501

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	PATRIARCH RENOVATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	PATRIARCH RENOVATIONS	**c** EIN-PN	82-4459181-501
a Plan name	PATRIOT CAR WASH SOCA BENEFIT PLAN		
b Name of plan sponsor	PATRIOT CAR WASH	**c** EIN-PN	82-1010078-501
a Plan name	PATRIOT SIGNAGE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PATRIOT SIGNAGE, INC.	**c** EIN-PN	31-1320223-501
a Plan name	PATRIOT STAINLESS USA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATRIOT STAINLESS USA INC	**c** EIN-PN	27-1897542-501
a Plan name	PATRON SUPPLY COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATRON SUPPLY COMPANY INC	**c** EIN-PN	34-1821596-501
a Plan name	PATTERSON POOLS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATTERSON POOLS LLC	**c** EIN-PN	46-4154179-501
a Plan name	PATTERSON SPECIALTY SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	PATTERSON SPECIALTY SERVICE	**c** EIN-PN	81-3704985-501
a Plan name	PATTON PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	PATTON PEST CONTROL	**c** EIN-PN	34-1158384-501
a Plan name	PATTON'S TOWING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PATTONS TOWING INC	**c** EIN-PN	34-1849940-502
a Plan name	PAUL ADELMAN TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	PAUL ADELMAN TRUCKING	**c** EIN-PN	34-1211625-501
a Plan name	PAUL DAVIS RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PAUL DAVIS RESTORATION	**c** EIN-PN	32-0012179-501
a Plan name	PAUL GRAMMAS SOCA BENEFIT PLAN		
b Name of plan sponsor	PAUL GRAMMAS	**c** EIN-PN	31-1543479-501

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	PAUL LUCAS LANDSCAPING AND CONSTRUCTION, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAUL LUCAS LANDSCAPING AND CONSTRUCTION, INC	**c** EIN-PN	34-1541947-502
a Plan name	PAULS LAWN AND GARDEN SOCA BENEFIT PLAN		
b Name of plan sponsor	PAULS LAWN AND GARDEN	**c** EIN-PN	30-0771290-502
a Plan name	PAX MEDICAL ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAX MEDICAL ASSOCIATES INC	**c** EIN-PN	34-1914157-501
a Plan name	PAYBRIDGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PAYBRIDGE LLC	**c** EIN-PN	56-2623857-501
a Plan name	PAYDAY PERX SOCA BENEFIT PLAN		
b Name of plan sponsor	PAYDAY PERX	**c** EIN-PN	16-1683228-501
a Plan name	PAYNE AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	PAYNE AND COMPANY	**c** EIN-PN	31-1454307-501
a Plan name	PBJ CONNECTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PBJ CONNECTIONS, INC.	**c** EIN-PN	20-5935457-501
a Plan name	PBS SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PBS SERVICES LLC	**c** EIN-PN	27-1518867-501
a Plan name	PCFC ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PCFC ENTERPRISES LLC	**c** EIN-PN	87-2293797-501
a Plan name	PCVS GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PCVS GROUP, LLC	**c** EIN-PN	87-4282644-501
a Plan name	PD PAYKOFF TRUCKING CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PD PAYKOFF TRUCKING CO LLC	**c** EIN-PN	31-1175648-501
a Plan name	PDQ DOORS SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	PDQ DOORS SALES	**c** EIN-PN	81-0690063-501

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	PDS SYSTEMS HOLDINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PDS SYSTEMS HOLDINGS, LLC	**c** EIN-PN	46-0592694-501
a Plan name	PEAK HUMAN PERFORMANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAK HUMAN PERFORMANCE	**c** EIN-PN	47-1296724-501
a Plan name	PEAK PERFORMANCE POLYMERS SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAK PERFORMANCE POLYMERS	**c** EIN-PN	81-3737189-501
a Plan name	PEAK RESOURCES CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAK RESOURCES CONSULTING	**c** EIN-PN	51-0624585-501
a Plan name	PEAK TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAK TECHNOLOGY	**c** EIN-PN	82-1508464-501
a Plan name	PEAK WEALTH SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAK WEALTH SOLUTIONS INC	**c** EIN-PN	34-1914557-501
a Plan name	PEAKE CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	PEAKE CONTRACTING	**c** EIN-PN	84-2582311-501
a Plan name	PEARLY VINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEARLY VINE LLC	**c** EIN-PN	83-2050705-501
a Plan name	PEBBY FOREVEE SOCA BENEFIT PLAN		
b Name of plan sponsor	PEBBY FOREVEE	**c** EIN-PN	46-0967611-501
a Plan name	PECAN PENNY S BAR B Q SOCA BENEFIT PLAN		
b Name of plan sponsor	PECAN PENNY S BAR B Q	**c** EIN-PN	82-1301514-501
a Plan name	PECK & GAMBISH CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	PECK & GAMBISH CPAS	**c** EIN-PN	34-1160660-501
a Plan name	PECK HANNAFORD AND BRIGGS, CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	PECK HANNAFORD AND BRIGGS, CO.	**c** EIN-PN	31-0655823-501

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	PEEBLES HERZOG INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEEBLES HERZOG INC	**c** EIN-PN	31-0855999-501
a Plan name	PEELLE MCCOY LAW OFFICES CO., L.P.A. SOCA BENEFIT PLAN		
b Name of plan sponsor	PEELLE MCCOY LAW OFFICES CO., L.P.A.	**c** EIN-PN	27-2943264-501
a Plan name	PEER SOLUTIONS RECOVERY OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PEER SOLUTIONS RECOVERY OHIO	**c** EIN-PN	92-3290399-501
a Plan name	PEERLESS MANAGEMENT GROUP HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEERLESS MANAGEMENT GROUP HOLDINGS LLC	**c** EIN-PN	93-3412312-501
a Plan name	PEGASUS SPECIALTY VEHICLES SOCA BENEFIT PLAN		
b Name of plan sponsor	PEGASUS SPECIALTY VEHICLES	**c** EIN-PN	87-2029405-501
a Plan name	PEIFER ORCHARD SOCA BENEFIT PLAN		
b Name of plan sponsor	PEIFER ORCHARD	**c** EIN-PN	31-1807812-502
a Plan name	PELFREY & CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PELFREY & CO	**c** EIN-PN	31-1712761-501
a Plan name	PELLA OF COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PELLA OF COLUMBUS LLC	**c** EIN-PN	87-3133279-501
a Plan name	PEMAMEK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEMAMEK LLC	**c** EIN-PN	81-4031039-501
a Plan name	PENDLETON CONSULTING CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	PENDLETON CONSULTING CORP	**c** EIN-PN	82-3629955-501
a Plan name	PENDRAGON HOMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PENDRAGON HOMES LLC	**c** EIN-PN	20-1687759-501
a Plan name	PENGUIN CONTRACTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PENGUIN CONTRACTING LLC	**c** EIN-PN	84-4421422-502

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	PENN - OHIO ELECTRICAL CONTRATORS SOCA BENEFIT PLAN		
b Name of plan sponsor	PENN - OHIO ELECTRICAL CONTRATORS	**c** EIN-PN	34-1023213-501
a Plan name	PENNOHIO CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PENNOHIO CORPORATION	**c** EIN-PN	31-1508323-501
a Plan name	PENTA GEAR METROLOGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PENTA GEAR METROLOGY LLC	**c** EIN-PN	38-3982972-501
a Plan name	PEOPLE IN NEED INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PEOPLE IN NEED INC	**c** EIN-PN	31-1019655-501
a Plan name	PEOPLES BANK OF GAMBIER SOCA BENEFIT PLAN		
b Name of plan sponsor	PEOPLES BANK OF GAMBIER	**c** EIN-PN	31-4278230-501
a Plan name	PERFECT AIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERFECT AIR LLC	**c** EIN-PN	27-3266974-501
a Plan name	PERFECT PAVER CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PERFECT PAVER CO	**c** EIN-PN	81-2309554-502
a Plan name	PERFORMANCE PODIATRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERFORMANCE PODIATRY LLC	**c** EIN-PN	92-3124169-501
a Plan name	PERKINS INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PERKINS INSURANCE	**c** EIN-PN	34-1085942-501
a Plan name	PERKINS SPINE AND SPORTS MEDICINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERKINS SPINE AND SPORTS MEDICINE LLC	**c** EIN-PN	93-2014977-501
a Plan name	PERRY CO DENTAL GROUP SZ LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERRY CO DENTAL GROUP SZ LLC	**c** EIN-PN	31-1051917-501
a Plan name	PERRY DAIRY QUEEN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERRY DAIRY QUEEN LLC	**c** EIN-PN	47-1338119-501

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	PERRY PROSTHETICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PERRY PROSTHETICS INC	**c** EIN-PN	34-1913982-502
a Plan name	PERRY TOWNSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	PERRY TOWNSHIP	**c** EIN-PN	31-6000593-501
a Plan name	PERSONALIZED LEARNING SOCA BENEFIT PLAN		
b Name of plan sponsor	PERSONALIZED LEARNING	**c** EIN-PN	84-1761995-501
a Plan name	PESOLA HOSPITALITY SOCA BENEFIT PLAN		
b Name of plan sponsor	PESOLA HOSPITALITY	**c** EIN-PN	81-3142542-501
a Plan name	PET FINATICS SOCA BENEFIT PLAN		
b Name of plan sponsor	PET FINATICS	**c** EIN-PN	26-4637570-501
a Plan name	PET HEALTH DELIVERED, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PET HEALTH DELIVERED, LLC	**c** EIN-PN	83-1986778-501
a Plan name	PETER GAIETTO AND ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PETER GAIETTO AND ASSOCIATES, INC.	**c** EIN-PN	20-4009115-501
a Plan name	PETES BP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PETES BP LLC	**c** EIN-PN	83-4437808-501
a Plan name	PETFIX OF NORTHEAST OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PETFIX OF NORTHEAST OHIO	**c** EIN-PN	20-2205609-501
a Plan name	PETLAND CP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PETLAND CP LLC	**c** EIN-PN	27-2257362-501
a Plan name	PETRA POWER SOCA BENEFIT PLAN		
b Name of plan sponsor	PETRA POWER	**c** EIN-PN	82-1802707-501
a Plan name	PETRO ENVIRONMENTAL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PETRO ENVIRONMENTAL, LLC	**c** EIN-PN	26-0086740-501

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	PETROFF LAW OFFICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PETROFF LAW OFFICES LLC	**c** EIN-PN	56-2656623-501
a Plan name	PETTY FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PETTY FARMS LLC	**c** EIN-PN	82-2365422-502
a Plan name	PFM FLEET SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	PFM FLEET SERVICE	**c** EIN-PN	85-0851252-501
a Plan name	PH MATTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PH MATTER LLC	**c** EIN-PN	27-3633090-501
a Plan name	PHARMA GENLABS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PHARMA GENLABS LLC	**c** EIN-PN	87-3498059-501
a Plan name	PHASE TO PHASE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PHASE TO PHASE LLC	**c** EIN-PN	82-1463575-501
a Plan name	PHIL MILLER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	PHIL MILLER CONSTRUCTION	**c** EIN-PN	34-1634672-501
a Plan name	PHILLIPPI DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PHILLIPPI DENTAL LLC	**c** EIN-PN	88-2198926-501
a Plan name	PHILLIPS AND PHILLIPS CPAS SOCA BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS AND PHILLIPS CPAS	**c** EIN-PN	34-1574249-501
a Plan name	PHILLIPS HOMEMADE SOCA BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS HOMEMADE	**c** EIN-PN	87-2963153-501
a Plan name	PHILLIPS PROP MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS PROP MAINTENANCE	**c** EIN-PN	82-1074570-501
a Plan name	PHILLIPS SEKANICK ARCHITECTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS SEKANICK ARCHITECTS INC	**c** EIN-PN	34-1868844-501

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 BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	PHOENIX BREWING COMPANY	**c** EIN-PN	46-1850530-501
a Plan name	PHOENIX HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	PHOENIX HOUSE	**c** EIN-PN	34-1862727-501
a Plan name	PHYSICAL MED ASSOC OF NWOH SOCA BENEFIT PLAN		
b Name of plan sponsor	PHYSICAL MED ASSOC OF NWOH	**c** EIN-PN	31-1466212-502
a Plan name	PHYSICIAN GROUP OF SOUTHEASTERN OHIO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PHYSICIAN GROUP OF SOUTHEASTERN OHIO INC	**c** EIN-PN	31-1775278-502
a Plan name	PHYSICIANS AND SURGEONS FOR WOMEN SOCA BENEFIT PLAN		
b Name of plan sponsor	PHYSICIANS AND SURGEONS FOR WOMEN	**c** EIN-PN	31-1076050-501
a Plan name	PIANO INTERNATIONAL ASSOCIATION OF NORTHERN OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PIANO INTERNATIONAL ASSOCIATION OF NORTHERN OHIO	**c** EIN-PN	34-1774615-501
a Plan name	PICKAWAY FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKAWAY FARMS INC	**c** EIN-PN	46-2302296-501
a Plan name	PICKAWAY MACHINE AND FABRICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKAWAY MACHINE AND FABRICATION	**c** EIN-PN	31-1183999-501
a Plan name	PICKAWAY METRO HOUSING AUT SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKAWAY METRO HOUSING AUT	**c** EIN-PN	31-0954776-501
a Plan name	PICKAWAY TWP PICKAWAY CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKAWAY TWP PICKAWAY CO	**c** EIN-PN	31-6400854-501
a Plan name	PICKENS UNDERGROUND UTILITIES SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKENS UNDERGROUND UTILITIES SERVICE INC	**c** EIN-PN	76-0831707-502
a Plan name	PICKEREL DEVELOPMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	PICKEREL DEVELOPMENT CORP	**c** EIN-PN	47-1370874-501

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	PIECES SOCA BENEFIT PLAN		
b Name of plan sponsor	PIECES	**c** EIN-PN	85-1194476-501
a Plan name	PIEDMONT GAS SOCA BENEFIT PLAN		
b Name of plan sponsor	PIEDMONT GAS	**c** EIN-PN	34-1563612-501
a Plan name	PIERCOLOGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIERCOLOGY INC	**c** EIN-PN	31-1417436-501
a Plan name	PIERSANTE INS AND FINANCIAL SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	PIERSANTE INS AND FINANCIAL SVS	**c** EIN-PN	45-3324322-501
a Plan name	PIKE METRO HOUSING AUTH SOCA BENEFIT PLAN		
b Name of plan sponsor	PIKE METRO HOUSING AUTH	**c** EIN-PN	31-6187538-501
a Plan name	PING ITS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PING ITS LLC	**c** EIN-PN	45-4549114-501
a Plan name	PINNACLE CONSTRUCTION DEV SOCA BENEFIT PLAN		
b Name of plan sponsor	PINNACLE CONSTRUCTION DEV	**c** EIN-PN	34-1922987-501
a Plan name	PINNACLE PROPERTY MAINT SOCA BENEFIT PLAN		
b Name of plan sponsor	PINNACLE PROPERTY MAINT	**c** EIN-PN	20-2368164-501
a Plan name	PINPOINT LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	PINPOINT LOGISTICS	**c** EIN-PN	31-1450922-501
a Plan name	PIONEER BASEMENT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	PIONEER BASEMENT SOLUTIONS	**c** EIN-PN	34-1755186-502
a Plan name	PIONEER BOULEVARD MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	PIONEER BOULEVARD MANAGEMENT	**c** EIN-PN	31-1519642-501
a Plan name	PIONEER MASONRY SUPPLY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIONEER MASONRY SUPPLY INC	**c** EIN-PN	31-1056423-501

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	PIQUA TRANSFER AND STORAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	PIQUA TRANSFER AND STORAGE	**c** EIN-PN	31-0408061-501
a Plan name	PIRHL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIRHL LLC	**c** EIN-PN	20-1525660-501
a Plan name	PIRTEK SOCA BENEFIT PLAN		
b Name of plan sponsor	PIRTEK	**c** EIN-PN	20-2288924-501
a Plan name	PIT STOP CAFE SOCA BENEFIT PLAN		
b Name of plan sponsor	PIT STOP CAFE	**c** EIN-PN	30-0846154-502
a Plan name	PITTSER FAMILY EYECARE SOCA BENEFIT PLAN		
b Name of plan sponsor	PITTSER FAMILY EYECARE	**c** EIN-PN	20-0302114-501
a Plan name	PIVOT STAFFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIVOT STAFFING LLC	**c** EIN-PN	82-3644544-501
a Plan name	PIVOTAL PROPANE SOCA BENEFIT PLAN		
b Name of plan sponsor	PIVOTAL PROPANE	**c** EIN-PN	27-2120401-501
a Plan name	PIXEL FICTION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIXEL FICTION, LLC	**c** EIN-PN	82-3096880-501
a Plan name	PIXEL LEADERSHIP GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIXEL LEADERSHIP GROUP LLC	**c** EIN-PN	82-3008936-501
a Plan name	PIXEL PARK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIXEL PARK LLC	**c** EIN-PN	80-0893326-501
a Plan name	PIZANOS PARTNERSHIP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIZANOS PARTNERSHIP LLC	**c** EIN-PN	84-1650037-501
a Plan name	PIZZA PARTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PIZZA PARTS LLC	**c** EIN-PN	46-4563369-501

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	PJ OPERATING SOCA BENEFIT PLAN		
b Name of plan sponsor	PJ OPERATING	**c** EIN-PN	34-1399289-501
a Plan name	PK FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PK FINANCIAL GROUP	**c** EIN-PN	34-1957830-501
a Plan name	PKI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PKI INC	**c** EIN-PN	35-2176398-501
a Plan name	PLA MOR LANES SOCA BENEFIT PLAN		
b Name of plan sponsor	PLA MOR LANES	**c** EIN-PN	34-1179651-501
a Plan name	PLANNERKATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLANNERKATE LLC	**c** EIN-PN	47-2871213-501
a Plan name	PLANNERS II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLANNERS II LLC	**c** EIN-PN	20-1963888-501
a Plan name	PLASTEAK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLASTEAK INC	**c** EIN-PN	34-1852725-502
a Plan name	PLASTIC SURGERY INSTITUTE OF DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	PLASTIC SURGERY INSTITUTE OF DAYTON	**c** EIN-PN	31-0961569-501
a Plan name	PLASTICS MACHINERY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PLASTICS MACHINERY GROUP	**c** EIN-PN	45-2423160-501
a Plan name	PLASTILENE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLASTILENE INC	**c** EIN-PN	86-1821917-501
a Plan name	PLASTIWIN CAPITAL EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	PLASTIWIN CAPITAL EQUIPMENT	**c** EIN-PN	27-5427477-502
a Plan name	PLATELET DISORDER SUPPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	PLATELET DISORDER SUPPORT	**c** EIN-PN	22-2611011-501

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	PLATFORM CEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	PLATFORM CEMENT	**c** EIN-PN	31-1523673-501
a Plan name	PLATINUM EXPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	PLATINUM EXPRESS	**c** EIN-PN	31-1073460-501
a Plan name	PLATINUM MARKETING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PLATINUM MARKETING GROUP	**c** EIN-PN	31-1812445-501
a Plan name	PLATINUM RECOVERY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLATINUM RECOVERY LLC	**c** EIN-PN	86-1564797-501
a Plan name	PLAZA VIEW INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLAZA VIEW INC	**c** EIN-PN	34-1044266-501
a Plan name	PLB AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLB AND ASSOCIATES LLC	**c** EIN-PN	46-3505371-501
a Plan name	PLEASANT RDG PET HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PLEASANT RDG PET HOSPITAL	**c** EIN-PN	31-1692362-501
a Plan name	PLEASANT VALLEY TRANSPORT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLEASANT VALLEY TRANSPORT, LLC	**c** EIN-PN	81-4833301-501
a Plan name	PLEASANT VIEW BUILDING SERVICES AND SUPPLY CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	PLEASANT VIEW BUILDING SERVICES AND SUPPLY CO.	**c** EIN-PN	34-0876444-501
a Plan name	PLUMBING 911 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PLUMBING 911 INC	**c** EIN-PN	80-0304075-501
a Plan name	PLUS TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PLUS TECHNOLOGIES	**c** EIN-PN	27-4845414-501
a Plan name	PLX FREIGHT SOCA BENEFIT PLAN		
b Name of plan sponsor	PLX FREIGHT	**c** EIN-PN	83-2862903-501

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	PM TITLE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PM TITLE LLC	**c** EIN-PN	46-4924146-501
a Plan name	PME OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PME OF OHIO	**c** EIN-PN	31-1738968-501
a Plan name	POCO MOCO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POCO MOCO LLC	**c** EIN-PN	84-3930388-501
a Plan name	PODOJIL BUILDERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PODOJIL BUILDERS INC	**c** EIN-PN	34-1266932-501
a Plan name	POFF TRUCKING CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	POFF TRUCKING CORPORATION	**c** EIN-PN	41-2916177-501
a Plan name	POHLAR CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POHLAR CONSTRUCTION LLC	**c** EIN-PN	46-4119096-502
a Plan name	POINT OF SALE INNOVATION INC OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	POINT OF SALE INNOVATION INC OHIO	**c** EIN-PN	26-0631289-501
a Plan name	POLARIS LOGISTICS GROUP, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	POLARIS LOGISTICS GROUP, INC.	**c** EIN-PN	46-2294551-501
a Plan name	POLARIS MMA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POLARIS MMA LLC	**c** EIN-PN	83-1715339-501
a Plan name	POLING FOOD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	POLING FOOD INC	**c** EIN-PN	27-3098893-501
a Plan name	POLLAK TECH SERVS SOCA BENEFIT PLAN		
b Name of plan sponsor	POLLAK TECH SERVS	**c** EIN-PN	20-2878551-501
a Plan name	POLYRHYTHM SOFTWARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POLYRHYTHM SOFTWARE LLC	**c** EIN-PN	92-0662370-501

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	POMACON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	POMACON INC	**c** EIN-PN	34-1474577-501
a Plan name	POMME COMMUNICATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POMME COMMUNICATIONS LLC	**c** EIN-PN	47-2287066-501
a Plan name	PONDI'S INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PONDIS INC.	**c** EIN-PN	80-0606599-501
a Plan name	PONDSCAPE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PONDSCAPE, LLC	**c** EIN-PN	03-0611837-501
a Plan name	PONDVIEW VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	PONDVIEW VETERINARY CLINIC	**c** EIN-PN	82-5048865-501
a Plan name	PONSKY FACIAL AESTHETICS SOCA BENEFIT PLAN		
b Name of plan sponsor	PONSKY FACIAL AESTHETICS	**c** EIN-PN	81-1672236-501
a Plan name	PONTIAC ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PONTIAC ENTERPRISES INC	**c** EIN-PN	34-1875279-501
a Plan name	POORMAN MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	POORMAN MEDICAL	**c** EIN-PN	04-3679495-501
a Plan name	PORT CLINTON FISHERIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PORT CLINTON FISHERIES	**c** EIN-PN	34-1138737-501
a Plan name	PORT CONNEAUT FCU SOCA BENEFIT PLAN		
b Name of plan sponsor	PORT CONNEAUT FCU	**c** EIN-PN	34-0869655-501
a Plan name	PORTAGE LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTAGE LOGISTICS	**c** EIN-PN	26-4614811-501
a Plan name	PORTAGE TREE FARM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTAGE TREE FARM LLC	**c** EIN-PN	46-4738058-501

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	PORTER INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTER INDUSTRIES LLC	**c** EIN-PN	36-4976088-501
a Plan name	PORTERFIELD FARMS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTERFIELD FARMS, LLC	**c** EIN-PN	83-2727449-501
a Plan name	PORTEVER SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTEVER	**c** EIN-PN	35-2770419-501
a Plan name	PORTFOLIO VISION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTFOLIO VISION INC	**c** EIN-PN	34-1666577-501
a Plan name	PORTHAS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTHAS INC	**c** EIN-PN	46-4940652-501
a Plan name	PORTSMOUTH AREA COC SOCA BENEFIT PLAN		
b Name of plan sponsor	PORTSMOUTH AREA COC	**c** EIN-PN	31-1378689-501
a Plan name	POSITIVE ELECTRIC, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	POSITIVE ELECTRIC, INC	**c** EIN-PN	30-0365868-501
a Plan name	POSITROL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	POSITROL, INC.	**c** EIN-PN	31-0854367-501
a Plan name	POST HOUSE CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	POST HOUSE CREATIVE	**c** EIN-PN	27-3080276-501
a Plan name	POSTALI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POSTALI LLC	**c** EIN-PN	27-0562487-501
a Plan name	POVERELLO FEDERAL CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	POVERELLO FEDERAL CREDIT UNION	**c** EIN-PN	34-6532277-501
a Plan name	POWELL DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	POWELL DENTAL	**c** EIN-PN	20-1932459-502

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	POWELL ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	POWELL ENTERPRISES INC	**c** EIN-PN	31-1620227-501
a Plan name	POWELL PERFORMANCE AUTOS SOCA BENEFIT PLAN		
b Name of plan sponsor	POWELL PERFORMANCE AUTOS	**c** EIN-PN	20-2680770-501
a Plan name	POWERED BY IMPACT SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERED BY IMPACT	**c** EIN-PN	87-4270388-501
a Plan name	POWERHOUSE ELECTRIC SUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERHOUSE ELECTRIC SUPPLY LLC	**c** EIN-PN	20-4157931-501
a Plan name	POWERMERS SMART INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERMERS SMART INDUSTRIES INC	**c** EIN-PN	88-4424414-501
a Plan name	POWERS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERS AGENCY	**c** EIN-PN	31-1161871-501
a Plan name	POWERS CONSULTING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERS CONSULTING SERVICES	**c** EIN-PN	31-1605740-501
a Plan name	POWERSONIC INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	POWERSONIC INDUSTRIES LLC	**c** EIN-PN	46-5341235-502
a Plan name	PP AND G OIL CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PP AND G OIL CO LLC	**c** EIN-PN	31-1390567-501
a Plan name	PPA AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PPA AGENCY LLC	**c** EIN-PN	87-3779113-501
a Plan name	PQ FOOTWEAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PQ FOOTWEAR LLC	**c** EIN-PN	92-2677360-501
a Plan name	PREBLE COUNTY DIST LIBRARY SOCA BENEFIT PLAN		
b Name of plan sponsor	PREBLE COUNTY DIST LIBRARY	**c** EIN-PN	31-0646284-501

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	PREBLE MEMORY GARDENS SOCA BENEFIT PLAN		
b Name of plan sponsor	PREBLE MEMORY GARDENS	**c** EIN-PN	85-1852957-501
a Plan name	PRECISE AUTOMATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISE AUTOMATION LLC	**c** EIN-PN	20-5227885-501
a Plan name	PRECISION AG, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION AG, LLC	**c** EIN-PN	27-4977045-501
a Plan name	PRECISION ALLOY SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION ALLOY SERVICES INC	**c** EIN-PN	26-2787126-501
a Plan name	PRECISION CUT FABRICATING SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION CUT FABRICATING	**c** EIN-PN	34-1891855-501
a Plan name	PRECISION DENTAL LAB SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION DENTAL LAB	**c** EIN-PN	26-2736547-501
a Plan name	PRECISION DETAILS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION DETAILS INC.	**c** EIN-PN	34-1599719-501
a Plan name	PRECISION EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION EXCAVATING	**c** EIN-PN	34-1925254-501
a Plan name	PRECISION FACILITY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION FACILITY GROUP	**c** EIN-PN	85-3429926-501
a Plan name	PRECISION GLASS AND SHOWER SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION GLASS AND SHOWER	**c** EIN-PN	27-3120642-501
a Plan name	PRECISION HEALTH AND WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION HEALTH AND WELLNESS	**c** EIN-PN	88-2855645-501
a Plan name	PRECISION NEW MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION NEW MEDIA	**c** EIN-PN	27-3002846-501

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	PRECISION PRO GOLF SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION PRO GOLF	**c** EIN-PN	81-4918960-501
a Plan name	PRECISION REFLEX, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION REFLEX, INC.	**c** EIN-PN	34-1235562-501
a Plan name	PRECISION REPLACEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION REPLACEMENT	**c** EIN-PN	26-0081164-501
a Plan name	PRECISION SEVEN CONSTRUCTION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION SEVEN CONSTRUCTION, LLC	**c** EIN-PN	30-0833753-501
a Plan name	PRECISION SITEWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION SITEWORK	**c** EIN-PN	31-1779588-501
a Plan name	PRECISION TILE AND STONE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRECISION TILE AND STONE, LLC	**c** EIN-PN	47-1800738-501
a Plan name	PREFERRED ABRASIVES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PREFERRED ABRASIVES, INC.	**c** EIN-PN	31-1808849-501
a Plan name	PREFERRED HOME COMFORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PREFERRED HOME COMFORT LLC	**c** EIN-PN	46-4651414-501
a Plan name	PREFERRED REAL ESTATE SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PREFERRED REAL ESTATE SERVICES LLC	**c** EIN-PN	45-3911681-501
a Plan name	PREGNANT POSSIBILITIES CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	PREGNANT POSSIBILITIES CTR	**c** EIN-PN	47-2882533-501
a Plan name	PREMIER 1 POOL AND PATIO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER 1 POOL AND PATIO LLC	**c** EIN-PN	93-2810917-501
a Plan name	PREMIER ANESTHESIA OF SANDUSKY SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER ANESTHESIA OF SANDUSKY	**c** EIN-PN	20-0051808-502

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	PREMIER AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER AUTO BODY	**c** EIN-PN	46-2313571-501
a Plan name	PREMIER BEHAVIORAL HEALTH SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER BEHAVIORAL HEALTH SERVICES	**c** EIN-PN	26-2416346-501
a Plan name	PREMIER COUNTERTOP SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER COUNTERTOP SALES	**c** EIN-PN	81-3995560-501
a Plan name	PREMIER CROP INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER CROP INSURANCE	**c** EIN-PN	27-0906527-502
a Plan name	PREMIER EXEC CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER EXEC CONSULTANTS	**c** EIN-PN	65-0394668-502
a Plan name	PREMIER GENERAL CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER GENERAL CONSTRUCTION	**c** EIN-PN	26-3833463-501
a Plan name	PREMIER HEARING HC CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER HEARING HC CENTER	**c** EIN-PN	27-2489050-501
a Plan name	PREMIER INSULATION CONTRACTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER INSULATION CONTRACTING INC	**c** EIN-PN	34-1915841-501
a Plan name	PREMIER MANUFACTURING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER MANUFACTURING GROUP	**c** EIN-PN	99-2690150-501
a Plan name	PREMIER PLANNING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER PLANNING GROUP	**c** EIN-PN	85-2382467-501
a Plan name	PREMIER RENAL CARE ASSOCIATES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER RENAL CARE ASSOCIATES, LLC	**c** EIN-PN	88-0655493-501
a Plan name	PREMIER RENTAL-PURCHASE SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER RENTAL-PURCHASE	**c** EIN-PN	20-1802826-501

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	PREMIER TUMBLING AND DANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIER TUMBLING AND DANCE	**c** EIN-PN	42-1661710-501
a Plan name	PREMIUM AGRICULTURAL COMMODITIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIUM AGRICULTURAL COMMODITIES	**c** EIN-PN	31-0865503-501
a Plan name	PREMIUM MEATS SOCA BENEFIT PLAN		
b Name of plan sponsor	PREMIUM MEATS	**c** EIN-PN	34-1456036-501
a Plan name	PRESCRIBE FIT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESCRIBE FIT LLC	**c** EIN-PN	82-1112064-501
a Plan name	PRESSLERS MEATS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESSLERS MEATS INC	**c** EIN-PN	34-1192628-501
a Plan name	PRESTIGE BUILDER GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESTIGE BUILDER GROUP LLC	**c** EIN-PN	85-3552645-501
a Plan name	PRESTIGE CAPITAL MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESTIGE CAPITAL MANAGEMENT LLC	**c** EIN-PN	84-3466273-501
a Plan name	PRESTIGE PROPERTY MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESTIGE PROPERTY MGMT	**c** EIN-PN	82-1451679-501
a Plan name	PRESTIGE STONE SOCA BENEFIT PLAN		
b Name of plan sponsor	PRESTIGE STONE	**c** EIN-PN	47-1006005-501
a Plan name	PRETEK GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	PRETEK GROUP	**c** EIN-PN	26-4179459-501
a Plan name	PRETZEL HAUS SOCA BENEFIT PLAN		
b Name of plan sponsor	PRETZEL HAUS	**c** EIN-PN	26-0713956-501
a Plan name	PREVENTIONFIRST SOCA BENEFIT PLAN		
b Name of plan sponsor	PREVENTIONFIRST	**c** EIN-PN	31-1474841-501

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	PRICE HILL WILL SOCA BENEFIT PLAN		
b Name of plan sponsor	PRICE HILL WILL	**c** EIN-PN	20-1452663-501
a Plan name	PRIDESTAFF SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIDESTAFF	**c** EIN-PN	82-3953966-501
a Plan name	PRIMAS RENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIMAS RENTAL LLC	**c** EIN-PN	45-3760151-501
a Plan name	PRIME IV HYDRATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIME IV HYDRATION	**c** EIN-PN	87-2229808-501
a Plan name	PRIME LIGHTING SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIME LIGHTING	**c** EIN-PN	84-3201372-501
a Plan name	PRIME TECHNICAL SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIME TECHNICAL SERVICES INC	**c** EIN-PN	74-3252594-501
a Plan name	PRIME TIME PARTY RENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIME TIME PARTY RENTAL	**c** EIN-PN	84-2428423-501
a Plan name	PRIMOPADS SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIMOPADS	**c** EIN-PN	82-1117863-501
a Plan name	PRINTSWIFT, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRINTSWIFT, LLC	**c** EIN-PN	85-3367625-501
a Plan name	PRIORITY NATIONAL TITLE SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIORITY NATIONAL TITLE SERVICES, INC.	**c** EIN-PN	27-1528298-501
a Plan name	PRISMA INTEGRATION CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PRISMA INTEGRATION CORPORATION	**c** EIN-PN	61-1844382-501
a Plan name	PRITT ENTERTAINMENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRITT ENTERTAINMENT GROUP LLC	**c** EIN-PN	26-3863514-501

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	PRIVIT SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIVIT	**c** EIN-PN	46-2373938-501
a Plan name	PRIZMED IMAGING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	PRIZMED IMAGING SOLUTIONS	**c** EIN-PN	83-4593359-501
a Plan name	PRO DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO DESIGN LLC	**c** EIN-PN	20-8514521-501
a Plan name	PRO EDGE LAWN CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO EDGE LAWN CARE	**c** EIN-PN	20-8948208-501
a Plan name	PRO GRAPHICS NETWORK SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO GRAPHICS NETWORK	**c** EIN-PN	34-1985911-501
a Plan name	PRO MAINTENANCE GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO MAINTENANCE GROUP LLC	**c** EIN-PN	45-4098792-501
a Plan name	PRO MECHANICAL SERVICES CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO MECHANICAL SERVICES CO	**c** EIN-PN	82-5329063-501
a Plan name	PRO ROOFING & SIDING RESTORATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO ROOFING & SIDING RESTORATION LLC	**c** EIN-PN	88-1816186-501
a Plan name	PRO TEC INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PRO TEC INDUSTRIES INC	**c** EIN-PN	34-1730754-501
a Plan name	PROACTIVE BEHAVIOR SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	PROACTIVE BEHAVIOR SERVICES	**c** EIN-PN	47-2276242-501
a Plan name	PROBAKE SOCA BENEFIT PLAN		
b Name of plan sponsor	PROBAKE	**c** EIN-PN	34-1303690-501
a Plan name	PROCAMPS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROCAMPS INC	**c** EIN-PN	45-2562041-501

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	PROCESS DYNAMICS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PROCESS DYNAMICS, INC.	**c** EIN-PN	34-1971380-501
a Plan name	PROCESS OHIO CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	PROCESS OHIO CORPORATION	**c** EIN-PN	85-3811364-501
a Plan name	PROCUREDESK LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROCUREDESK LLC	**c** EIN-PN	83-0652488-501
a Plan name	PRODIGY PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODIGY PROPERTIES	**c** EIN-PN	41-2175710-501
a Plan name	PRODIGY STUDENT TRAVEL SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODIGY STUDENT TRAVEL	**c** EIN-PN	31-1710685-501
a Plan name	PRODUCE PERKS MIDWEST, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCE PERKS MIDWEST, INC.	**c** EIN-PN	47-5000763-501
a Plan name	PRODUCTION PACKAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCTION PACKAGING	**c** EIN-PN	34-1752912-501
a Plan name	PRODUCTION PLUS CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCTION PLUS CORP	**c** EIN-PN	31-0951925-501
a Plan name	PRODUCTION SUPPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCTION SUPPORT	**c** EIN-PN	31-1697805-501
a Plan name	PRODUCTION TOOL CO SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCTION TOOL CO	**c** EIN-PN	34-1237770-501
a Plan name	PRODUCTION TUBE CUTTING SOCA BENEFIT PLAN		
b Name of plan sponsor	PRODUCTION TUBE CUTTING	**c** EIN-PN	31-0618361-501
a Plan name	PROF PLUMBING HEAT AND AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	PROF PLUMBING HEAT AND AIR	**c** EIN-PN	34-1818995-501

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	PROFANT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROFANT INC	**c** EIN-PN	20-5223904-501
a Plan name	PROFERO TEAM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROFERO TEAM LLC	**c** EIN-PN	45-4554955-501
a Plan name	PROFESSIONAL NDE SERVICES GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONAL NDE SERVICES GROUP LLC	**c** EIN-PN	82-2970191-501
a Plan name	PROFESSIONAL PSYCHIATRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONAL PSYCHIATRIC	**c** EIN-PN	20-2261314-501
a Plan name	PROFESSIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONS INC	**c** EIN-PN	31-0844415-501
a Plan name	PROGRESSIVE FIGHTING SYST SOCA BENEFIT PLAN		
b Name of plan sponsor	PROGRESSIVE FIGHTING SYST	**c** EIN-PN	27-4674951-501
a Plan name	PROGRESSIVE HEALTH AND REHAB CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	PROGRESSIVE HEALTH AND REHAB CORP	**c** EIN-PN	30-0100418-501
a Plan name	PROGRESSIVE LAND TITLE AGENCY LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	PROGRESSIVE LAND TITLE AGENCY LTD	**c** EIN-PN	45-0509509-501
a Plan name	PROGRESSIVE MOLDING TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	PROGRESSIVE MOLDING TECH	**c** EIN-PN	37-1429648-501
a Plan name	PROJECT MKC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROJECT MKC	**c** EIN-PN	27-3159463-501
a Plan name	PROJITECH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROJITECH INC	**c** EIN-PN	46-4188161-501
a Plan name	PROLINE HIDDEN FENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	PROLINE HIDDEN FENCE	**c** EIN-PN	31-1601138-501

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	PROMAC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PROMAC, INC.	**c** EIN-PN	31-0798623-501
a Plan name	PROMARK SOCA BENEFIT PLAN		
b Name of plan sponsor	PROMARK	**c** EIN-PN	20-4445622-501
a Plan name	PROMILL MANUFACTURING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROMILL MANUFACTURING LLC	**c** EIN-PN	26-1075354-501
a Plan name	PROMUSICA CHAMBER SOCA BENEFIT PLAN		
b Name of plan sponsor	PROMUSICA CHAMBER	**c** EIN-PN	31-0952873-501
a Plan name	PROPERTY INVESTMENT CO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROPERTY INVESTMENT CO, LLC	**c** EIN-PN	34-1049430-501
a Plan name	PROPERTY MANAGEMENT SVCS SOCA BENEFIT PLAN		
b Name of plan sponsor	PROPERTY MANAGEMENT SVCS	**c** EIN-PN	32-0480990-501
a Plan name	PROSIGN STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	PROSIGN STUDIO	**c** EIN-PN	90-1080063-501
a Plan name	PROSPECT HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	PROSPECT HOUSE	**c** EIN-PN	31-0789292-501
a Plan name	PROSPECT STREAM SOFTWARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROSPECT STREAM SOFTWARE INC	**c** EIN-PN	92-1306562-501
a Plan name	PROTECH ELECTRICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PROTECH ELECTRICAL	**c** EIN-PN	30-0345433-501
a Plan name	PROTECH SECURITY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROTECH SECURITY INC	**c** EIN-PN	34-1686982-501
a Plan name	PROTOCOL COMMUNICATIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PROTOCOL COMMUNICATIONS, INC.	**c** EIN-PN	31-1199872-501

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	PROVIDENT UNITED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROVIDENT UNITED LLC	**c** EIN-PN	47-4059440-501
a Plan name	PROVIDER REAL ESTATE PART SOCA BENEFIT PLAN		
b Name of plan sponsor	PROVIDER REAL ESTATE PART	**c** EIN-PN	85-2940542-501
a Plan name	PROWANT SPECIALITY CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PROWANT SPECIALITY CO INC	**c** EIN-PN	34-1897531-501
a Plan name	PROXIMITY MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	PROXIMITY MARKETING	**c** EIN-PN	34-1853499-501
a Plan name	PRUSA CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	PRUSA CONSTRUCTION	**c** EIN-PN	34-1933277-501
a Plan name	PRUSAKS PRECISION CONST SOCA BENEFIT PLAN		
b Name of plan sponsor	PRUSAKS PRECISION CONST	**c** EIN-PN	34-1902870-501
a Plan name	PSARA TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PSARA TECHNOLOGIES INC	**c** EIN-PN	31-1182104-501
a Plan name	PSYCHO SOCIAL THERAPIES SOCA BENEFIT PLAN		
b Name of plan sponsor	PSYCHO SOCIAL THERAPIES	**c** EIN-PN	20-2105472-501
a Plan name	PTULA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PTULA LLC	**c** EIN-PN	81-3309758-501
a Plan name	PUFF N STUFF SOCA BENEFIT PLAN		
b Name of plan sponsor	PUFF N STUFF	**c** EIN-PN	26-4859760-501
a Plan name	PULLEYWORKS CAPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	PULLEYWORKS CAPITAL	**c** EIN-PN	31-1149178-501
a Plan name	PULMONARY MEDICINE OF DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	PULMONARY MEDICINE OF DAYTON	**c** EIN-PN	31-1337126-501

