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 06/01/2024 and ending 05/31/2025

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
MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

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)
MISSOURI CHAMBER FEDERATION BENEFIT PLAN

428 EAST CAPITOL AVENUE #100
JEFFERSON CITY, MO 65101

2b Employer Identification Number (EIN)
82-0907005

2c Plan Sponsor's telephone number
573-634-3511

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.	03/16/2026	BECKY WEKENBORG
	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 159682641

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 06/01/2024 and ending 05/31/2025

A Name of plan
MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
MISSOURI CHAMBER FEDERATION BENEFIT PLAN

D Employer Identification Number (EIN)
82-0907005

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
RIGHTCHOICE MANAGED CARE, INC.

(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
43-0303080	10345	0000	45418	06/01/2024	05/31/2025

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
198072	0

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

MIKE KEITH INSURANCE, INC.
103 W FRANKLIN ST. PO BOX 388
CLINTON, MO 64735

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
62397			3

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

JOHN JOE INSURANCE AGENCY, INC.
1802 UNION ST.
ST. JOSEPH, MO 64501

(b) Amount of sales and base commissions paid	Fees and other commissions paid		
	(c) Amount	(d) Purpose	(e) Organization code
55944			3

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

MISSOURI HERITAGE INSURANCE

192 STATE HWY Z
GORDONVILLE, MO 63752

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
24462			3

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

MDIS

3340 AMERICAN AVENUE
JEFFERSON CITY, MO 65109

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
9531			3

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

LEGACY BROKERS, LLC

15301 W 87TH ST PKWAY
#275
LENEXA, KS 66219

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
6750			3

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

EMPLOYEE BENEFIT DESIGN

1125 E. LAKEWOOD
SPRINGFIELD, MO 65810

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
5508			3

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

MERIDIAN

201 MAIN STREET
BELTON, MO 64012

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
3699			3

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

NAUGHT-NAUGHT AGENCY

11441 CHRISTY DRIVE
PO BOX 1768
JEFFERSON CITY, MO 65101

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
3672			3

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

MOPCA AFFINITY

540 MARYVILLE CENTRE DRIVE
SUITE 200
ST. LOUIS, MO 63141

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
3456			3

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

CROLEY INSURANCE

300 E 39TH STREET
KANSAS CITY, MO 64111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
2619			3

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

SPECIALTY RISK INSURANCE AGENCY

2023 S GARRISON AVE
CARTHAGE, MO 64836

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
2565			3

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

WEYDERT INSURANCE SERVICES

321 SOUTH MAIN STREET
PO BOX 8
BROOKFIELD, MO 64628

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
2133			3

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

DIVERSIFIED SOLUTIONS, LLC

1251 NW BRIARCLIFF PARKWAY
SUITE 140
KANSAS CITY, MO 64116

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1944			3

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

NEVONT

1370 E PRIMROSE STREET
SUITE A
SPRINGFIELD, MO 65804

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1944			3

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

LIVIAN AGENCY

705-B SE MELODY LANE
#102
LEES SUMMIT, MO 64063

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1566