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	PULSAR ECO PRODUCTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PULSAR ECO PRODUCTS, LLC	**c** EIN-PN	34-1911257-501
a Plan name	PULSE BARRE & FITNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	PULSE BARRE & FITNESS	**c** EIN-PN	82-4647603-501
a Plan name	PUPS PARADISE SOCA BENEFIT PLAN		
b Name of plan sponsor	PUPS PARADISE	**c** EIN-PN	46-4253114-501
a Plan name	PURCHASING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	PURCHASING SERVICES	**c** EIN-PN	56-2531798-501
a Plan name	PURE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	PURE ELECTRIC	**c** EIN-PN	47-1787091-501
a Plan name	PURE OHIO DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	PURE OHIO DAYTON	**c** EIN-PN	84-2993718-501
a Plan name	PURE PROPERTY SOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	PURE PROPERTY SOLUTION	**c** EIN-PN	27-3060909-501
a Plan name	PUROCLEAN SOCA BENEFIT PLAN		
b Name of plan sponsor	PUROCLEAN	**c** EIN-PN	84-2137015-501
a Plan name	PUROCLEAN SOCA BENEFIT PLAN		
b Name of plan sponsor	PUROCLEAN	**c** EIN-PN	26-3100879-501
a Plan name	PUTMAN PROPERTIES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	PUTMAN PROPERTIES, INC	**c** EIN-PN	34-1620758-501
a Plan name	PW PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	PW PARTNERS LLC	**c** EIN-PN	83-3323563-501
a Plan name	PYRAMID TREATING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	PYRAMID TREATING INC.	**c** EIN-PN	34-1776656-501

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	Q4 IMPACT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	Q4 IMPACT GROUP LLC	**c** EIN-PN	46-2929859-501
a Plan name	QDRO CONSULTANTS CO.,LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	QDRO CONSULTANTS CO.,LLC	**c** EIN-PN	34-1820650-501
a Plan name	QDRO PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	QDRO PARTNERS	**c** EIN-PN	81-3275682-501
a Plan name	QLEANAIR SCANDINAVIA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QLEANAIR SCANDINAVIA INC	**c** EIN-PN	35-2536077-501
a Plan name	QSTART SOCA BENEFIT PLAN		
b Name of plan sponsor	QSTART	**c** EIN-PN	26-2841066-501
a Plan name	QT EQUIPMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QT EQUIPMENT INC	**c** EIN-PN	34-1716527-501
a Plan name	QUAL IT RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	QUAL IT RESOURCES	**c** EIN-PN	82-0919389-501
a Plan name	QUALITY CABLE SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY CABLE SERVICES, INC	**c** EIN-PN	31-1578054-501
a Plan name	QUALITY ENVIRONMENTAL SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY ENVIRONMENTAL SERVICES INC	**c** EIN-PN	31-1372155-501
a Plan name	QUALITY MACHINE AND REPAIR, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY MACHINE AND REPAIR, INC.	**c** EIN-PN	26-1305878-501
a Plan name	QUALITY MACHINING AND MFG SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY MACHINING AND MFG	**c** EIN-PN	35-1901664-501
a Plan name	QUALITY MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY MANUFACTURING	**c** EIN-PN	31-0865268-501

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	QUALITY MASONRY SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY MASONRY	**c** EIN-PN	34-1548254-501
a Plan name	QUALITY PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY PEST CONTROL	**c** EIN-PN	31-1168718-502
a Plan name	QUALITY PRODUCTS AND SVCS SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY PRODUCTS AND SVCS	**c** EIN-PN	31-1221015-501
a Plan name	QUALITY RUBBER STAMPS SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY RUBBER STAMPS	**c** EIN-PN	31-0978018-501
a Plan name	QUALITY WINDOW SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUALITY WINDOW SYSTEMS INC	**c** EIN-PN	31-1608797-501
a Plan name	QUANTA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUANTA LLC	**c** EIN-PN	83-2326476-501
a Plan name	QUASAR ENERGY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	QUASAR ENERGY GROUP	**c** EIN-PN	20-3999204-501
a Plan name	QUEEN CITY BAKERS SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY BAKERS	**c** EIN-PN	83-1546856-501
a Plan name	QUEEN CITY MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY MANUFACTURING	**c** EIN-PN	92-0775816-501
a Plan name	QUEEN CITY PARTNERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY PARTNERS, INC	**c** EIN-PN	20-3535771-501
a Plan name	QUEEN CITY RARE COIN SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY RARE COIN	**c** EIN-PN	83-3251258-501
a Plan name	QUEEN CITY RESTAURANT SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY RESTAURANT SUPPLY	**c** EIN-PN	47-4556104-501

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	QUEEN CITY SAUSAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY SAUSAGE	**c** EIN-PN	31-0686427-501
a Plan name	QUEEN EXHIBITS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEEN EXHIBITS LLC	**c** EIN-PN	83-3285996-501
a Plan name	QUEENSGATE TRUCK CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEENSGATE TRUCK CENTER	**c** EIN-PN	31-0869395-501
a Plan name	QUEST RECOVERY CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	QUEST RECOVERY CENTER LLC	**c** EIN-PN	84-3729943-501
a Plan name	QUICK MARKETS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	QUICK MARKETS, INC.	**c** EIN-PN	31-0811617-501
a Plan name	QUICK TANK LINES SOCA BENEFIT PLAN		
b Name of plan sponsor	QUICK TANK LINES	**c** EIN-PN	26-3371851-501
a Plan name	QUINN MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	QUINN MANAGEMENT	**c** EIN-PN	87-3419289-501
a Plan name	QXSOFT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	QXSOFT LLC	**c** EIN-PN	84-4173111-501
a Plan name	R & D INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R & D INDUSTRIES LLC	**c** EIN-PN	84-3902353-501
a Plan name	R & D SCHLESSMAN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R & D SCHLESSMAN, LLC	**c** EIN-PN	34-1883921-501
a Plan name	R & L HYDRAULICS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R & L HYDRAULICS INC	**c** EIN-PN	31-1281347-501
a Plan name	R & M PRICE ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	R & M PRICE ENTERPRISES	**c** EIN-PN	31-1812534-501

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

a Plan name	R & S LINES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R & S LINES INC	**c** EIN-PN	34-1575402-501
a Plan name	R A B TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R A B TRUCKING INC	**c** EIN-PN	20-2800222-501
a Plan name	R AND D SUPERIOR CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	R AND D SUPERIOR CONCRETE	**c** EIN-PN	86-3040829-501
a Plan name	R AND M FLUID POWER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R AND M FLUID POWER INC	**c** EIN-PN	34-1255321-501
a Plan name	R D ENERGY SOCA BENEFIT PLAN		
b Name of plan sponsor	R D ENERGY	**c** EIN-PN	20-2177002-501
a Plan name	R KELLY CONSTRUCTORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R KELLY CONSTRUCTORS LLC	**c** EIN-PN	45-2649519-501
a Plan name	R S LANDSCAPING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R S LANDSCAPING INC	**c** EIN-PN	26-0825784-501
a Plan name	R STRATEGY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	R STRATEGY GROUP	**c** EIN-PN	27-2102851-501
a Plan name	R&M CONTROLS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R&M CONTROLS LLC	**c** EIN-PN	82-0944014-501
a Plan name	R&R PAVING SOCA BENEFIT PLAN		
b Name of plan sponsor	R&R PAVING	**c** EIN-PN	34-1959344-501
a Plan name	R&R RESTAURANT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	R&R RESTAURANT GROUP	**c** EIN-PN	45-4976163-501
a Plan name	R.J. VERNAK REFRIGERATION SOCA BENEFIT PLAN		
b Name of plan sponsor	R.J. VERNAK REFRIGERATION	**c** EIN-PN	45-0528986-501

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	R1G MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R1G MANAGEMENT LLC	**c** EIN-PN	85-4005670-501
a Plan name	R2D2 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	R2D2 INC	**c** EIN-PN	31-1408840-501
a Plan name	R2O CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	R2O CONSULTING LLC	**c** EIN-PN	81-5380057-501
a Plan name	RA COOKS RENOVATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RA COOKS RENOVATIONS LLC	**c** EIN-PN	46-4944045-501
a Plan name	RACHELLE BOUDREAU DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RACHELLE BOUDREAU DDS INC	**c** EIN-PN	31-1764159-501
a Plan name	RACKLEY PAINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	RACKLEY PAINTING	**c** EIN-PN	30-0199617-501
a Plan name	RACO MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	RACO MECHANICAL	**c** EIN-PN	30-0685405-501
a Plan name	RAD AIR SERVICE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAD AIR SERVICE CENTER INC	**c** EIN-PN	31-1509875-501
a Plan name	RAD TECH SERVICE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAD TECH SERVICE, INC	**c** EIN-PN	31-1340282-501
a Plan name	RADCOM SOCA BENEFIT PLAN		
b Name of plan sponsor	RADCOM	**c** EIN-PN	34-1845398-501
a Plan name	RADEBAUGH & COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	RADEBAUGH & COMPANY	**c** EIN-PN	31-1395233-501
a Plan name	RADHA FOOD AND GAS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RADHA FOOD AND GAS INC.	**c** EIN-PN	56-2525083-501

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	RADIANCE FAMILY DENTISTRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RADIANCE FAMILY DENTISTRY LLC	**c** EIN-PN	92-2539416-501
a Plan name	RADIANT DIVINE MED SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	RADIANT DIVINE MED SPA	**c** EIN-PN	81-5190025-501
a Plan name	RADIANT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	RADIANT SOLUTIONS	**c** EIN-PN	26-0178280-501
a Plan name	RADIORESEARCH.COM SOCA BENEFIT PLAN		
b Name of plan sponsor	RADIORESEARCH.COM	**c** EIN-PN	31-1629129-501
a Plan name	RADI-O-SOUND COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	RADI-O-SOUND COMMUNICATIONS	**c** EIN-PN	34-1617903-502
a Plan name	RADON TECHNOLOGIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RADON TECHNOLOGIES INC	**c** EIN-PN	31-1380275-501
a Plan name	RAFTER A, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	RAFTER A, LTD	**c** EIN-PN	06-1728106-501
a Plan name	RAIDER TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAIDER TECHNOLOGIES LLC	**c** EIN-PN	92-1405491-501
a Plan name	RAILROAD CUSTOMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAILROAD CUSTOMS LLC	**c** EIN-PN	84-2529823-501
a Plan name	RAILROAD TRACK SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	RAILROAD TRACK SOLUTIONS	**c** EIN-PN	02-0750026-501
a Plan name	RAIN ONE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RAIN ONE, INC.	**c** EIN-PN	31-1452651-501
a Plan name	RAINBOW DATA SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	RAINBOW DATA SYSTEMS	**c** EIN-PN	31-1524558-501

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	RAINBOW ENVIRONMENTAL SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	RAINBOW ENVIRONMENTAL SERV	**c** EIN-PN	31-1306695-501
a Plan name	RAINBOW POOL & SUPPLIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAINBOW POOL & SUPPLIES INC	**c** EIN-PN	31-1179718-501
a Plan name	RAINBOW SPRINKLER SYSTEMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAINBOW SPRINKLER SYSTEMS LLC	**c** EIN-PN	88-0729824-501
a Plan name	RAL PROPERTY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	RAL PROPERTY MANAGEMENT	**c** EIN-PN	45-4187548-501
a Plan name	RALLAR ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RALLAR ENTERPRISES INC	**c** EIN-PN	26-0000903-501
a Plan name	RALSTON ART MEMORIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	RALSTON ART MEMORIAL	**c** EIN-PN	83-4358394-501
a Plan name	RALSTON FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RALSTON FARMS LLC	**c** EIN-PN	81-1529924-501
a Plan name	RAMM FENCE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	RAMM FENCE SYSTEMS	**c** EIN-PN	34-1734145-501
a Plan name	RAMSEY ROOFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAMSEY ROOFING LLC	**c** EIN-PN	26-1854873-501
a Plan name	RAMSEY ROONEY SOCA BENEFIT PLAN		
b Name of plan sponsor	RAMSEY ROONEY	**c** EIN-PN	34-1908129-501
a Plan name	RANCKS LIQUID TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RANCKS LIQUID TRANSPORT LLC	**c** EIN-PN	46-2415159-501
a Plan name	RANDAL A LOWRY CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	RANDAL A LOWRY CO LPA	**c** EIN-PN	34-1437526-501

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	RANDALL RICHARD AND MOORE LLC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RANDALL RICHARD AND MOORE LLC	**c** EIN-PN	34-1875664-501
a	Plan name	RANDOLPH DIRECT, LLC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RANDOLPH DIRECT, LLC	**c** EIN-PN	73-1674116-501
a	Plan name	RANDY MOORE PETROLEUM DISTRIBUTION LLC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RANDY MOORE PETROLEUM DISTRIBUTION LLC	**c** EIN-PN	31-1001680-501
a	Plan name	RANDY TIRE AND AUTO REPAIR SOCA BENEFIT PLAN		
b	Name of plan sponsor	RANDY TIRE AND AUTO REPAIR	**c** EIN-PN	34-1860349-501
a	Plan name	RANGELINE TRUCKING LLC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RANGELINE TRUCKING LLC	**c** EIN-PN	93-4817424-501
a	Plan name	RAP MANAGEMENT SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAP MANAGEMENT	**c** EIN-PN	35-2585869-501
a	Plan name	RAPHAELS SCHOOL OF BEAUTY CULTURE SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPHAELS SCHOOL OF BEAUTY CULTURE	**c** EIN-PN	34-1244083-501
a	Plan name	RAPID 2 WAY INC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPID 2 WAY INC	**c** EIN-PN	34-1914754-501
a	Plan name	RAPID DRAW SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPID DRAW	**c** EIN-PN	81-0576373-501
a	Plan name	RAPID MOLD REPAIR AND MACHINE INC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPID MOLD REPAIR AND MACHINE INC	**c** EIN-PN	34-1871234-501
a	Plan name	RAPID MR INTERNATIONAL LLC SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPID MR INTERNATIONAL LLC	**c** EIN-PN	20-5070597-501
a	Plan name	RAPID PLUMBING SOCA BENEFIT PLAN		
b	Name of plan sponsor	RAPID PLUMBING	**c** EIN-PN	31-0987925-502

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	RASOR MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	RASOR MARKETING	**c** EIN-PN	20-2405899-501
a Plan name	RAUSER & ASSOCIATES LEGAL CLINIC LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	RAUSER & ASSOCIATES LEGAL CLINIC LLP	**c** EIN-PN	34-1887235-501
a Plan name	RAYMOND BUILDERS SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	RAYMOND BUILDERS SUPPLY	**c** EIN-PN	34-0905636-501
a Plan name	RAYMOND CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	RAYMOND CHIROPRACTIC	**c** EIN-PN	26-1937671-501
a Plan name	RAYTEC SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	RAYTEC SYSTEMS	**c** EIN-PN	34-1528829-501
a Plan name	RC FABRICATING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RC FABRICATING, INC.	**c** EIN-PN	31-1560687-501
a Plan name	RCI ELECTRICAL SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RCI ELECTRICAL SOLUTIONS, LLC	**c** EIN-PN	45-0486476-501
a Plan name	RCM ARCHITECTS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RCM ARCHITECTS, INC	**c** EIN-PN	34-1603248-501
a Plan name	RD DENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RD DENTAL LLC	**c** EIN-PN	88-3180570-501
a Plan name	RDF TRUCKING ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	RDF TRUCKING ENTERPRISES	**c** EIN-PN	45-2438905-501
a Plan name	REACH MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	REACH MECHANICAL	**c** EIN-PN	88-1267587-501
a Plan name	REACHING ABOVE HOPELESSNESS AND BROKENNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	REACHING ABOVE HOPELESSNESS AND BROKENNESS	**c** EIN-PN	20-3285531-502

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	READING FEED & GARDEN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	READING FEED & GARDEN LLC	**c** EIN-PN	85-0644205-501
a Plan name	REAL ART DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	REAL ART DESIGN	**c** EIN-PN	31-1287976-501
a Plan name	REAL ESTATE RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	REAL ESTATE RESOURCES	**c** EIN-PN	61-1324619-501
a Plan name	REALE DOG TRAINING SOCA BENEFIT PLAN		
b Name of plan sponsor	REALE DOG TRAINING	**c** EIN-PN	84-2717584-501
a Plan name	REALM COLLABORATIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REALM COLLABORATIVE LLC	**c** EIN-PN	47-5263031-502
a Plan name	REALTOR ALLIANCE OF GREATER CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	REALTOR ALLIANCE OF GREATER CINCINNATI	**c** EIN-PN	31-0241030-501
a Plan name	REASER CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	REASER CONSTRUCTION	**c** EIN-PN	46-1070060-501
a Plan name	REBEL REBEL TATTOO SOCA BENEFIT PLAN		
b Name of plan sponsor	REBEL REBEL TATTOO	**c** EIN-PN	38-4025600-501
a Plan name	REBERLAND EQUIPMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REBERLAND EQUIPMENT INC	**c** EIN-PN	34-1301237-501
a Plan name	REC AT WAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REC AT WAR LLC	**c** EIN-PN	84-2338306-501
a Plan name	REC2CONNECT FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	REC2CONNECT FOUNDATION	**c** EIN-PN	47-1812391-501
a Plan name	RECASA FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	RECASA FINANCIAL GROUP	**c** EIN-PN	31-1666335-501

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	RECESS CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	RECESS CREATIVE	**c** EIN-PN	27-0957254-501
a Plan name	RECKER PROPERTY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RECKER PROPERTY LLC	**c** EIN-PN	20-2918031-501
a Plan name	RECO GENERAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	RECO GENERAL CONTRACTING	**c** EIN-PN	31-1436320-501
a Plan name	RECOVERY DEFINED SOCA BENEFIT PLAN		
b Name of plan sponsor	RECOVERY DEFINED	**c** EIN-PN	82-1099648-501
a Plan name	RECOVERY INSTITUTE OF OH SOCA BENEFIT PLAN		
b Name of plan sponsor	RECOVERY INSTITUTE OF OH	**c** EIN-PN	83-1529261-501
a Plan name	RECOVERY WORKS HOLDING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RECOVERY WORKS HOLDING COMPANY LLC	**c** EIN-PN	33-2113134-501
a Plan name	RED CARPET AUTOMOTIVE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RED CARPET AUTOMOTIVE, LLC	**c** EIN-PN	46-1845889-501
a Plan name	RED CARPET EVENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RED CARPET EVENTS LLC	**c** EIN-PN	46-4402385-501
a Plan name	RED CEDAR INVESTMENT MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	RED CEDAR INVESTMENT MGMT	**c** EIN-PN	46-2667997-501
a Plan name	RED TRAIN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RED TRAIN LLC	**c** EIN-PN	46-2696345-501
a Plan name	RED WING SHOE REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	RED WING SHOE REPAIR	**c** EIN-PN	34-1880602-501
a Plan name	REDBRICK FINANCIAL PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	REDBRICK FINANCIAL PARTNERS	**c** EIN-PN	84-4086928-501

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	REDDING INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	REDDING INSURANCE AGENCY	**c** EIN-PN	31-1338745-501
a Plan name	REDDINGTON PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REDDINGTON PARTNERS LLC	**c** EIN-PN	83-3230500-501
a Plan name	REDEMPTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REDEMPTION INC	**c** EIN-PN	87-0764349-501
a Plan name	REDEX INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REDEX INDUSTRIES INC	**c** EIN-PN	34-1217682-501
a Plan name	REDHAWK GLOBAL SOCA BENEFIT PLAN		
b Name of plan sponsor	REDHAWK GLOBAL	**c** EIN-PN	33-1021576-501
a Plan name	REDI-ROCK STRUCTURES SOCA BENEFIT PLAN		
b Name of plan sponsor	REDI-ROCK STRUCTURES	**c** EIN-PN	90-0067013-501
a Plan name	REDKEY EXPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	REDKEY EXPRESS	**c** EIN-PN	46-1684491-501
a Plan name	REDLINE ROOFINGS & COATINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REDLINE ROOFINGS & COATINGS, LLC	**c** EIN-PN	93-3685117-501
a Plan name	REDPOINT ENGINEERING CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	REDPOINT ENGINEERING CONSULTING	**c** EIN-PN	85-2850474-501
a Plan name	REDWALL TECHNOLOGIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REDWALL TECHNOLOGIES LLC	**c** EIN-PN	35-2474630-501
a Plan name	REEB AVENUE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	REEB AVENUE CENTER	**c** EIN-PN	46-3956659-501
a Plan name	REES FLOWERS AND GIFTS SOCA BENEFIT PLAN		
b Name of plan sponsor	REES FLOWERS AND GIFTS	**c** EIN-PN	31-0970767-501

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	REESE DISABILITY SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REESE DISABILITY SERVICES LLC	**c** EIN-PN	26-2735967-501
a Plan name	REFERIN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REFERIN INC	**c** EIN-PN	85-3636400-501
a Plan name	REFLECTIONS INTERIOR DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	REFLECTIONS INTERIOR DESIGN	**c** EIN-PN	26-3464582-501
a Plan name	REFRIGERATION CONTROL CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REFRIGERATION CONTROL CO INC	**c** EIN-PN	34-1586054-502
a Plan name	REGAL EQUIPMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REGAL EQUIPMENT INC	**c** EIN-PN	34-1703837-501
a Plan name	REGENERATION SCHOOLS OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	REGENERATION SCHOOLS OHIO	**c** EIN-PN	83-2110904-501
a Plan name	REGENT OIL AND CHEMICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	REGENT OIL AND CHEMICAL	**c** EIN-PN	34-0871810-501
a Plan name	REGIONAL CARDIAC ARRHYTHMIA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REGIONAL CARDIAC ARRHYTHMIA INC	**c** EIN-PN	81-3765920-501
a Plan name	REGIONAL EQUIPMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	REGIONAL EQUIPMENT SERVICES	**c** EIN-PN	34-1799387-501
a Plan name	REGIONAL EXCAVATION & DEV SOCA BENEFIT PLAN		
b Name of plan sponsor	REGIONAL EXCAVATION & DEV	**c** EIN-PN	84-3991791-501
a Plan name	REGIONAL IMAGING ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REGIONAL IMAGING ASSOCIATES INC	**c** EIN-PN	20-1714193-501
a Plan name	REICHERT EXCAVATING INC AND DANIEL REICHERT REALTY GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REICHERT EXCAVATING INC AND DANIEL REICHERT REALTY GROUP LLC	**c** EIN-PN	34-1637530-501

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	REICHLE KLEIN GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	REICHLE KLEIN GROUP	**c** EIN-PN	34-1738813-501
a Plan name	REIDENBACH LAW GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REIDENBACH LAW GROUP LLC	**c** EIN-PN	99-1850863-501
a Plan name	REINECKERS BAKERY LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	REINECKERS BAKERY LTD	**c** EIN-PN	34-1795173-501
a Plan name	REINHARDT SUPPLY COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	REINHARDT SUPPLY COMPANY	**c** EIN-PN	34-1307433-501
a Plan name	REJUVENATE HEALTHCARE SOCA BENEFIT PLAN		
b Name of plan sponsor	REJUVENATE HEALTHCARE	**c** EIN-PN	47-4447320-501
a Plan name	RELEQUINT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELEQUINT LLC	**c** EIN-PN	81-0822657-501
a Plan name	RELI ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELI ELECTRIC LLC	**c** EIN-PN	90-1141500-501
a Plan name	RELIABLE BUSINESS SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE BUSINESS SOLUTIONS	**c** EIN-PN	34-1946218-501
a Plan name	RELIABLE CONSULTING GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE CONSULTING GROUP	**c** EIN-PN	83-2006382-501
a Plan name	RELIABLE CONTAINERS SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE CONTAINERS	**c** EIN-PN	83-3202411-501
a Plan name	RELIABLE HAULING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE HAULING, LLC	**c** EIN-PN	85-1292394-501
a Plan name	RELIABLE INTEGRATED COMMUNICATION, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE INTEGRATED COMMUNICATION, LLC	**c** EIN-PN	26-2295980-501

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	RELIABLE STAFFING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE STAFFING SERVICES	**c** EIN-PN	20-5213555-503
a Plan name	RELIABLE TAX & BOOKKEEPING SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIABLE TAX & BOOKKEEPING	**c** EIN-PN	90-0422968-501
a Plan name	RELIANT SEARCH GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIANT SEARCH GROUP LLC	**c** EIN-PN	84-3750905-501
a Plan name	RELIANT STAFFING SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RELIANT STAFFING SOLUTIONS LLC	**c** EIN-PN	46-0566200-501
a Plan name	RELY-ON MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	RELY-ON MANUFACTURING	**c** EIN-PN	31-1140543-501
a Plan name	REM COMMUNICATIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	REM COMMUNICATIONS, INC.	**c** EIN-PN	31-1524570-501
a Plan name	REM INSTALLATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REM INSTALLATIONS LLC	**c** EIN-PN	20-0607676-501
a Plan name	REMAR REVIEW SOCA BENEFIT PLAN		
b Name of plan sponsor	REMAR REVIEW	**c** EIN-PN	27-4186880-501
a Plan name	REMARCABLE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	REMARCABLE, INC.	**c** EIN-PN	85-0532546-501
a Plan name	REMCO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REMCO INC	**c** EIN-PN	31-1576760-501
a Plan name	REMEMBER US URBAN SCOUTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REMEMBER US URBAN SCOUTS INC	**c** EIN-PN	84-1930874-501
a Plan name	REMODEL COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REMODEL COLUMBUS LLC	**c** EIN-PN	82-4783572-502

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	RENAISSANCE GARDEN ACCENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	RENAISSANCE GARDEN ACCENTS	**c** EIN-PN	84-3909600-501
a Plan name	RENAISSANCE RECONSTRUCTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	RENAISSANCE RECONSTRUCTIVE	**c** EIN-PN	31-1671524-502
a Plan name	RENAISSANCE TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	RENAISSANCE TECH	**c** EIN-PN	46-3207156-501
a Plan name	RENAL PHYSICIANS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RENAL PHYSICIANS, INC.	**c** EIN-PN	31-0821503-501
a Plan name	RENE MICHAEL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RENE MICHAEL INC	**c** EIN-PN	30-1615856-501
a Plan name	RENEGADE BRANDS SOCA BENEFIT PLAN		
b Name of plan sponsor	RENEGADE BRANDS	**c** EIN-PN	45-4978402-501
a Plan name	RENEGADE WAREHOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	RENEGADE WAREHOUSE	**c** EIN-PN	27-3414664-501
a Plan name	RENOGIZE PROFESSIONAL COACHING SOCA BENEFIT PLAN		
b Name of plan sponsor	RENOGIZE PROFESSIONAL COACHING	**c** EIN-PN	45-4412417-501
a Plan name	RENU VISION SOCA BENEFIT PLAN		
b Name of plan sponsor	RENU VISION	**c** EIN-PN	46-3267885-501
a Plan name	REPETA TRANSPORTATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REPETA TRANSPORTATION LLC	**c** EIN-PN	88-3194656-501
a Plan name	REPS RESOURCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REPS RESOURCE LLC	**c** EIN-PN	31-1779699-501
a Plan name	REPUBLIC MERCANTILE & ELEVATOR SOCA BENEFIT PLAN		
b Name of plan sponsor	REPUBLIC MERCANTILE & ELEVATOR	**c** EIN-PN	34-4338230-501

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	RES AUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	RES AUCTION SERVICES	**c** EIN-PN	26-3175949-501
a Plan name	RESCOM PROPERTY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	RESCOM PROPERTY SERVICES	**c** EIN-PN	46-2861897-502
a Plan name	RESCUE MISSION OF MAHONING VALLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	RESCUE MISSION OF MAHONING VALLEY	**c** EIN-PN	34-6006424-501
a Plan name	RESERVE MILLWORK, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RESERVE MILLWORK, INC.	**c** EIN-PN	34-1308684-501
a Plan name	RESOLUTE WEALTH ADVISOR, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RESOLUTE WEALTH ADVISOR, INC.	**c** EIN-PN	82-3396795-501
a Plan name	RESOURCE RECYCLING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RESOURCE RECYCLING INC.	**c** EIN-PN	26-3148131-501
a Plan name	RESPONSE FIRE PROTECTION SOCA BENEFIT PLAN		
b Name of plan sponsor	RESPONSE FIRE PROTECTION	**c** EIN-PN	20-5377237-501
a Plan name	RESTAVEK FREEDOM SOCA BENEFIT PLAN		
b Name of plan sponsor	RESTAVEK FREEDOM	**c** EIN-PN	20-8334578-501
a Plan name	RESTORATION 1 SOCA BENEFIT PLAN		
b Name of plan sponsor	RESTORATION 1	**c** EIN-PN	83-3890516-501
a Plan name	RESTORATION RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	RESTORATION RESOURCES	**c** EIN-PN	34-1789745-501
a Plan name	RESTORING OUR OWN THROUGH TRANSFORMATION SOCA BENEFIT PLAN		
b Name of plan sponsor	RESTORING OUR OWN THROUGH TRANSFORMATION	**c** EIN-PN	82-1964469-501
a Plan name	RETAIL APP PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	RETAIL APP PARTNERS	**c** EIN-PN	46-4706459-501

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	RETINA CARE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	RETINA CARE GROUP	**c** EIN-PN	31-1460051-501
a Plan name	RETIRE RIGHT WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	RETIRE RIGHT WEALTH MANAGEMENT	**c** EIN-PN	45-4623210-501
a Plan name	RETIREMENT PLANS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RETIREMENT PLANS INC	**c** EIN-PN	90-0734163-501
a Plan name	RETZAM SOCA BENEFIT PLAN		
b Name of plan sponsor	RETZAM	**c** EIN-PN	26-2355449-501
a Plan name	REVAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVAL LLC	**c** EIN-PN	81-4712919-501
a Plan name	REVELATE PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVELATE PARTNERS LLC	**c** EIN-PN	87-4601319-501
a Plan name	REVENANT GLOBAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVENANT GLOBAL LLC	**c** EIN-PN	99-1892558-501
a Plan name	REVERE ROOFING COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVERE ROOFING COMPANY INC	**c** EIN-PN	45-4171672-501
a Plan name	REVITALIZED BEHAVIORAL HEALTHCARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVITALIZED BEHAVIORAL HEALTHCARE LLC	**c** EIN-PN	84-4023810-501
a Plan name	REVIVE REAL ESTATE SOCA BENEFIT PLAN		
b Name of plan sponsor	REVIVE REAL ESTATE	**c** EIN-PN	82-4147500-501
a Plan name	REVOLUTION TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REVOLUTION TRUCKING LLC	**c** EIN-PN	83-3710079-501
a Plan name	REWORK FURNISHINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REWORK FURNISHINGS LLC	**c** EIN-PN	47-1333774-501

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	REXARC INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	REXARC INTERNATIONAL	**c** EIN-PN	31-1081408-502
a Plan name	REYNOLDS PROPERTIES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	REYNOLDS PROPERTIES, LLC	**c** EIN-PN	20-0071864-501
a Plan name	REYNOLDS-GARLAND HVAC SOCA BENEFIT PLAN		
b Name of plan sponsor	REYNOLDS-GARLAND HVAC	**c** EIN-PN	84-3665426-501
a Plan name	RF WOEHRMYER CONCRETE CONS SOCA BENEFIT PLAN		
b Name of plan sponsor	RF WOEHRMYER CONCRETE CONS	**c** EIN-PN	34-1525932-501
a Plan name	RFC CONTRACTING,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RFC CONTRACTING,INC	**c** EIN-PN	34-1791227-501
a Plan name	RFSD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RFSD LLC	**c** EIN-PN	99-2862266-501
a Plan name	RG ADOPTION CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	RG ADOPTION CONSULTING	**c** EIN-PN	46-3326630-501
a Plan name	RG AVIATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RG AVIATION LLC	**c** EIN-PN	83-1927205-501
a Plan name	RG LONG & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	RG LONG & ASSOCIATES	**c** EIN-PN	31-0966213-501
a Plan name	RGH RUMPKE CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RGH RUMPKE CO LLC	**c** EIN-PN	35-2253600-501
a Plan name	RHEMA CHRISTIAN CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	RHEMA CHRISTIAN CENTER	**c** EIN-PN	31-1062286-501
a Plan name	RHINO PEST CONTROL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RHINO PEST CONTROL, LLC	**c** EIN-PN	26-2510738-501

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	RHODEN MEMORIAL FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	RHODEN MEMORIAL FUNERAL HOME	**c** EIN-PN	34-1587553-501
a Plan name	RHODES EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RHODES EXCAVATING INC	**c** EIN-PN	85-4226297-501
a Plan name	RIALTO MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	RIALTO MANUFACTURING	**c** EIN-PN	31-1283879-501
a Plan name	RIC CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	RIC CONSTRUCTION	**c** EIN-PN	27-2650882-501
a Plan name	RICE AUTO BODY SOCA BENEFIT PLAN		
b Name of plan sponsor	RICE AUTO BODY	**c** EIN-PN	31-0900210-501
a Plan name	RICH MCCLURG & WILL MURRAY SOCA BENEFIT PLAN		
b Name of plan sponsor	RICH MCCLURG & WILL MURRAY	**c** EIN-PN	31-1784464-501
a Plan name	RICHARD A BARONE FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARD A BARONE FOUNDATION	**c** EIN-PN	80-0306290-501
a Plan name	RICHARD C. VEID, CPA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARD C. VEID, CPA LLC	**c** EIN-PN	54-2131378-501
a Plan name	RICHARD CIBIK ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARD CIBIK ENTERPRISES	**c** EIN-PN	82-0747229-501
a Plan name	RICHARDS APPLIANCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARDS APPLIANCE INC	**c** EIN-PN	20-1144529-501
a Plan name	RICHARDS AUTO SERVICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARDS AUTO SERVICE, LLC	**c** EIN-PN	83-0421691-501
a Plan name	RICHARDS MONUMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARDS MONUMENT	**c** EIN-PN	80-0359223-501

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	RICHARDS MOVING & STORAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARDS MOVING & STORAGE	**c** EIN-PN	34-1042110-501
a Plan name	RICHARDS TREE AND CRANE SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHARDS TREE AND CRANE	**c** EIN-PN	85-1050378-501
a Plan name	RICHFIELD BANQ AND CONF SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHFIELD BANQ AND CONF	**c** EIN-PN	26-0102911-501
a Plan name	RICHIES ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHIES ENTERPRISES LLC	**c** EIN-PN	47-2043453-501
a Plan name	RICHLAND LUMBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHLAND LUMBER COMPANY	**c** EIN-PN	34-0977020-501
a Plan name	RICHLAND SOURCE SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHLAND SOURCE	**c** EIN-PN	90-0924516-501
a Plan name	RICHPAK CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	RICHPAK CORPORATION	**c** EIN-PN	20-4762896-501
a Plan name	RICKETTS FARM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RICKETTS FARM INC	**c** EIN-PN	31-0892391-501
a Plan name	RICKS LIFETIME MUFFLER SOCA BENEFIT PLAN		
b Name of plan sponsor	RICKS LIFETIME MUFFLER	**c** EIN-PN	47-1104411-501
a Plan name	RIDGE CREEK GLOBAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIDGE CREEK GLOBAL INC	**c** EIN-PN	34-1794149-501
a Plan name	RIDGE PRECISION SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIDGE PRECISION SERVICES LLC	**c** EIN-PN	83-2781036-501
a Plan name	RIEGEL FINANCIAL INVESTMENT SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIEGEL FINANCIAL INVESTMENT SERVICES, LLC	**c** EIN-PN	46-1541298-501

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	RIETHMAN, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIETHMAN, INC	**c** EIN-PN	34-1793378-501
a Plan name	RIGHT & TIGHT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHT & TIGHT LLC	**c** EIN-PN	20-5809852-501
a Plan name	RIGHT CAPITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHT CAPITAL LLC	**c** EIN-PN	86-2134955-501
a Plan name	RIGHT NOW MOBILITY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHT NOW MOBILITY LLC	**c** EIN-PN	47-3842605-501
a Plan name	RIGHT PATH RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHT PATH RECOVERY	**c** EIN-PN	86-0605320-501
a Plan name	RIGHT WAY HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHT WAY HEATING AND COOLING	**c** EIN-PN	81-1158994-501
a Plan name	RIGHTWEALTH ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	RIGHTWEALTH ADVISORS	**c** EIN-PN	83-3153732-502
a Plan name	RILEY PETROLEUM PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RILEY PETROLEUM PRODUCTS LLC	**c** EIN-PN	30-0138347-501
a Plan name	RINEAIR HVAC SOCA BENEFIT PLAN		
b Name of plan sponsor	RINEAIR HVAC	**c** EIN-PN	20-1005572-501
a Plan name	RION RION AND RION LPA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RION RION AND RION LPA INC	**c** EIN-PN	31-1591366-501
a Plan name	RISHER AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	RISHER AND COMPANY	**c** EIN-PN	34-0753182-501
a Plan name	RISING STAR TALENT PROD SOCA BENEFIT PLAN		
b Name of plan sponsor	RISING STAR TALENT PROD	**c** EIN-PN	31-1191306-501

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	RISK COMPLIANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	RISK COMPLIANCE GROUP	**c** EIN-PN	81-2577505-503
a Plan name	RISKVERSITY SOCA BENEFIT PLAN		
b Name of plan sponsor	RISKVERSITY	**c** EIN-PN	47-4902409-501
a Plan name	RITECARE MEDICAL TRANSPORT SOCA BENEFIT PLAN		
b Name of plan sponsor	RITECARE MEDICAL TRANSPORT	**c** EIN-PN	81-1121167-501
a Plan name	RITTER AND RANDOLPH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RITTER AND RANDOLPH LLC	**c** EIN-PN	31-0921225-501
a Plan name	RITTGERS AND RITTGERS SOCA BENEFIT PLAN		
b Name of plan sponsor	RITTGERS AND RITTGERS	**c** EIN-PN	82-2818503-501
a Plan name	RITTMAN AUTOMOTIVE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RITTMAN AUTOMOTIVE, LLC	**c** EIN-PN	85-1193995-501
a Plan name	RIVER CITY REMODELING SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVER CITY REMODELING	**c** EIN-PN	85-0589169-501
a Plan name	RIVER CITY TIRE SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVER CITY TIRE	**c** EIN-PN	31-1185510-501
a Plan name	RIVER CITY WOOD PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVER CITY WOOD PRODUCTS LLC	**c** EIN-PN	20-2147793-501
a Plan name	RIVER FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVER FINANCIAL GROUP	**c** EIN-PN	32-0062447-501
a Plan name	RIVER RECYCLING SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVER RECYCLING	**c** EIN-PN	34-1277210-501
a Plan name	RIVERBEND MARINA SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERBEND MARINA	**c** EIN-PN	34-1547582-501

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

a Plan name	RIVERSIDE RECRUITING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERSIDE RECRUITING LLC	**c** EIN-PN	47-2477989-501
a Plan name	RIVERSIDE STEEL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERSIDE STEEL INC	**c** EIN-PN	34-1003859-501
a Plan name	RIVERSIDE SURGICAL ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERSIDE SURGICAL ASSOC	**c** EIN-PN	31-0780474-502
a Plan name	RIVERTOWNE TITLE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERTOWNE TITLE, LLC	**c** EIN-PN	47-4597131-501
a Plan name	RIVERWEST MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERWEST MANAGEMENT LLC	**c** EIN-PN	83-1450331-501
a Plan name	RIVERWOOD EMERGENCY SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVERWOOD EMERGENCY SERVICES, INC.	**c** EIN-PN	26-0021686-501
a Plan name	RIVTECH, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RIVTECH, INC	**c** EIN-PN	31-1451833-501
a Plan name	RIZWITSCH SALES, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	RIZWITSCH SALES, LTD.	**c** EIN-PN	31-1103687-501
a Plan name	RJ BUCHMAN FARM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RJ BUCHMAN FARM LLC	**c** EIN-PN	46-2252412-501
a Plan name	RJR CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RJR CONSULTING INC	**c** EIN-PN	03-0402134-501
a Plan name	RJS LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	RJS LIMITED	**c** EIN-PN	27-2483574-501
a Plan name	RL PROPERTY MGT SOCA BENEFIT PLAN		
b Name of plan sponsor	RL PROPERTY MGT	**c** EIN-PN	80-0933004-501

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	RLS AND ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RLS AND ASSOCIATES, INC.	**c** EIN-PN	31-1287821-501
a Plan name	RM RIGGLE ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RM RIGGLE ENTERPRISES INC	**c** EIN-PN	20-2257614-502
a Plan name	RMK INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	RMK INVESTMENTS	**c** EIN-PN	26-2747848-501
a Plan name	RNL FIRE SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	RNL FIRE SYSTEMS	**c** EIN-PN	27-0438068-502
a Plan name	ROAD RUNNERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROAD RUNNERS, INC	**c** EIN-PN	20-8464475-501
a Plan name	ROADS RIVERS AND TRAILS SOCA BENEFIT PLAN		
b Name of plan sponsor	ROADS RIVERS AND TRAILS	**c** EIN-PN	27-3463063-501
a Plan name	ROBENALT LAW FIRM, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBENALT LAW FIRM, INC	**c** EIN-PN	47-2093477-501
a Plan name	ROBERT APLING AND ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBERT APLING AND ASSOCIATES LLC	**c** EIN-PN	30-0604748-501
a Plan name	ROBERT K JONES INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBERT K JONES INS AGENCY	**c** EIN-PN	31-1450880-501
a Plan name	ROBERT L FRY & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBERT L FRY & ASSOCIATES	**c** EIN-PN	31-1058358-501
a Plan name	ROBERT LONG MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBERT LONG MANUFACTURING	**c** EIN-PN	34-1366979-502
a Plan name	ROBERTS MECHANICAL EQUIP SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBERTS MECHANICAL EQUIP	**c** EIN-PN	02-0581138-501

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	ROBINAUGH EMERGENCY MED SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBINAUGH EMERGENCY MED	**c** EIN-PN	45-2796062-501
a Plan name	ROBINSON'S JANITORIAL & FLOOR CARE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBINSONS JANITORIAL & FLOOR CARE SERVICES	**c** EIN-PN	82-4160758-501
a Plan name	ROBLES DESIGNS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBLES DESIGNS LLC	**c** EIN-PN	47-1783844-501
a Plan name	ROBOT MORNING SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBOT MORNING	**c** EIN-PN	26-2402627-501
a Plan name	ROBOTIC TECHNICAL SUPPORT SERVICES,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBOTIC TECHNICAL SUPPORT SERVICES,INC	**c** EIN-PN	80-0875059-501
a Plan name	ROB'S HORST PACKING SOCA BENEFIT PLAN		
b Name of plan sponsor	ROBS HORST PACKING	**c** EIN-PN	83-1439156-501
a Plan name	ROCK COLUMBUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCK COLUMBUS LLC	**c** EIN-PN	47-2721295-501
a Plan name	ROCK HARD INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCK HARD INVESTMENTS	**c** EIN-PN	84-2937241-501
a Plan name	ROCK ON ICE SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCK ON ICE	**c** EIN-PN	84-3134672-501
a Plan name	ROCK SOLID LANDSCAPE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCK SOLID LANDSCAPE LLC	**c** EIN-PN	47-2549014-501
a Plan name	ROCK U LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCK U LLC	**c** EIN-PN	20-5814482-501
a Plan name	ROCKHILL MACHINE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCKHILL MACHINE, LLC	**c** EIN-PN	87-3870259-501

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	ROCKING MOBILITY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCKING MOBILITY	**c** EIN-PN	84-2748477-501
a Plan name	ROCKPORT READY MIX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCKPORT READY MIX INC	**c** EIN-PN	34-1733636-501
a Plan name	ROCKWAY MORTGAGE COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCKWAY MORTGAGE COMPANY INC	**c** EIN-PN	82-4801440-502
a Plan name	ROCKWELL LASER INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROCKWELL LASER INDUSTRIES	**c** EIN-PN	31-0971331-501
a Plan name	RODERER ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RODERER ENTERPRISES INC	**c** EIN-PN	31-1428213-501
a Plan name	RODES MEATS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RODES MEATS LLC	**c** EIN-PN	92-1489708-501
a Plan name	RODGERS GARAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	RODGERS GARAGE	**c** EIN-PN	87-1418380-501
a Plan name	RODIER LAW OFFICE SOCA BENEFIT PLAN		
b Name of plan sponsor	RODIER LAW OFFICE	**c** EIN-PN	76-0760813-501
a Plan name	RODS WELDING AND REBUILD SOCA BENEFIT PLAN		
b Name of plan sponsor	RODS WELDING AND REBUILD	**c** EIN-PN	31-1429092-501
a Plan name	ROEBLING MANAGEMENT COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROEBLING MANAGEMENT COMPANY	**c** EIN-PN	85-0878885-501
a Plan name	ROGER C PERRY & CO SOCA BENEFIT PLAN		
b Name of plan sponsor	ROGER C PERRY & CO	**c** EIN-PN	31-0827785-501
a Plan name	ROHRBACHER TRIMBLE & ZIMMERMAN CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	ROHRBACHER TRIMBLE & ZIMMERMAN CO LPA	**c** EIN-PN	34-1759112-501

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	ROLLERENA AUTO SALES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROLLERENA AUTO SALES LLC	**c** EIN-PN	61-1698331-501
a Plan name	ROLLING GREEN GOLF CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	ROLLING GREEN GOLF CLUB	**c** EIN-PN	34-1042014-502
a Plan name	ROLLING HILLS VETERINARY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROLLING HILLS VETERINARY SERVICES	**c** EIN-PN	51-0655180-501
a Plan name	ROLLING ROCK FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	ROLLING ROCK FARM	**c** EIN-PN	31-1450686-501
a Plan name	ROMAN AVERY PRESCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	ROMAN AVERY PRESCHOOL	**c** EIN-PN	85-1240271-501
a Plan name	ROMAN PESHOFF INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROMAN PESHOFF INC	**c** EIN-PN	31-1383296-501
a Plan name	ROMER LANDSCAPING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROMER LANDSCAPING LLC	**c** EIN-PN	81-2167250-501
a Plan name	ROMEROCK ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	ROMEROCK ASSOCIATION	**c** EIN-PN	34-1031889-501
a Plan name	ROMPS WATER PORT SOCA BENEFIT PLAN		
b Name of plan sponsor	ROMPS WATER PORT	**c** EIN-PN	34-0870484-501
a Plan name	RON & ANNA BISHER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RON & ANNA BISHER LLC	**c** EIN-PN	46-4426331-501
a Plan name	RON FOTH RETAIL SOCA BENEFIT PLAN		
b Name of plan sponsor	RON FOTH RETAIL	**c** EIN-PN	31-0900870-501
a Plan name	RON PFAFF ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	RON PFAFF ELECTRIC	**c** EIN-PN	34-1580672-501

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	RONAS MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	RONAS MACHINE	**c** EIN-PN	86-3491053-501
a Plan name	RONS ROOST SOCA BENEFIT PLAN		
b Name of plan sponsor	RONS ROOST	**c** EIN-PN	31-1365708-501
a Plan name	ROOF AND EXTERIOR PRODUCT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROOF AND EXTERIOR PRODUCT SERVICES	**c** EIN-PN	20-1959432-502
a Plan name	ROOFTEC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROOFTEC INC	**c** EIN-PN	34-1607245-501
a Plan name	ROOSENSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROOSENSE LLC	**c** EIN-PN	82-3012622-502
a Plan name	ROOTED CREATIVE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROOTED CREATIVE AGENCY	**c** EIN-PN	47-4765844-501
a Plan name	ROQUEMORE ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	ROQUEMORE ENTERPRISES	**c** EIN-PN	20-2056151-501
a Plan name	ROSCA SCARLATO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSCA SCARLATO LLC	**c** EIN-PN	87-3876881-501
a Plan name	ROSE FARM RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSE FARM RENTALS	**c** EIN-PN	45-2148650-501
a Plan name	ROSE GYNECOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSE GYNECOLOGY	**c** EIN-PN	46-1326750-501
a Plan name	ROSE PRECISION MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSE PRECISION MACHINE	**c** EIN-PN	31-1402692-501
a Plan name	ROSEHILL VETERINARY HOSP SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSEHILL VETERINARY HOSP	**c** EIN-PN	31-1747181-501

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	ROSEWOOD AUTO SALES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSEWOOD AUTO SALES LLC	**c** EIN-PN	47-4290934-501
a Plan name	ROSPERT FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSPERT FUNERAL HOME	**c** EIN-PN	20-4613667-501
a Plan name	ROSS ACRES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSS ACRES LLC	**c** EIN-PN	26-9707256-501
a Plan name	ROSS BRITTAIN SCHONBERG CO SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSS BRITTAIN SCHONBERG CO	**c** EIN-PN	34-1672049-501
a Plan name	ROSS CTY COMMITTEE FOR THE ELDERLY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSS CTY COMMITTEE FOR THE ELDERLY	**c** EIN-PN	31-0861945-501
a Plan name	ROSS GORDON DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSS GORDON DDS	**c** EIN-PN	92-1917884-501
a Plan name	ROSS HX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSS HX LLC	**c** EIN-PN	82-4095274-501
a Plan name	ROSSELOT FINANCIAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSSELOT FINANCIAL GROUP	**c** EIN-PN	31-1154703-501
a Plan name	ROSSMAN AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	ROSSMAN AND COMPANY	**c** EIN-PN	31-0803834-501
a Plan name	ROTH INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	ROTH INSURANCE	**c** EIN-PN	34-6549991-501
a Plan name	ROTH, BLAIR, ROBERTS, STRASFELD AND LODGE SOCA BENEFIT PLAN		
b Name of plan sponsor	ROTH, BLAIR, ROBERTS, STRASFELD AND LODGE	**c** EIN-PN	34-1236096-501
a Plan name	ROTO ROOTER SOCA BENEFIT PLAN		
b Name of plan sponsor	ROTO ROOTER	**c** EIN-PN	34-1112321-501

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	ROUBIC TREE SERVICE,INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROUBIC TREE SERVICE,INC	**c** EIN-PN	46-0691255-501
a Plan name	ROUND GROVE PRODUCTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROUND GROVE PRODUCTS LLC	**c** EIN-PN	46-2729767-501
a Plan name	ROUND TABLE GAMES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROUND TABLE GAMES, LLC	**c** EIN-PN	93-4372742-501
a Plan name	ROUTTE CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROUTTE CONSTRUCTION INC	**c** EIN-PN	31-1593605-501
a Plan name	ROY E SCOTT, DDS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ROY E SCOTT, DDS, INC.	**c** EIN-PN	31-1566743-501
a Plan name	ROYAL DOCUMENT DESTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	ROYAL DOCUMENT DESTRUCTION	**c** EIN-PN	31-1438953-501
a Plan name	ROYAL FOX MARKETING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROYAL FOX MARKETING LLC	**c** EIN-PN	84-2590718-501
a Plan name	ROYAL HEAT AND AIR CONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	ROYAL HEAT AND AIR CONDITIONING	**c** EIN-PN	34-1270674-501
a Plan name	ROYAL LANDSCAPE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ROYAL LANDSCAPE INC	**c** EIN-PN	34-1242130-502
a Plan name	ROYS TUNE UP SOCA BENEFIT PLAN		
b Name of plan sponsor	ROYS TUNE UP	**c** EIN-PN	20-0625152-501
a Plan name	RP PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	RP PLUMBING	**c** EIN-PN	31-1327179-501
a Plan name	RPAL ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RPAL ENTERPRISES LLC	**c** EIN-PN	84-3236228-501

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	RPG MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RPG MANAGEMENT LLC	**c** EIN-PN	47-2218191-501
a Plan name	RPS AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	RPS AMERICA	**c** EIN-PN	81-1344580-501
a Plan name	RR&T SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	RR&T SERVICES	**c** EIN-PN	82-4081544-501
a Plan name	RS ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	RS ADVISORS	**c** EIN-PN	02-0685189-501
a Plan name	RSA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RSA LLC	**c** EIN-PN	87-3318343-501
a Plan name	RSI PIPELINE SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RSI PIPELINE SOLUTIONS LLC	**c** EIN-PN	83-3959181-501
a Plan name	RSP INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RSP INDUSTRIES INC	**c** EIN-PN	81-2471711-501
a Plan name	RT DESIGNS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RT DESIGNS LLC	**c** EIN-PN	82-3789536-501
a Plan name	RT FOX, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RT FOX, LLC	**c** EIN-PN	36-4520072-501
a Plan name	RTS SERVICE CENTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RTS SERVICE CENTER, INC.	**c** EIN-PN	34-1451013-501
a Plan name	RUDDY MARKETING GROUP INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RUDDY MARKETING GROUP INC.	**c** EIN-PN	31-1025307-501
a Plan name	RUDIROCK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUDIROCK INC	**c** EIN-PN	81-3859501-501

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	RUDOLPH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	RUDOLPH MANAGEMENT	**c** EIN-PN	31-1452360-501
a Plan name	RUDY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUDY INC	**c** EIN-PN	31-0616218-501
a Plan name	RUDY KIKO INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RUDY KIKO INC.	**c** EIN-PN	46-2931198-501
a Plan name	RUEF DESIGN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUEF DESIGN LLC	**c** EIN-PN	27-0152181-501
a Plan name	RUG GALLERY SOCA BENEFIT PLAN		
b Name of plan sponsor	RUG GALLERY	**c** EIN-PN	31-0952438-501
a Plan name	RUMPKE RESTORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	RUMPKE RESTORATION	**c** EIN-PN	47-4893816-501
a Plan name	RUMPKE RESTORATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUMPKE RESTORATION INC	**c** EIN-PN	82-3445619-501
a Plan name	RUNNER TOOL AND DIE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUNNER TOOL AND DIE LLC	**c** EIN-PN	82-3463986-501
a Plan name	RUNZO S OUTDOOR SPORTS SOCA BENEFIT PLAN		
b Name of plan sponsor	RUNZO S OUTDOOR SPORTS	**c** EIN-PN	34-1947818-501
a Plan name	RUPP CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUPP CONSTRUCTION INC	**c** EIN-PN	34-0791785-501
a Plan name	RUPP ROSEBROCK, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RUPP ROSEBROCK, INC.	**c** EIN-PN	34-1606644-501
a Plan name	RURAL ANESTHESIA MGMT SOCA BENEFIT PLAN		
b Name of plan sponsor	RURAL ANESTHESIA MGMT	**c** EIN-PN	20-2909908-501

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	RUSHCREEK FEED AND SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSHCREEK FEED AND SUPPLY	**c** EIN-PN	31-0643250-501
a Plan name	RUSHCREEK PLUMBING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSHCREEK PLUMBING, LLC	**c** EIN-PN	93-4904003-501
a Plan name	RUSS HADICK & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSS HADICK & ASSOCIATES	**c** EIN-PN	31-1330670-501
a Plan name	RUSSELL T CHARLES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSSELL T CHARLES INC.	**c** EIN-PN	27-1872582-501
a Plan name	RUSSO ROSALINA AND CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSSO ROSALINA AND CO LPA	**c** EIN-PN	46-3483573-501
a Plan name	RUST BELT BRONCOS SOCA BENEFIT PLAN		
b Name of plan sponsor	RUST BELT BRONCOS	**c** EIN-PN	47-1404498-502
a Plan name	RUST BELT RIDERS COMPOSTING SOCA BENEFIT PLAN		
b Name of plan sponsor	RUST BELT RIDERS COMPOSTING	**c** EIN-PN	46-5133072-501
a Plan name	RUSTBELT RECLAMATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUSTBELT RECLAMATION LLC	**c** EIN-PN	83-0515525-501
a Plan name	RUTLAND BOTTLE GAS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	RUTLAND BOTTLE GAS INC	**c** EIN-PN	20-2485013-501
a Plan name	RV LIFE IS GOOD SOCA BENEFIT PLAN		
b Name of plan sponsor	RV LIFE IS GOOD	**c** EIN-PN	84-2587779-501
a Plan name	RV MOBILE POWER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RV MOBILE POWER LLC	**c** EIN-PN	82-5360013-501
a Plan name	RVP SURVEYING SOCA BENEFIT PLAN		
b Name of plan sponsor	RVP SURVEYING	**c** EIN-PN	82-1726285-501

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	RWB PROPERTIES AND CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	RWB PROPERTIES AND CONSTRUCTION	**c** EIN-PN	26-2248335-501
a Plan name	RYAN DUEBBER ARCHITECT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RYAN DUEBBER ARCHITECT LLC	**c** EIN-PN	20-3941679-501
a Plan name	RYAN FORD ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	RYAN FORD ENTERPRISES	**c** EIN-PN	46-3346602-501
a Plan name	RYAN ST MARIE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	RYAN ST MARIE AGENCY	**c** EIN-PN	34-1878680-501
a Plan name	RYDAN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RYDAN LLC	**c** EIN-PN	83-2330080-502
a Plan name	RYSE AERO TECHNOLOGIES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	RYSE AERO TECHNOLOGIES, LLC	**c** EIN-PN	87-2576052-501
a Plan name	S & S BUS PARTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S & S BUS PARTS, LLC	**c** EIN-PN	20-8147313-501
a Plan name	S & S MIDWEST FIRE PROTECTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S & S MIDWEST FIRE PROTECTION LLC	**c** EIN-PN	47-2332222-501
a Plan name	S AND H PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	S AND H PRODUCTS	**c** EIN-PN	34-1225811-501
a Plan name	S AND P PAINTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	S AND P PAINTING INC	**c** EIN-PN	02-0616633-501
a Plan name	S AND P PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	S AND P PROPERTIES	**c** EIN-PN	85-2103158-501
a Plan name	S AND S FASTENER SOCA BENEFIT PLAN		
b Name of plan sponsor	S AND S FASTENER	**c** EIN-PN	31-0862552-501

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	S AND S WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	S AND S WELLNESS	**c** EIN-PN	20-4367389-501
a Plan name	S DRAKE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S DRAKE LLC	**c** EIN-PN	85-0777165-501
a Plan name	S I DISTRIBUTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	S I DISTRIBUTING INC	**c** EIN-PN	34-1756687-501
a Plan name	S I P BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	S I P BREWING COMPANY	**c** EIN-PN	82-2479679-501
a Plan name	S M GOLDBERG SOCA BENEFIT PLAN		
b Name of plan sponsor	S M GOLDBERG	**c** EIN-PN	30-0622962-501
a Plan name	S SQUARED FOOD AND BEVERAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	S SQUARED FOOD AND BEVERAGE	**c** EIN-PN	84-3599388-501
a Plan name	S&F SUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S&F SUPPLY LLC	**c** EIN-PN	99-3620138-501
a Plan name	S&J CRIME SCENE REMEDIATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S&J CRIME SCENE REMEDIATION LLC	**c** EIN-PN	82-4848738-501
a Plan name	S&J MED INC SOCA BENEFIT PLAN		
b Name of plan sponsor	S&J MED INC	**c** EIN-PN	31-1513392-501
a Plan name	S&J POOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	S&J POOLS	**c** EIN-PN	31-1734287-501
a Plan name	S.A.N.E. OF BUTLER COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	S.A.N.E. OF BUTLER COUNTY	**c** EIN-PN	31-1604036-501
a Plan name	S.M. MILLER HOME SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	S.M. MILLER HOME SERVICES LLC	**c** EIN-PN	88-2315276-501

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	SA RAIL, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SA RAIL, LLC	**c** EIN-PN	83-2365515-501
a Plan name	SABER MATRIX GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SABER MATRIX GROUP	**c** EIN-PN	20-1842360-501
a Plan name	SABETTA CLASSICS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SABETTA CLASSICS, LLC	**c** EIN-PN	82-3910359-501
a Plan name	SADDLE CREEK FARMS BEDDING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SADDLE CREEK FARMS BEDDING INC	**c** EIN-PN	20-5004871-501
a Plan name	SAFE ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE ELECTRIC	**c** EIN-PN	47-2032850-501
a Plan name	SAFE HARBOR FINANCIAL GRP SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE HARBOR FINANCIAL GRP	**c** EIN-PN	47-2363237-501
a Plan name	SAFE HARBOR RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE HARBOR RECOVERY	**c** EIN-PN	84-4143934-501
a Plan name	SAFE HAVEN BRANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE HAVEN BRANDS LLC	**c** EIN-PN	47-5402434-501
a Plan name	SAFE N SOUND SECURITY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE N SOUND SECURITY INC	**c** EIN-PN	34-1869387-502
a Plan name	SAFE TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFE TRANSPORTATION	**c** EIN-PN	31-1245342-501
a Plan name	SAFEAIR CONTRACTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFEAIR CONTRACTORS INC	**c** EIN-PN	34-1610538-501
a Plan name	SAFEX, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SAFEX, INC.	**c** EIN-PN	31-1365251-501

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	SAGE PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAGE PARTNERS LLC	**c** EIN-PN	46-3113665-501
a Plan name	SAGE RESEARCH CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	SAGE RESEARCH CONSULTING	**c** EIN-PN	20-5082506-501
a Plan name	SAGE WEALTH MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAGE WEALTH MANAGEMENT LLC	**c** EIN-PN	85-1170665-501
a Plan name	SAGLE BROTHERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAGLE BROTHERS, INC	**c** EIN-PN	31-4386533-501
a Plan name	SAKAMURA USA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAKAMURA USA INC	**c** EIN-PN	31-1542443-501
a Plan name	SALEM FAMILY CARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SALEM FAMILY CARE LLC	**c** EIN-PN	99-1211836-501
a Plan name	SALEM WELDING SOCA BENEFIT PLAN		
b Name of plan sponsor	SALEM WELDING	**c** EIN-PN	34-1263571-501
a Plan name	SALES FUEL SOCA BENEFIT PLAN		
b Name of plan sponsor	SALES FUEL	**c** EIN-PN	31-1632080-501
a Plan name	SALING SIMMS ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SALING SIMMS ASSOCIATES	**c** EIN-PN	31-1254295-501
a Plan name	SALON INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	SALON INSTITUTE	**c** EIN-PN	26-2942900-501
a Plan name	SALTCREEK INDUSTRIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SALTCREEK INDUSTRIES LLC	**c** EIN-PN	46-3389039-501
a Plan name	SALTY GIRL REAL ESTATE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SALTY GIRL REAL ESTATE LLC	**c** EIN-PN	83-2632820-501

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	SALUS DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SALUS DEVELOPMENT	**c** EIN-PN	47-5221854-501
a Plan name	SAM LANDSCAPING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAM LANDSCAPING INC	**c** EIN-PN	34-1853624-501
a Plan name	SAMP LABS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMP LABS LLC	**c** EIN-PN	87-4594997-501
a Plan name	SAMPLES TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMPLES TRUCKING	**c** EIN-PN	35-2321477-501
a Plan name	SAMPSEL PLUMBING AND HVAC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMPSEL PLUMBING AND HVAC LLC	**c** EIN-PN	30-0621935-501
a Plan name	SAMPSONNATI GLASS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMPSONNATI GLASS LLC	**c** EIN-PN	84-4803328-501
a Plan name	SAMS EXCAVATING UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMS EXCAVATING UNLIMITED	**c** EIN-PN	94-3421659-501
a Plan name	SAM'S LOAN AND EMPORIUM INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMS LOAN AND EMPORIUM INC.	**c** EIN-PN	34-1284355-501
a Plan name	SAMUEL JEFFERSON CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	SAMUEL JEFFERSON CONTRACTING	**c** EIN-PN	85-2220322-501
a Plan name	SANCTUARY MARKETING GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SANCTUARY MARKETING GROUP LLC	**c** EIN-PN	26-3754504-501
a Plan name	SANDFORD MOTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SANDFORD MOTORS INC	**c** EIN-PN	46-1343846-501
a Plan name	SANDYS TIRE SALES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SANDYS TIRE SALES, INC.	**c** EIN-PN	34-1234664-501

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	SANFREY FREIGHT SOCA BENEFIT PLAN		
b Name of plan sponsor	SANFREY FREIGHT	**c** EIN-PN	34-1777192-501
a Plan name	SANGFROID STRATEGY SOCA BENEFIT PLAN		
b Name of plan sponsor	SANGFROID STRATEGY	**c** EIN-PN	81-4262361-501
a Plan name	SANNT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SANNT LLC	**c** EIN-PN	84-4656667-501
a Plan name	SAPIENTIA VENTURES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAPIENTIA VENTURES LLC	**c** EIN-PN	88-3936717-501
a Plan name	SARAH SHIFFLET SOCA BENEFIT PLAN		
b Name of plan sponsor	SARAH SHIFFLET	**c** EIN-PN	83-4057237-501
a Plan name	SARAHS FRIENDS SOCA BENEFIT PLAN		
b Name of plan sponsor	SARAHS FRIENDS	**c** EIN-PN	34-1663056-501
a Plan name	SARKIT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SARKIT INC	**c** EIN-PN	87-4128865-501
a Plan name	SASA HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SASA HOLDINGS LLC	**c** EIN-PN	81-5397943-501
a Plan name	SATTLER MACHINE PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	SATTLER MACHINE PRODUCTS	**c** EIN-PN	99-1909373-501
a Plan name	SATURN ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SATURN ELECTRIC	**c** EIN-PN	31-1280886-501
a Plan name	SATYA WHOLESALE SOCA BENEFIT PLAN		
b Name of plan sponsor	SATYA WHOLESALE	**c** EIN-PN	83-3979229-501
a Plan name	SAUBERS STUMBLE INN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SAUBERS STUMBLE INN LLC	**c** EIN-PN	81-4806493-501

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	SAUNDERS MACHINE WORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	SAUNDERS MACHINE WORKS	**c** EIN-PN	46-2283342-501
a Plan name	SAUNDERS TOWING & RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	SAUNDERS TOWING & RECOVERY	**c** EIN-PN	40-0011335-501
a Plan name	SAVE A WARRIOR SOCA BENEFIT PLAN		
b Name of plan sponsor	SAVE A WARRIOR	**c** EIN-PN	45-5571507-501
a Plan name	SAVING HARDWARE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SAVING HARDWARE INC.	**c** EIN-PN	31-4400507-501
a Plan name	SAWYERS WISH SOCA BENEFIT PLAN		
b Name of plan sponsor	SAWYERS WISH	**c** EIN-PN	87-3311117-501
a Plan name	SBA STUDIOS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SBA STUDIOS LLC	**c** EIN-PN	45-1748993-501
a Plan name	SBFE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SBFE, LLC	**c** EIN-PN	90-1118599-501
a Plan name	SC FASTENING SYSTEMS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SC FASTENING SYSTEMS, LLC	**c** EIN-PN	34-1899334-501
a Plan name	SCALISH CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	SCALISH CONSTRUCTION	**c** EIN-PN	26-3482141-501
a Plan name	SCARLET SMOKE SHOP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCARLET SMOKE SHOP LLC	**c** EIN-PN	83-2480039-501
a Plan name	SCATR SOCA BENEFIT PLAN		
b Name of plan sponsor	SCATR	**c** EIN-PN	88-3110516-501
a Plan name	SCENIC SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SCENIC SOLUTIONS	**c** EIN-PN	31-1692695-501

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	SCHAEFER BOX & PALLET SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHAEFER BOX & PALLET	**c** EIN-PN	31-0739622-501
a Plan name	SCHAEFFER S TANK & TRUCK SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHAEFFER S TANK & TRUCK	**c** EIN-PN	34-1273548-501
a Plan name	SCHAFER DAIRY FARM INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHAFER DAIRY FARM INC.	**c** EIN-PN	31-1298311-501
a Plan name	SCHAPPACHER CONCRETE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHAPPACHER CONCRETE INC	**c** EIN-PN	37-1611909-501
a Plan name	SCHAUB EXCAVATING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHAUB EXCAVATING INC	**c** EIN-PN	34-1246065-501
a Plan name	SCHEIDERER TRANSPORT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHEIDERER TRANSPORT INC	**c** EIN-PN	31-1172142-501
a Plan name	SCHIAVONE LAW FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHIAVONE LAW FIRM	**c** EIN-PN	85-1029960-501
a Plan name	SCHIAVONI SCHIAVONI SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHIAVONI SCHIAVONI	**c** EIN-PN	34-1587247-501
a Plan name	SCHIFF ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHIFF ASSOCIATES	**c** EIN-PN	31-1589981-501
a Plan name	SCHILTZ CRANE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHILTZ CRANE INC.	**c** EIN-PN	34-1961716-501
a Plan name	SCHINDLER HARDWOOD SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHINDLER HARDWOOD	**c** EIN-PN	20-4509728-501
a Plan name	SCHLABACH FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHLABACH FUNERAL HOME	**c** EIN-PN	34-1935061-501

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	SCHLATTERS PLUMBING, HEATING AND AIR CONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHLATTERS PLUMBING, HEATING AND AIR CONDITIONING	**c** EIN-PN	30-0948479-502
a Plan name	SCHLECTY PROPERTY MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHLECTY PROPERTY MANAGEMENT	**c** EIN-PN	81-2517880-503
a Plan name	SCHLUETER PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHLUETER PLUMBING	**c** EIN-PN	46-5666690-501
a Plan name	SCHMIDT AUTO CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHMIDT AUTO CARE	**c** EIN-PN	87-4518308-501
a Plan name	SCHMIDT CPAS ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHMIDT CPAS ASSOCIATES	**c** EIN-PN	45-3865675-501
a Plan name	SCHMITT WEALTH ADVISERS SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHMITT WEALTH ADVISERS	**c** EIN-PN	47-4700160-501
a Plan name	SCHMITZ TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHMITZ TRUCKING	**c** EIN-PN	85-3382652-501
a Plan name	SCHNEIDER & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHNEIDER & ASSOCIATES	**c** EIN-PN	45-3815880-501
a Plan name	SCHOCK & POORES CPAS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOCK & POORES CPAS INC	**c** EIN-PN	31-1314608-501
a Plan name	SCHOENBERGER TILE AND MARB SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOENBERGER TILE AND MARB	**c** EIN-PN	31-1621189-501
a Plan name	SCHOLL ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOLL ENTERPRISES	**c** EIN-PN	31-1420897-501
a Plan name	SCHONHARDT AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHONHARDT AND ASSOCIATES	**c** EIN-PN	31-1183155-501

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	SCHOOL OF ADVERTISING ART SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOOL OF ADVERTISING ART	**c** EIN-PN	45-2519379-501
a Plan name	SCHOOL'S IN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOOLS IN, LLC	**c** EIN-PN	26-2804118-501
a Plan name	SCHOONOVER INDUSTRIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHOONOVER INDUSTRIES, INC.	**c** EIN-PN	34-1526141-501
a Plan name	SCHRAFF THOMAS LAW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHRAFF THOMAS LAW LLC	**c** EIN-PN	82-4527066-501
a Plan name	SCHROEDEL SCULLIN BESTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHROEDEL SCULLIN BESTIC	**c** EIN-PN	34-1903609-501
a Plan name	SCHROEDER PLUMB & HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHROEDER PLUMB & HEATING	**c** EIN-PN	83-2485781-501
a Plan name	SCHULTE FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHULTE FARMS	**c** EIN-PN	46-3255169-501
a Plan name	SCHUMACHER AND BAUER DDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHUMACHER AND BAUER DDS LLC	**c** EIN-PN	46-1952123-501
a Plan name	SCHWARTZ FARMS PARTNERSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHWARTZ FARMS PARTNERSHIP	**c** EIN-PN	34-1617257-501
a Plan name	SCHWEITZER BROTHERS CO SOCA BENEFIT PLAN		
b Name of plan sponsor	SCHWEITZER BROTHERS CO	**c** EIN-PN	31-0438250-501
a Plan name	SCIENTIFIC INSTRUMENT CENTER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCIENTIFIC INSTRUMENT CENTER, INC.	**c** EIN-PN	31-1315987-501
a Plan name	SCITRAIN LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SCITRAIN LTD	**c** EIN-PN	20-0799765-501

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	SCOLAROS CULINARY SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOLAROS CULINARY	**c** EIN-PN	86-1978923-501
a Plan name	SCOTT AND SON CONCRETE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTT AND SON CONCRETE INC.	**c** EIN-PN	31-1614911-501
a Plan name	SCOTT SCRIVEN LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTT SCRIVEN LLP	**c** EIN-PN	31-1422314-501
a Plan name	SCOTT SHELDON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTT SHELDON LLC	**c** EIN-PN	20-8241659-501
a Plan name	SCOTT WAGNER PLG AND HTG, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTT WAGNER PLG AND HTG, INC.	**c** EIN-PN	31-1686094-501
a Plan name	SCOTTS QUALITY CONCRETE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTTS QUALITY CONCRETE INC	**c** EIN-PN	34-1734294-501
a Plan name	SCOTT'S TRUCK AND AUTO SERVICE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SCOTTS TRUCK AND AUTO SERVICE, LLC	**c** EIN-PN	20-8196626-501
a Plan name	SCRANTON ASSOCIATES INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SCRANTON ASSOCIATES INC.	**c** EIN-PN	34-1015126-501
a Plan name	SCROLL BRAND STUDIO SOCA BENEFIT PLAN		
b Name of plan sponsor	SCROLL BRAND STUDIO	**c** EIN-PN	84-4683762-501
a Plan name	SCRUM SYNDICATE SOCA BENEFIT PLAN		
b Name of plan sponsor	SCRUM SYNDICATE	**c** EIN-PN	99-2736829-501
a Plan name	SEAFORTH MINERAL AND ORE SOCA BENEFIT PLAN		
b Name of plan sponsor	SEAFORTH MINERAL AND ORE	**c** EIN-PN	34-0876835-501
a Plan name	SEAGATE TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SEAGATE TRANSPORTATION	**c** EIN-PN	35-1544464-501

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	SEALCORE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEALCORE, LLC	**c** EIN-PN	81-1053073-501
a Plan name	SEALS CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEALS CONSTRUCTION INC	**c** EIN-PN	31-1659037-502
a Plan name	SEARS PRY GRIEBLING AND MCBRIDE SOCA BENEFIT PLAN		
b Name of plan sponsor	SEARS PRY GRIEBLING AND MCBRIDE	**c** EIN-PN	34-1009807-501
a Plan name	SEAWAY FUELS TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	SEAWAY FUELS TRUCKING	**c** EIN-PN	34-1792743-501
a Plan name	SEAWAY PATTERN MFG INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEAWAY PATTERN MFG INC	**c** EIN-PN	34-0897757-501
a Plan name	SECOND HARVEST FOOD BANK OF THE MAHONING VALLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	SECOND HARVEST FOOD BANK OF THE MAHONING VALLEY	**c** EIN-PN	83-2134113-501
a Plan name	SECOND PHASE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECOND PHASE INC	**c** EIN-PN	34-1774790-501
a Plan name	SEC-TRON SOCA BENEFIT PLAN		
b Name of plan sponsor	SEC-TRON	**c** EIN-PN	31-1030859-501
a Plan name	SECURE CYBER DEFENSE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURE CYBER DEFENSE, LLC	**c** EIN-PN	47-3183283-501
a Plan name	SECURE FUTURE ADVISORS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURE FUTURE ADVISORS, LLC	**c** EIN-PN	46-1341872-501
a Plan name	SECURE ITADS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURE ITADS LLC	**c** EIN-PN	26-4307314-501
a Plan name	SECURE MY CAMPUS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURE MY CAMPUS LLC	**c** EIN-PN	46-5132613-501

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	SECURITY RISK MGT CONSULTANTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURITY RISK MGT CONSULTANTS LLC	**c** EIN-PN	46-1774493-501
a Plan name	SECURRO FAMILY INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	SECURRO FAMILY INSURANCE	**c** EIN-PN	45-2886736-501
a Plan name	SEDECO USA, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SEDECO USA, INC.	**c** EIN-PN	20-3828124-501
a Plan name	SEEB INDUSTRIAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEEB INDUSTRIAL INC	**c** EIN-PN	34-1729831-501
a Plan name	SEELEY BROS PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	SEELEY BROS PLUMBING	**c** EIN-PN	47-1159036-501
a Plan name	SEGER TRUCKING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SEGER TRUCKING, INC.	**c** EIN-PN	34-1896470-501
a Plan name	SEGNA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEGNA INC	**c** EIN-PN	31-1797593-501
a Plan name	SEHLHORST EQUIP SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SEHLHORST EQUIP SERVICES	**c** EIN-PN	20-8516056-501
a Plan name	SEIBEL CABINETS & DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	SEIBEL CABINETS & DESIGN	**c** EIN-PN	31-1494255-501
a Plan name	SEILER'S LANDSCAPING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEILERS LANDSCAPING, LLC	**c** EIN-PN	84-3618641-501
a Plan name	SEISMIC DRILLING COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEISMIC DRILLING COMPANY INC	**c** EIN-PN	34-1969031-501
a Plan name	SEITANS REALM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEITANS REALM LLC	**c** EIN-PN	83-7270682-501

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	SEITZ DESIGN & CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	SEITZ DESIGN & CONSTRUCTION	**c** EIN-PN	34-1035565-502
a Plan name	SEITZ ELECTRIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEITZ ELECTRIC INC	**c** EIN-PN	34-1883783-501
a Plan name	SELECT ASSOCIATION MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SELECT ASSOCIATION MANAGEMENT LLC	**c** EIN-PN	27-4203749-501
a Plan name	SELECT STEEL SOCA BENEFIT PLAN		
b Name of plan sponsor	SELECT STEEL	**c** EIN-PN	34-1726642-501
a Plan name	SELECTRIC N E SOCA BENEFIT PLAN		
b Name of plan sponsor	SELECTRIC N E	**c** EIN-PN	71-1031506-501
a Plan name	SENECA REGIONAL COC & VISITOR SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	SENECA REGIONAL COC & VISITOR SERVICE	**c** EIN-PN	34-4373480-501
a Plan name	SENIOR SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SENIOR SOLUTIONS	**c** EIN-PN	05-6952479-501
a Plan name	SENSEICS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SENSEICS LTD	**c** EIN-PN	82-0833004-501
a Plan name	SENSOURCE GLOBAL SOURCING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SENSOURCE GLOBAL SOURCING, LLC	**c** EIN-PN	27-1940609-501
a Plan name	SENTINEL OCCUPATIONAL SAFETY SOCA BENEFIT PLAN		
b Name of plan sponsor	SENTINEL OCCUPATIONAL SAFETY	**c** EIN-PN	85-0520797-501
a Plan name	SENTRY HEATING AND AIR CONDITIONING SOCA BENEFIT PLAN		
b Name of plan sponsor	SENTRY HEATING AND AIR CONDITIONING	**c** EIN-PN	45-1261453-501
a Plan name	SEO CPA GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SEO CPA GROUP	**c** EIN-PN	83-1639096-501

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	SEO PROPERTY PRESERVATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SEO PROPERTY PRESERVATIONS	**c** EIN-PN	47-4230120-501
a Plan name	SERENITY BEHAVIORAL HEALTH SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SERENITY BEHAVIORAL HEALTH SERVICES INC	**c** EIN-PN	46-5239819-501
a Plan name	SERENITY POOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	SERENITY POOLS	**c** EIN-PN	85-2858543-501
a Plan name	SERGAKIS PROPERTIES II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SERGAKIS PROPERTIES II LLC	**c** EIN-PN	81-2492695-501
a Plan name	SERVICE 1 FIRE AND SAFETY SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICE 1 FIRE AND SAFETY	**c** EIN-PN	84-2084666-501
a Plan name	SERVICE AIR TECHNOLOGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICE AIR TECHNOLOGY LLC	**c** EIN-PN	82-1297403-501
a Plan name	SERVICE PROGRAM MARKETING GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICE PROGRAM MARKETING GROUP INC	**c** EIN-PN	45-4018488-501
a Plan name	SERVICE REPAIR CO SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICE REPAIR CO	**c** EIN-PN	45-2903897-501
a Plan name	SERVICE STANDARD INVESTMENTS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICE STANDARD INVESTMENTS LTD	**c** EIN-PN	34-1760215-501
a Plan name	SERVICES FOR AGING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVICES FOR AGING, INC	**c** EIN-PN	34-1108780-501
a Plan name	SERVPRO OF MIDDLETOWN SPRINGBORO SOCA BENEFIT PLAN		
b Name of plan sponsor	SERVPRO OF MIDDLETOWN SPRINGBORO	**c** EIN-PN	31-1438541-501
a Plan name	SETH LITTLE FARM & CONSTRU SOCA BENEFIT PLAN		
b Name of plan sponsor	SETH LITTLE FARM & CONSTRU	**c** EIN-PN	20-4794941-502

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	SEVEN HILLS TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	SEVEN HILLS TECHNOLOGY	**c** EIN-PN	47-4963607-501
a Plan name	SEVEN JS & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SEVEN JS & ASSOCIATES	**c** EIN-PN	20-3558035-501
a Plan name	SEWARD PLUMBING HEAT COOL SOCA BENEFIT PLAN		
b Name of plan sponsor	SEWARD PLUMBING HEAT COOL	**c** EIN-PN	31-1424057-501
a Plan name	SEWER CLEANING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEWER CLEANING COMPANY LLC	**c** EIN-PN	84-2243762-501
a Plan name	SEXTON ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	SEXTON ARCHITECTS	**c** EIN-PN	76-0738100-501
a Plan name	SEXTON FLOORING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SEXTON FLOORING INC	**c** EIN-PN	31-1211547-501
a Plan name	SFP ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SFP ENTERPRISES INC	**c** EIN-PN	20-8392051-501
a Plan name	SGA ENGINEERS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SGA ENGINEERS, LLC	**c** EIN-PN	88-3970157-501
a Plan name	SHADE AND SHADE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHADE AND SHADE LLC	**c** EIN-PN	31-1268435-501
a Plan name	SHAFERLY UTILITIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAFERLY UTILITIES LLC	**c** EIN-PN	83-1020512-501
a Plan name	SHAFERS COACH RENTALS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAFERS COACH RENTALS LLC	**c** EIN-PN	45-3505545-501
a Plan name	SHAFFERS PRODUCE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAFFERS PRODUCE INC.	**c** EIN-PN	26-3033088-501

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	SHAKER INVESTMENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAKER INVESTMENTS	**c** EIN-PN	34-1970851-501
a Plan name	SHAMROCK FAMILY EYE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAMROCK FAMILY EYE CARE	**c** EIN-PN	31-1364634-501
a Plan name	SHAMROCK TOWING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAMROCK TOWING INC.	**c** EIN-PN	31-1172593-501
a Plan name	SHAMY HEATING & AIR CONDIT SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAMY HEATING & AIR CONDIT	**c** EIN-PN	34-1545372-501
a Plan name	SHANE A ISAACS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHANE A ISAACS	**c** EIN-PN	30-0664310-501
a Plan name	SHANTZ CARTAGE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHANTZ CARTAGE INC	**c** EIN-PN	34-0903671-501
a Plan name	SHAPERO AND ROLOFF CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAPERO AND ROLOFF CO LPA	**c** EIN-PN	34-1972870-501
a Plan name	SHARON WOODS AUTO CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SHARON WOODS AUTO CARE	**c** EIN-PN	81-3883047-501
a Plan name	SHARONVILLE BP SOCA BENEFIT PLAN		
b Name of plan sponsor	SHARONVILLE BP	**c** EIN-PN	84-5160807-501
a Plan name	SHARP N LUBE SOCA BENEFIT PLAN		
b Name of plan sponsor	SHARP N LUBE	**c** EIN-PN	47-2626621-501
a Plan name	SHARPER CAPITAL PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHARPER CAPITAL PARTNERS	**c** EIN-PN	86-3857212-501
a Plan name	SHAW CONSTRUCTION AND ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAW CONSTRUCTION AND ELECTRIC	**c** EIN-PN	46-2932314-501

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	SHAWCO ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAWCO ENGINEERING	**c** EIN-PN	45-5553702-501
a Plan name	SHAWN MCALLISTER ARCHITECT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SHAWN MCALLISTER ARCHITECT INC.	**c** EIN-PN	31-1639428-501
a Plan name	SHC ACQUISITIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHC ACQUISITIONS	**c** EIN-PN	85-2261350-501
a Plan name	SHEA TAX CONSULTING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SHEA TAX CONSULTING INC.	**c** EIN-PN	47-2378381-501
a Plan name	SHEAFFER FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHEAFFER FARMS	**c** EIN-PN	31-1021994-501
a Plan name	SHEARER PLUMBING & HEATING SOCA BENEFIT PLAN		
b Name of plan sponsor	SHEARER PLUMBING & HEATING	**c** EIN-PN	34-1176641-501
a Plan name	SHELBY COUNTY MOTOR CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	SHELBY COUNTY MOTOR CLUB	**c** EIN-PN	34-4425452-501
a Plan name	SHELBY TRANSPORT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHELBY TRANSPORT INC	**c** EIN-PN	81-4340760-501
a Plan name	SHELLY MANAGEMENT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SHELLY MANAGEMENT SERVICES	**c** EIN-PN	27-0497757-501
a Plan name	SHELTON BEHAVIORAL HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	SHELTON BEHAVIORAL HEALTH	**c** EIN-PN	85-2187934-501
a Plan name	SHEPARD PAINTING SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHEPARD PAINTING SOLUTIONS	**c** EIN-PN	86-3382127-501
a Plan name	SHER & GERMAN ORTHODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHER & GERMAN ORTHODONTICS	**c** EIN-PN	82-2191220-501

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	SHERIDAN MILLWORK & CABINETRY SOCA BENEFIT PLAN		
b Name of plan sponsor	SHERIDAN MILLWORK & CABINETRY	**c** EIN-PN	20-4948658-501
a Plan name	SHERLOCK OIL COMPANY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SHERLOCK OIL COMPANY INC.	**c** EIN-PN	34-1937064-501
a Plan name	SHERTOK SMILES SOCA BENEFIT PLAN		
b Name of plan sponsor	SHERTOK SMILES	**c** EIN-PN	82-2108204-501
a Plan name	SHIFT OLOGY COMMUNICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SHIFT OLOGY COMMUNICATION	**c** EIN-PN	26-3531544-501
a Plan name	SHINE ACUPUNCTURE WELLNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHINE ACUPUNCTURE WELLNESS	**c** EIN-PN	81-2061250-501
a Plan name	SHINGLE AND METAL ROOFS SOCA BENEFIT PLAN		
b Name of plan sponsor	SHINGLE AND METAL ROOFS	**c** EIN-PN	88-3653371-501
a Plan name	SHINTO JAPANESE STEAKHOUSE AND SUSHI BAR SOCA BENEFIT PLAN		
b Name of plan sponsor	SHINTO JAPANESE STEAKHOUSE AND SUSHI BAR	**c** EIN-PN	20-1222002-501
a Plan name	SHIRK AND O'DONOVAN CONSULTING ENGINEERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHIRK AND ODONOVAN CONSULTING ENGINEERS, INC	**c** EIN-PN	31-1379596-501
a Plan name	SHIRTY VIBES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHIRTY VIBES LLC	**c** EIN-PN	88-2624483-501
a Plan name	SHMATA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHMATA LLC	**c** EIN-PN	82-3142176-501
a Plan name	SHOAIB LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHOAIB LLC	**c** EIN-PN	26-0735330-501
a Plan name	SHORELINE CONTRACTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHORELINE CONTRACTORS INC	**c** EIN-PN	87-3606412-501

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	SHORT NORTH ALLIANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	SHORT NORTH ALLIANCE	**c** EIN-PN	45-4891723-501
a Plan name	SHORTS AUTO CARE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SHORTS AUTO CARE, INC	**c** EIN-PN	34-1531855-501
a Plan name	SHOUT IT OUT DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	SHOUT IT OUT DESIGN	**c** EIN-PN	46-4991201-501
a Plan name	SHPAC USA SOCA BENEFIT PLAN		
b Name of plan sponsor	SHPAC USA	**c** EIN-PN	27-1081578-501
a Plan name	SIDE EFFECTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SIDE EFFECTS, INC.	**c** EIN-PN	31-1580777-501
a Plan name	SIDEWINDER COFFEE SOCA BENEFIT PLAN		
b Name of plan sponsor	SIDEWINDER COFFEE	**c** EIN-PN	56-2435087-501
a Plan name	SIDNEY MANUFACTURING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SIDNEY MANUFACTURING COMPANY	**c** EIN-PN	34-0977825-501
a Plan name	SIEGEL JENNINGS CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	SIEGEL JENNINGS CO LPA	**c** EIN-PN	34-1190975-501
a Plan name	SIELSCHOTT FINANCIAL SVCS SOCA BENEFIT PLAN		
b Name of plan sponsor	SIELSCHOTT FINANCIAL SVCS	**c** EIN-PN	45-4866366-501
a Plan name	SIERRA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIERRA, INC	**c** EIN-PN	31-1532376-501
a Plan name	SIF & ANA SOCA BENEFIT PLAN		
b Name of plan sponsor	SIF & ANA	**c** EIN-PN	85-2669957-501
a Plan name	SIGITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGITAL LLC	**c** EIN-PN	82-4697383-501

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	SIGNAL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNAL SERVICE	**c** EIN-PN	34-1101973-501
a Plan name	SIGNAL TREE FINANCIAL PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNAL TREE FINANCIAL PARTNERS	**c** EIN-PN	86-1311461-501
a Plan name	SIGNATURE CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE CONCRETE	**c** EIN-PN	31-1529313-501
a Plan name	SIGNATURE DERMATOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE DERMATOLOGY	**c** EIN-PN	26-2344218-502
a Plan name	SIGNATURE MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE MAINTENANCE	**c** EIN-PN	27-0041054-501
a Plan name	SIGNATURE MEDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE MEDS LLC	**c** EIN-PN	82-5264988-501
a Plan name	SIGNATURE SMILES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE SMILES LLC	**c** EIN-PN	83-0640819-501
a Plan name	SIGNCOM INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNCOM INCORPORATED	**c** EIN-PN	31-1347302-501
a Plan name	SIGNS OF PROGRESS LLC OH SOCA BENEFIT PLAN		
b Name of plan sponsor	SIGNS OF PROGRESS LLC OH	**c** EIN-PN	81-4372685-501
a Plan name	SILCOTT RAILWAY EQUIP LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SILCOTT RAILWAY EQUIP LTD	**c** EIN-PN	31-1509142-501
a Plan name	SILVER HILLS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	SILVER HILLS CONSTRUCTION	**c** EIN-PN	87-2417471-501
a Plan name	SILVER PINE SOCA BENEFIT PLAN		
b Name of plan sponsor	SILVER PINE	**c** EIN-PN	20-2307076-501

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	SILVERTHORNE ADVISORY GRP SOCA BENEFIT PLAN		
b Name of plan sponsor	SILVERTHORNE ADVISORY GRP	**c** EIN-PN	81-1056510-501
a Plan name	SIM 7 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIM 7 INC	**c** EIN-PN	27-2345106-501
a Plan name	SIMERO ROOFING SYSTEMS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMERO ROOFING SYSTEMS, INC	**c** EIN-PN	31-1010927-501
a Plan name	SIMKINS SLUK THERAPY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMKINS SLUK THERAPY, LLC	**c** EIN-PN	81-0748084-501
a Plan name	SIMM IND SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMM IND SOLUTIONS LLC	**c** EIN-PN	88-0842877-501
a Plan name	SIMPLE KEEPING LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLE KEEPING LTD	**c** EIN-PN	46-4558968-501
a Plan name	SIMPLE TIMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLE TIMES LLC	**c** EIN-PN	83-1424682-501
a Plan name	SIMPLEX-IT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLEX-IT LLC	**c** EIN-PN	26-0695953-501
a Plan name	SIMPLIFY3D LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLIFY3D LLC	**c** EIN-PN	46-1914312-501
a Plan name	SIMPLY AMAZING FAMILY ENV SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLY AMAZING FAMILY ENV	**c** EIN-PN	83-3612473-501
a Plan name	SIMPLY QUARTERED LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SIMPLY QUARTERED LTD	**c** EIN-PN	45-2259381-501
a Plan name	SINDUR, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SINDUR, LLC	**c** EIN-PN	20-3072061-501

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	SINGER-VAUGHN ELECTRIC, LLP SOCA BENEFIT PLAN		
b Name of plan sponsor	SINGER-VAUGHN ELECTRIC, LLP	**c** EIN-PN	46-1346757-501
a Plan name	SINGLE SOURCE IT SOCA BENEFIT PLAN		
b Name of plan sponsor	SINGLE SOURCE IT	**c** EIN-PN	20-1195330-502
a Plan name	SIT MEANS SIT OF NEO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIT MEANS SIT OF NEO LLC	**c** EIN-PN	26-1530511-501
a Plan name	SITE SERVICES GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SITE SERVICES GROUP	**c** EIN-PN	27-0055999-501
a Plan name	SIX AXIS SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SIX AXIS SOLUTIONS, LLC	**c** EIN-PN	46-1511063-501
a Plan name	SIX DOF TESTING SOCA BENEFIT PLAN		
b Name of plan sponsor	SIX DOF TESTING	**c** EIN-PN	31-1780097-501
a Plan name	SIXTH CITY GLAZING SOCA BENEFIT PLAN		
b Name of plan sponsor	SIXTH CITY GLAZING	**c** EIN-PN	82-5372925-501
a Plan name	SJS ENTERPRISES II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SJS ENTERPRISES II LLC	**c** EIN-PN	41-1101457-501
a Plan name	SKETCH BLUE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKETCH BLUE LLC	**c** EIN-PN	87-3868911-501
a Plan name	SKILLCLOUD CONSULTING GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKILLCLOUD CONSULTING GROUP, LLC	**c** EIN-PN	86-1879495-501
a Plan name	SKIN AND SUGAR SOCA BENEFIT PLAN		
b Name of plan sponsor	SKIN AND SUGAR	**c** EIN-PN	82-2228391-501
a Plan name	SKINNER AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SKINNER AND ASSOCIATES	**c** EIN-PN	46-4377490-501

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	SKIPS BAGEL DELI INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKIPS BAGEL DELI INC	**c** EIN-PN	31-1446578-501
a Plan name	SKR V CREATIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKR V CREATIVE LLC	**c** EIN-PN	84-2646889-501
a Plan name	SKUFCAS ON STATE SOCA BENEFIT PLAN		
b Name of plan sponsor	SKUFCAS ON STATE	**c** EIN-PN	20-2544119-501
a Plan name	SKULLY MEDIA COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SKULLY MEDIA COMPANY	**c** EIN-PN	87-2906315-501
a Plan name	SKY CO-OP SOCA BENEFIT PLAN		
b Name of plan sponsor	SKY CO-OP	**c** EIN-PN	20-5452970-501
a Plan name	SKY INNOVATIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKY INNOVATIONS, LLC	**c** EIN-PN	81-1542889-501
a Plan name	SKY SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKY SERVICES INC	**c** EIN-PN	46-3619438-501
a Plan name	SKYLINE HOME IMPROVEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SKYLINE HOME IMPROVEMENT	**c** EIN-PN	84-2789432-501
a Plan name	SKYLINE TRANSPORT GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SKYLINE TRANSPORT GROUP, LLC	**c** EIN-PN	81-1507202-501
a Plan name	SKYSTONE PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	SKYSTONE PARTNERS	**c** EIN-PN	27-3622747-501
a Plan name	SKYVISION CENTERS SOCA BENEFIT PLAN		
b Name of plan sponsor	SKYVISION CENTERS	**c** EIN-PN	20-0835087-502
a Plan name	SLAC PRECISION EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SLAC PRECISION EQUIPMENT	**c** EIN-PN	81-3903491-501

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	SLARK'S AUTOMOTIVE SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SLARKS AUTOMOTIVE SERVICES INC	**c** EIN-PN	88-4343415-501
a Plan name	SLEEP CARE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SLEEP CARE, INC	**c** EIN-PN	31-1441985-501
a Plan name	SLICER AESTH AND MED SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	SLICER AESTH AND MED SVS	**c** EIN-PN	84-3439639-501
a Plan name	SLIMLINE SURGICAL DEVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SLIMLINE SURGICAL DEVICES	**c** EIN-PN	46-1299871-501
a Plan name	SLOVIN AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SLOVIN AND ASSOCIATES	**c** EIN-PN	20-1458519-501
a Plan name	SLS BENEFIT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SLS BENEFIT LLC	**c** EIN-PN	46-5152243-501
a Plan name	SM EVANS GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SM EVANS GROUP LLC	**c** EIN-PN	84-4007466-501
a Plan name	SM ORTHODONTISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	SM ORTHODONTISTS	**c** EIN-PN	86-2049386-501
a Plan name	SMALL BUSINESS MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SMALL BUSINESS MANAGEMENT	**c** EIN-PN	34-1314761-501
a Plan name	SMALL WONDERS DISCOVERY & LEARNING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	SMALL WONDERS DISCOVERY & LEARNING CENTER	**c** EIN-PN	27-2722505-501
a Plan name	SMART SODA HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	SMART SODA HOLDINGS	**c** EIN-PN	83-3688752-501
a Plan name	SMDK CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	SMDK CO LPA	**c** EIN-PN	34-1939981-501

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	SMERGLIA CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMERGLIA CHIROPRACTIC	**c** EIN-PN	45-3997968-501
a Plan name	SMETZERS TIRE CENTER, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMETZERS TIRE CENTER, INC	**c** EIN-PN	34-0817560-501
a Plan name	SMILEY TIRE & RETREADING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	SMILEY TIRE & RETREADING CO	**c** EIN-PN	34-1613863-501
a Plan name	SMITH CLEANING SOLUTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMITH CLEANING SOLUTIONS INC	**c** EIN-PN	01-0767613-501
a Plan name	SMITH FAMILY HOMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMITH FAMILY HOMES LLC	**c** EIN-PN	88-2768191-501
a Plan name	SMITH MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	SMITH MACHINE	**c** EIN-PN	34-1322468-501
a Plan name	SMITHVILLE MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	SMITHVILLE MANUFACTURING	**c** EIN-PN	34-1102652-501
a Plan name	SMITTYS PIZZA WORKS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMITTYS PIZZA WORKS LLC	**c** EIN-PN	84-3069459-501
a Plan name	SMUDZ INSURANCE GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SMUDZ INSURANCE GROUP LLC	**c** EIN-PN	45-2724816-501
a Plan name	SMYLIE ONE HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	SMYLIE ONE HEATING AND COOLING	**c** EIN-PN	35-2206657-501
a Plan name	SNAP AND CRACK LOCKSMITH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNAP AND CRACK LOCKSMITH LLC	**c** EIN-PN	45-4729959-501
a Plan name	SNI, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNI, INC	**c** EIN-PN	31-1351347-501

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	SNIDER ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNIDER ELECTRIC	**c** EIN-PN	47-3064990-501
a Plan name	SNODGRASS OF NE OHIO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNODGRASS OF NE OHIO INC	**c** EIN-PN	46-3004069-501
a Plan name	SNOW S FIRE PROTECTION SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNOW S FIRE PROTECTION SERVICE INC	**c** EIN-PN	34-1619932-501
a Plan name	SNS MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SNS MANAGEMENT LLC	**c** EIN-PN	30-0893788-501
a Plan name	SNYDER AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SNYDER AND COMPANY	**c** EIN-PN	31-1336284-501
a Plan name	SNYDER CARE CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SNYDER CARE CARE	**c** EIN-PN	31-1426265-501
a Plan name	SNYDER MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	SNYDER MACHINE	**c** EIN-PN	34-1082853-501
a Plan name	SOAR AVIATION LAW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOAR AVIATION LAW LLC	**c** EIN-PN	87-2677859-501
a Plan name	SOCA SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOCA SERVICES LLC	**c** EIN-PN	85-4395712-501
a Plan name	SOCIAL MORTGAGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOCIAL MORTGAGE LLC	**c** EIN-PN	86-2352440-501
a Plan name	SOFFSEAL SOCA BENEFIT PLAN		
b Name of plan sponsor	SOFFSEAL	**c** EIN-PN	99-0378783-501
a Plan name	SOFIA QUINTERO ART & CULTURE SOCA BENEFIT PLAN		
b Name of plan sponsor	SOFIA QUINTERO ART & CULTURE	**c** EIN-PN	34-1925216-501

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	SOFTWARE PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	SOFTWARE PROPERTIES	**c** EIN-PN	20-5747611-501
a Plan name	SOLES LAW OFFICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLES LAW OFFICES	**c** EIN-PN	56-2454601-501
a Plan name	SOLICA CONSTRUCTION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLICA CONSTRUCTION, INC.	**c** EIN-PN	36-4630678-501
a Plan name	SOLID CRAFT BOATS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLID CRAFT BOATS INC	**c** EIN-PN	82-1973733-501
a Plan name	SOLID ROCK ROOFING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLID ROCK ROOFING INC	**c** EIN-PN	31-1326532-501
a Plan name	SOLOMON PROFESSIONAL SERVS SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLOMON PROFESSIONAL SERVS	**c** EIN-PN	85-4037628-501
a Plan name	SOLSHINE SOLAR SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLSHINE SOLAR	**c** EIN-PN	92-1780381-501
a Plan name	SOLUTIONS BEHAVIORAL CONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SOLUTIONS BEHAVIORAL CONS	**c** EIN-PN	30-0754920-501
a Plan name	SOMERSET GAS TRANSMISSION SOCA BENEFIT PLAN		
b Name of plan sponsor	SOMERSET GAS TRANSMISSION	**c** EIN-PN	16-1514196-501
a Plan name	SONDER BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SONDER BREWING COMPANY	**c** EIN-PN	81-3881049-501
a Plan name	SORELLA INVESTMENTS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SORELLA INVESTMENTS, LLC	**c** EIN-PN	20-8491207-501
a Plan name	SORRENTO'S SOCA BENEFIT PLAN		
b Name of plan sponsor	SORRENTOS	**c** EIN-PN	20-3157296-501

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	SOUNDSUPPLY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUNDSUPPLY LLC	**c** EIN-PN	82-3546409-501
a Plan name	SOUNDTRACE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUNDTRACE LLC	**c** EIN-PN	86-1679327-502
a Plan name	SOUTH COURT FAM PHYSICIANS SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTH COURT FAM PHYSICIANS	**c** EIN-PN	20-0245590-501
a Plan name	SOUTH REGENCY TENNIS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTH REGENCY TENNIS CENTER	**c** EIN-PN	31-1646460-501
a Plan name	SOUTH ZANESVILLE FAMILY MEDICAL CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTH ZANESVILLE FAMILY MEDICAL CENTER	**c** EIN-PN	31-1489098-502
a Plan name	SOUTHEASTERN OHIO PHYSICIANS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHEASTERN OHIO PHYSICIANS LLC	**c** EIN-PN	31-1190086-501
a Plan name	SOUTHERN ELECTRICAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN ELECTRICAL CONTRACTING	**c** EIN-PN	61-1273166-501
a Plan name	SOUTHERN OHIO COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN OHIO COMMUNICATIONS	**c** EIN-PN	31-0918771-501
a Plan name	SOUTHERN OHIO PATHOLOGY CONSULTANTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN OHIO PATHOLOGY CONSULTANTS, INC.	**c** EIN-PN	31-1389035-501
a Plan name	SOUTHERN OHIO PGA SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN OHIO PGA	**c** EIN-PN	51-0142575-501
a Plan name	SOUTHGATE CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHGATE CORPORATION	**c** EIN-PN	31-1112276-501
a Plan name	SOUTHSIDE AUTOMOTIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHSIDE AUTOMOTIVE	**c** EIN-PN	34-1250253-501

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	SOUTHSIDE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHSIDE SERVICES	**c** EIN-PN	11-1434933-501
a Plan name	SOUTHWESTERN OHIO SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHWESTERN OHIO SERVICES LLC	**c** EIN-PN	46-2737274-502
a Plan name	SOUTHWESTERN TILE AND MARBLE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SOUTHWESTERN TILE AND MARBLE INC	**c** EIN-PN	31-0912114-501
a Plan name	SOVEREIGN PROPERTY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SOVEREIGN PROPERTY SOLUTIONS	**c** EIN-PN	82-1032141-501
a Plan name	SPACE MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SPACE MANAGEMENT	**c** EIN-PN	31-1615344-501
a Plan name	SPALDING EMIG COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SPALDING EMIG COMPANY	**c** EIN-PN	34-1381303-501
a Plan name	SPANDFITFAM, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPANDFITFAM, LLC	**c** EIN-PN	82-3594853-501
a Plan name	SPARK SPACE CREATIVE SOCA BENEFIT PLAN		
b Name of plan sponsor	SPARK SPACE CREATIVE	**c** EIN-PN	46-2392275-501
a Plan name	SPARKLEWASH INTERNATIONAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPARKLEWASH INTERNATIONAL INC	**c** EIN-PN	34-1471705-501
a Plan name	SPARKS PSYCHOLOGICAL SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	SPARKS PSYCHOLOGICAL SERV	**c** EIN-PN	20-4150099-501
a Plan name	SPEAK OF THE DEVIL SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEAK OF THE DEVIL	**c** EIN-PN	36-4775147-501
a Plan name	SPEAKEASY YOGA SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEAKEASY YOGA	**c** EIN-PN	47-5549667-502

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	SPEARS MECHANICAL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEARS MECHANICAL SYSTEMS	**c** EIN-PN	35-2224724-501
a Plan name	SPECIAL TOUCH HOMECARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIAL TOUCH HOMECARE	**c** EIN-PN	51-0495662-501
a Plan name	SPECIALIZED EMPLOYEES SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALIZED EMPLOYEES	**c** EIN-PN	46-5639235-501
a Plan name	SPECIALIZED SPEECH TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALIZED SPEECH TECH	**c** EIN-PN	31-1788944-501
a Plan name	SPECIALTY FITNESS EQUIP SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALTY FITNESS EQUIP	**c** EIN-PN	46-0574355-501
a Plan name	SPECIALTY HOSE CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALTY HOSE CORPORATION	**c** EIN-PN	34-1210862-501
a Plan name	SPECIALTY PROCESSING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALTY PROCESSING LLC	**c** EIN-PN	26-2622005-501
a Plan name	SPECIALTY VALUATION GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECIALTY VALUATION GROUP	**c** EIN-PN	81-3505668-501
a Plan name	SPECTRE INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECTRE INDUSTRIES	**c** EIN-PN	82-2214398-501
a Plan name	SPECTRUM COMMERCIAL COATINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECTRUM COMMERCIAL COATINGS LLC	**c** EIN-PN	27-0880861-501
a Plan name	SPECTRUM OF FINDLAY SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECTRUM OF FINDLAY	**c** EIN-PN	37-1642756-501
a Plan name	SPECTRUM REPORTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPECTRUM REPORTING LLC	**c** EIN-PN	31-1814524-502

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	SPEECH PATHOLOGY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEECH PATHOLOGY SERVICES	**c** EIN-PN	31-1241270-501
a Plan name	SPEED PRO MACHINE SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEED PRO MACHINE	**c** EIN-PN	27-0049927-501
a Plan name	SPEEDEON DATA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEEDEON DATA LLC	**c** EIN-PN	26-2376027-501
a Plan name	SPEEDY SEWER & DRAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	SPEEDY SEWER & DRAIN	**c** EIN-PN	34-1570670-501
a Plan name	SPELLMAN MID STATE LOGISTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	SPELLMAN MID STATE LOGISTICS	**c** EIN-PN	88-0811436-501
a Plan name	SPENCE MILLER FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	SPENCE MILLER FUNERAL HOME	**c** EIN-PN	20-1606574-501
a Plan name	SPENGLER NATHANSON P.L.L. SOCA BENEFIT PLAN		
b Name of plan sponsor	SPENGLER NATHANSON P.L.L.	**c** EIN-PN	34-4411333-501
a Plan name	SPHAR ELECTRONIC SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	SPHAR ELECTRONIC SERVICE	**c** EIN-PN	47-4373697-501
a Plan name	SPI CONNECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	SPI CONNECTS	**c** EIN-PN	31-1224562-501
a Plan name	SPICE HOSPITALITY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SPICE HOSPITALITY GROUP	**c** EIN-PN	82-0667322-501
a Plan name	SPICE OF LIFE ENTERTAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	SPICE OF LIFE ENTERTAIN	**c** EIN-PN	83-3230237-501
a Plan name	SPICEFIRE BRAND CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	SPICEFIRE BRAND CONSULTING	**c** EIN-PN	93-3782262-501

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	SPIRE DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRE DEVELOPMENT	**c** EIN-PN	47-1981923-501
a Plan name	SPIRES GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRES GROUP INC	**c** EIN-PN	31-1387201-502
a Plan name	SPIRES PAVING COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRES PAVING COMPANY INC	**c** EIN-PN	84-4749252-501
a Plan name	SPIRIT APOTHECARY SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRIT APOTHECARY	**c** EIN-PN	47-3298315-501
a Plan name	SPIRIT AUTO GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRIT AUTO GROUP LLC	**c** EIN-PN	82-5195498-501
a Plan name	SPIRIT COMMUNICATIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRIT COMMUNICATIONS, INC	**c** EIN-PN	31-1396255-501
a Plan name	SPIRITHORSE OF OHIO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIRITHORSE OF OHIO, LLC	**c** EIN-PN	47-3952553-501
a Plan name	SPIVAK AND SAKELLARIOU SOCA BENEFIT PLAN		
b Name of plan sponsor	SPIVAK AND SAKELLARIOU	**c** EIN-PN	47-4537208-501
a Plan name	SPLASH CARWASH OF MONTROSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPLASH CARWASH OF MONTROSE LLC	**c** EIN-PN	47-1748441-501
a Plan name	SPLASHSCAPES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPLASHSCAPES LLC	**c** EIN-PN	90-0863506-501
a Plan name	SPLAT HAIR DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	SPLAT HAIR DESIGN	**c** EIN-PN	26-8886657-501
a Plan name	SPLICENET INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPLICENET INC	**c** EIN-PN	31-1670257-501

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	SPLIT ROCK GOLF CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	SPLIT ROCK GOLF CLUB	**c** EIN-PN	31-1495443-501
a Plan name	SPM INSTRUMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPM INSTRUMENT INC	**c** EIN-PN	06-1452910-501
a Plan name	SPOKE REAL ESTATE ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPOKE REAL ESTATE ENTERPRISES LLC	**c** EIN-PN	84-1747190-501
a Plan name	SPORTS XPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	SPORTS XPRESS	**c** EIN-PN	34-1824361-501
a Plan name	SPRADLIN PROFESSIONAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRADLIN PROFESSIONAL SERVICES	**c** EIN-PN	31-1269500-501
a Plan name	SPRAY FOAMATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRAY FOAMATIONS LLC	**c** EIN-PN	93-3078219-501
a Plan name	SPRENG SMITH AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRENG SMITH AGENCY	**c** EIN-PN	34-0907405-501
a Plan name	SPRING LEGAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRING LEGAL LLC	**c** EIN-PN	87-4227623-501
a Plan name	SPRING REALTY CO., INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRING REALTY CO., INC.	**c** EIN-PN	34-1942852-501
a Plan name	SPRING VALLEY BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRING VALLEY BANK	**c** EIN-PN	31-1524161-501
a Plan name	SPRINGBOARD CAPITAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGBOARD CAPITAL LLC	**c** EIN-PN	47-4091182-501
a Plan name	SPRINGDALE BINDERY SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGDALE BINDERY	**c** EIN-PN	26-2197842-501

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	SPRINGFIELD ACME ELECTRIC CO SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD ACME ELECTRIC CO	**c** EIN-PN	31-0577635-501
a Plan name	SPRINGFIELD ARTS COUNCIL SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD ARTS COUNCIL	**c** EIN-PN	31-6077714-501
a Plan name	SPRINGFIELD COUNTRY CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD COUNTRY CLUB	**c** EIN-PN	31-0452670-501
a Plan name	SPRINGFIELD HEALTH CARE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD HEALTH CARE CENTER INC	**c** EIN-PN	31-1295761-502
a Plan name	SPRINGFIELD OVERHEAD DOOR SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD OVERHEAD DOOR	**c** EIN-PN	31-1684761-501
a Plan name	SPRINGHETTI INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRINGHETTI INSURANCE	**c** EIN-PN	34-1960899-501
a Plan name	SPROSTY BAG LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SPROSTY BAG LLC	**c** EIN-PN	87-2738874-501
a Plan name	SPRUCE NAIL SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	SPRUCE NAIL SHOP	**c** EIN-PN	47-4845491-501
a Plan name	SPS FOUNDATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SPS FOUNDATIONS	**c** EIN-PN	32-0065869-501
a Plan name	SQUADRON PROPERTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	SQUADRON PROPERTIES	**c** EIN-PN	03-0576884-501
a Plan name	SQUEAKY CLEAN SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SQUEAKY CLEAN SERVICES LLC	**c** EIN-PN	87-1794637-501
a Plan name	SRG ENTERPRISES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SRG ENTERPRISES, INC	**c** EIN-PN	04-3861886-501

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	SRS MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	SRS MECHANICAL	**c** EIN-PN	31-1378467-502
a Plan name	ST ALBANS GOLF COURSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ST ALBANS GOLF COURSE LLC	**c** EIN-PN	47-5062502-501
a Plan name	ST JOHN CENTRAL ACADEMY SOCA BENEFIT PLAN		
b Name of plan sponsor	ST JOHN CENTRAL ACADEMY	**c** EIN-PN	83-3974273-501
a Plan name	ST TOOL AND DESIGN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ST TOOL AND DESIGN INC	**c** EIN-PN	34-1853767-501
a Plan name	ST. CAJETAN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ST. CAJETAN LLC	**c** EIN-PN	84-5134985-501
a Plan name	ST. CHARLES PLACE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	ST. CHARLES PLACE SERVICES	**c** EIN-PN	26-3580837-501
a Plan name	ST. CLAIR ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	ST. CLAIR ADVISORS	**c** EIN-PN	26-1481384-501
a Plan name	ST. PETERS CHILD CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	ST. PETERS CHILD CARE	**c** EIN-PN	34-0944637-501
a Plan name	STACHLER HARMON SOCA BENEFIT PLAN		
b Name of plan sponsor	STACHLER HARMON	**c** EIN-PN	47-2403666-501
a Plan name	STAFF RIGHT SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STAFF RIGHT SERVICES INC	**c** EIN-PN	45-4043636-501
a Plan name	STAFFING MANAGED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STAFFING MANAGED LLC	**c** EIN-PN	80-0733007-501
a Plan name	STAFFORD GAGE & TOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	STAFFORD GAGE & TOOL	**c** EIN-PN	31-1627796-501

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	STAFFORD TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	STAFFORD TECHNOLOGY	**c** EIN-PN	45-4274788-501
a Plan name	STAGNARO, HANNIGAN, KOOP & COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	STAGNARO, HANNIGAN, KOOP & COMPANY	**c** EIN-PN	82-3722182-501
a Plan name	STALDER SPRING WORKS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STALDER SPRING WORKS, INC	**c** EIN-PN	31-0874246-501
a Plan name	STALLARD AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	STALLARD AND ASSOCIATES	**c** EIN-PN	34-1814674-501
a Plan name	STAMAS DENTAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	STAMAS DENTAL GROUP	**c** EIN-PN	31-1789335-501
a Plan name	STAN LYON TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STAN LYON TRUCKING LLC	**c** EIN-PN	30-1200740-501
a Plan name	STANDARD SIGNS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STANDARD SIGNS INC	**c** EIN-PN	34-0151740-501
a Plan name	STANSBERRY SEED SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	STANSBERRY SEED SERVICE	**c** EIN-PN	26-4110482-501
a Plan name	STANTON'S SHEET MUSIC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STANTONS SHEET MUSIC INC	**c** EIN-PN	31-4445958-501
a Plan name	STAR CITY CONCRETE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STAR CITY CONCRETE, LLC	**c** EIN-PN	77-0719402-501
a Plan name	STAR CITY ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	STAR CITY ELECTRIC	**c** EIN-PN	81-3779761-501
a Plan name	STAR CONSULTANTS SOCA BENEFIT PLAN		
b Name of plan sponsor	STAR CONSULTANTS	**c** EIN-PN	31-1558857-501

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 SOURCE CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	STAR SOURCE CONSULTING	**c** EIN-PN	45-3915708-501
a Plan name	STARK & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	STARK & ASSOCIATES	**c** EIN-PN	31-1358480-501
a Plan name	STARK MEDICAL SPECIALTIES SOCA BENEFIT PLAN		
b Name of plan sponsor	STARK MEDICAL SPECIALTIES	**c** EIN-PN	31-0792172-501
a Plan name	STASHABLES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STASHABLES LLC	**c** EIN-PN	46-0801268-501
a Plan name	STATE FARM AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	STATE FARM AGENCY	**c** EIN-PN	82-3541125-501
a Plan name	STATE HIGHWAY SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	STATE HIGHWAY SUPPLY	**c** EIN-PN	31-1375937-501
a Plan name	STATE WIDE CONCRETE PUMPING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STATE WIDE CONCRETE PUMPING INC	**c** EIN-PN	31-0804205-501
a Plan name	STATEHOUSE IMPACT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STATEHOUSE IMPACT GROUP LLC	**c** EIN-PN	20-2200793-501
a Plan name	STATELINE POWER CORP. SOCA BENEFIT PLAN		
b Name of plan sponsor	STATELINE POWER CORP.	**c** EIN-PN	65-1083632-501
a Plan name	STATISTICAL ENERGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STATISTICAL ENERGY LLC	**c** EIN-PN	81-1231024-501
a Plan name	STATMAN HARRIS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STATMAN HARRIS LLC	**c** EIN-PN	87-1939849-501
a Plan name	STAVROFF LAND & DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	STAVROFF LAND & DEVELOPMENT	**c** EIN-PN	05-0552584-501

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	STEAMEX EASTERN SOCA BENEFIT PLAN		
b Name of plan sponsor	STEAMEX EASTERN	**c** EIN-PN	47-1186245-501
a Plan name	STECK AND STEVENS CUSTOM LETTERING LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	STECK AND STEVENS CUSTOM LETTERING LTD.	**c** EIN-PN	31-1453071-501
a Plan name	STEDMAN FLOOR COMPANY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	STEDMAN FLOOR COMPANY, INC.	**c** EIN-PN	31-0823623-501
a Plan name	STEEL AVIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	STEEL AVIATION	**c** EIN-PN	77-0626737-501
a Plan name	STEEL VALLEY LIQUIDATORS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEEL VALLEY LIQUIDATORS LLC	**c** EIN-PN	88-1082715-501
a Plan name	STEELE INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	STEELE INSURANCE AGENCY	**c** EIN-PN	34-1004486-501
a Plan name	STEELTREE CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEELTREE CONSTRUCTION INC	**c** EIN-PN	31-1265925-501
a Plan name	STEFANEK REGALBUTO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEFANEK REGALBUTO LLC	**c** EIN-PN	93-3806515-501
a Plan name	STEIMEL METAL FAB, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEIMEL METAL FAB, LLC	**c** EIN-PN	82-2748576-501
a Plan name	STEINKE TRACTOR SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	STEINKE TRACTOR SALES	**c** EIN-PN	31-0975831-501
a Plan name	STELLAR 1 COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	STELLAR 1 COMMUNICATIONS	**c** EIN-PN	31-1715317-501
a Plan name	STELLER CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STELLER CONSTRUCTION LLC	**c** EIN-PN	37-1733529-501

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	STELTER & BRINCK SOCA BENEFIT PLAN		
b Name of plan sponsor	STELTER & BRINCK	**c** EIN-PN	31-0619109-501
a Plan name	STEPHENS RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	STEPHENS RESTAURANT	**c** EIN-PN	31-1747830-501
a Plan name	STEPHENSON AND WARNER, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	STEPHENSON AND WARNER, INC.	**c** EIN-PN	31-1452851-501
a Plan name	STEPPING STONE DAYTON LEARNING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	STEPPING STONE DAYTON LEARNING CENTER	**c** EIN-PN	81-4358615-501
a Plan name	STEPPINGSTONE ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	STEPPINGSTONE ENGINEERING	**c** EIN-PN	20-2664320-501
a Plan name	STEPS AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEPS AGENCY INC	**c** EIN-PN	30-0664288-501
a Plan name	STERIBITE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STERIBITE, LLC	**c** EIN-PN	32-0472700-501
a Plan name	STEUBEN RADIOLOGY ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	STEUBEN RADIOLOGY ASSOCIATES	**c** EIN-PN	34-1569653-501
a Plan name	STEVE BABLE CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVE BABLE CONSTRUCTION	**c** EIN-PN	27-1612017-501
a Plan name	STEVE D. SHUFFLEBARGER, DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVE D. SHUFFLEBARGER, DDS	**c** EIN-PN	26-1745322-501
a Plan name	STEVE FAIGLE LEGACY JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVE FAIGLE LEGACY JEWELERS	**c** EIN-PN	81-0985800-501
a Plan name	STEVE S FAMILY AUTO SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVE S FAMILY AUTO	**c** EIN-PN	35-2359157-501

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	STEVE ZELL FARM EQUIPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVE ZELL FARM EQUIPMENT	**c** EIN-PN	31-1412814-501
a Plan name	STEVEN P GORDON OD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVEN P GORDON OD INC	**c** EIN-PN	34-1919696-501
a Plan name	STEVENS CONSTRUCTION CO SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVENS CONSTRUCTION CO	**c** EIN-PN	34-1838346-501
a Plan name	STEVENSON UTILITIES CONST SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVENSON UTILITIES CONST	**c** EIN-PN	31-1303914-501
a Plan name	STEVE'S AUTO SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	STEVES AUTO SERVICE	**c** EIN-PN	20-1726064-502
a Plan name	STEWART TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	STEWART TRUCKING	**c** EIN-PN	34-1857083-501
a Plan name	STILES MADEWELL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STILES MADEWELL LLC	**c** EIN-PN	47-1996121-501
a Plan name	STILL WATERS PLUMBING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STILL WATERS PLUMBING, LLC	**c** EIN-PN	47-4131300-501
a Plan name	STILLWATER VALLEY FARM SOCA BENEFIT PLAN		
b Name of plan sponsor	STILLWATER VALLEY FARM	**c** EIN-PN	47-2004227-501
a Plan name	STIMMEL CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STIMMEL CONSTRUCTION LLC	**c** EIN-PN	83-2673817-501
a Plan name	STINGLE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STINGLE INC	**c** EIN-PN	81-1423777-502
a Plan name	STINSON & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	STINSON & ASSOCIATES	**c** EIN-PN	20-0594011-501

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	STIR STUDIO KITCHEN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STIR STUDIO KITCHEN LLC	**c** EIN-PN	83-2481375-501
a Plan name	STIRLING RESOURCES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STIRLING RESOURCES LLC	**c** EIN-PN	87-4698665-501
a Plan name	STLP CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	STLP CORP	**c** EIN-PN	45-3727306-501
a Plan name	STOERMER INSURANCE BROKERS SOCA BENEFIT PLAN		
b Name of plan sponsor	STOERMER INSURANCE BROKERS	**c** EIN-PN	31-0741840-501
a Plan name	STOETT INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STOETT INDUSTRIES INC	**c** EIN-PN	31-1641472-502
a Plan name	STOFCHECK BALLINGER FUNERA SOCA BENEFIT PLAN		
b Name of plan sponsor	STOFCHECK BALLINGER FUNERA	**c** EIN-PN	26-0683965-501
a Plan name	STOLLER ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STOLLER ENTERPRISES LLC	**c** EIN-PN	55-0825209-501
a Plan name	STOLLER FAMILY FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STOLLER FAMILY FARMS INC	**c** EIN-PN	92-1570210-501
a Plan name	STONE OVEN BAKERY SOCA BENEFIT PLAN		
b Name of plan sponsor	STONE OVEN BAKERY	**c** EIN-PN	84-2983696-501
a Plan name	STONEBURNER WEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	STONEBURNER WEALTH	**c** EIN-PN	27-0863721-501
a Plan name	STONECREST MAINTENANCE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STONECREST MAINTENANCE, INC	**c** EIN-PN	82-0753961-501
a Plan name	STONEGATE DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	STONEGATE DENTAL	**c** EIN-PN	20-5808518-501

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	STONEY CREEK LANDSCAPE SOCA BENEFIT PLAN		
b Name of plan sponsor	STONEY CREEK LANDSCAPE	**c** EIN-PN	92-0182967-501
a Plan name	STONEY POINT CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	STONEY POINT CONSTRUCTION	**c** EIN-PN	86-1453745-501
a Plan name	STOPOL EQUIPMENT SALES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STOPOL EQUIPMENT SALES, LLC	**c** EIN-PN	27-0636083-501
a Plan name	STORE OPS 2140 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STORE OPS 2140 LLC	**c** EIN-PN	87-0899669-501
a Plan name	STORM SEARCH SOCA BENEFIT PLAN		
b Name of plan sponsor	STORM SEARCH	**c** EIN-PN	81-3866313-501
a Plan name	STORMIMPACT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STORMIMPACT INC	**c** EIN-PN	88-2680189-501
a Plan name	STORYPORTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STORYPORTS LLC	**c** EIN-PN	47-1531252-501
a Plan name	STOWE MISSION OF CENTRAL OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	STOWE MISSION OF CENTRAL OHIO	**c** EIN-PN	32-0326645-501
a Plan name	STRATAGEM MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATAGEM MANAGEMENT LLC	**c** EIN-PN	83-4552999-501
a Plan name	STRATAX CONSULTING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATAX CONSULTING INC	**c** EIN-PN	93-3554803-501
a Plan name	STRATEGIC 7 MARKETING, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC 7 MARKETING, LLC	**c** EIN-PN	87-2904523-501
a Plan name	STRATEGIC BUSINESS FUNDING SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC BUSINESS FUNDING	**c** EIN-PN	35-2636886-501

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	STRATEGIC PLANNING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC PLANNING INC.	**c** EIN-PN	31-1670502-501
a Plan name	STRATEGIC RETIREMENT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC RETIREMENT SOLUTIONS	**c** EIN-PN	26-1126679-502
a Plan name	STRATEGIC WEALTH PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC WEALTH PARTNERS	**c** EIN-PN	26-2328809-501
a Plan name	STRATEGIES TO END HOMELESSNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATEGIES TO END HOMELESSNESS	**c** EIN-PN	20-8286347-501
a Plan name	STRATFORD CHASE EQUITIES SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATFORD CHASE EQUITIES	**c** EIN-PN	87-2911039-501
a Plan name	STRATFORD ECOLOGICAL CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATFORD ECOLOGICAL CENTER	**c** EIN-PN	31-1312879-501
a Plan name	STRATTON MORTGAGE SOCA BENEFIT PLAN		
b Name of plan sponsor	STRATTON MORTGAGE	**c** EIN-PN	81-1205329-501
a Plan name	STREAM IMPROVEMENT SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STREAM IMPROVEMENT SERVICES LLC	**c** EIN-PN	45-1499437-501
a Plan name	STREAM MANAGEMENT GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STREAM MANAGEMENT GROUP LLC	**c** EIN-PN	86-3471172-501
a Plan name	STREAMLINX LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STREAMLINX LLC	**c** EIN-PN	27-2453495-501
a Plan name	STREBS MEATS SOCA BENEFIT PLAN		
b Name of plan sponsor	STREBS MEATS	**c** EIN-PN	34-1537049-501
a Plan name	STREETSCAPE HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	STREETSCAPE HOLDINGS	**c** EIN-PN	20-2848148-501

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	STREETWISE MOTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	STREETWISE MOTORS	**c** EIN-PN	34-1659229-501
a Plan name	STRESS ANALYSIS SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	STRESS ANALYSIS SERVICES, INC.	**c** EIN-PN	34-1055490-501
a Plan name	STRICKLAND NUSKE FRIEND AND BERRY SOCA BENEFIT PLAN		
b Name of plan sponsor	STRICKLAND NUSKE FRIEND AND BERRY	**c** EIN-PN	34-1094653-501
a Plan name	STROHECKER INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	STROHECKER INCORPORATED	**c** EIN-PN	25-0932300-501
a Plan name	STS OFFERINGS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	STS OFFERINGS LTD	**c** EIN-PN	84-3735603-501
a Plan name	STUCKE OPTOMETRY GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STUCKE OPTOMETRY GROUP, LLC	**c** EIN-PN	82-4862571-501
a Plan name	STUDIO FREIGHT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STUDIO FREIGHT LLC	**c** EIN-PN	87-2060966-501
a Plan name	STUDIO SPIRAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STUDIO SPIRAL INC	**c** EIN-PN	31-1605930-501
a Plan name	STUDIOTHINK SOCA BENEFIT PLAN		
b Name of plan sponsor	STUDIOTHINK	**c** EIN-PN	56-2474763-501
a Plan name	STUFF N PUFFS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	STUFF N PUFFS LTD	**c** EIN-PN	80-0682514-501
a Plan name	STULL WOODWORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	STULL WOODWORKS INC	**c** EIN-PN	31-1706608-501
a Plan name	STUMP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	STUMP LLC	**c** EIN-PN	47-4358244-501

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	SUBMARINE HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUBMARINE HOUSE	**c** EIN-PN	32-6027487-501
a Plan name	SUBMARINE TYME LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUBMARINE TYME LLC	**c** EIN-PN	31-1437231-501
a Plan name	SUGARCREEK STOCKYARDS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUGARCREEK STOCKYARDS	**c** EIN-PN	84-4816076-501
a Plan name	SUHRE AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SUHRE AND ASSOCIATES	**c** EIN-PN	31-1743989-501
a Plan name	SULLIVANS RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	SULLIVANS RESTAURANT	**c** EIN-PN	36-4665758-501
a Plan name	SUMMIT BASEMENT COMPANY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT BASEMENT COMPANY, LLC	**c** EIN-PN	83-3362944-501
a Plan name	SUMMIT COLLISION PROS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT COLLISION PROS LLC	**c** EIN-PN	88-2763575-501
a Plan name	SUMMIT COMMERCIAL REAL ESTATE GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT COMMERCIAL REAL ESTATE GROUP LLC	**c** EIN-PN	81-3033503-501
a Plan name	SUMMIT COUNTY CONTINUUM OF CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT COUNTY CONTINUUM OF CARE	**c** EIN-PN	83-0591179-501
a Plan name	SUMMIT COUNTY LAND REUTILIZATION CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT COUNTY LAND REUTILIZATION CORPORATION	**c** EIN-PN	46-0822568-501
a Plan name	SUMMIT INDUSTRIAL MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT INDUSTRIAL MAINTENANCE	**c** EIN-PN	31-1368223-501
a Plan name	SUMMIT MOTORCARS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT MOTORCARS	**c** EIN-PN	26-4312930-501

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	SUMMIT PLUMBING CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT PLUMBING CONTRACTORS	**c** EIN-PN	83-1469520-501
a Plan name	SUMMIT SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT SALES	**c** EIN-PN	26-0176187-501
a Plan name	SUMMIT SKILLED SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT SKILLED SOLUTIONS	**c** EIN-PN	83-0849737-501
a Plan name	SUMMIT TIRE SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMIT TIRE SERVICE LLC	**c** EIN-PN	87-1033103-501
a Plan name	SUMMITQWEST GROUND INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUMMITQWEST GROUND INC	**c** EIN-PN	27-2408918-501
a Plan name	SUNBRIDGE CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNBRIDGE CONSULTING LLC	**c** EIN-PN	86-1319615-501
a Plan name	SUNBURY CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNBURY CHIROPRACTIC	**c** EIN-PN	31-1019738-502
a Plan name	SUNDAE SONGS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNDAE SONGS	**c** EIN-PN	86-1761531-501
a Plan name	SUNDANCE VENTURES I & II SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNDANCE VENTURES I & II	**c** EIN-PN	87-3641387-501
a Plan name	SUNLIGHT WINDOWS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNLIGHT WINDOWS	**c** EIN-PN	83-4361548-501
a Plan name	SUNNY FUND N A INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNNY FUND N A INC	**c** EIN-PN	88-1541678-501
a Plan name	SUNRISE FOODS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNRISE FOODS INC	**c** EIN-PN	31-1549264-501

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	SUNSET IN PARADISE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNSET IN PARADISE	**c** EIN-PN	26-1154303-501
a Plan name	SUNSET INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	SUNSET INDUSTRIES	**c** EIN-PN	34-0847291-501
a Plan name	SUPER DEAL AUTO GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPER DEAL AUTO GROUP	**c** EIN-PN	47-4575426-501
a Plan name	SUPER TECH AUTOMOTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPER TECH AUTOMOTIVE LLC	**c** EIN-PN	47-2887134-501
a Plan name	SUPERB LAWN CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERB LAWN CARE	**c** EIN-PN	82-4608353-501
a Plan name	SUPERFLAT CONCRETE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERFLAT CONCRETE	**c** EIN-PN	46-2337379-501
a Plan name	SUPERIOR BEHAVIORAL HEALTH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR BEHAVIORAL HEALTH INC	**c** EIN-PN	88-3538677-501
a Plan name	SUPERIOR CARSTAR SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR CARSTAR	**c** EIN-PN	30-0789908-501
a Plan name	SUPERIOR EQUIPMENT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR EQUIPMENT SOLUTIONS	**c** EIN-PN	75-3063073-501
a Plan name	SUPERIOR HOME CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR HOME CARE	**c** EIN-PN	20-0738705-501
a Plan name	SUPERIOR STEEL STAMP CO SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR STEEL STAMP CO	**c** EIN-PN	34-0565360-501
a Plan name	SUPPLY LINK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPPLY LINK INC	**c** EIN-PN	31-1455764-501

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	SUPPLYHUT SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPPLYHUT	**c** EIN-PN	46-0764004-501
a Plan name	SUPREME WINDOW AND GLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	SUPREME WINDOW AND GLASS	**c** EIN-PN	46-0882350-501
a Plan name	SURBHI ENTERPRISE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SURBHI ENTERPRISE LLC	**c** EIN-PN	81-2548149-501
a Plan name	SUREIMPACT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUREIMPACT INC	**c** EIN-PN	83-2597446-501
a Plan name	SURETY BONDS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SURETY BONDS, INC	**c** EIN-PN	31-0942981-501
a Plan name	SURFACE TECH, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SURFACE TECH, INC.	**c** EIN-PN	31-1551392-501
a Plan name	SURRVEYAH FAMILY TIES SOCA BENEFIT PLAN		
b Name of plan sponsor	SURRVEYAH FAMILY TIES	**c** EIN-PN	88-1480409-501
a Plan name	SUSAN ONYSKO PHOTOGRAPHY SOCA BENEFIT PLAN		
b Name of plan sponsor	SUSAN ONYSKO PHOTOGRAPHY	**c** EIN-PN	84-3305047-501
a Plan name	SUSTAIN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SUSTAIN LLC	**c** EIN-PN	81-1780505-501
a Plan name	SUSTAINABLE COMMUNITY ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	SUSTAINABLE COMMUNITY ASSOCIATES	**c** EIN-PN	82-2988596-501
a Plan name	SUTCO INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SUTCO INC.	**c** EIN-PN	31-0739277-501
a Plan name	SUTTER BROTHERS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	SUTTER BROTHERS LTD	**c** EIN-PN	46-2336761-501

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	SVATS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SVATS, INC.	**c** EIN-PN	46-5653357-501
a Plan name	SW MILLS SOCA BENEFIT PLAN		
b Name of plan sponsor	SW MILLS	**c** EIN-PN	20-4392436-502
a Plan name	SW SUMMIT COMMUNICATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	SW SUMMIT COMMUNICATIONS	**c** EIN-PN	46-3272815-501
a Plan name	SWARTZENTRUBER AND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	SWARTZENTRUBER AND COMPANY	**c** EIN-PN	54-2091918-501
a Plan name	SWEATY BANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SWEATY BANDS LLC	**c** EIN-PN	26-3898420-501
a Plan name	SWEEPER MART SOCA BENEFIT PLAN		
b Name of plan sponsor	SWEEPER MART	**c** EIN-PN	83-4559746-502
a Plan name	SWEETHAVEN OF SHREVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SWEETHAVEN OF SHREVE INC	**c** EIN-PN	87-0956268-501
a Plan name	SWIM RITE POOLS SOCA BENEFIT PLAN		
b Name of plan sponsor	SWIM RITE POOLS	**c** EIN-PN	34-1854534-501
a Plan name	SWISS REMODELING SOCA BENEFIT PLAN		
b Name of plan sponsor	SWISS REMODELING	**c** EIN-PN	46-1090482-501
a Plan name	SWISS WOODCRAFT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SWISS WOODCRAFT INC	**c** EIN-PN	34-1621861-501
a Plan name	SWO VENTURES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SWO VENTURES LLC	**c** EIN-PN	99-1306658-501
a Plan name	SYCAMORE CHIROPRACTIC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYCAMORE CHIROPRACTIC	**c** EIN-PN	47-3637988-501

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	SYCAMORE GROWTH GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYCAMORE GROWTH GROUP LLC	**c** EIN-PN	81-1276027-501
a Plan name	SYMMES AUTO SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	SYMMES AUTO SALES	**c** EIN-PN	31-1463849-501
a Plan name	SYMPHONY FINANCIAL SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	SYMPHONY FINANCIAL SERVICE	**c** EIN-PN	34-1959781-501
a Plan name	SYNAPSE BIOMEDICAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYNAPSE BIOMEDICAL INC	**c** EIN-PN	20-0510322-501
a Plan name	SYNERGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYNERGY LLC	**c** EIN-PN	27-3582242-501
a Plan name	SYNERGY REHAB SOCA BENEFIT PLAN		
b Name of plan sponsor	SYNERGY REHAB	**c** EIN-PN	20-8671659-501
a Plan name	SYNLAWN OHIO VALLEY SOCA BENEFIT PLAN		
b Name of plan sponsor	SYNLAWN OHIO VALLEY	**c** EIN-PN	31-1736717-501
a Plan name	SYNTHIA CHOWDHURY DDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYNTHIA CHOWDHURY DDS LLC	**c** EIN-PN	88-4143654-501
a Plan name	SYSTEM4 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYSTEM4 LLC	**c** EIN-PN	20-1129339-501
a Plan name	SYSTEMS ASSOCIATES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	SYSTEMS ASSOCIATES, INC.	**c** EIN-PN	34-1547357-501
a Plan name	SYTECH SYSTEMS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	SYTECH SYSTEMS, INC	**c** EIN-PN	20-3772170-501
a Plan name	T & Z CONCRETE & CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	T & Z CONCRETE & CONSTRUCTION LLC	**c** EIN-PN	86-3890683-501

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

a Plan name	T A RUBEL PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	T A RUBEL PLUMBING	**c** EIN-PN	81-4824525-501
a Plan name	T DAVIS CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	T DAVIS CONTRACTORS	**c** EIN-PN	27-0744165-501
a Plan name	T MORRIS TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	T MORRIS TRUCKING INC	**c** EIN-PN	47-4898876-501
a Plan name	T R WIGGLESWORTH MACHINERY COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	T R WIGGLESWORTH MACHINERY COMPANY	**c** EIN-PN	34-1447595-501
a Plan name	T S DUNCAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	T S DUNCAN INC	**c** EIN-PN	34-1641780-501
a Plan name	T.J. CLARK INTERNATIONAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	T.J. CLARK INTERNATIONAL LLC	**c** EIN-PN	46-3661030-501
a Plan name	TABER REALTY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	TABER REALTY GROUP	**c** EIN-PN	81-1396765-501
a Plan name	TAIGA DATA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TAIGA DATA INC	**c** EIN-PN	84-1951296-501
a Plan name	TAJS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TAJS INC	**c** EIN-PN	31-1436329-501
a Plan name	TALENT ADVISORY PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALENT ADVISORY PARTNERS LLC	**c** EIN-PN	88-3600135-501
a Plan name	TALENT ADVISORY PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALENT ADVISORY PARTNERS LLC	**c** EIN-PN	88-3600135-502
a Plan name	TALISMAN GROUP MANAGEMENT INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TALISMAN GROUP MANAGEMENT INC.	**c** EIN-PN	31-1791655-501

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	TALK ON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALK ON LLC	**c** EIN-PN	83-3561512-501
a Plan name	TALLEY PAINTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALLEY PAINTING LLC	**c** EIN-PN	20-5665273-501
a Plan name	TALLMADGE CHIROPRACTIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALLMADGE CHIROPRACTIC LLC	**c** EIN-PN	81-4980091-501
a Plan name	TALMETRIX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TALMETRIX INC	**c** EIN-PN	81-4701099-501
a Plan name	TANDEM3, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TANDEM3, INC.	**c** EIN-PN	87-3269974-501
a Plan name	TANNER HEATING & AIR CONDI SOCA BENEFIT PLAN		
b Name of plan sponsor	TANNER HEATING & AIR CONDI	**c** EIN-PN	31-1176184-501
a Plan name	TANSKY'S AUTOMART INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TANSKYS AUTOMART INC	**c** EIN-PN	31-1260471-501
a Plan name	TAP ROOT HOSPITALITY GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TAP ROOT HOSPITALITY GROUP, LLC	**c** EIN-PN	82-2632713-501
a Plan name	TAPCO ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TAPCO ELECTRIC	**c** EIN-PN	87-0752996-501
a Plan name	TAPOUT TUNING SOCA BENEFIT PLAN		
b Name of plan sponsor	TAPOUT TUNING	**c** EIN-PN	82-5279855-501
a Plan name	TAPS & TAILS SOCA BENEFIT PLAN		
b Name of plan sponsor	TAPS & TAILS	**c** EIN-PN	84-4398487-501
a Plan name	TARGET ABA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TARGET ABA LLC	**c** EIN-PN	85-3695664-501

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	TARGETED COMPOUND MONITOR SOCA BENEFIT PLAN		
b Name of plan sponsor	TARGETED COMPOUND MONITOR	**c** EIN-PN	81-1847468-501
a Plan name	TARHEEL CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TARHEEL CONSTRUCTION INC	**c** EIN-PN	26-4289245-501
a Plan name	TARVIN AUTO SERIVCE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TARVIN AUTO SERIVCE, INC.	**c** EIN-PN	31-1225641-501
a Plan name	TAS AVIATION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TAS AVIATION, INC.	**c** EIN-PN	34-1339157-501
a Plan name	TASHJIAN ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TASHJIAN ENTERPRISES LLC	**c** EIN-PN	35-2330267-501
a Plan name	TASK FORCE INSTALLATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TASK FORCE INSTALLATIONS LLC	**c** EIN-PN	83-2305190-501
a Plan name	TASM GYMNASTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TASM GYMNASTICS LLC	**c** EIN-PN	93-1528325-501
a Plan name	TATE & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	TATE & ASSOCIATES	**c** EIN-PN	34-1939938-501
a Plan name	TATMAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TATMAN INC	**c** EIN-PN	31-1579859-501
a Plan name	TATTLETALE PORTABLE ALARM SYSTEMS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TATTLETALE PORTABLE ALARM SYSTEMS INC.	**c** EIN-PN	31-1439616-501
a Plan name	TAYLOR THELLER FUNERAL HOME AND CREMATION SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	TAYLOR THELLER FUNERAL HOME AND CREMATION SERVICE	**c** EIN-PN	84-3746143-501
a Plan name	TAYLOR TIRE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	TAYLOR TIRE COMPANY	**c** EIN-PN	31-1697553-501

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	TAYLOR TREE & LANDSCAP SOCA BENEFIT PLAN		
b Name of plan sponsor	TAYLOR TREE & LANDSCAP	**c** EIN-PN	31-1547046-501
a Plan name	T-BILL, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	T-BILL, INC.	**c** EIN-PN	31-1589747-501
a Plan name	TC ARCHITECTS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TC ARCHITECTS, INC.	**c** EIN-PN	34-1231894-501
a Plan name	TC DUFFY INSURANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TC DUFFY INSURANCE LLC	**c** EIN-PN	81-3616419-501
a Plan name	TC PACKAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	TC PACKAGING	**c** EIN-PN	94-3450784-501
a Plan name	TCA GRAPHICS SOCA BENEFIT PLAN		
b Name of plan sponsor	TCA GRAPHICS	**c** EIN-PN	31-1050911-501
a Plan name	TCAA CINCINNATI, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TCAA CINCINNATI, LLC	**c** EIN-PN	85-3743101-501
a Plan name	TCH INDUSTRIES SOCA BENEFIT PLAN		
b Name of plan sponsor	TCH INDUSTRIES	**c** EIN-PN	34-1417628-501
a Plan name	TCP ASSET MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TCP ASSET MANAGEMENT LLC	**c** EIN-PN	81-4385158-501
a Plan name	TCS SOFTWARE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TCS SOFTWARE INC	**c** EIN-PN	31-1441840-501
a Plan name	TD BECK TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TD BECK TRUCKING LLC	**c** EIN-PN	20-5583789-501
a Plan name	TDFJ INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TDFJ INC	**c** EIN-PN	03-0408661-501

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	TDH ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TDH ENTERPRISES INC	**c** EIN-PN	34-1768787-501
a Plan name	TDT MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	TDT MANAGEMENT	**c** EIN-PN	31-1339814-501
a Plan name	TEALBOOK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEALBOOK INC	**c** EIN-PN	38-4136859-501
a Plan name	TEAM FITZ GRAPHICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAM FITZ GRAPHICS LLC	**c** EIN-PN	26-1273944-501
a Plan name	TEAM MIRON, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAM MIRON, LTD	**c** EIN-PN	02-0725599-501
a Plan name	TEAM NDT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAM NDT LLC	**c** EIN-PN	47-4819745-501
a Plan name	TEAMCENTRAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAMCENTRAL	**c** EIN-PN	87-2975339-501
a Plan name	TEAMLOGIC IT SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAMLOGIC IT	**c** EIN-PN	45-5615671-501
a Plan name	TEAMONE BEC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAMONE BEC LLC	**c** EIN-PN	45-5570661-504
a Plan name	TEAMONE ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEAMONE ENTERPRISES LLC	**c** EIN-PN	88-1381280-501
a Plan name	TEBAY CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	TEBAY CONSTRUCTION	**c** EIN-PN	37-1774600-501
a Plan name	TEC COMMUNICATIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEC COMMUNICATIONS, INC	**c** EIN-PN	34-1302589-501

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	TECCK GRAPHICS CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	TECCK GRAPHICS CORP	**c** EIN-PN	84-3109178-501
a Plan name	TECH 9 INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TECH 9 INC	**c** EIN-PN	34-2025582-501
a Plan name	TECH FORCE ONSITE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TECH FORCE ONSITE LLC	**c** EIN-PN	45-1260281-501
a Plan name	TECH SONIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TECH SONIC	**c** EIN-PN	04-3823245-501
a Plan name	TECHNICAL RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNICAL RESOURCES	**c** EIN-PN	34-1643937-501
a Plan name	TECHNICALLY BLOWN MULCH SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNICALLY BLOWN MULCH	**c** EIN-PN	03-0378848-501
a Plan name	TECHNICOLOGY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNICOLOGY LLC	**c** EIN-PN	87-2025232-501
a Plan name	TECHNITRON INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNITRON INC.	**c** EIN-PN	31-1402704-501
a Plan name	TECHNOLOGY GROUP INTERNATL SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNOLOGY GROUP INTERNATL	**c** EIN-PN	34-1888439-501
a Plan name	TECHNOLOGY MANAGEMENT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNOLOGY MANAGEMENT SOLUTIONS	**c** EIN-PN	34-1907413-501
a Plan name	TECHNOLOGY SOLUTIONS PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TECHNOLOGY SOLUTIONS PARTNERS LLC	**c** EIN-PN	99-3084135-501
a Plan name	TEGTMEYER'S TRAILER SALES SOCA BENEFIT PLAN		
b Name of plan sponsor	TEGTMEYERS TRAILER SALES	**c** EIN-PN	31-1307747-501

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	TEKTON CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TEKTON CONSTRUCTION SERVICES	**c** EIN-PN	88-1188057-501
a Plan name	TELE GOLD JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	TELE GOLD JEWELERS	**c** EIN-PN	34-1359437-501
a Plan name	TELE-SOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TELE-SOLUTIONS, INC.	**c** EIN-PN	34-1498745-501
a Plan name	TEMA ROOFING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TEMA ROOFING SERVICES	**c** EIN-PN	30-0853993-501
a Plan name	TEMMM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEMMM INC	**c** EIN-PN	27-0072824-501
a Plan name	TEMPLE ISRAEL SOCA BENEFIT PLAN		
b Name of plan sponsor	TEMPLE ISRAEL	**c** EIN-PN	31-4384145-501
a Plan name	TEMPURE MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TEMPURE MECHANICAL	**c** EIN-PN	20-5424693-501
a Plan name	TEMS JOINT AMBULANCE DISTRICT SOCA BENEFIT PLAN		
b Name of plan sponsor	TEMS JOINT AMBULANCE DISTRICT	**c** EIN-PN	76-0712710-501
a Plan name	TEN34PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	TEN34PARTNERS	**c** EIN-PN	85-2530111-501
a Plan name	TENDER BREEZE SOCA BENEFIT PLAN		
b Name of plan sponsor	TENDER BREEZE	**c** EIN-PN	84-3963701-502
a Plan name	TENDER LOVING CARE ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TENDER LOVING CARE ANIMAL HOSPITAL	**c** EIN-PN	34-1952324-501
a Plan name	TENET 3 SOCA BENEFIT PLAN		
b Name of plan sponsor	TENET 3	**c** EIN-PN	45-5199442-501

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	TENET CONSTRUCTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TENET CONSTRUCTION SERVICES	**c** EIN-PN	83-3300802-501
a Plan name	TENNYSON HEALTH CARE SVCS SOCA BENEFIT PLAN		
b Name of plan sponsor	TENNYSON HEALTH CARE SVCS	**c** EIN-PN	82-2622611-501
a Plan name	TENSILE TESTING SOCA BENEFIT PLAN		
b Name of plan sponsor	TENSILE TESTING	**c** EIN-PN	34-1029460-501
a Plan name	TERRA BLUE TITLE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRA BLUE TITLE AGENCY	**c** EIN-PN	83-1130039-501
a Plan name	TERRAIN EVOLUTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRAIN EVOLUTION INC	**c** EIN-PN	13-4219899-501
a Plan name	TERRAPIN BAKERY SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRAPIN BAKERY	**c** EIN-PN	85-1349636-501
a Plan name	TERRASTRAT SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRASTRAT	**c** EIN-PN	83-3999364-501
a Plan name	TERRESTRIAL BREWING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRESTRIAL BREWING CO	**c** EIN-PN	81-1591214-501
a Plan name	TERRY ANDERSON INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	TERRY ANDERSON INS AGENCY	**c** EIN-PN	31-1131546-501
a Plan name	TESA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TESA INC	**c** EIN-PN	31-1439828-501
a Plan name	TESTA COMPANIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TESTA COMPANIES INC	**c** EIN-PN	34-1346208-501
a Plan name	TESTFUCHS CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	TESTFUCHS CORPORATION	**c** EIN-PN	81-5387175-501

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	TEXTBOOK HOME IMPROVEMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TEXTBOOK HOME IMPROVEMENTS LLC	**c** EIN-PN	20-5805820-501
a Plan name	TFR CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	TFR CONSTRUCTION	**c** EIN-PN	47-2735987-501
a Plan name	TG MANUFACTURER SEALERS SOCA BENEFIT PLAN		
b Name of plan sponsor	TG MANUFACTURER SEALERS	**c** EIN-PN	34-1258617-501
a Plan name	TGE SOLAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TGE SOLAR LLC	**c** EIN-PN	87-4692568-501
a Plan name	TGR ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	TGR ENTERPRISES	**c** EIN-PN	20-1002296-501
a Plan name	TH SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TH SOLUTIONS LLC	**c** EIN-PN	26-4601615-501
a Plan name	THACKER ORTHODONTICS SOCA BENEFIT PLAN		
b Name of plan sponsor	THACKER ORTHODONTICS	**c** EIN-PN	31-1175038-501
a Plan name	THANKS FOR VISITING SOCA BENEFIT PLAN		
b Name of plan sponsor	THANKS FOR VISITING	**c** EIN-PN	84-3072634-501
a Plan name	THAT MUSIC PLACE SOCA BENEFIT PLAN		
b Name of plan sponsor	THAT MUSIC PLACE	**c** EIN-PN	38-3645396-501
a Plan name	THAT TRUCK AND VAN SOCA BENEFIT PLAN		
b Name of plan sponsor	THAT TRUCK AND VAN	**c** EIN-PN	81-3564697-501
a Plan name	THATCHER AND BOUDREAU DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	THATCHER AND BOUDREAU DDS	**c** EIN-PN	31-0846507-501
a Plan name	THE 5 DISCIPLINES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE 5 DISCIPLINES, INC	**c** EIN-PN	47-3476854-501

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 ACKERMAN INSURANCE TEAM SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ACKERMAN INSURANCE TEAM	**c** EIN-PN	27-1769645-501
a Plan name	THE ALINEMENT SHOP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ALINEMENT SHOP INC	**c** EIN-PN	34-1849035-501
a Plan name	THE ALLEN THOMAS INSURANCE AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ALLEN THOMAS INSURANCE AGENCY INC	**c** EIN-PN	84-1620669-501
a Plan name	THE ANIMAL EYE INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ANIMAL EYE INSTITUTE	**c** EIN-PN	45-2504788-501
a Plan name	THE ANIMAL HEALTH ORG SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ANIMAL HEALTH ORG	**c** EIN-PN	82-1260951-501
a Plan name	THE APPLIANCE LOFT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE APPLIANCE LOFT LLC	**c** EIN-PN	20-0380515-501
a Plan name	THE ARLEDGE POWELL CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ARLEDGE POWELL CO INC	**c** EIN-PN	31-1615230-501
a Plan name	THE ARLINGTON GRP INVEST SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ARLINGTON GRP INVEST	**c** EIN-PN	27-4655653-501
a Plan name	THE BALDWIN GROUP, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BALDWIN GROUP, INC.	**c** EIN-PN	34-1320317-501
a Plan name	THE BEHAL LAW GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BEHAL LAW GROUP LLC	**c** EIN-PN	33-1193018-501
a Plan name	THE BELMONT PARK CEMETERY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BELMONT PARK CEMETERY	**c** EIN-PN	34-0092745-501
a Plan name	THE BELVEDERE OF WESTLAKE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BELVEDERE OF WESTLAKE	**c** EIN-PN	88-2254880-501

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 BEST CAKE RECIPES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BEST CAKE RECIPES LLC	**c** EIN-PN	83-2936000-501
a Plan name	THE BLACK CAT BARBER SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BLACK CAT BARBER SHOP	**c** EIN-PN	83-1226060-501
a Plan name	THE BLACK MENTAL HEALTH CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BLACK MENTAL HEALTH CORPORATION	**c** EIN-PN	82-3931238-501
a Plan name	THE BLUE HERON BREWERY & EVENT CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BLUE HERON BREWERY & EVENT CENTER	**c** EIN-PN	82-2015099-501
a Plan name	THE BOBBY TRIPODI FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BOBBY TRIPODI FOUNDATION	**c** EIN-PN	34-1945499-501
a Plan name	THE BODNAR PRINTING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BODNAR PRINTING COMPANY	**c** EIN-PN	34-1691043-501
a Plan name	THE BODY SHOP OF NILES SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BODY SHOP OF NILES	**c** EIN-PN	34-1427047-501
a Plan name	THE BOSTER CENTER FOR MS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BOSTER CENTER FOR MS	**c** EIN-PN	84-3389880-501
a Plan name	THE BOTNICK LAW FIRM, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BOTNICK LAW FIRM, LLC	**c** EIN-PN	84-3629630-501
a Plan name	THE BROOKWOOD GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BROOKWOOD GROUP	**c** EIN-PN	92-1132129-501
a Plan name	THE BUILDERS EXCHANGE OF CENTRAL OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BUILDERS EXCHANGE OF CENTRAL OHIO	**c** EIN-PN	31-4137970-501
a Plan name	THE BUTCHER BLOCK SOCA BENEFIT PLAN		
b Name of plan sponsor	THE BUTCHER BLOCK	**c** EIN-PN	87-2410474-501

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 CABINET SHOP OF TROY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CABINET SHOP OF TROY INC	**c** EIN-PN	34-1904029-501
a Plan name	THE CALLARD COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CALLARD COMPANY	**c** EIN-PN	31-1251438-501
a Plan name	THE CARD WARD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CARD WARD LLC	**c** EIN-PN	82-4241467-501
a Plan name	THE CARPET COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CARPET COMPANY	**c** EIN-PN	34-1761129-501
a Plan name	THE CAS-KER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CAS-KER COMPANY	**c** EIN-PN	31-0235205-501
a Plan name	THE CENTER FOR ADVANCED DENTRISTY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CENTER FOR ADVANCED DENTRISTY	**c** EIN-PN	85-2716047-501
a Plan name	THE CHIROPRACTIC WELLNESS CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CHIROPRACTIC WELLNESS CENTER	**c** EIN-PN	47-5527041-501
a Plan name	THE CHRIST FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CHRIST FOUNDATION	**c** EIN-PN	23-7121546-502
a Plan name	THE CHRISTOPHER CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CHRISTOPHER CORPORATION	**c** EIN-PN	85-4294002-501
a Plan name	THE CINCINNATI CATHOLIC CEMETERY SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CINCINNATI CATHOLIC CEMETERY SOCIETY	**c** EIN-PN	31-0537501-501
a Plan name	THE CLEVELAND CLASSICAL GUITAR SOCIETY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CLEVELAND CLASSICAL GUITAR SOCIETY	**c** EIN-PN	27-2319077-501
a Plan name	THE COLUMBUS ARCHITECTURAL SOCA BENEFIT PLAN		
b Name of plan sponsor	THE COLUMBUS ARCHITECTURAL	**c** EIN-PN	81-3148108-501

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 CONTI CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE CONTI CORPORATION	**c** EIN-PN	34-0894014-501
a Plan name	THE COUSINO GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE COUSINO GROUP INC	**c** EIN-PN	34-1555958-501
a Plan name	THE DAGIASIS GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DAGIASIS GROUP LLC	**c** EIN-PN	26-0096943-501
a Plan name	THE DAILY GROWLER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DAILY GROWLER	**c** EIN-PN	45-1687361-501
a Plan name	THE DATA HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DATA HOUSE	**c** EIN-PN	34-1099182-501
a Plan name	THE DAYTON MOVIES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DAYTON MOVIES, INC.	**c** EIN-PN	83-1702784-501
a Plan name	THE DELIBERATO LAW CENTER, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DELIBERATO LAW CENTER, LLC	**c** EIN-PN	47-4963398-501
a Plan name	THE DESIGN CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DESIGN CENTER LLC	**c** EIN-PN	87-4155567-501
a Plan name	THE DISPATCH PRINTING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DISPATCH PRINTING CO	**c** EIN-PN	31-4166990-501
a Plan name	THE DOLLRIES GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DOLLRIES GROUP	**c** EIN-PN	20-8035397-501
a Plan name	THE DONAHEY LAW FRM SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DONAHEY LAW FRM	**c** EIN-PN	61-1598666-501
a Plan name	THE DOOR GUYS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE DOOR GUYS	**c** EIN-PN	34-1847828-501

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 ELECT GROUP INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ELECT GROUP INC.	**c** EIN-PN	31-1750931-501
a Plan name	THE EMERALD GROUP CONSULT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE EMERALD GROUP CONSULT	**c** EIN-PN	83-4127603-501
a Plan name	THE ENGLISH CONTRACTOR SOCA BENEFIT PLAN		
b Name of plan sponsor	THE ENGLISH CONTRACTOR	**c** EIN-PN	47-1716105-501
a Plan name	THE EQUESTRIAN THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE EQUESTRIAN THERAPY	**c** EIN-PN	34-1376159-501
a Plan name	THE EYE CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE EYE CLINIC	**c** EIN-PN	34-1314333-501
a Plan name	THE FENIX GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FENIX GROUP	**c** EIN-PN	38-3839419-501
a Plan name	THE FINAL COAT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FINAL COAT	**c** EIN-PN	58-5855858-501
a Plan name	THE FINCH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FINCH COMPANY	**c** EIN-PN	34-0859792-501
a Plan name	THE FLEISCHER LAW FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FLEISCHER LAW FIRM	**c** EIN-PN	27-3503361-501
a Plan name	THE FOLKS CREATIVE PRINTERS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FOLKS CREATIVE PRINTERS, INC	**c** EIN-PN	31-4241030-501
a Plan name	THE FOUR PAWS RESORT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FOUR PAWS RESORT	**c** EIN-PN	01-0846986-501
a Plan name	THE FRIEDMANN FIRM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE FRIEDMANN FIRM LLC	**c** EIN-PN	46-1341767-501

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 GARLAND GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GARLAND GROUP	**c** EIN-PN	31-1380837-501
a Plan name	THE GAS STATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GAS STATION	**c** EIN-PN	34-1764724-501
a Plan name	THE GATHERING PLACE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GATHERING PLACE	**c** EIN-PN	34-1879035-501
a Plan name	THE GLOBAL ACCOUNTING SOLUTIONS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GLOBAL ACCOUNTING SOLUTIONS, INC.	**c** EIN-PN	27-4790472-501
a Plan name	THE GODDARD SCHOOL SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GODDARD SCHOOL	**c** EIN-PN	83-0931361-501
a Plan name	THE GODDARD SCHOOL - CINCINNATI RED BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GODDARD SCHOOL - CINCINNATI RED BANK	**c** EIN-PN	68-0660399-501
a Plan name	THE GODDARD SCHOOL OF CENTERVILLE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GODDARD SCHOOL OF CENTERVILLE	**c** EIN-PN	31-1733429-501
a Plan name	THE GOVERNOR SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GOVERNOR	**c** EIN-PN	81-4078100-501
a Plan name	THE GRAPE AND GRANARY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GRAPE AND GRANARY INC	**c** EIN-PN	34-1831050-501
a Plan name	THE GREAT LAKE PORT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GREAT LAKE PORT CORP	**c** EIN-PN	47-1580929-501
a Plan name	THE GREENLEAF GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GREENLEAF GROUP INC	**c** EIN-PN	34-1946629-501
a Plan name	THE GRIFFIN LANTZ INS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GRIFFIN LANTZ INS	**c** EIN-PN	35-2222416-501

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 GRIFFITH AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GRIFFITH AGENCY	**c** EIN-PN	34-0749740-501
a Plan name	THE GROUNDS GUYS OF MEDINA SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GROUNDS GUYS OF MEDINA	**c** EIN-PN	81-4374664-501
a Plan name	THE GROW GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GROW GROUP	**c** EIN-PN	31-1581449-501
a Plan name	THE GUITAMMER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE GUITAMMER COMPANY	**c** EIN-PN	61-1650777-501
a Plan name	THE HAMLER STATE BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HAMLER STATE BANK	**c** EIN-PN	34-4253390-501
a Plan name	THE HAND CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HAND CENTER LLC	**c** EIN-PN	45-2632106-501
a Plan name	THE HARDWARE EXCHANGE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HARDWARE EXCHANGE	**c** EIN-PN	31-1148457-501
a Plan name	THE HAT CREEK COMPANIES SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HAT CREEK COMPANIES	**c** EIN-PN	46-3777879-501
a Plan name	THE HEIRLOOM CHEF SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HEIRLOOM CHEF	**c** EIN-PN	81-3063802-501
a Plan name	THE HOUSING CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HOUSING CENTER	**c** EIN-PN	34-1771480-501
a Plan name	THE HOWLAND COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HOWLAND COMPANY LLC	**c** EIN-PN	75-3155364-501
a Plan name	THE HUPP MOBILE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE HUPP MOBILE, INC	**c** EIN-PN	46-5489199-501

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 IDEA COLLECTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE IDEA COLLECTIVE LLC	**c** EIN-PN	83-1091767-501
a Plan name	THE INSTITUTE FOR CREATIVE MINDFULNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE INSTITUTE FOR CREATIVE MINDFULNESS	**c** EIN-PN	82-3964258-501
a Plan name	THE IVAN LAW FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	THE IVAN LAW FIRM	**c** EIN-PN	83-1028189-501
a Plan name	THE JEFFRIES FAMILY OFFICE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE JEFFRIES FAMILY OFFICE	**c** EIN-PN	20-4133428-501
a Plan name	THE JOHN K. HOWE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE JOHN K. HOWE COMPANY	**c** EIN-PN	31-0831423-501
a Plan name	THE KITCHEN SOCA BENEFIT PLAN		
b Name of plan sponsor	THE KITCHEN	**c** EIN-PN	46-1928938-501
a Plan name	THE KNOCH CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE KNOCH CORPORATION	**c** EIN-PN	34-1399682-501
a Plan name	THE LANG THANG GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LANG THANG GROUP	**c** EIN-PN	45-4919278-501
a Plan name	THE LASH LOUNGE ROCKYRIVER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LASH LOUNGE ROCKYRIVER	**c** EIN-PN	37-1884095-501
a Plan name	THE LAW OFFICE OF VINCENT T. NORWILLO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LAW OFFICE OF VINCENT T. NORWILLO	**c** EIN-PN	27-0940699-501
a Plan name	THE LAWN RANGER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LAWN RANGER	**c** EIN-PN	30-0009445-501
a Plan name	THE LIT MOVEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LIT MOVEMENT	**c** EIN-PN	81-4007904-501

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 LORENZ CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE LORENZ CORPORATION	**c** EIN-PN	31-0504056-501
a Plan name	THE MAKE A DAY FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MAKE A DAY FOUNDATION	**c** EIN-PN	82-3422637-501
a Plan name	THE MANDREL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MANDREL GROUP	**c** EIN-PN	85-3370099-501
a Plan name	THE MANUFACTURERS EQUIP CO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MANUFACTURERS EQUIP CO	**c** EIN-PN	31-0364560-502
a Plan name	THE MCCALLUM AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MCCALLUM AGENCY	**c** EIN-PN	45-3170670-501
a Plan name	THE MEDIA CAPTAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MEDIA CAPTAIN	**c** EIN-PN	27-3370344-501
a Plan name	THE METZENBAUM FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE METZENBAUM FOUNDATION	**c** EIN-PN	26-0265809-501
a Plan name	THE MIDWEST SEA SALT CO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MIDWEST SEA SALT CO	**c** EIN-PN	81-3733952-501
a Plan name	THE MILBY GROUP INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MILBY GROUP INSURANCE AGENCY	**c** EIN-PN	31-1345126-501
a Plan name	THE MODERN MAID LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MODERN MAID LLC	**c** EIN-PN	30-0654893-501
a Plan name	THE MOHLER LUMBER COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE MOHLER LUMBER COMPANY	**c** EIN-PN	34-0408370-501
a Plan name	THE NATL BASKETBALL ACAD SOCA BENEFIT PLAN		
b Name of plan sponsor	THE NATL BASKETBALL ACAD	**c** EIN-PN	90-0088338-501

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 NERD PATROL SOCA BENEFIT PLAN		
b Name of plan sponsor	THE NERD PATROL	**c** EIN-PN	31-1716714-501
a Plan name	THE OHIO AGGREGATES ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OHIO AGGREGATES ASSOCIATION	**c** EIN-PN	31-1416777-501
a Plan name	THE OHIO CENTER FOR ORAL, FACIAL & IMPLANT SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OHIO CENTER FOR ORAL, FACIAL & IMPLANT SURGERY	**c** EIN-PN	47-0918296-501
a Plan name	THE OHIO STATE TROOPERS ASSOCIATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OHIO STATE TROOPERS ASSOCIATION	**c** EIN-PN	31-1453938-501
a Plan name	THE OHLMANN GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OHLMANN GROUP	**c** EIN-PN	31-0682270-501
a Plan name	THE OPAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OPAL GROUP	**c** EIN-PN	23-2876092-501
a Plan name	THE OTTOVILLE BANK COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE OTTOVILLE BANK COMPANY	**c** EIN-PN	34-4323170-501
a Plan name	THE PARSHALL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE PARSHALL GROUP	**c** EIN-PN	99-3008228-501
a Plan name	THE POLISHED LOOK SOCA BENEFIT PLAN		
b Name of plan sponsor	THE POLISHED LOOK	**c** EIN-PN	34-1857482-501
a Plan name	THE PORTARO GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE PORTARO GROUP	**c** EIN-PN	20-0786990-501
a Plan name	THE PRIVATE INVESTMENT GRP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE PRIVATE INVESTMENT GRP	**c** EIN-PN	31-1466134-501
a Plan name	THE RANDOLPH COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RANDOLPH COMPANY	**c** EIN-PN	31-0725312-501

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 RAYMOND JOHN WEAN FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RAYMOND JOHN WEAN FOUNDATION	**c** EIN-PN	34-6505038-501
a Plan name	THE RECOVERY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RECOVERY CENTER	**c** EIN-PN	31-1327805-502
a Plan name	THE RED ZONE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RED ZONE LLC	**c** EIN-PN	81-2009857-501
a Plan name	THE REFUGE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE REFUGE, INC	**c** EIN-PN	31-1655288-501
a Plan name	THE REFUGEE RESPONSE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE REFUGEE RESPONSE	**c** EIN-PN	30-0594051-501
a Plan name	THE RENAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RENAL GROUP	**c** EIN-PN	34-1171740-501
a Plan name	THE REPRO CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	THE REPRO CENTER	**c** EIN-PN	34-1877263-501
a Plan name	THE RIVER IOP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RIVER IOP	**c** EIN-PN	82-2692568-501
a Plan name	THE RIVERSTONE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE RIVERSTONE COMPANY	**c** EIN-PN	34-1958400-501
a Plan name	THE SATERI GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SATERI GROUP	**c** EIN-PN	86-1451376-501
a Plan name	THE SAYLES COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SAYLES COMPANY	**c** EIN-PN	20-8617353-501
a Plan name	THE SHELTON GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SHELTON GROUP	**c** EIN-PN	27-1599675-501

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 SIEKMANN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SIEKMANN COMPANY	**c** EIN-PN	31-0995736-501
a Plan name	THE SITE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SITE GROUP	**c** EIN-PN	31-1433137-501
a Plan name	THE SMOKE STACK HOBBY SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SMOKE STACK HOBBY SHOP	**c** EIN-PN	46-2076157-501
a Plan name	THE SOCIAL FIRM SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SOCIAL FIRM	**c** EIN-PN	27-3317219-501
a Plan name	THE SPOT ATHLETICS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SPOT ATHLETICS	**c** EIN-PN	27-3129415-501
a Plan name	THE STANDARD SOCA BENEFIT PLAN		
b Name of plan sponsor	THE STANDARD	**c** EIN-PN	93-4378582-501
a Plan name	THE STOP SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE STOP SHOP	**c** EIN-PN	47-4241101-501
a Plan name	THE SUCCESS GROUP LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SUCCESS GROUP LTD	**c** EIN-PN	31-1749514-501
a Plan name	THE SURGERY CENTER NCO SOCA BENEFIT PLAN		
b Name of plan sponsor	THE SURGERY CENTER NCO	**c** EIN-PN	83-3986181-501
a Plan name	THE TEAM MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE TEAM MANAGEMENT	**c** EIN-PN	37-1957530-501
a Plan name	THE TELOS INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	THE TELOS INSTITUTE	**c** EIN-PN	20-5683985-501
a Plan name	THE TRAILER DOCTOR SOCA BENEFIT PLAN		
b Name of plan sponsor	THE TRAILER DOCTOR	**c** EIN-PN	26-3110196-501

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 TURF TAILOR GROUNDS MAINTANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE TURF TAILOR GROUNDS MAINTANCE LLC	**c** EIN-PN	27-4720665-501
a Plan name	THE TWENTY SEVEN GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE TWENTY SEVEN GROUP	**c** EIN-PN	82-4809069-501
a Plan name	THE UNITED WAY OF GREATER LIMA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE UNITED WAY OF GREATER LIMA INC	**c** EIN-PN	34-4466356-501
a Plan name	THE VILLE RESTAURANT SOCA BENEFIT PLAN		
b Name of plan sponsor	THE VILLE RESTAURANT	**c** EIN-PN	34-1842085-501
a Plan name	THE WELLIFE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THE WELLIFE LLC	**c** EIN-PN	81-2724739-501
a Plan name	THE WENDT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE WENDT GROUP	**c** EIN-PN	27-0001376-501
a Plan name	THE WHOLE BOWL CINCINNATI SOCA BENEFIT PLAN		
b Name of plan sponsor	THE WHOLE BOWL CINCINNATI	**c** EIN-PN	81-3728599-501
a Plan name	THE WOODLANDS OF FINDLAY SOCA BENEFIT PLAN		
b Name of plan sponsor	THE WOODLANDS OF FINDLAY	**c** EIN-PN	93-4157143-501
a Plan name	THE WOODWORKING SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	THE WOODWORKING SHOP	**c** EIN-PN	26-0052942-501
a Plan name	THE YTOWN MIRROR AND GLASS SOCA BENEFIT PLAN		
b Name of plan sponsor	THE YTOWN MIRROR AND GLASS	**c** EIN-PN	34-0769357-501
a Plan name	THERAN SELPH & ASSOC LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	THERAN SELPH & ASSOC LTD.	**c** EIN-PN	84-4607345-501
a Plan name	THERAPY CONNECTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THERAPY CONNECTIONS, LLC	**c** EIN-PN	31-1652849-501

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	THERESA BUSH INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	THERESA BUSH INS AGENCY	**c** EIN-PN	20-0762134-501
a Plan name	THERMAL TECHNOLOGY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THERMAL TECHNOLOGY INC	**c** EIN-PN	34-1361178-501
a Plan name	THERMEQ SOCA BENEFIT PLAN		
b Name of plan sponsor	THERMEQ	**c** EIN-PN	34-1572679-501
a Plan name	THERMO-TEC INSULATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THERMO-TEC INSULATION INC	**c** EIN-PN	34-1736693-501
a Plan name	THIEL CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	THIEL CONSTRUCTION	**c** EIN-PN	34-1166285-501
a Plan name	THIEL DRAFTING SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THIEL DRAFTING SERVICE LLC	**c** EIN-PN	48-8587456-501
a Plan name	THIEL LANDSCAPE ARCHITECT SOCA BENEFIT PLAN		
b Name of plan sponsor	THIEL LANDSCAPE ARCHITECT	**c** EIN-PN	82-3164960-501
a Plan name	THINK MEDIA STUDIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	THINK MEDIA STUDIOS	**c** EIN-PN	81-2025155-501
a Plan name	THINK TANK, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THINK TANK, INC	**c** EIN-PN	20-3742833-501
a Plan name	THIRDSPACE ACTION LAB SOCA BENEFIT PLAN		
b Name of plan sponsor	THIRDSPACE ACTION LAB	**c** EIN-PN	83-1411092-501
a Plan name	THIRTY21 SOCA BENEFIT PLAN		
b Name of plan sponsor	THIRTY21	**c** EIN-PN	81-4739851-502
a Plan name	THOMAS & COMPANY LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS & COMPANY LPA	**c** EIN-PN	45-0462880-501

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	THOMAS AND THOMAS OPHTHAL SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS AND THOMAS OPHTHAL	**c** EIN-PN	34-1443815-502
a Plan name	THOMAS DOOR CONTROLS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS DOOR CONTROLS INC	**c** EIN-PN	31-0727173-502
a Plan name	THOMAS FLEET SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS FLEET SERVICE LLC	**c** EIN-PN	83-3430801-501
a Plan name	THOMAS J MILLER, DDS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS J MILLER, DDS INC	**c** EIN-PN	31-0886102-501
a Plan name	THOMAS P SHORTREED AND ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS P SHORTREED AND ASSOCIATES	**c** EIN-PN	45-1284695-501
a Plan name	THOMAS R BATES SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMAS R BATES	**c** EIN-PN	27-5527443-501
a Plan name	THOMPSON AND SONS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMPSON AND SONS INC.	**c** EIN-PN	34-1094564-501
a Plan name	THOMPSON CONSOLIDATED PROP SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMPSON CONSOLIDATED PROP	**c** EIN-PN	46-3423106-501
a Plan name	THOMPSON DUNLAP & HEYDINGER LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMPSON DUNLAP & HEYDINGER LTD	**c** EIN-PN	34-1002272-501
a Plan name	THOMPSON MARBLE AND GRANITE SOCA BENEFIT PLAN		
b Name of plan sponsor	THOMPSON MARBLE AND GRANITE	**c** EIN-PN	83-4092453-501
a Plan name	THORNVILLE FAMILY MED CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	THORNVILLE FAMILY MED CTR	**c** EIN-PN	31-1518750-501
a Plan name	THORSENS GREENHOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	THORSENS GREENHOUSE	**c** EIN-PN	31-1737306-502

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	THOUSAND X ONE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	THOUSAND X ONE LLC	**c** EIN-PN	82-0636688-501
a Plan name	THREE LEAF PRODUCTIONS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THREE LEAF PRODUCTIONS INC	**c** EIN-PN	34-1797319-501
a Plan name	THRIFT TOOL, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	THRIFT TOOL, INC	**c** EIN-PN	61-1083733-501
a Plan name	THRIVE COUNSELING SOCA BENEFIT PLAN		
b Name of plan sponsor	THRIVE COUNSELING	**c** EIN-PN	82-4565025-502
a Plan name	THRIVE STAFFING SOCA BENEFIT PLAN		
b Name of plan sponsor	THRIVE STAFFING	**c** EIN-PN	92-1983489-501
a Plan name	THURBER GATE INVESTMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	THURBER GATE INVESTMENT	**c** EIN-PN	27-1063873-501
a Plan name	TI PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TI PROPERTIES LLC	**c** EIN-PN	26-2870222-501
a Plan name	TIC ACQUISITION CO 2018 LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIC ACQUISITION CO 2018 LLC	**c** EIN-PN	84-3564673-501
a Plan name	TIDY WHITE COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	TIDY WHITE COMPANY	**c** EIN-PN	85-1194419-501
a Plan name	TIER1 MEDICAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TIER1 MEDICAL SERVICES	**c** EIN-PN	87-1119933-501
a Plan name	TIER1 MRO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIER1 MRO, LLC	**c** EIN-PN	99-1359526-501
a Plan name	TIGER FITNESS SOCA BENEFIT PLAN		
b Name of plan sponsor	TIGER FITNESS	**c** EIN-PN	31-1797832-501

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	TILSLEY AND ASSOCIATES ARCHITECTS SOCA BENEFIT PLAN		
b Name of plan sponsor	TILSLEY AND ASSOCIATES ARCHITECTS	**c** EIN-PN	20-2032384-501
a Plan name	TIM FRANK SEPTIC TANK CO SOCA BENEFIT PLAN		
b Name of plan sponsor	TIM FRANK SEPTIC TANK CO	**c** EIN-PN	34-1859184-501
a Plan name	TIM LAMB GROUP-MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TIM LAMB GROUP-MEDICAL	**c** EIN-PN	20-8271812-501
a Plan name	TIMAC SPRING MANUFACTURING SOCA BENEFIT PLAN		
b Name of plan sponsor	TIMAC SPRING MANUFACTURING	**c** EIN-PN	31-0936652-501
a Plan name	TIMCO PRODUCTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIMCO PRODUCTS INC	**c** EIN-PN	31-1437964-501
a Plan name	TIMCO RUBBER PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	TIMCO RUBBER PRODUCTS	**c** EIN-PN	34-0798596-501
a Plan name	TIME SAVERS HVAC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIME SAVERS HVAC	**c** EIN-PN	27-4386269-501
a Plan name	TIME SERVICE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIME SERVICE INC	**c** EIN-PN	34-4373785-501
a Plan name	TIMOTHY F PRISTAS DDS SOCA BENEFIT PLAN		
b Name of plan sponsor	TIMOTHY F PRISTAS DDS	**c** EIN-PN	45-3754897-501
a Plan name	TIMOTHY KENKEL OD SOCA BENEFIT PLAN		
b Name of plan sponsor	TIMOTHY KENKEL OD	**c** EIN-PN	31-1437986-501
a Plan name	TIN MAN HEATING AND COOLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIN MAN HEATING AND COOLING INC	**c** EIN-PN	34-1806359-501
a Plan name	TINT GUY SOCA BENEFIT PLAN		
b Name of plan sponsor	TINT GUY	**c** EIN-PN	30-1116194-501

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	TINYS DAIRY BARN SOCA BENEFIT PLAN		
b Name of plan sponsor	TINYS DAIRY BARN	**c** EIN-PN	86-2971719-501
a Plan name	TIPCO PUNCH, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TIPCO PUNCH, INC.	**c** EIN-PN	31-0985864-501
a Plan name	TIP-DAN ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIP-DAN ELECTRIC	**c** EIN-PN	31-1443058-501
a Plan name	TIPP EYE CENTER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIPP EYE CENTER INC	**c** EIN-PN	31-1441304-501
a Plan name	TIPTON LAWN AND LANDSCAPIN SOCA BENEFIT PLAN		
b Name of plan sponsor	TIPTON LAWN AND LANDSCAPIN	**c** EIN-PN	34-1823733-501
a Plan name	TIRE GUYS AND SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TIRE GUYS AND SERVICE LLC	**c** EIN-PN	83-1812268-501
a Plan name	TITAN COMMERCIAL FLOORING SOCA BENEFIT PLAN		
b Name of plan sponsor	TITAN COMMERCIAL FLOORING	**c** EIN-PN	27-3346875-501
a Plan name	TITAN MECHANICAL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TITAN MECHANICAL INC	**c** EIN-PN	47-2796106-502
a Plan name	TITAN MECHANICAL SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	TITAN MECHANICAL SOLUTIONS	**c** EIN-PN	27-2421054-501
a Plan name	TITAN TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	TITAN TECH	**c** EIN-PN	45-4203624-501
a Plan name	TITLE CONNECT AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TITLE CONNECT AGENCY LLC	**c** EIN-PN	81-0891616-501
a Plan name	TITTLE & PERLMUTER SOCA BENEFIT PLAN		
b Name of plan sponsor	TITTLE & PERLMUTER	**c** EIN-PN	47-4410623-501

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	TJD PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TJD PARTNERS LLC	**c** EIN-PN	85-2294407-501
a Plan name	TL MANAGEMENT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TL MANAGEMENT INC	**c** EIN-PN	30-0007530-501
a Plan name	TLA REAL ESTATE HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	TLA REAL ESTATE HOLDINGS	**c** EIN-PN	20-4003436-501
a Plan name	TLC HOME HEALTHCARE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TLC HOME HEALTHCARE LLC	**c** EIN-PN	83-4516166-501
a Plan name	TLC PROPERTY HOLDINGS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TLC PROPERTY HOLDINGS, LLC	**c** EIN-PN	27-2330754-501
a Plan name	TLM RESIDENTIAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TLM RESIDENTIAL SERVICES	**c** EIN-PN	46-3124474-501
a Plan name	TLR CHILI SOCA BENEFIT PLAN		
b Name of plan sponsor	TLR CHILI	**c** EIN-PN	26-3036395-501
a Plan name	TM 1992 PROPERTIES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TM 1992 PROPERTIES LLC	**c** EIN-PN	85-3773166-501
a Plan name	TMC MED MASSAGE AND MOVE SOCA BENEFIT PLAN		
b Name of plan sponsor	TMC MED MASSAGE AND MOVE	**c** EIN-PN	31-1411513-501
a Plan name	TMG SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TMG SERVICES	**c** EIN-PN	20-1668744-501
a Plan name	TMI ELECTRICAL CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	TMI ELECTRICAL CONTRACTORS	**c** EIN-PN	31-1306120-501
a Plan name	TMW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TMW LLC	**c** EIN-PN	45-2377222-501

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	TNEDICCA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TNEDICCA INC	**c** EIN-PN	47-3342177-501
a Plan name	TNT HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	TNT HEATING AND COOLING	**c** EIN-PN	26-3959239-501
a Plan name	TNT-CONQUEST OPERATING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TNT-CONQUEST OPERATING COMPANY LLC	**c** EIN-PN	92-0422697-501
a Plan name	TOBIAS TORCHIA & SIMON SOCA BENEFIT PLAN		
b Name of plan sponsor	TOBIAS TORCHIA & SIMON	**c** EIN-PN	31-0878499-501
a Plan name	TODAYS CLASSROOM SOCA BENEFIT PLAN		
b Name of plan sponsor	TODAYS CLASSROOM	**c** EIN-PN	27-2268879-501
a Plan name	TODD FARMS AND EXCAVATING SOCA BENEFIT PLAN		
b Name of plan sponsor	TODD FARMS AND EXCAVATING	**c** EIN-PN	46-4186739-501
a Plan name	TODD HOMES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TODD HOMES LLC	**c** EIN-PN	20-8130710-501
a Plan name	TODD J PESEK MD INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TODD J PESEK MD INC	**c** EIN-PN	27-0212527-501
a Plan name	TOJI SOCA BENEFIT PLAN		
b Name of plan sponsor	TOJI	**c** EIN-PN	46-3742934-501
a Plan name	TOLEDO LEGAL NEWS SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLEDO LEGAL NEWS	**c** EIN-PN	81-5221905-501
a Plan name	TOLEDO PHYSICAL EDUCATION SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLEDO PHYSICAL EDUCATION SUPPLY	**c** EIN-PN	34-1276429-501
a Plan name	TOLEDO SOLAR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLEDO SOLAR INC	**c** EIN-PN	83-3166189-501

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	TOLEDO SPRING SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLEDO SPRING SERVICE	**c** EIN-PN	34-4327820-502
a Plan name	TOLEDO TICKET SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLEDO TICKET	**c** EIN-PN	34-4376360-502
a Plan name	TOLMIROS FINANCIAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLMIROS FINANCIAL LLC	**c** EIN-PN	92-1832539-501
a Plan name	TOLSON COMFORT SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	TOLSON COMFORT SYSTEMS	**c** EIN-PN	34-1418196-501
a Plan name	TOMAHAWK PRINTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOMAHAWK PRINTING LLC	**c** EIN-PN	47-2509110-501
a Plan name	TOMCO MACHINING, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOMCO MACHINING, INC	**c** EIN-PN	31-1713905-501
a Plan name	TOMMY VASILIOU LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOMMY VASILIOU LLC	**c** EIN-PN	20-5337189-501
a Plan name	TOMS CONSTRUCTION, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TOMS CONSTRUCTION, INC.	**c** EIN-PN	34-1679035-501
a Plan name	TOMS SEWER AND DRAIN SOCA BENEFIT PLAN		
b Name of plan sponsor	TOMS SEWER AND DRAIN	**c** EIN-PN	92-1341901-501
a Plan name	TONDO CARPETS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TONDO CARPETS, INC.	**c** EIN-PN	34-0975635-501
a Plan name	TONIC STUDIOS SOCA BENEFIT PLAN		
b Name of plan sponsor	TONIC STUDIOS	**c** EIN-PN	46-2268509-501
a Plan name	TONY HUGHES CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	TONY HUGHES CONSTRUCTION	**c** EIN-PN	87-1251246-501

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	TONY RAVAGNANI ARCHITECTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TONY RAVAGNANI ARCHITECTS LLC	**c** EIN-PN	46-1024930-501
a Plan name	TONY YANCEY INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	TONY YANCEY INSURANCE AGENCY	**c** EIN-PN	76-0802390-501
a Plan name	TOO SMOOTH FLOOR PREP, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TOO SMOOTH FLOOR PREP, INC.	**c** EIN-PN	34-1994237-501
a Plan name	TOP ECHELON SOCA BENEFIT PLAN		
b Name of plan sponsor	TOP ECHELON	**c** EIN-PN	84-2012445-501
a Plan name	TOPP NOTCH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOPP NOTCH, LLC	**c** EIN-PN	81-2167043-501
a Plan name	TORRMETAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TORRMETAL LLC	**c** EIN-PN	87-2021288-501
a Plan name	TOTAL FLOORING SOLUTIONS OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL FLOORING SOLUTIONS OF OHIO	**c** EIN-PN	26-4639031-501
a Plan name	TOTAL HEALTH AND WELLNESS OBGYN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL HEALTH AND WELLNESS OBGYN LLC	**c** EIN-PN	46-3365860-501
a Plan name	TOTAL MAINTENANCE AND COAT SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL MAINTENANCE AND COAT	**c** EIN-PN	34-6548397-501
a Plan name	TOTAL NETWORK TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL NETWORK TECHNOLOGIES	**c** EIN-PN	01-0750901-501
a Plan name	TOTAL QUALITY CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL QUALITY CONSTRUCTION	**c** EIN-PN	30-0028571-501
a Plan name	TOTAL SLIM SOCA BENEFIT PLAN		
b Name of plan sponsor	TOTAL SLIM	**c** EIN-PN	37-1581350-501

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	TOUCH PARTY RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	TOUCH PARTY RENTALS	**c** EIN-PN	31-1762134-501
a Plan name	TOWBOAT MARINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWBOAT MARINE LLC	**c** EIN-PN	83-3152434-501
a Plan name	TOWN & COUNTRY TECHNICAL SERV SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWN & COUNTRY TECHNICAL SERV	**c** EIN-PN	31-1122074-501
a Plan name	TOWN AND COUNTRY RV CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWN AND COUNTRY RV CTR	**c** EIN-PN	34-1503492-501
a Plan name	TOWNE AND COUNTRY ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNE AND COUNTRY ANIMAL CLINIC	**c** EIN-PN	31-1219082-501
a Plan name	TOWNHOMES AT ANDRUS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNHOMES AT ANDRUS, LLC	**c** EIN-PN	88-3333870-501
a Plan name	TOWNHOMES AT BLENDON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNHOMES AT BLENDON LLC	**c** EIN-PN	87-2926509-501
a Plan name	TOWNHOMES AT FAIRWAYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNHOMES AT FAIRWAYS LLC	**c** EIN-PN	88-3355349-501
a Plan name	TOWNHOMES AT MCNAUGHTEN SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNHOMES AT MCNAUGHTEN	**c** EIN-PN	88-3385720-501
a Plan name	TOWNSEND'S HEATING AND COOLING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TOWNSENDS HEATING AND COOLING, INC.	**c** EIN-PN	31-1366307-501
a Plan name	TPB INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TPB INVESTMENTS LLC	**c** EIN-PN	86-2517438-501
a Plan name	TPC ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TPC ELECTRIC	**c** EIN-PN	47-5415257-501

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	TPSI LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TPSI LLC	**c** EIN-PN	03-0575768-501
a Plan name	TRACY & MILLS SURVEYORS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRACY & MILLS SURVEYORS	**c** EIN-PN	31-1452780-501
a Plan name	TRADING PLACES UNLIMITED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRADING PLACES UNLIMITED LLC	**c** EIN-PN	27-0272635-501
a Plan name	TRADITIONS LANDSCAPE GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRADITIONS LANDSCAPE GROUP LLC	**c** EIN-PN	47-2757784-501
a Plan name	TRAFFIC CONTROL SAFETY SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRAFFIC CONTROL SAFETY SVS	**c** EIN-PN	46-1688055-501
a Plan name	TRAILEX INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRAILEX INC	**c** EIN-PN	34-0925981-502
a Plan name	TRAIN YOUR PUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRAIN YOUR PUP LLC	**c** EIN-PN	46-4712744-501
a Plan name	TRAINING SERVICES INTL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRAINING SERVICES INTL INC	**c** EIN-PN	34-1867581-501
a Plan name	TRANQUILITY HEALTH CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANQUILITY HEALTH CARE	**c** EIN-PN	84-2684508-501
a Plan name	TRANQUILITY PSYCHIATRY & COUNSELING SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANQUILITY PSYCHIATRY & COUNSELING SERVICES	**c** EIN-PN	88-0632575-501
a Plan name	TRANSCON CONVEYOR SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANSCON CONVEYOR	**c** EIN-PN	83-1362827-501
a Plan name	TRANSEL CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANSEL CORP	**c** EIN-PN	31-1341485-501

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	TRANSFORMATIONS PLUS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANSFORMATIONS PLUS	**c** EIN-PN	27-3581560-501
a Plan name	TRANSFORMING TEAMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANSFORMING TEAMS LLC	**c** EIN-PN	86-3951956-501
a Plan name	TRANSTELLIGENCE SOCA BENEFIT PLAN		
b Name of plan sponsor	TRANSTELLIGENCE	**c** EIN-PN	47-4099706-501
a Plan name	TRAVELING NURSE SOCA BENEFIT PLAN		
b Name of plan sponsor	TRAVELING NURSE	**c** EIN-PN	26-4347550-501
a Plan name	TRDB INVESTMENTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRDB INVESTMENTS LLC	**c** EIN-PN	93-1430853-501
a Plan name	TREALITY SVS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREALITY SVS, LLC	**c** EIN-PN	47-2056482-501
a Plan name	TREATY MILL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREATY MILL LLC	**c** EIN-PN	45-5393499-501
a Plan name	TREBLE ONE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREBLE ONE LLC	**c** EIN-PN	31-1690907-501
a Plan name	TREE IMAGES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREE IMAGES LLC	**c** EIN-PN	46-5712591-501
a Plan name	TREE SAVER PALLETS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREE SAVER PALLETS INC	**c** EIN-PN	56-2303458-501
a Plan name	TREES ARE MY BUSINESS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREES ARE MY BUSINESS LLC	**c** EIN-PN	22-3971241-501
a Plan name	TREETOP ASSET MANAGEMENT GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	TREETOP ASSET MANAGEMENT GROUP	**c** EIN-PN	81-3826612-501

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	TREFT FINANCIAL SERVICES, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREFT FINANCIAL SERVICES, INC	**c** EIN-PN	31-1360749-501
a Plan name	TREMAINES AUTO SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	TREMAINES AUTO SERVICE	**c** EIN-PN	26-1434172-501
a Plan name	TREMONT ANIMAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TREMONT ANIMAL CLINIC	**c** EIN-PN	46-1226574-501
a Plan name	TRENCHING UNLIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENCHING UNLIMITED	**c** EIN-PN	34-1589500-501
a Plan name	TRENCHLESS RENTAL SOLUTION SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENCHLESS RENTAL SOLUTION	**c** EIN-PN	34-1797735-502
a Plan name	TRENDENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENDENTISTRY	**c** EIN-PN	46-3098648-501
a Plan name	TRENTON ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENTON ANIMAL HOSPITAL	**c** EIN-PN	45-5436022-501
a Plan name	TRENTONS HELPING HANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENTONS HELPING HANDS LLC	**c** EIN-PN	83-2433958-501
a Plan name	TRENTS TIN SHOP SOCA BENEFIT PLAN		
b Name of plan sponsor	TRENTS TIN SHOP	**c** EIN-PN	27-3753874-501
a Plan name	TREVOR FURBAY SOCA BENEFIT PLAN		
b Name of plan sponsor	TREVOR FURBAY	**c** EIN-PN	82-0709973-501
a Plan name	TRI ADVERTISING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI ADVERTISING INC	**c** EIN-PN	31-0820992-501
a Plan name	TRI COAST TITLE SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI COAST TITLE	**c** EIN-PN	77-0692441-501

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	TRI COUNTY BLOCK & BRICK SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI COUNTY BLOCK & BRICK	**c** EIN-PN	34-0961472-501
a Plan name	TRI COUNTY FEEDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI COUNTY FEEDS LLC	**c** EIN-PN	30-0710350-501
a Plan name	TRI COUNTY VET SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI COUNTY VET SERVICES	**c** EIN-PN	34-1312353-501
a Plan name	TRI HOUSE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI HOUSE LLC	**c** EIN-PN	47-2360246-501
a Plan name	TRI K ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI K ENTERPRISES INC	**c** EIN-PN	34-1713180-501
a Plan name	TRI STATE COATINGS REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI STATE COATINGS REPAIR	**c** EIN-PN	75-3263872-501
a Plan name	TRI STATE CPAS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI STATE CPAS INC	**c** EIN-PN	84-3555082-501
a Plan name	TRI STATE HOSPITALISTS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI STATE HOSPITALISTS	**c** EIN-PN	90-0975314-501
a Plan name	TRI STATE SERVICE STATION MAINTENANCE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI STATE SERVICE STATION MAINTENANCE INC	**c** EIN-PN	31-1408835-501
a Plan name	TRIACE USA SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIACE USA	**c** EIN-PN	83-0559603-501
a Plan name	TRIAD GOVERNMENTAL SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIAD GOVERNMENTAL SYSTEMS	**c** EIN-PN	31-1087810-501
a Plan name	TRIAGE TRUCK SERVICES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIAGE TRUCK SERVICES INC	**c** EIN-PN	85-1999821-501

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	TRIBUTE MEDICAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIBUTE MEDICAL LLC	**c** EIN-PN	81-4239505-501
a Plan name	TRI-CITY ANIMAL HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-CITY ANIMAL HOSPITAL	**c** EIN-PN	85-0577613-501
a Plan name	TRICO ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRICO ENTERPRISES LLC	**c** EIN-PN	26-0623554-501
a Plan name	TRI-COUNTY JOINT FIRE DIST SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-COUNTY JOINT FIRE DIST	**c** EIN-PN	31-1017933-501
a Plan name	TRI-COUNTY WATER AUTHORITY SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-COUNTY WATER AUTHORITY	**c** EIN-PN	34-0895054-501
a Plan name	TRIFECTA TOOL AND ENGINEERING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIFECTA TOOL AND ENGINEERING LLC	**c** EIN-PN	33-1093897-501
a Plan name	TRIMBLE INS AGENCY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIMBLE INS AGENCY INC	**c** EIN-PN	31-1009461-501
a Plan name	TRINITAS COUNSELING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRINITAS COUNSELING LLC	**c** EIN-PN	85-0945038-501
a Plan name	TRINITY AGING LIFE ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRINITY AGING LIFE ADVISORS	**c** EIN-PN	83-3482033-502
a Plan name	TRINITY FINANCIAL ADVISORS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRINITY FINANCIAL ADVISORS	**c** EIN-PN	41-2190819-501
a Plan name	TRIO CONCRETE CONSTRUCTION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIO CONCRETE CONSTRUCTION INC	**c** EIN-PN	34-1315893-501
a Plan name	TRI-OAK SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-OAK	**c** EIN-PN	92-2940873-501

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	TRIONETICS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIONETICS, INC	**c** EIN-PN	34-1621817-501
a Plan name	TRIPLE D PERFORMANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIPLE D PERFORMANCE	**c** EIN-PN	46-0832044-501
a Plan name	TRIPLE E PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIPLE E PARTNERS LLC	**c** EIN-PN	27-0714302-501
a Plan name	TRIPLE G LOGISTICS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIPLE G LOGISTICS LLC	**c** EIN-PN	87-3865499-501
a Plan name	TRIPLE R MAINTENANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIPLE R MAINTENANCE LLC	**c** EIN-PN	82-4962163-501
a Plan name	TRISTATE IMG IMAGING MED GRP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRISTATE IMG IMAGING MED GRP INC	**c** EIN-PN	31-0736495-501
a Plan name	TRI-STATE MEDIA SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-STATE MEDIA	**c** EIN-PN	04-3759615-501
a Plan name	TRI-STATE PAIN MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	TRI-STATE PAIN MANAGEMENT	**c** EIN-PN	35-2199392-501
a Plan name	TRIUMPH SIGN CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIUMPH SIGN CONSULTING	**c** EIN-PN	20-2095486-501
a Plan name	TRIVERI ELECTRIC LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRIVERI ELECTRIC LLC	**c** EIN-PN	46-1955093-501
a Plan name	TROJAN AUTO CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	TROJAN AUTO CARE	**c** EIN-PN	31-1741969-501
a Plan name	TROJAN INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	TROJAN INSURANCE AGENCY	**c** EIN-PN	20-3858591-501

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	TROPICOOL HEATING,AIR CONDITIONING&PLUMBING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TROPICOOL HEATING,AIR CONDITIONING&PLUMBING LLC	**c** EIN-PN	82-3048458-501
a Plan name	TROUTWINE AUTO SALES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TROUTWINE AUTO SALES INC	**c** EIN-PN	34-1100346-501
a Plan name	TROY DONUT UNIVERSITY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TROY DONUT UNIVERSITY INC	**c** EIN-PN	31-0785861-501
a Plan name	TROYER TRUCKING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TROYER TRUCKING INC	**c** EIN-PN	34-1247211-501
a Plan name	TROYMILL MANAGEMENT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TROYMILL MANAGEMENT LLC	**c** EIN-PN	83-2527937-501
a Plan name	TRU STEEL METALS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRU STEEL METALS	**c** EIN-PN	27-3950645-501
a Plan name	TRUCK TECH MAINTENANCE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUCK TECH MAINTENANCE LLC	**c** EIN-PN	31-1200191-501
a Plan name	TRUE DIGITAL COMMUNICATION SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUE DIGITAL COMMUNICATION	**c** EIN-PN	27-4303624-501
a Plan name	TRUE FINISH LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUE FINISH LANDSCAPING	**c** EIN-PN	47-3555455-501
a Plan name	TRUE NORTH WEALTH PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUE NORTH WEALTH PARTNERS	**c** EIN-PN	83-2050405-501
a Plan name	TRUE WEALTH DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUE WEALTH DESIGN	**c** EIN-PN	20-2387686-501
a Plan name	TRULY NOLEN PEST CONTROL SOCA BENEFIT PLAN		
b Name of plan sponsor	TRULY NOLEN PEST CONTROL	**c** EIN-PN	27-0755778-502

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	TRUMBULL COUNTY LOGGING CO SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUMBULL COUNTY LOGGING CO	**c** EIN-PN	34-1835318-502
a Plan name	TRUSSCORE USA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUSSCORE USA, INC	**c** EIN-PN	82-3857082-501
a Plan name	TRUSTONE DISTRIBUTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUSTONE DISTRIBUTORS	**c** EIN-PN	83-3040445-501
a Plan name	TRUSTPAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TRUSTPAR LLC	**c** EIN-PN	30-0758293-501
a Plan name	TSC MECHANICAL SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TSC MECHANICAL SERVICE LLC	**c** EIN-PN	84-3631229-501
a Plan name	TSII INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TSII INC	**c** EIN-PN	34-1598980-501
a Plan name	TST & ASSOCIATES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TST & ASSOCIATES LLC	**c** EIN-PN	81-3494195-501
a Plan name	TSUNAMI JIMS SOCA BENEFIT PLAN		
b Name of plan sponsor	TSUNAMI JIMS	**c** EIN-PN	45-4427850-501
a Plan name	TT NAIL & SPA LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TT NAIL & SPA LLC.	**c** EIN-PN	82-3187334-501
a Plan name	TTGROUP AMERICA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TTGROUP AMERICA INC	**c** EIN-PN	20-0584868-501
a Plan name	T-TOWN TREATS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	T-TOWN TREATS, INC.	**c** EIN-PN	85-2921958-501
a Plan name	TTR MFG SOCA BENEFIT PLAN		
b Name of plan sponsor	TTR MFG	**c** EIN-PN	27-2395342-501

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	TUNDA, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TUNDA, INC	**c** EIN-PN	93-3446356-501
a Plan name	TURF TRIMMERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TURF TRIMMERS LLC	**c** EIN-PN	84-5076552-501
a Plan name	TURFGRASS ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	TURFGRASS ENTERPRISES INC	**c** EIN-PN	34-1702403-501
a Plan name	TURN KEY TUNNELING SOCA BENEFIT PLAN		
b Name of plan sponsor	TURN KEY TUNNELING	**c** EIN-PN	05-0620667-502
a Plan name	TURNER ON ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	TURNER ON ELECTRIC	**c** EIN-PN	86-3314359-501
a Plan name	TURNER VAULT SOCA BENEFIT PLAN		
b Name of plan sponsor	TURNER VAULT	**c** EIN-PN	34-4472867-501
a Plan name	TURNING POINT WEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	TURNING POINT WEALTH	**c** EIN-PN	87-2386077-501
a Plan name	TURNKO, LLC. SOCA BENEFIT PLAN		
b Name of plan sponsor	TURNKO, LLC.	**c** EIN-PN	13-4338127-501
a Plan name	TURTLECREEK DETAIL COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	TURTLECREEK DETAIL COMPANY	**c** EIN-PN	82-1666388-501
a Plan name	TWIN LAKES VETERINARY HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	TWIN LAKES VETERINARY HOSPITAL	**c** EIN-PN	27-4705687-501
a Plan name	TWIN OAKS REFRIGERATION HEATING AND COOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	TWIN OAKS REFRIGERATION HEATING AND COOLING	**c** EIN-PN	31-1424979-501
a Plan name	TWIN OAST BREWING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TWIN OAST BREWING LLC	**c** EIN-PN	82-2139762-501

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	TWINSBURG OPTOMETRY SOCA BENEFIT PLAN		
b Name of plan sponsor	TWINSBURG OPTOMETRY	**c** EIN-PN	47-1511837-501
a Plan name	TWISTED METAL COLLISION SOCA BENEFIT PLAN		
b Name of plan sponsor	TWISTED METAL COLLISION	**c** EIN-PN	47-2611665-501
a Plan name	TWISTED PISTON LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TWISTED PISTON LLC	**c** EIN-PN	46-1017119-501
a Plan name	TWISTED TECHNOLOGIES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	TWISTED TECHNOLOGIES, LLC	**c** EIN-PN	93-4504520-501
a Plan name	TZAGOURNIS FAMILY & COSMETIC DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	TZAGOURNIS FAMILY & COSMETIC DENTISTRY	**c** EIN-PN	81-1323539-501
a Plan name	U S FITTINGS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	U S FITTINGS, INC.	**c** EIN-PN	45-4454808-501
a Plan name	U.S. FABRICS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	U.S. FABRICS, INC.	**c** EIN-PN	31-1685088-501
a Plan name	UAC ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	UAC ENTERPRISES	**c** EIN-PN	88-0582085-501
a Plan name	UHER AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	UHER AGENCY	**c** EIN-PN	34-1884660-501
a Plan name	ULTRAVIOLET RESOURCES INTERNATIONAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ULTRAVIOLET RESOURCES INTERNATIONAL	**c** EIN-PN	20-0388580-501
a Plan name	UNDER THE WEATHER SOCA BENEFIT PLAN		
b Name of plan sponsor	UNDER THE WEATHER	**c** EIN-PN	45-4648516-501
a Plan name	UNDERGROUND INNOVATIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	UNDERGROUND INNOVATIONS	**c** EIN-PN	27-0361337-501

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	UNDERHILL AND HODGE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNDERHILL AND HODGE LLC	**c** EIN-PN	47-1045545-501
a Plan name	UNDERWOOD'S TOWING INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	UNDERWOODS TOWING INC.	**c** EIN-PN	34-1108688-501
a Plan name	UNIFIED BUSINESS SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIFIED BUSINESS SOLUTIONS LLC	**c** EIN-PN	20-5187269-501
a Plan name	UNIFIED DWELLING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIFIED DWELLING LLC	**c** EIN-PN	46-2232235-501
a Plan name	UNIFIED TECH SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIFIED TECH SOLUTIONS	**c** EIN-PN	27-2481210-501
a Plan name	UNION INDUSTRIAL CONTRACT SOCA BENEFIT PLAN		
b Name of plan sponsor	UNION INDUSTRIAL CONTRACT	**c** EIN-PN	34-1254997-501
a Plan name	UNION MILES DEVELOPMENT CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	UNION MILES DEVELOPMENT CORPORATION	**c** EIN-PN	34-1336972-501
a Plan name	UNIONTOWN FIRE DEPT SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIONTOWN FIRE DEPT	**c** EIN-PN	34-1324252-501
a Plan name	UNIQUE HEALTH CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIQUE HEALTH CARE	**c** EIN-PN	47-3100961-501
a Plan name	UNITARIAN UNIVERSALIST CH OF AKRON SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITARIAN UNIVERSALIST CH OF AKRON	**c** EIN-PN	34-0792930-501
a Plan name	UNITED AMBULANCE SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED AMBULANCE SERVICE	**c** EIN-PN	27-2677884-501
a Plan name	UNITED COALITION FOR ANIMALS SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED COALITION FOR ANIMALS	**c** EIN-PN	30-0024366-501

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

a Plan name	UNITED FEED SCREWS SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED FEED SCREWS	**c** EIN-PN	34-1860122-501
a Plan name	UNITED HOUSEHOLD RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED HOUSEHOLD RENTALS	**c** EIN-PN	31-1169428-501
a Plan name	UNITED METAL FABRICATORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED METAL FABRICATORS INC	**c** EIN-PN	34-0673301-501
a Plan name	UNITED ROOFING SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED ROOFING	**c** EIN-PN	34-1006391-501
a Plan name	UNITED WAY OF GREATER DAYTON SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF GREATER DAYTON	**c** EIN-PN	31-0536658-503
a Plan name	UNITED WAY OF GREATER LORAIN COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF GREATER LORAIN COUNTY	**c** EIN-PN	34-1011104-501
a Plan name	UNITED WAY OF MPM SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF MPM	**c** EIN-PN	31-4379456-501
a Plan name	UNITED WAY OF N CENTRAL OH SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF N CENTRAL OH	**c** EIN-PN	31-0641236-501
a Plan name	UNITED WAY OF SANDUSKY COUNTY SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF SANDUSKY COUNTY	**c** EIN-PN	34-4479790-502
a Plan name	UNITED WAY OF WAYNE AND HOLMES COUNTY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF WAYNE AND HOLMES COUNTY INC.	**c** EIN-PN	34-0946973-501
a Plan name	UNIV OF AKRON RESEARCH SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIV OF AKRON RESEARCH	**c** EIN-PN	34-1972453-501
a Plan name	UNIVERSAL AUTO PARTS AND SALVAGE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL AUTO PARTS AND SALVAGE, LLC	**c** EIN-PN	31-1713447-501

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	UNIVERSAL CONCRETE GRINDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL CONCRETE GRINDING LLC	**c** EIN-PN	81-3023100-501
a Plan name	UNIVERSAL DERMATOLOGY VEIN CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL DERMATOLOGY VEIN CARE	**c** EIN-PN	45-1019175-501
a Plan name	UNIVERSAL PLUMBING PIPING SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL PLUMBING PIPING	**c** EIN-PN	26-4670355-501
a Plan name	UNIVERSITY ELECTRIC INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSITY ELECTRIC INC.	**c** EIN-PN	34-1569058-501
a Plan name	UNIVERSITY OF TOLEDO FEDERAL CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	UNIVERSITY OF TOLEDO FEDERAL CREDIT UNION	**c** EIN-PN	34-1044734-501
a Plan name	UNK S PLACE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	UNK S PLACE INC	**c** EIN-PN	47-4452184-501
a Plan name	UNLIMITED TOWING AND RECOVERY SOCA BENEFIT PLAN		
b Name of plan sponsor	UNLIMITED TOWING AND RECOVERY	**c** EIN-PN	85-1401103-501
a Plan name	UPDEGRAFF ACCOUNTING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	UPDEGRAFF ACCOUNTING, INC.	**c** EIN-PN	27-1457907-501
a Plan name	UPPER ECHELON ELECTRICAL SERVICES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UPPER ECHELON ELECTRICAL SERVICES, LLC	**c** EIN-PN	93-2706614-501
a Plan name	UPSPRING SOCA BENEFIT PLAN		
b Name of plan sponsor	UPSPRING	**c** EIN-PN	31-1628027-501
a Plan name	UPTOWN PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	UPTOWN PHARMACY	**c** EIN-PN	31-1576661-501
a Plan name	UPTOWN RESTAURANT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UPTOWN RESTAURANT LLC	**c** EIN-PN	82-0817415-501

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	URBAN BANTAM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	URBAN BANTAM LLC	**c** EIN-PN	86-2236855-501
a Plan name	URBAN ELSASS & SON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	URBAN ELSASS & SON INC	**c** EIN-PN	34-1215001-501
a Plan name	URBAN MINORITY ALCOHOL DRUG SOCA BENEFIT PLAN		
b Name of plan sponsor	URBAN MINORITY ALCOHOL DRUG	**c** EIN-PN	06-1710347-501
a Plan name	URBAN RENOVATION & DEVELOPMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	URBAN RENOVATION & DEVELOPMENT	**c** EIN-PN	83-3496519-501
a Plan name	URBANA CAFE SOCA BENEFIT PLAN		
b Name of plan sponsor	URBANA CAFE	**c** EIN-PN	46-3411575-501
a Plan name	URBN TIMBER SOCA BENEFIT PLAN		
b Name of plan sponsor	URBN TIMBER	**c** EIN-PN	81-1391141-501
a Plan name	UROLOGY SPECIALISTS OF OHIO SOCA BENEFIT PLAN		
b Name of plan sponsor	UROLOGY SPECIALISTS OF OHIO	**c** EIN-PN	20-8629620-501
a Plan name	US ADVANTAGE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	US ADVANTAGE INC.	**c** EIN-PN	31-1241661-501
a Plan name	US LASER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	US LASER LLC	**c** EIN-PN	26-3932379-501
a Plan name	US WARRANTY CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	US WARRANTY CORPORATION	**c** EIN-PN	94-3081783-501
a Plan name	USA CUSTOM WORKS LIMITED SOCA BENEFIT PLAN		
b Name of plan sponsor	USA CUSTOM WORKS LIMITED	**c** EIN-PN	85-1788425-501
a Plan name	USA EXPOSITIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	USA EXPOSITIONS LLC	**c** EIN-PN	46-3042568-501

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	USA PARKING SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	USA PARKING SYSTEMS INC	**c** EIN-PN	34-1695245-501
a Plan name	UTI MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	UTI MEDICAL	**c** EIN-PN	33-1025918-501
a Plan name	UTILITY ONE SOCA BENEFIT PLAN		
b Name of plan sponsor	UTILITY ONE	**c** EIN-PN	46-3745638-501
a Plan name	UTILITY SERVICES GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	UTILITY SERVICES GROUP LLC	**c** EIN-PN	46-2870662-501
a Plan name	V NOSS CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	V NOSS CONSULTING	**c** EIN-PN	81-4045534-501
a Plan name	V RANDOLPH BROWN CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	V RANDOLPH BROWN CONSULTING	**c** EIN-PN	45-5394400-501
a Plan name	V2 ARCHITECHTS SOCA BENEFIT PLAN		
b Name of plan sponsor	V2 ARCHITECHTS	**c** EIN-PN	31-1484476-501
a Plan name	V20 RECRUITING AND CONSULT SOCA BENEFIT PLAN		
b Name of plan sponsor	V20 RECRUITING AND CONSULT	**c** EIN-PN	84-3626422-501
a Plan name	VALE ROOFING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	VALE ROOFING COMPANY	**c** EIN-PN	34-1865359-501
a Plan name	VALENTINE CONTRACTORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VALENTINE CONTRACTORS INC	**c** EIN-PN	20-3598333-501
a Plan name	VALLEY ATV LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY ATV LLC	**c** EIN-PN	47-2243107-501
a Plan name	VALLEY BEHAVIORAL HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY BEHAVIORAL HEALTH	**c** EIN-PN	81-5315473-501

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	VALLEY FILM CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY FILM CO.	**c** EIN-PN	83-4358636-501
a Plan name	VALLEY REFRIGERATION SERVICE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY REFRIGERATION SERVICE, INC	**c** EIN-PN	31-1026675-501
a Plan name	VALLEY REGIONAL SURGERY CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY REGIONAL SURGERY CENTER	**c** EIN-PN	62-1621627-501
a Plan name	VALLEY TERMITE & PEST SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY TERMITE & PEST	**c** EIN-PN	20-3803557-501
a Plan name	VALLEY TOBACCO SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY TOBACCO	**c** EIN-PN	23-2870749-501
a Plan name	VALLEY WELDING SOCA BENEFIT PLAN		
b Name of plan sponsor	VALLEY WELDING	**c** EIN-PN	31-0986502-501
a Plan name	VALORES TRUCK PAINTING SOCA BENEFIT PLAN		
b Name of plan sponsor	VALORES TRUCK PAINTING	**c** EIN-PN	34-1172909-501
a Plan name	VALUE ADDED PACKAGING SOCA BENEFIT PLAN		
b Name of plan sponsor	VALUE ADDED PACKAGING	**c** EIN-PN	31-1589594-501
a Plan name	VALUE BASED SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	VALUE BASED SOLUTIONS	**c** EIN-PN	20-2684473-502
a Plan name	VALVE RELATED CONTROLS SOCA BENEFIT PLAN		
b Name of plan sponsor	VALVE RELATED CONTROLS	**c** EIN-PN	31-1296354-501
a Plan name	VALVOLE AMERICA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VALVOLE AMERICA LLC	**c** EIN-PN	47-2566155-501
a Plan name	VALVSYS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VALVSYS LLC	**c** EIN-PN	31-1734475-501

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	VAN CLEEF ASSET MANAGEMENT, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	VAN CLEEF ASSET MANAGEMENT, INC.	**c** EIN-PN	34-1583121-501
a Plan name	VAN MARTIN WINDOWS & ROOFING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VAN MARTIN WINDOWS & ROOFING LLC	**c** EIN-PN	27-3611343-502
a Plan name	VAN WERT AUTO SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	VAN WERT AUTO SUPPLY	**c** EIN-PN	34-1882576-501
a Plan name	VANDALIA RANGE AND ARMORY SOCA BENEFIT PLAN		
b Name of plan sponsor	VANDALIA RANGE AND ARMORY	**c** EIN-PN	31-1651099-501
a Plan name	VAN-GRINER SOCA BENEFIT PLAN		
b Name of plan sponsor	VAN-GRINER	**c** EIN-PN	27-2085195-501
a Plan name	VANKAT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VANKAT LLC	**c** EIN-PN	46-4633747-501
a Plan name	VANTHO SOCA BENEFIT PLAN		
b Name of plan sponsor	VANTHO	**c** EIN-PN	88-0665409-501
a Plan name	VAPOR HAUS SOCA BENEFIT PLAN		
b Name of plan sponsor	VAPOR HAUS	**c** EIN-PN	46-4013784-501
a Plan name	VARI-WALL TUBE SPEC, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	VARI-WALL TUBE SPEC, INC.	**c** EIN-PN	34-1475801-501
a Plan name	VAROUH OIL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VAROUH OIL INC	**c** EIN-PN	34-0818939-502
a Plan name	VARSITY RENTALS SOCA BENEFIT PLAN		
b Name of plan sponsor	VARSITY RENTALS	**c** EIN-PN	34-1439741-501
a Plan name	VASANTHA NORTH AMERICAN TECH CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	VASANTHA NORTH AMERICAN TECH CENTER	**c** EIN-PN	84-2724621-501

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	VASBINDER INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	VASBINDER INSURANCE	**c** EIN-PN	87-2196743-501
a Plan name	VASCO CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VASCO CONSULTING LLC	**c** EIN-PN	84-3359682-502
a Plan name	VAST RESULTS SOCA BENEFIT PLAN		
b Name of plan sponsor	VAST RESULTS	**c** EIN-PN	81-1256742-501
a Plan name	VAUGHAN MUSIC STUDIOS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VAUGHAN MUSIC STUDIOS LLC	**c** EIN-PN	71-1027453-501
a Plan name	VAZA CONSULTING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VAZA CONSULTING LLC	**c** EIN-PN	47-5598493-501
a Plan name	VECTOR CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	VECTOR CONSTRUCTION	**c** EIN-PN	34-1889903-501
a Plan name	VECTOR POINT SOLUTIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VECTOR POINT SOLUTIONS LLC	**c** EIN-PN	46-1265665-501
a Plan name	VECTRON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VECTRON INC	**c** EIN-PN	85-3857789-501
a Plan name	VEHR COMMUNICATIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VEHR COMMUNICATIONS, LLC	**c** EIN-PN	20-8275847-501
a Plan name	VELOCITY CONSTRUCTION SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VELOCITY CONSTRUCTION SERVICES LLC	**c** EIN-PN	20-4751426-502
a Plan name	VELOCITY IT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	VELOCITY IT SOLUTIONS	**c** EIN-PN	30-0302621-501
a Plan name	VELONTRA SOCA BENEFIT PLAN		
b Name of plan sponsor	VELONTRA	**c** EIN-PN	88-2010244-501

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	VENEMAN ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	VENEMAN ELECTRIC	**c** EIN-PN	27-4546699-501
a Plan name	VENEZIANO EYE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	VENEZIANO EYE GROUP	**c** EIN-PN	04-3706408-501
a Plan name	VENTURE ENVIRONMENTAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	VENTURE ENVIRONMENTAL CONTRACTING	**c** EIN-PN	34-1959515-501
a Plan name	VENTURE TECH CONSULTING SOCA BENEFIT PLAN		
b Name of plan sponsor	VENTURE TECH CONSULTING	**c** EIN-PN	82-5378062-501
a Plan name	VENTURE VALUATION ADVISORY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VENTURE VALUATION ADVISORY, LLC	**c** EIN-PN	93-4532579-501
a Plan name	VENTURELINX SOCA BENEFIT PLAN		
b Name of plan sponsor	VENTURELINX	**c** EIN-PN	34-1138913-501
a Plan name	VERACEPT RESOURCES SOCA BENEFIT PLAN		
b Name of plan sponsor	VERACEPT RESOURCES	**c** EIN-PN	36-4788872-501
a Plan name	VERDE SECURITY SOCA BENEFIT PLAN		
b Name of plan sponsor	VERDE SECURITY	**c** EIN-PN	85-2437823-501
a Plan name	VERGE IMPACT PARTNERS SOCA BENEFIT PLAN		
b Name of plan sponsor	VERGE IMPACT PARTNERS	**c** EIN-PN	83-4063027-501
a Plan name	VERITRAK SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VERITRAK SYSTEMS INC	**c** EIN-PN	34-1468145-501
a Plan name	VERMILION POWERS BOATS SOCA BENEFIT PLAN		
b Name of plan sponsor	VERMILION POWERS BOATS	**c** EIN-PN	34-4446542-501
a Plan name	VERMILION SOLAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VERMILION SOLAR LLC	**c** EIN-PN	83-2066689-501

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	VERMILION TOWNSHIP SOCA BENEFIT PLAN		
b Name of plan sponsor	VERMILION TOWNSHIP	**c** EIN-PN	34-6401513-501
a Plan name	VERNON FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	VERNON FUNERAL HOME	**c** EIN-PN	36-4517438-501
a Plan name	VEROOT SOCA BENEFIT PLAN		
b Name of plan sponsor	VEROOT	**c** EIN-PN	27-2145772-501
a Plan name	VERSATILE AUTOMATION TECH SOCA BENEFIT PLAN		
b Name of plan sponsor	VERSATILE AUTOMATION TECH	**c** EIN-PN	34-2033691-501
a Plan name	VERTICAL RUNNER SOCA BENEFIT PLAN		
b Name of plan sponsor	VERTICAL RUNNER	**c** EIN-PN	06-1699130-501
a Plan name	VES, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VES, LLC	**c** EIN-PN	83-0896853-501
a Plan name	VESCO MEDICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	VESCO MEDICAL	**c** EIN-PN	46-5706384-501
a Plan name	VETERAN CLAIMS PAID LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VETERAN CLAIMS PAID LLC	**c** EIN-PN	83-1662039-501
a Plan name	VETERANS ELECTRICAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	VETERANS ELECTRICAL GROUP	**c** EIN-PN	47-2931810-501
a Plan name	VETERANS TECHNOLOGY SOLUTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VETERANS TECHNOLOGY SOLUTIONS, LLC	**c** EIN-PN	83-4300596-501
a Plan name	VIB-ISO, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIB-ISO, LLC	**c** EIN-PN	32-0400844-501
a Plan name	VICON FABRICATING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	VICON FABRICATING COMPANY	**c** EIN-PN	34-1783189-502

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	VICTORY AIR MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	VICTORY AIR MECHANICAL	**c** EIN-PN	46-4285219-501
a Plan name	VICTORY FITNESS COLUMBUS W SOCA BENEFIT PLAN		
b Name of plan sponsor	VICTORY FITNESS COLUMBUS W	**c** EIN-PN	46-3164484-501
a Plan name	VIDIKA CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	VIDIKA CORPORATION	**c** EIN-PN	55-0826876-501
a Plan name	VIGIL SOFTWARE, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIGIL SOFTWARE, INC	**c** EIN-PN	92-1709954-501
a Plan name	VIKING HEATING AND AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	VIKING HEATING AND AIR	**c** EIN-PN	27-1079840-501
a Plan name	VILLA VISTA ROYALE, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VILLA VISTA ROYALE, LLC	**c** EIN-PN	26-3698082-501
a Plan name	VILLAGE CONTRACTORS CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	VILLAGE CONTRACTORS CONSTRUCTION	**c** EIN-PN	90-0913541-501
a Plan name	VILLAGE OUTDOORS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	VILLAGE OUTDOORS LTD	**c** EIN-PN	20-8617295-501
a Plan name	VIMCO HOSPITALITY HOLIDAY INN EXPRESS SOCA BENEFIT PLAN		
b Name of plan sponsor	VIMCO HOSPITALITY HOLIDAY INN EXPRESS	**c** EIN-PN	82-0894192-501
a Plan name	VINCE HROBAT INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	VINCE HROBAT INSURANCE AGENCY	**c** EIN-PN	34-1521983-501
a Plan name	VINYL MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	VINYL MARKETING	**c** EIN-PN	47-5603359-501
a Plan name	VINYL PROFILES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VINYL PROFILES LLC	**c** EIN-PN	20-4651313-501

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	VIO HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	VIO HOLDINGS	**c** EIN-PN	83-1778490-501
a Plan name	VIO MED SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	VIO MED SPA	**c** EIN-PN	83-2986668-501
a Plan name	VIOLA STARTZMAN CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIOLA STARTZMAN CLINIC	**c** EIN-PN	34-1758151-501
a Plan name	VIPO US SOCA BENEFIT PLAN		
b Name of plan sponsor	VIPO US	**c** EIN-PN	86-0887739-501
a Plan name	VIRTERA PARTNERS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIRTERA PARTNERS LLC	**c** EIN-PN	84-5033907-501
a Plan name	VIRTUAL MANUFACTURING RS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIRTUAL MANUFACTURING RS INC	**c** EIN-PN	84-4868060-501
a Plan name	VIRTUAL REMOTE STAFFING SOCA BENEFIT PLAN		
b Name of plan sponsor	VIRTUAL REMOTE STAFFING	**c** EIN-PN	87-2795549-501
a Plan name	VIRTUAL SPROUT SOCA BENEFIT PLAN		
b Name of plan sponsor	VIRTUAL SPROUT	**c** EIN-PN	47-1215790-501
a Plan name	VISIA MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	VISIA MARKETING	**c** EIN-PN	88-3670629-501
a Plan name	VISIMAX SOCA BENEFIT PLAN		
b Name of plan sponsor	VISIMAX	**c** EIN-PN	27-2751962-501
a Plan name	VISION ADVISORY GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	VISION ADVISORY GROUP	**c** EIN-PN	38-3771328-501
a Plan name	VISION CONCEPT TECHNOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	VISION CONCEPT TECHNOLOGY	**c** EIN-PN	20-0433130-501

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	VISION SOURCE HAMILTON SOCA BENEFIT PLAN		
b Name of plan sponsor	VISION SOURCE HAMILTON	**c** EIN-PN	31-1214652-501
a Plan name	VISTA AST, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VISTA AST, LLC	**c** EIN-PN	81-4235289-501
a Plan name	VISTA IT SYSTEMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VISTA IT SYSTEMS INC	**c** EIN-PN	46-4253757-501
a Plan name	VISTA WATER SOLUTIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VISTA WATER SOLUTIONS, INC	**c** EIN-PN	82-3372413-501
a Plan name	VITA DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	VITA DENTAL	**c** EIN-PN	27-3264201-501
a Plan name	VITAL HEALTH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VITAL HEALTH, LLC	**c** EIN-PN	87-3010066-501
a Plan name	VITALITY HEALTH SOCA BENEFIT PLAN		
b Name of plan sponsor	VITALITY HEALTH	**c** EIN-PN	47-1092955-501
a Plan name	VITORI HEALTH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VITORI HEALTH LLC	**c** EIN-PN	85-4262795-501
a Plan name	VIVA BELLA EVENTS SOCA BENEFIT PLAN		
b Name of plan sponsor	VIVA BELLA EVENTS	**c** EIN-PN	20-5740750-501
a Plan name	VIVID JEWELERS SOCA BENEFIT PLAN		
b Name of plan sponsor	VIVID JEWELERS	**c** EIN-PN	34-1534886-501
a Plan name	VIVID SIGN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	VIVID SIGN COMPANY	**c** EIN-PN	87-2727161-501
a Plan name	VIVID WRAPS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIVID WRAPS LLC	**c** EIN-PN	47-1677447-501

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	VIVO BROTHERS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VIVO BROTHERS INC	**c** EIN-PN	01-0720783-501
a Plan name	VLAD PEDIATRICS SOCA BENEFIT PLAN		
b Name of plan sponsor	VLAD PEDIATRICS	**c** EIN-PN	34-1236530-501
a Plan name	VMI AMERICAS SOCA BENEFIT PLAN		
b Name of plan sponsor	VMI AMERICAS	**c** EIN-PN	31-1492585-502
a Plan name	VNJ ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VNJ ENTERPRISES LLC	**c** EIN-PN	81-2904453-501
a Plan name	VOCATIONAL RESOURCE CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	VOCATIONAL RESOURCE CENTER	**c** EIN-PN	26-1595881-501
a Plan name	VOLPE, BROWN AND COMPANY, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VOLPE, BROWN AND COMPANY, LLC	**c** EIN-PN	26-3039379-501
a Plan name	VOLPINI LAW, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	VOLPINI LAW, LLC	**c** EIN-PN	82-0800726-501
a Plan name	VOLYNT AERO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	VOLYNT AERO INC	**c** EIN-PN	99-2699237-501
a Plan name	VONDERHAAR FIREPLACE SOCA BENEFIT PLAN		
b Name of plan sponsor	VONDERHAAR FIREPLACE	**c** EIN-PN	30-0515252-501
a Plan name	VTI ELECTRIC SOCA BENEFIT PLAN		
b Name of plan sponsor	VTI ELECTRIC	**c** EIN-PN	81-2295138-501
a Plan name	VYSION TECHNOLOGY SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	VYSION TECHNOLOGY SOLUTIONS	**c** EIN-PN	46-3784707-501
a Plan name	W & W AUTO TECH LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	W & W AUTO TECH LLC	**c** EIN-PN	31-1366080-501

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	W AUTO GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	W AUTO GROUP LLC	**c** EIN-PN	93-3955814-501
a Plan name	W C SALES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	W C SALES INC	**c** EIN-PN	34-1946817-501
a Plan name	W L TUCKER SUPPLY COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	W L TUCKER SUPPLY COMPANY	**c** EIN-PN	34-0583670-501
a Plan name	W T LEONES TRI AREA ELECTRIC CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	W T LEONES TRI AREA ELECTRIC CO INC	**c** EIN-PN	34-1268968-501
a Plan name	W. J. EGLI CO., INC SOCA BENEFIT PLAN		
b Name of plan sponsor	W. J. EGLI CO., INC	**c** EIN-PN	34-1028470-501
a Plan name	W.B. GREEN & COMPANY INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	W.B. GREEN & COMPANY INC.	**c** EIN-PN	31-0715304-501
a Plan name	W.E. DOWNIE CO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	W.E. DOWNIE CO INC	**c** EIN-PN	34-0961094-501
a Plan name	W.J. PLUMLY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	W.J. PLUMLY, INC.	**c** EIN-PN	34-1084365-501
a Plan name	WACO WAREHOUSE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WACO WAREHOUSE INC	**c** EIN-PN	31-1373266-501
a Plan name	WAELZHOLZ NORTH AMERICA SOCA BENEFIT PLAN		
b Name of plan sponsor	WAELZHOLZ NORTH AMERICA	**c** EIN-PN	34-1964192-501
a Plan name	WAGENBRENNER MGMT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGENBRENNER MGMT INC	**c** EIN-PN	31-1491162-501
a Plan name	WAGNER AND BLOCH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGNER AND BLOCH, LLC	**c** EIN-PN	46-4540592-501

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	WAGNER AUTO SALES LTD CO SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGNER AUTO SALES LTD CO	**c** EIN-PN	31-0718318-501
a Plan name	WAGNER ENERGY SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGNER ENERGY SERVICES	**c** EIN-PN	82-2714659-501
a Plan name	WAGNER INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGNER INSURANCE AGENCY	**c** EIN-PN	31-0725402-501
a Plan name	WAGS AND WHISKERS WONDERLAND SOCA BENEFIT PLAN		
b Name of plan sponsor	WAGS AND WHISKERS WONDERLAND	**c** EIN-PN	84-3448092-501
a Plan name	WAIN SECURITY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WAIN SECURITY INC	**c** EIN-PN	34-1934380-501
a Plan name	WAITE AND SON FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	WAITE AND SON FUNERAL HOME	**c** EIN-PN	34-0871207-502
a Plan name	WALDMAN AND COMPANY, CPA'S SOCA BENEFIT PLAN		
b Name of plan sponsor	WALDMAN AND COMPANY, CPAS	**c** EIN-PN	31-0926187-501
a Plan name	WALKER AND SON SIDING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALKER AND SON SIDING LLC	**c** EIN-PN	81-4314210-502
a Plan name	WALKER FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	WALKER FUNERAL HOME	**c** EIN-PN	27-3532486-501
a Plan name	WALL STREET SYSTEMS SOCA BENEFIT PLAN		
b Name of plan sponsor	WALL STREET SYSTEMS	**c** EIN-PN	34-1118372-501
a Plan name	WALLACE ACKLEY CO SOCA BENEFIT PLAN		
b Name of plan sponsor	WALLACE ACKLEY CO	**c** EIN-PN	31-6029924-501
a Plan name	WALLACE AND TURNER INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALLACE AND TURNER INC	**c** EIN-PN	31-1396641-501

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	WALLACE LAW FIRM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALLACE LAW FIRM LLC	**c** EIN-PN	83-0694092-501
a Plan name	WALLY BYAM CARAVAN CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	WALLY BYAM CARAVAN CLUB	**c** EIN-PN	95-6080831-501
a Plan name	WALNUT GROVE COUNTRY CLUB SOCA BENEFIT PLAN		
b Name of plan sponsor	WALNUT GROVE COUNTRY CLUB	**c** EIN-PN	31-0480290-501
a Plan name	WALNUT HILL FEEDS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WALNUT HILL FEEDS INC.	**c** EIN-PN	34-1855534-501
a Plan name	WALTEK COMPANY, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	WALTEK COMPANY, LTD.	**c** EIN-PN	46-1533958-501
a Plan name	WALTER & COMPANY FINANCIAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WALTER & COMPANY FINANCIAL	**c** EIN-PN	26-0310794-501
a Plan name	WALTER W STEPANIAK INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALTER W STEPANIAK INC	**c** EIN-PN	31-1158727-501
a Plan name	WALTERS AND WASYLYNA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALTERS AND WASYLYNA LLC	**c** EIN-PN	27-3134045-501
a Plan name	WALTERS BOILER WORKS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WALTERS BOILER WORKS INC	**c** EIN-PN	31-1448833-501
a Plan name	WANDELL KNOCKOUT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WANDELL KNOCKOUT LLC	**c** EIN-PN	81-3552099-501
a Plan name	WANDERING MONSTERS BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	WANDERING MONSTERS BREWING COMPANY	**c** EIN-PN	88-3202157-501
a Plan name	WAPAKONETA FORD LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WAPAKONETA FORD LLC	**c** EIN-PN	99-2051625-501

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	WARE TRANSPORT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WARE TRANSPORT LLC	**c** EIN-PN	85-2165878-501
a Plan name	WARM VENTURES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WARM VENTURES INC	**c** EIN-PN	82-3330729-502
a Plan name	WARNKE ENTERPRISES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WARNKE ENTERPRISES LLC	**c** EIN-PN	51-0568815-501
a Plan name	WARPED WING BREWING CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WARPED WING BREWING CO LLC	**c** EIN-PN	46-2178970-501
a Plan name	WARREN CONCRETE AND SUPPLY SOCA BENEFIT PLAN		
b Name of plan sponsor	WARREN CONCRETE AND SUPPLY	**c** EIN-PN	34-0930313-501
a Plan name	WARREN DERMATOLOGY & MOHS SURGERY SOCA BENEFIT PLAN		
b Name of plan sponsor	WARREN DERMATOLOGY & MOHS SURGERY	**c** EIN-PN	47-4385925-501
a Plan name	WARREN MEDICAL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	WARREN MEDICAL GROUP	**c** EIN-PN	34-1779660-501
a Plan name	WARRIOR IMPORTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WARRIOR IMPORTS INC	**c** EIN-PN	30-0113939-501
a Plan name	WASHAM PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	WASHAM PLUMBING	**c** EIN-PN	34-1802699-501
a Plan name	WASHINGTON FIRE DEPT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WASHINGTON FIRE DEPT INC	**c** EIN-PN	47-3087729-501
a Plan name	WASINIAK CONSTRUCTION SOCA BENEFIT PLAN		
b Name of plan sponsor	WASINIAK CONSTRUCTION	**c** EIN-PN	34-1853865-501
a Plan name	WATCH GANG SOCA BENEFIT PLAN		
b Name of plan sponsor	WATCH GANG	**c** EIN-PN	81-4256669-501

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	WATER DEEP MEDIA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATER DEEP MEDIA LLC	**c** EIN-PN	85-1684274-501
a Plan name	WATER SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	WATER SOLUTIONS	**c** EIN-PN	27-3462287-501
a Plan name	WATERS EDGE POOLS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATERS EDGE POOLS, LLC	**c** EIN-PN	20-3347213-501
a Plan name	WATERS TAX SERVICE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATERS TAX SERVICE LLC	**c** EIN-PN	85-2363668-501
a Plan name	WATERSPLASH GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATERSPLASH GROUP LLC	**c** EIN-PN	85-3279469-501
a Plan name	WATERVALE MGMT CO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATERVALE MGMT CO LLC	**c** EIN-PN	81-5428673-501
a Plan name	WATKINS PRINTING CO. SOCA BENEFIT PLAN		
b Name of plan sponsor	WATKINS PRINTING CO.	**c** EIN-PN	31-4369701-501
a Plan name	WATTS EXCAVATING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATTS EXCAVATING LLC	**c** EIN-PN	85-3556272-501
a Plan name	WATTS LAW LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WATTS LAW LLC	**c** EIN-PN	92-2560145-501
a Plan name	WAVE TITLE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	WAVE TITLE AGENCY	**c** EIN-PN	20-0601299-501
a Plan name	WAVEFRONT SOFTWARE SOCA BENEFIT PLAN		
b Name of plan sponsor	WAVEFRONT SOFTWARE	**c** EIN-PN	03-0398219-501
a Plan name	WAYNES COUNTRY MARKET SOCA BENEFIT PLAN		
b Name of plan sponsor	WAYNES COUNTRY MARKET	**c** EIN-PN	34-1736887-501

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	WAYNESVILLE VET HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WAYNESVILLE VET HOSPITAL	**c** EIN-PN	83-0782591-501
a Plan name	WAYPOINT BENEFIT SOLUTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	WAYPOINT BENEFIT SOLUTIONS	**c** EIN-PN	82-2384947-501
a Plan name	WB GRAPHICS & TS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WB GRAPHICS & TS LLC	**c** EIN-PN	81-1087946-501
a Plan name	WCLT RADIO SOCA BENEFIT PLAN		
b Name of plan sponsor	WCLT RADIO	**c** EIN-PN	31-4426909-501
a Plan name	WD FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WD FARMS LLC	**c** EIN-PN	35-2524827-501
a Plan name	WE CAN CODE IT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WE CAN CODE IT LLC	**c** EIN-PN	38-3956211-501
a Plan name	WE CARE4U TRANSIT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WE CARE4U TRANSIT LLC	**c** EIN-PN	86-3842662-501
a Plan name	WEAVER COMMERCIAL CONTRACTORS SOCA BENEFIT PLAN		
b Name of plan sponsor	WEAVER COMMERCIAL CONTRACTORS	**c** EIN-PN	26-3995629-501
a Plan name	WEB STUDIO INTERACTIVE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WEB STUDIO INTERACTIVE LLC	**c** EIN-PN	45-5546566-501
a Plan name	WEBB INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	WEBB INSURANCE AGENCY	**c** EIN-PN	34-4387490-501
a Plan name	WEBER & STERLING SOCA BENEFIT PLAN		
b Name of plan sponsor	WEBER & STERLING	**c** EIN-PN	34-1642932-501
a Plan name	WEBER MATERIALS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	WEBER MATERIALS LTD	**c** EIN-PN	82-3394971-501

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	WEBER WOOD MEDINGER CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	WEBER WOOD MEDINGER CORP	**c** EIN-PN	34-1846429-501
a Plan name	WEBFEAT COMPLETE SOCA BENEFIT PLAN		
b Name of plan sponsor	WEBFEAT COMPLETE	**c** EIN-PN	46-3189210-501
a Plan name	WEDGEWOOD FERNANDOS PIZZA SOCA BENEFIT PLAN		
b Name of plan sponsor	WEDGEWOOD FERNANDOS PIZZA	**c** EIN-PN	34-1910240-501
a Plan name	WEEDEN WATERPROOFING, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WEEDEN WATERPROOFING, INC.	**c** EIN-PN	34-1885618-501
a Plan name	WEIFFENBACH MARBLE AND TILE SOCA BENEFIT PLAN		
b Name of plan sponsor	WEIFFENBACH MARBLE AND TILE	**c** EIN-PN	31-0483680-501
a Plan name	WEIGEL FUNERAL HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	WEIGEL FUNERAL HOME	**c** EIN-PN	32-0092501-501
a Plan name	WEIL THOMAN SOCA BENEFIT PLAN		
b Name of plan sponsor	WEIL THOMAN	**c** EIN-PN	31-0483780-501
a Plan name	WEIS LAW GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WEIS LAW GROUP LLC	**c** EIN-PN	47-1440998-501
a Plan name	WELAGE CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	WELAGE CORPORATION	**c** EIN-PN	31-0583356-501
a Plan name	WELD PLUS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WELD PLUS INC	**c** EIN-PN	31-1327935-501
a Plan name	WELLAGE WINDOW CLEANING SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLAGE WINDOW CLEANING	**c** EIN-PN	47-3821351-501
a Plan name	WELLINGTON SPECIALTY SURGERY CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLINGTON SPECIALTY SURGERY CENTER LLC	**c** EIN-PN	84-4962361-501

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	WELLMAN SERVICES LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLMAN SERVICES LLC	**c** EIN-PN	27-1434287-502
a Plan name	WELLNESS MEDICAL CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLNESS MEDICAL CLINIC	**c** EIN-PN	81-2333460-501
a Plan name	WELLS ELECTRIC SERVICE SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLS ELECTRIC SERVICE	**c** EIN-PN	31-1296914-501
a Plan name	WELLSVILLE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WELLSVILLE, INC.	**c** EIN-PN	34-1840757-501
a Plan name	WELTONS MAINTENANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	WELTONS MAINTENANCE	**c** EIN-PN	34-1665093-501
a Plan name	WENDT TOURING SOCA BENEFIT PLAN		
b Name of plan sponsor	WENDT TOURING	**c** EIN-PN	26-3974085-501
a Plan name	WENGLOR SENSORIC, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WENGLOR SENSORIC, LLC	**c** EIN-PN	75-3267461-501
a Plan name	WERNKE STEEL SOCA BENEFIT PLAN		
b Name of plan sponsor	WERNKE STEEL	**c** EIN-PN	31-0859430-501
a Plan name	WES MARTIN INTERIORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WES MARTIN INTERIORS INC	**c** EIN-PN	34-1503023-501
a Plan name	WESLEY HOLDINGS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	WESLEY HOLDINGS LTD	**c** EIN-PN	81-2558220-501
a Plan name	WESSELS WORKPLACE SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	WESSELS WORKPLACE SERVICES	**c** EIN-PN	31-1577664-501
a Plan name	WEST AKRON VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST AKRON VETERINARY CLINIC	**c** EIN-PN	34-1964854-501

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	WEST CENTRAL OHIO PSYCHOTHERAPY CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST CENTRAL OHIO PSYCHOTHERAPY CARE	**c** EIN-PN	20-1667053-501
a Plan name	WEST CHESTER AUTOBODY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST CHESTER AUTOBODY, INC.	**c** EIN-PN	31-1705439-501
a Plan name	WEST CHESTER FAMILY DENTISTRY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST CHESTER FAMILY DENTISTRY, INC.	**c** EIN-PN	31-1758621-501
a Plan name	WEST ENTERPRISE SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST ENTERPRISE	**c** EIN-PN	31-1184551-501
a Plan name	WEST OHIO FOOD BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST OHIO FOOD BANK	**c** EIN-PN	34-1587528-501
a Plan name	WEST SIDE BREWING SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST SIDE BREWING	**c** EIN-PN	81-1569859-501
a Plan name	WEST SIDE PEDIATRICS INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WEST SIDE PEDIATRICS INC.	**c** EIN-PN	31-6094740-501
a Plan name	WESTAR OBSTETRICS & GYN SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTAR OBSTETRICS & GYN	**c** EIN-PN	82-0564139-501
a Plan name	WESTCOTT HOUSE FOUNDATION SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTCOTT HOUSE FOUNDATION	**c** EIN-PN	81-1747111-501
a Plan name	WESTERN JOINT AMBULANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN JOINT AMBULANCE	**c** EIN-PN	31-1439741-501
a Plan name	WESTERN RESERVE ANESTHESIA SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE ANESTHESIA	**c** EIN-PN	47-3572968-501
a Plan name	WESTERN RESERVE ENERGY SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE ENERGY	**c** EIN-PN	34-1212025-501

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	WESTERN RESERVE GRACE BRETHREN CHURCH SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE GRACE BRETHREN CHURCH	**c** EIN-PN	34-1514064-501
a Plan name	WESTERN RESERVE MECHANICAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE MECHANICAL	**c** EIN-PN	34-1592648-501
a Plan name	WESTERN RESERVE RESOURCES CORPORATION SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE RESOURCES CORPORATION	**c** EIN-PN	34-1185328-501
a Plan name	WESTERN RESERVE TITLE ESCR SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE TITLE ESCR	**c** EIN-PN	27-3982514-501
a Plan name	WESTERN RESERVE TRADING SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERN RESERVE TRADING	**c** EIN-PN	34-1855142-501
a Plan name	WESTERVILLE PEDIATRIC DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERVILLE PEDIATRIC DENTAL	**c** EIN-PN	81-3021174-501
a Plan name	WESTERVILLE PEDIATRIC SPEC SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERVILLE PEDIATRIC SPEC	**c** EIN-PN	31-1354344-501
a Plan name	WESTERVILLE SURGICAL SPECS SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERVILLE SURGICAL SPECS	**c** EIN-PN	31-1715401-501
a Plan name	WESTERVILLE VETERINARY CLINIC SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTERVILLE VETERINARY CLINIC	**c** EIN-PN	47-2142592-501
a Plan name	WESTFALLS FLORIST LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTFALLS FLORIST LLC	**c** EIN-PN	80-0318471-501
a Plan name	WESTHILL AUTOMOTIVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTHILL AUTOMOTIVE INC	**c** EIN-PN	34-1871565-501
a Plan name	WESTMINSTER TECHNOLOGIES SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTMINSTER TECHNOLOGIES	**c** EIN-PN	46-1915866-501

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	WESTRN KAT SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTRN KAT SERVICES	**c** EIN-PN	88-0655026-501
a Plan name	WESTWATER HOLDINGS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTWATER HOLDINGS LLC	**c** EIN-PN	86-3609596-501
a Plan name	WESTWOOD REAL ESTATE CAP SOCA BENEFIT PLAN		
b Name of plan sponsor	WESTWOOD REAL ESTATE CAP	**c** EIN-PN	87-2335980-501
a Plan name	WETSU GROUP INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WETSU GROUP INC	**c** EIN-PN	31-1390037-501
a Plan name	WETZ WAREHOUSING SOCA BENEFIT PLAN		
b Name of plan sponsor	WETZ WAREHOUSING	**c** EIN-PN	31-0929421-501
a Plan name	WHARTON DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WHARTON DENTAL	**c** EIN-PN	88-1249667-501
a Plan name	WHEN TEETH ALIGN, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHEN TEETH ALIGN, LLC	**c** EIN-PN	93-2016079-501
a Plan name	WHERE I'M FROM SOCA BENEFIT PLAN		
b Name of plan sponsor	WHERE IM FROM	**c** EIN-PN	46-4820536-501
a Plan name	WHETRO ADVISORS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHETRO ADVISORS INC	**c** EIN-PN	87-2786708-501
a Plan name	WHIPTY-DO! SOCA BENEFIT PLAN		
b Name of plan sponsor	WHIPTY-DO!	**c** EIN-PN	26-3929592-501
a Plan name	WHISKEY AND THE WOLF SOCA BENEFIT PLAN		
b Name of plan sponsor	WHISKEY AND THE WOLF	**c** EIN-PN	83-1522494-501
a Plan name	WHISKEY BUMP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHISKEY BUMP LLC	**c** EIN-PN	47-5580527-501

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	WHISKEY RIVER COMMUNICATIONS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHISKEY RIVER COMMUNICATIONS LLC	**c** EIN-PN	84-3613239-501
a Plan name	WHISKYVILLE GOLF COURSE SOCA BENEFIT PLAN		
b Name of plan sponsor	WHISKYVILLE GOLF COURSE	**c** EIN-PN	86-3987021-501
a Plan name	WHITE OAK RANCH SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITE OAK RANCH	**c** EIN-PN	20-3801085-501
a Plan name	WHITEBOARD MARKETING SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITEBOARD MARKETING	**c** EIN-PN	20-4368649-501
a Plan name	WHITEFEATHER MEATS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITEFEATHER MEATS LLC	**c** EIN-PN	34-1782553-501
a Plan name	WHITEHALL CAP, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITEHALL CAP, INC	**c** EIN-PN	23-7414075-501
a Plan name	WHITEWATER COMMUNITY CREDIT UNION SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITEWATER COMMUNITY CREDIT UNION	**c** EIN-PN	31-0597307-501
a Plan name	WHITEYS FOOD SYSTEM SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITEYS FOOD SYSTEM	**c** EIN-PN	34-1342737-501
a Plan name	WHITIE S CAR CARE SOCA BENEFIT PLAN		
b Name of plan sponsor	WHITIE S CAR CARE	**c** EIN-PN	87-3572239-501
a Plan name	WHOLE HEALTH DENTISTRY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHOLE HEALTH DENTISTRY LLC	**c** EIN-PN	46-1546001-501
a Plan name	WHOLEHAN MARKETING ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHOLEHAN MARKETING ASSOC	**c** EIN-PN	34-1551531-501
a Plan name	WHOLLY CRAFT LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WHOLLY CRAFT LLC	**c** EIN-PN	27-4703120-501

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	WHS ENGINEERING SOCA BENEFIT PLAN		
b Name of plan sponsor	WHS ENGINEERING	**c** EIN-PN	59-3798855-501
a Plan name	WICKED WELDING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WICKED WELDING INC	**c** EIN-PN	32-0043995-501
a Plan name	WIELANDS AUTO REPAIR SOCA BENEFIT PLAN		
b Name of plan sponsor	WIELANDS AUTO REPAIR	**c** EIN-PN	30-0736416-501
a Plan name	WILD OHIO BREWING COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	WILD OHIO BREWING COMPANY	**c** EIN-PN	82-2861093-501
a Plan name	WILDERNESS PRODUCTIONS, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILDERNESS PRODUCTIONS, LLC	**c** EIN-PN	45-1452874-501
a Plan name	WILKES AND COMPANY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILKES AND COMPANY INC	**c** EIN-PN	34-4470701-501
a Plan name	WILKIN TRANSPORTATION SOCA BENEFIT PLAN		
b Name of plan sponsor	WILKIN TRANSPORTATION	**c** EIN-PN	47-3462866-501
a Plan name	WILKINSON PAVING AND EXCAV SOCA BENEFIT PLAN		
b Name of plan sponsor	WILKINSON PAVING AND EXCAV	**c** EIN-PN	34-1568130-501
a Plan name	WILKS INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	WILKS INSURANCE AGENCY	**c** EIN-PN	31-1354261-501
a Plan name	WILLIAM ALBERT INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM ALBERT INC	**c** EIN-PN	31-0994679-501
a Plan name	WILLIAM F MITCHELL SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM F MITCHELL	**c** EIN-PN	31-1582256-501
a Plan name	WILLIAM H BASS TRUCKING SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM H BASS TRUCKING	**c** EIN-PN	34-1665325-501

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	WILLIAM J. HAGERTY, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM J. HAGERTY, INC.	**c** EIN-PN	31-0808092-501
a Plan name	WILLIAM R PINTARIC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM R PINTARIC	**c** EIN-PN	84-3499766-501
a Plan name	WILLIAM S MILLER INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAM S MILLER INC.	**c** EIN-PN	34-1349564-501
a Plan name	WILLIAMS AND SCHOENBERGER SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAMS AND SCHOENBERGER	**c** EIN-PN	31-1600615-501
a Plan name	WILLIAMS AND STROHM LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAMS AND STROHM LLC	**c** EIN-PN	27-1975409-501
a Plan name	WILLIAMSON INSURANCE SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIAMSON INSURANCE	**c** EIN-PN	31-0713527-501
a Plan name	WILLIS SPANGER STARLING SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLIS SPANGER STARLING	**c** EIN-PN	46-4230982-501
a Plan name	WILLOWVALE FARMS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLOWVALE FARMS INC	**c** EIN-PN	34-1054139-501
a Plan name	WILLSON FARMS SOCA BENEFIT PLAN		
b Name of plan sponsor	WILLSON FARMS	**c** EIN-PN	30-0300945-501
a Plan name	WILSE, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WILSE, INC.	**c** EIN-PN	85-4258128-501
a Plan name	WILSON INSURANCE GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	WILSON INSURANCE GROUP	**c** EIN-PN	31-1294837-501
a Plan name	WILSON SCHRAMM SPAULDING FUNERAL HOME, SOCA BENEFIT PLAN		
b Name of plan sponsor	WILSON SCHRAMM SPAULDING FUNERAL HOME,	**c** EIN-PN	31-0782863-501

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	WIND BENDER HEATING COOLING PLUMBING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WIND BENDER HEATING COOLING PLUMBING LLC	**c** EIN-PN	93-4674020-501
a Plan name	WIND CHIME FARMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WIND CHIME FARMS LLC	**c** EIN-PN	47-1948257-501
a Plan name	WINDING WORKS INCORPORATED SOCA BENEFIT PLAN		
b Name of plan sponsor	WINDING WORKS INCORPORATED	**c** EIN-PN	47-1588250-501
a Plan name	WINDOW AND DOOR EXPERTS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINDOW AND DOOR EXPERTS LLC	**c** EIN-PN	47-3961044-501
a Plan name	WINDOW DEPOT GLOBAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WINDOW DEPOT GLOBAL	**c** EIN-PN	45-3836664-501
a Plan name	WINELCO INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINELCO INC	**c** EIN-PN	31-0825164-501
a Plan name	WINFREE & ASSOCIATES SOCA BENEFIT PLAN		
b Name of plan sponsor	WINFREE & ASSOCIATES	**c** EIN-PN	31-1394072-501
a Plan name	WINGATE ALLOYS SOCA BENEFIT PLAN		
b Name of plan sponsor	WINGATE ALLOYS	**c** EIN-PN	34-1471777-501
a Plan name	WINGS OF CHANGE THERAPY SOCA BENEFIT PLAN		
b Name of plan sponsor	WINGS OF CHANGE THERAPY	**c** EIN-PN	27-2529727-501
a Plan name	WINGS R US HARRISON INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINGS R US HARRISON INC	**c** EIN-PN	31-1606668-501
a Plan name	WINHOVEN PIPELINE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINHOVEN PIPELINE LLC	**c** EIN-PN	82-5414080-501
a Plan name	WINKLEMAN POURED WALLS SOCA BENEFIT PLAN		
b Name of plan sponsor	WINKLEMAN POURED WALLS	**c** EIN-PN	31-1696988-501

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	WINNDENTAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINNDENTAL LLC	**c** EIN-PN	30-2881258-501
a Plan name	WINSLOW PHOTOGRAPHY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WINSLOW PHOTOGRAPHY LLC	**c** EIN-PN	82-1666565-501
a Plan name	WINTERSVILLE VOLUNTEER FD SOCA BENEFIT PLAN		
b Name of plan sponsor	WINTERSVILLE VOLUNTEER FD	**c** EIN-PN	51-0172600-501
a Plan name	WISE CHEM, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WISE CHEM, LLC	**c** EIN-PN	75-3191167-501
a Plan name	WISE CHRYSLER DODGE JEEP SOCA BENEFIT PLAN		
b Name of plan sponsor	WISE CHRYSLER DODGE JEEP	**c** EIN-PN	87-1091618-501
a Plan name	WISE HEATING AND COOLING INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WISE HEATING AND COOLING INC	**c** EIN-PN	80-0419440-501
a Plan name	WISE STEEL CONSTRUCTION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WISE STEEL CONSTRUCTION LLC	**c** EIN-PN	54-2194536-501
a Plan name	WISMAR PRECISION TOOLING SOCA BENEFIT PLAN		
b Name of plan sponsor	WISMAR PRECISION TOOLING	**c** EIN-PN	34-1842976-501
a Plan name	WISSLER, MYERS AND KALLIES FAMILY DENTISTRY SOCA BENEFIT PLAN		
b Name of plan sponsor	WISSLER, MYERS AND KALLIES FAMILY DENTISTRY	**c** EIN-PN	43-2094064-501
a Plan name	WK ENTERPRISES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WK ENTERPRISES INC	**c** EIN-PN	31-0820197-501
a Plan name	WLZ RESTAURANT GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WLZ RESTAURANT GROUP, LLC	**c** EIN-PN	81-1868489-501
a Plan name	WM L REINERT, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WM L REINERT, INC	**c** EIN-PN	31-1156070-501

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	WM. HAFER DRAYAGE INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	WM. HAFER DRAYAGE INC.	**c** EIN-PN	31-0529412-501
a Plan name	WNDER, LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	WNDER, LTD	**c** EIN-PN	84-2540976-501
a Plan name	WNW OPCO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WNW OPCO LLC	**c** EIN-PN	99-1027031-501
a Plan name	WODKA BAR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WODKA BAR LLC	**c** EIN-PN	83-1979421-501
a Plan name	WOLF MEDICAL ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	WOLF MEDICAL ENTERPRISES	**c** EIN-PN	31-1416101-501
a Plan name	WOLFF & PHAN AUTISM CENTER LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOLFF & PHAN AUTISM CENTER LLC	**c** EIN-PN	86-1265112-501
a Plan name	WOLFORDS ROLLOFF INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOLFORDS ROLLOFF INC	**c** EIN-PN	34-1725470-501
a Plan name	WOLFSON INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	WOLFSON INSURANCE AGENCY	**c** EIN-PN	83-2282524-501
a Plan name	WOLLAM AG CENTER SOCA BENEFIT PLAN		
b Name of plan sponsor	WOLLAM AG CENTER	**c** EIN-PN	34-1220147-501
a Plan name	WOMANKIND OBSTETRICS AND GYNECOLOGY SOCA BENEFIT PLAN		
b Name of plan sponsor	WOMANKIND OBSTETRICS AND GYNECOLOGY	**c** EIN-PN	31-1510712-501
a Plan name	WOMEN HAVE OPTIONS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOMEN HAVE OPTIONS, INC	**c** EIN-PN	31-1357186-501
a Plan name	WOMEN PHYSICIANS IN OBGYN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOMEN PHYSICIANS IN OBGYN INC	**c** EIN-PN	31-1199653-501

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	WOMENS INTEGRATIVE MEDICINE OBGYN LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOMENS INTEGRATIVE MEDICINE OBGYN LLC	**c** EIN-PN	84-3479085-501
a Plan name	WOMENS MED CENTERS LTD SOCA BENEFIT PLAN		
b Name of plan sponsor	WOMENS MED CENTERS LTD	**c** EIN-PN	31-1256471-501
a Plan name	WONDERLUST COLLECTIVE INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WONDERLUST COLLECTIVE INC	**c** EIN-PN	82-3555446-501
a Plan name	WOODFORD EXCAVATING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODFORD EXCAVATING LLC	**c** EIN-PN	20-4694972-501
a Plan name	WOODFORD SATHAPPAN MCGEE SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODFORD SATHAPPAN MCGEE	**c** EIN-PN	86-1840959-501
a Plan name	WOODLAND DESIGN COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODLAND DESIGN COMPANY	**c** EIN-PN	35-2546554-501
a Plan name	WOODLAWN CEMETERY SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODLAWN CEMETERY	**c** EIN-PN	34-1831168-501
a Plan name	WOODS SYSTEMS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODS SYSTEMS LLC	**c** EIN-PN	46-4009531-501
a Plan name	WOODSFIELD SAVINGS BANK SOCA BENEFIT PLAN		
b Name of plan sponsor	WOODSFIELD SAVINGS BANK	**c** EIN-PN	34-0627390-501
a Plan name	WOOSTER AREA COC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOOSTER AREA COC	**c** EIN-PN	34-0628440-501
a Plan name	WOOSTER COLOR POINT SOCA BENEFIT PLAN		
b Name of plan sponsor	WOOSTER COLOR POINT	**c** EIN-PN	45-4740906-501
a Plan name	WOOSTER ENT ASSOCIATES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOOSTER ENT ASSOCIATES INC	**c** EIN-PN	34-1317619-501

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	WOOSTER FAMILY DENTAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WOOSTER FAMILY DENTAL	**c** EIN-PN	47-1922902-501
a Plan name	WORCESTER SALES & SVS SOCA BENEFIT PLAN		
b Name of plan sponsor	WORCESTER SALES & SVS	**c** EIN-PN	34-1030276-502
a Plan name	WORDSWORTH COMM SOCA BENEFIT PLAN		
b Name of plan sponsor	WORDSWORTH COMM	**c** EIN-PN	31-1276127-501
a Plan name	WORKING ANIMALS GIVING SERVICE FOR KIDS SOCA BENEFIT PLAN		
b Name of plan sponsor	WORKING ANIMALS GIVING SERVICE FOR KIDS	**c** EIN-PN	20-5520973-501
a Plan name	WORKMANS AUTO PARTS INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WORKMANS AUTO PARTS INC	**c** EIN-PN	34-0895411-501
a Plan name	WORLDWIDE BRANDS DIRECT SOCA BENEFIT PLAN		
b Name of plan sponsor	WORLDWIDE BRANDS DIRECT	**c** EIN-PN	83-2578610-501
a Plan name	WORTHINGTON AREA COC SOCA BENEFIT PLAN		
b Name of plan sponsor	WORTHINGTON AREA COC	**c** EIN-PN	31-1037348-501
a Plan name	WORTHINGTON WOODS CARE CTR SOCA BENEFIT PLAN		
b Name of plan sponsor	WORTHINGTON WOODS CARE CTR	**c** EIN-PN	31-1238195-501
a Plan name	WOW BRANDS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WOW BRANDS LLC	**c** EIN-PN	87-3610142-501
a Plan name	WOW PAINTING AND CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	WOW PAINTING AND CONTRACTING	**c** EIN-PN	46-1591662-501
a Plan name	WP LAND COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	WP LAND COMPANY	**c** EIN-PN	81-3421079-501
a Plan name	WRAY PRECISION PRODUCTS SOCA BENEFIT PLAN		
b Name of plan sponsor	WRAY PRECISION PRODUCTS	**c** EIN-PN	31-1566922-501

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	WRECKED MEDIA GROUP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WRECKED MEDIA GROUP, LLC	**c** EIN-PN	85-3876147-501
a Plan name	WRIGHT AND SCHULTE LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WRIGHT AND SCHULTE LLC	**c** EIN-PN	45-5229285-501
a Plan name	WRIGHT BROTHERS GLOBAL GAS SOCA BENEFIT PLAN		
b Name of plan sponsor	WRIGHT BROTHERS GLOBAL GAS	**c** EIN-PN	04-3794211-501
a Plan name	WRIGHT BROTHERS INSTITUTE SOCA BENEFIT PLAN		
b Name of plan sponsor	WRIGHT BROTHERS INSTITUTE	**c** EIN-PN	82-0546129-501
a Plan name	WRIGHT TECHNICAL SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	WRIGHT TECHNICAL SERVICES	**c** EIN-PN	87-1889616-501
a Plan name	WRIS WEB SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	WRIS WEB SERVICES	**c** EIN-PN	34-1919483-501
a Plan name	WRITE ON TARGET INC SOCA BENEFIT PLAN		
b Name of plan sponsor	WRITE ON TARGET INC	**c** EIN-PN	31-1431575-501
a Plan name	WRITE RN SOCA BENEFIT PLAN		
b Name of plan sponsor	WRITE RN	**c** EIN-PN	47-5665628-501
a Plan name	WSG ENTERPRISES SOCA BENEFIT PLAN		
b Name of plan sponsor	WSG ENTERPRISES	**c** EIN-PN	27-0585495-501
a Plan name	WUF PET SPA SOCA BENEFIT PLAN		
b Name of plan sponsor	WUF PET SPA	**c** EIN-PN	83-3860302-501
a Plan name	WULFF AND ASSOCIATES CPA II LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	WULFF AND ASSOCIATES CPA II LLC	**c** EIN-PN	82-4244843-501
a Plan name	WURZ COMPANY SOCA BENEFIT PLAN		
b Name of plan sponsor	WURZ COMPANY	**c** EIN-PN	45-4997432-501

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	WYMARD ASSOC SOCA BENEFIT PLAN		
b Name of plan sponsor	WYMARD ASSOC	**c** EIN-PN	31-1714504-501
a Plan name	WYOGA VETERINARY HOSPITAL SOCA BENEFIT PLAN		
b Name of plan sponsor	WYOGA VETERINARY HOSPITAL	**c** EIN-PN	31-1211528-501
a Plan name	WYOMING AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	WYOMING AIR	**c** EIN-PN	45-2878444-501
a Plan name	XACT GENOMICS SOCA BENEFIT PLAN		
b Name of plan sponsor	XACT GENOMICS	**c** EIN-PN	46-1483943-501
a Plan name	XCLUTCH USA INC SOCA BENEFIT PLAN		
b Name of plan sponsor	XCLUTCH USA INC	**c** EIN-PN	30-1128483-501
a Plan name	XL PLUMBING SOCA BENEFIT PLAN		
b Name of plan sponsor	XL PLUMBING	**c** EIN-PN	45-1089213-501
a Plan name	XPERT DATA WORKS LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	XPERT DATA WORKS LLC	**c** EIN-PN	45-4931219-501
a Plan name	X-PRESS UNDERGROUND SOCA BENEFIT PLAN		
b Name of plan sponsor	X-PRESS UNDERGROUND	**c** EIN-PN	27-1554182-501
a Plan name	XTP DIESEL SOCA BENEFIT PLAN		
b Name of plan sponsor	XTP DIESEL	**c** EIN-PN	81-0915941-501
a Plan name	XTREME AIR LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	XTREME AIR LLC	**c** EIN-PN	26-2679159-501
a Plan name	Y CITY POWER WASH INC SOCA BENEFIT PLAN		
b Name of plan sponsor	Y CITY POWER WASH INC	**c** EIN-PN	26-1994031-501
a Plan name	YACOBOZZI DRAKATOS, ESQ SOCA BENEFIT PLAN		
b Name of plan sponsor	YACOBOZZI DRAKATOS, ESQ	**c** EIN-PN	11-3778012-501

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	YAGOUR GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YAGOUR GROUP LLC	**c** EIN-PN	26-3568626-501
a Plan name	YAMATO SOCA BENEFIT PLAN		
b Name of plan sponsor	YAMATO	**c** EIN-PN	46-5423191-501
a Plan name	YANKEE DOODLE FLAGS AND MORE SOCA BENEFIT PLAN		
b Name of plan sponsor	YANKEE DOODLE FLAGS AND MORE	**c** EIN-PN	82-5435292-501
a Plan name	YANKEE TRACE WOODS SOCA BENEFIT PLAN		
b Name of plan sponsor	YANKEE TRACE WOODS	**c** EIN-PN	46-3412974-501
a Plan name	YARD GROUP LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YARD GROUP LLC	**c** EIN-PN	82-3886926-501
a Plan name	YDS RESTORATION INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YDS RESTORATION INC	**c** EIN-PN	31-1564870-501
a Plan name	YEAGER WELL DRILLING PUMPS SOCA BENEFIT PLAN		
b Name of plan sponsor	YEAGER WELL DRILLING PUMPS	**c** EIN-PN	03-0422947-501
a Plan name	YELLOW SPRINGS HOME INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YELLOW SPRINGS HOME INC	**c** EIN-PN	31-1656193-501
a Plan name	YENSER GROSS HEAT AND AIR SOCA BENEFIT PLAN		
b Name of plan sponsor	YENSER GROSS HEAT AND AIR	**c** EIN-PN	46-2144937-501
a Plan name	YO GRANITE AND QUARTZ LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YO GRANITE AND QUARTZ LLC	**c** EIN-PN	83-4632055-501
a Plan name	YODER BONTRAGER INS AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	YODER BONTRAGER INS AGENCY	**c** EIN-PN	27-4396386-501
a Plan name	YORE STUFF INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YORE STUFF INC	**c** EIN-PN	47-4836135-501

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	YOST DC ART LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOST DC ART LLC	**c** EIN-PN	46-0621837-501
a Plan name	YOST INSURANCE AGENCY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOST INSURANCE AGENCY LLC	**c** EIN-PN	45-2204578-501
a Plan name	YOST PHARMACY SOCA BENEFIT PLAN		
b Name of plan sponsor	YOST PHARMACY	**c** EIN-PN	31-0650887-501
a Plan name	YOU BELONG SOCA BENEFIT PLAN		
b Name of plan sponsor	YOU BELONG	**c** EIN-PN	84-4181693-501
a Plan name	YOUNG & SON TRANSPORTATION LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNG & SON TRANSPORTATION LLC	**c** EIN-PN	45-4376053-501
a Plan name	YOUNG TEAM INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNG TEAM INC	**c** EIN-PN	20-8903322-501
a Plan name	YOUNG WEALTH MANAGEMENT SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNG WEALTH MANAGEMENT	**c** EIN-PN	46-3004855-501
a Plan name	YOUNGS MOBILE HOME SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGS MOBILE HOME	**c** EIN-PN	34-1035941-501
a Plan name	YOUNGSTOWN ENGINEERING COMPANY LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN ENGINEERING COMPANY LLC	**c** EIN-PN	93-4617033-501
a Plan name	YOUNGSTOWN HARD CHROME SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN HARD CHROME	**c** EIN-PN	34-0925064-501
a Plan name	YOUNGSTOWN HEAT TREAT SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN HEAT TREAT	**c** EIN-PN	47-2669260-501
a Plan name	YOUNGSTOWN INSURANCE AGENCY SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN INSURANCE AGENCY	**c** EIN-PN	87-3267727-501

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	YOUNGSTOWN NEIGHBORHOOD DEVELOPMENT CORP SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN NEIGHBORHOOD DEVELOPMENT CORP	**c** EIN-PN	26-4117989-501
a Plan name	YOUNGSTOWN SPECIALTY METALS, INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN SPECIALTY METALS, INC	**c** EIN-PN	34-1953435-501
a Plan name	YOUNGSTOWN SPRAY EQUIP SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUNGSTOWN SPRAY EQUIP	**c** EIN-PN	84-2937874-501
a Plan name	YOUR LAWN, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUR LAWN, INC.	**c** EIN-PN	31-1201080-501
a Plan name	YOURKVITCH & DIBO SOCA BENEFIT PLAN		
b Name of plan sponsor	YOURKVITCH & DIBO	**c** EIN-PN	83-2535441-501
a Plan name	YOUTH OVER US INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YOUTH OVER US INC	**c** EIN-PN	31-1694422-501
a Plan name	YU INSURANCE AND FINANCIAL SERVICES, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	YU INSURANCE AND FINANCIAL SERVICES, INC.	**c** EIN-PN	46-3038646-501
a Plan name	YUDU SALONS SOCA BENEFIT PLAN		
b Name of plan sponsor	YUDU SALONS	**c** EIN-PN	27-2774209-501
a Plan name	YVEL INC SOCA BENEFIT PLAN		
b Name of plan sponsor	YVEL INC	**c** EIN-PN	31-1276973-501
a Plan name	YWCA OF HAMILTON SOCA BENEFIT PLAN		
b Name of plan sponsor	YWCA OF HAMILTON	**c** EIN-PN	31-0537167-501
a Plan name	Z PROMOTIONS SOCA BENEFIT PLAN		
b Name of plan sponsor	Z PROMOTIONS	**c** EIN-PN	20-4973504-501
a Plan name	Z PROTECTION SERVICES SOCA BENEFIT PLAN		
b Name of plan sponsor	Z PROTECTION SERVICES	**c** EIN-PN	83-1281524-501

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	ZABOR FUNERAL HOMES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZABOR FUNERAL HOMES INC	**c** EIN-PN	34-1038801-501
a Plan name	ZACHARY D. SMITH, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZACHARY D. SMITH, LLC	**c** EIN-PN	47-2355099-501
a Plan name	ZAN INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZAN INC	**c** EIN-PN	45-5554859-501
a Plan name	ZANA LIMITED LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZANA LIMITED LLC	**c** EIN-PN	34-1911577-501
a Plan name	ZARLEY INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZARLEY INC	**c** EIN-PN	31-1167644-501
a Plan name	ZCI GENERAL CONTRACTING SOCA BENEFIT PLAN		
b Name of plan sponsor	ZCI GENERAL CONTRACTING	**c** EIN-PN	85-0626719-501
a Plan name	ZEIGLER EARTHWORKS SOCA BENEFIT PLAN		
b Name of plan sponsor	ZEIGLER EARTHWORKS	**c** EIN-PN	34-1838421-501
a Plan name	ZELCAP, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZELCAP, LLC	**c** EIN-PN	87-1299499-501
a Plan name	ZELLAR & ZELLAR ATTORNEY SOCA BENEFIT PLAN		
b Name of plan sponsor	ZELLAR & ZELLAR ATTORNEY	**c** EIN-PN	31-1773709-501
a Plan name	ZENDER ELECTRIC, LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZENDER ELECTRIC, LLC	**c** EIN-PN	32-0067075-501
a Plan name	ZENGEL REMODEL GROUP SOCA BENEFIT PLAN		
b Name of plan sponsor	ZENGEL REMODEL GROUP	**c** EIN-PN	45-4181802-501
a Plan name	ZICKA FAMILY HOMES LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	ZICKA FAMILY HOMES LTD.	**c** EIN-PN	46-1590626-501

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	ZIEHLER LANDSCAPING SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIEHLER LANDSCAPING	**c** EIN-PN	20-8131214-501
a Plan name	ZILLA LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZILLA LLC	**c** EIN-PN	80-0822602-501
a Plan name	ZIMMERFIELD SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIMMERFIELD	**c** EIN-PN	27-2957761-501
a Plan name	ZIMMERMAN & COMPANY CPAS, INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIMMERMAN & COMPANY CPAS, INC.	**c** EIN-PN	31-1632168-501
a Plan name	ZIMMERMAN REALTY, LTD. SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIMMERMAN REALTY, LTD.	**c** EIN-PN	34-1287530-501
a Plan name	ZIPDEAL LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIPDEAL LLC	**c** EIN-PN	84-4744250-501
a Plan name	ZIPS CAFE SOCA BENEFIT PLAN		
b Name of plan sponsor	ZIPS CAFE	**c** EIN-PN	32-0452865-501
a Plan name	ZKR INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZKR INC	**c** EIN-PN	26-1808884-501
a Plan name	ZOBRIST DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	ZOBRIST DESIGN	**c** EIN-PN	20-2753281-501
a Plan name	ZOCO DESIGN SOCA BENEFIT PLAN		
b Name of plan sponsor	ZOCO DESIGN	**c** EIN-PN	46-3609488-501
a Plan name	ZOETIC GLOBAL SOCA BENEFIT PLAN		
b Name of plan sponsor	ZOETIC GLOBAL	**c** EIN-PN	47-4527408-501
a Plan name	ZONECO LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZONECO LLC	**c** EIN-PN	85-3420705-501

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	ZONTEC INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZONTEC INC	**c** EIN-PN	31-1059925-502
a Plan name	ZORAS HOUSE SOCA BENEFIT PLAN		
b Name of plan sponsor	ZORAS HOUSE	**c** EIN-PN	84-2107847-501
a Plan name	ZORICH INDUSTRIES INC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZORICH INDUSTRIES INC	**c** EIN-PN	35-2236974-501
a Plan name	ZSI INC. SOCA BENEFIT PLAN		
b Name of plan sponsor	ZSI INC.	**c** EIN-PN	81-3134611-501
a Plan name	ZTH TRUCKING LLC SOCA BENEFIT PLAN		
b Name of plan sponsor	ZTH TRUCKING LLC	**c** EIN-PN	47-0996344-501
a Plan name	ZUKERMAN LEAR AND MURRAY CO LPA SOCA BENEFIT PLAN		
b Name of plan sponsor	ZUKERMAN LEAR AND MURRAY CO LPA	**c** EIN-PN	34-1840482-501
a Plan name	ZUKUN PLAN SOCA BENEFIT PLAN		
b Name of plan sponsor	ZUKUN PLAN	**c** EIN-PN	20-0880687-501
a Plan name	ZUNDO HOLDINGS SOCA BENEFIT PLAN		
b Name of plan sponsor	ZUNDO HOLDINGS	**c** EIN-PN	92-1377916-501
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

For calendar plan year 2024 or fiscal plan year beginning 05/01/2024 and ending 04/30/2025

A Name of plan
SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
SOUTHERN OHIO CHAMBER ALLIANCE

D Employer Identification Number (EIN)
47-1267936

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	25000	25000
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	318397	526875
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	39975736	42518040
(2) U.S. Government securities	1c(2)	26740312	28579520
(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)		
(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)	49073	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(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	67108518	71649435
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	582295	655639
i Acquisition indebtedness	1i		
j Other liabilities	1j	45291336	46456025
k Total liabilities (add all amounts in lines 1g through1j)	1k	45873631	47111664
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	21234887	24537771

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)	2786373	
(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)		2786373
(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)	390854	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		390854

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		3177227
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)	25410039	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	87937	
(5) Investment advisory and investment management fees	2i(5)	78107	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	10426	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	2345908	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		27932417
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		27932417
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-24755190
l Transfers of assets:			
(1) To this plan	2l(1)		558061523
(2) From this plan	2l(2)		530003449

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) [X] 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)** [X] 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: MALONEY + NOVOTNY LLC **(2)** EIN: 34-0677006

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.)	**4a**			
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	**4b**		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	**4c**		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	**4d**		X	
e Was this plan covered by a fidelity bond?	**4e**			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**			
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**			
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**			
l Has the plan failed to provide any benefit when due under the plan?	**4l**			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	**4n**			

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 _____.

SOUTHERN OHIO CHAMBER ALLIANCE
BENEFITS PLAN TRUST

FINANCIAL REPORT

APRIL 30, 2025 and 2024

SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN TRUST

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MALONEY + NOVOTNY LLC

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+ p 216.363.0100 | f 216.363.0500
+ www.maloneynovotny.com

Independent Auditors' Report

To the Board of Trustees of
Southern Ohio Chamber Alliance Benefit Plan Trust
Dayton, Ohio

Opinion

We have audited the financial statements of the Southern Ohio Chamber Alliance Benefit Plan Trust (the "Trust"), which comprise the statements of net assets as of April 30, 2025 and 2024, and the related statement of changes in net assets for the year ended April 30, 2025, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets of the Trust as of April 30, 2025 and 2024, and the changes in its net assets for the year ended April 30, 2025 in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Other Matter

The accompanying financial statements are those of the Trust; these financial statements do not purport to present the financial status of the participating plans and do not contain certain information on accumulated plan benefits and other disclosures necessary for a fair presentation of the financial statements of the participating plans in accordance with accounting principles generally accepted in the United States of America. Further, these financial statements do not purport to satisfy the Department of Labor's ("DOL") Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 ("ERISA") relating to the financial statements of employee benefit plans.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Auditors' Responsibilities for the Audits of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

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

Supplemental Schedules Required by ERISA and Other Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of operating expenses for the year ended April 30, 2025 and the supplemental schedule of assets (held at end of year) as of April 30, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements. The supplemental schedule of assets (held at end of year) as of April 30, 2025 is supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedule of assets (held at end of year) as of April 30, 2025, including its form and content, is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content of the schedule of assets (held at end of year) is presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Cleveland, Ohio
February 12, 2026

SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN TRUST

STATEMENTS OF NET ASSETS

April 30, 2025 and 2024

	2025	2024
ASSETS		
Cash	$ 25,000	$ 25,000
Investments, at fair value:		
Interest-bearing cash	109,991	39,975,736
Money market fund	42,408,049	-
U.S. Government securities	28,579,520	26,740,312
Total investments, at fair value	71,097,560	66,716,048
Receivables:		
Investment income	526,875	318,397
Prepaid expenses	-	49,073
Total assets	71,649,435	67,108,518
LIABILITIES		
Accounts payable	655,639	582,295
Net reinsurance payable	46,456,025	45,291,336
Total liabilities	47,111,664	45,873,631
NET ASSETS	$24,537,771	$21,234,887

The accompanying notes are an integral part of these financial statements.

SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN TRUST

STATEMENT OF CHANGES IN NET ASSETS

Year Ended April 30, 2025

ADDITIONS	
Net appreciation	$ 390,854
Interest income	2,786,373
Contributions from participating plans	558,061,523
Total additions	561,238,750
DEDUCTIONS	
Distributions to participating plans for benefit claims paid, net of reinsurance recoveries	47,841,333
Distributions to participating plans for premiums paid for the provision of benefits, net of ceding allowances	482,162,116
Total distributions to participating plans	530,003,449
Operating expenses	27,932,417
Total deductions	557,935,866
INCREASE IN NET ASSETS	3,302,884
NET ASSETS	
BEGINNING OF YEAR	21,234,887
END OF YEAR	$ 24,537,771

The accompanying notes are an integral part of these financial statements.

Note 1. Description of the Trust

The following description of the Southern Ohio Chamber Alliance Benefit Plan Trust (the "Trust") provides only general information. Participating plans should refer to the Trust agreement for a more complete description of the Trust's provisions.

General:

The Trust is intended to be a voluntary employees' beneficiary association ("VEBA") under Section 501(c)(9) of the Internal Revenue Code (the "IRC"). The purpose of the Trust is to hold Plan assets of a non-plan multiple employer welfare arrangement ("MEWA") as described in Section 1739 of the Ohio Revised Code and to pay those Plans' benefits and expenses. Employers of plans participating in this Trust (the "Plans") are members and affiliates of the Southern Ohio Chamber Alliance.

Contributions:

The Trust receives contributions for health and welfare coverage from the Plans. Such funds are utilized for the payment of premiums to Community Insurance Company dba Anthem Blue Cross and Blue Shield ("Anthem") for the provision of benefits on behalf of the Plans.

Distributions:

In addition to distributions for the premium payments to Anthem described above, distributions are made for the payment of benefit claims. These benefit claims are paid out of the Trust, on behalf of the Plans, to Anthem. Anthem administers payment of hospital charges, medical/surgical claims and prescription coverage.

Operating Expenses:

All administrative fees are paid by the Trust or the Plans at the option of the Trustees of the Trust.

Note 2. Summary of Significant Accounting Policies

The following are the significant accounting policies followed by the Trust:

Basis of Presentation:

The accompanying financial statements have been prepared on the accrual basis of accounting.

Net Reinsurance Payable:

Net reinsurance payable represents the net of amounts recoverable for claims paid (including stop loss recoveries) and amounts recoverable for administrative expenses under the quota share reinsurance agreement offset by the amounts payable for premiums ceded under the quota share and stop loss agreements.

Note 2. Summary of Significant Accounting Policies (Continued)

Recognition of Contribution Revenue:

Contribution revenue is recognized in the month for which coverage is being paid. Contributions received after the coverage months are recorded as receivables. Management has estimated an allowance of $-0- for past due accounts for contributions receivable from the Plans as of April 30, 2025 and 2024.

Investment Valuation and Income Recognition:

The Trust's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Reference Note 4 for discussion of fair value measurements.

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

Use of Estimates:

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the trust administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities and changes therein and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Distributions for the Payment of Benefits:

Distributions for the payment of benefit claims and premiums are recorded when processed and approved for payment to Anthem.

Subsequent Events:

The Trust has evaluated subsequent events through February 12, 2026, the date the financial statements were available to be issued.

Note 3. Cash and Investments

The Trust holds its temporary cash as cash or money market funds with national financial institutions which at times may exceed federally insured amounts.

Note 4. Fair Value Measurements

The Trust estimates the fair value of financial instruments using available market information and other generally accepted valuation methodologies. The inputs used to measure fair value are classified into three levels:

Note 4. Fair Value Measurements (Continued)

- Level 1 – Quoted market prices in active markets for identical assets and liabilities
- Level 2 – Observable market-based inputs or unobservable inputs that are corroborated by market data
- Level 3 – Unobservable inputs in which little or no market data exists

The following is a description of the valuation methodologies used for Trust assets measured at fair value:

- Interest-bearing cash is valued at cost, which approximates fair value.
- Money market fund consists of a short-term investment fund that maintains daily liquidity and has a constant unit value of $1.00 and is classified as a Level 1 instrument.
- U.S. Government securities are valued using pricing models maximizing the use of observable inputs for similar securities.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. There have been no changes in the methodologies used from 2024 to 2025. Furthermore, while the Trust believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table summarizes the Trust's investments at April 30, 2025 and 2024 at fair value and indicates the level of the valuation techniques utilized by the Trust:

		April 30,	
	Level	2025	2024
Interest-bearing cash	1	$ 109,991	$39,975,736
Money market fund	1	42,408,049	-
U.S. Government securities	2	28,579,520	26,740,312

Note 5. Reinsurance

During the year ended April 30, 2025, the Trust was subject to a quota share reinsurance agreement with Anthem to cede 90% of the Plans' health business.

During the year ended April 30, 2025, the plans were subject to a stop loss reinsurance agreement with Anthem for medical and prescription drug coverage. The premium is based upon the monthly funding rates and number of participants in each month of the contract. The specific stop loss threshold per covered person is $500,000. The total amount of reinsurance recovered due to stop loss was $20,863,501 for the year ended April 30, 2025.

Note 6. Related Party/Party-in-Interest Transactions

The Trust has entered into an administrative services contract with Anthem, whereby Anthem collects premiums and administers payment of hospital charges, medical/surgical claims and prescription coverage on behalf of the Plans. The Trust also has an agreement that compensates Anthem for quoting, servicing and renewing employers of the Plans. These transactions qualify as party-in-interest. Total fees paid from the Trust to Anthem for these services amounted to $20,863,684 for the year ended April 30, 2025.

The Trust has appointed Consoliplex Chambers LLC to act as plan manager of the plans and Trust. Fees paid to Consoliplex Chambers LLC for the year ended April 30, 2025 were $3,709,319.

Note 7. Tax Status

In December 2019, the Internal Revenue Service finalized regulations under IRC Section 512(a)(3)(E)(i) which specified that net investment income earned by a VEBA is taxable as unrelated business income. For the year ended April 30, 2025, the Trust incurred $997,572 in federal income taxes on unrelated business income that is included in operating expenses on the statement of changes in net assets. The Trust's management has analyzed the tax positions taken by the Trust and has concluded that, as of April 30, 2025, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Trust is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

In addition, the plans and the Trust are required to operate in conformity with the IRC to maintain the tax exempt status of the Trust. The trust administrator believes that the plans are being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the related Trust is tax exempt.

Note 8. Trust Termination

Although it has not expressed any intention to do so, the Trust may only be terminated by the Southern Ohio Chamber Alliance with at least 30 days' written notice to the Trustees. Any Trust assets at the time of termination will be distributed or will be transferred to another trust that complies with the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended, in accordance with the trust document.

Participating Plans' sponsors have the right under the plans to discontinue their contributions at any time and to terminate the plans, subject to provisions set forth in ERISA.

SUPPLEMENTAL SCHEDULES

SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN TRUST

SCHEDULE OF OPERATING EXPENSES

Year Ended April 30, 2025

Outsourced services	$25,410,039
Marketing fees	765,665
Federal income tax	997,572
Regulatory fees	513,578
Professional services	98,363
Investment fees	78,107
Insurance expense	69,093
Total operating expenses	$27,932,417

SOUTHERN OHIO CHAMBER ALLIANCE BENEFIT PLAN TRUST

EMPLOYER NO. 47-1267936
PLAN NO. 501

SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)

April 30, 2025

(a)	(b) Identity of Party	(c) Description of Investments	(d) Cost	Current (e) Value
		Interest-bearing cash		
	Huntington National Bank	Cash	$ 109,991	$ 109,991
		Money market fund		
	Fidelity	Institutional Government Money Market Fund - Class 1	42,408,049	42,408,049
		U.S. Government securities		
	U.S. Treasury	U.S. Treasury Notes 4.625% due 11/15/2026	8,928,364	9,018,899
	U.S. Treasury	U.S. Treasury Notes 2.25% due 11/15/2025	4,868,044	4,948,633
	U.S. Treasury	U.S. Treasury Notes 4.5% due 11/15/2025	4,291,187	4,306,887
	U.S. Treasury	U.S. Treasury Notes 4.125% due 11/15/2027	1,797,328	1,823,063
	U.S. Treasury	U.S. Treasury Notes 4.25% due 10/15/2025	1,800,754	1,800,352
	U.S. Treasury	U.S. Treasury Notes 3.5% due 09/15/2025	1,794,132	1,794,938
	U.S. Treasury	U.S. Treasury Notes 3.125% due 08/15/2025	1,790,661	1,793,461
	U.S. Treasury	U.S. Treasury Notes 3.125% due 11/15/2028	1,736,016	1,769,625
	U.S. Treasury	U.S. Treasury Notes 4.125% due 11/30/2029	1,302,590	1,323,664
			$70,827,114	$71,097,560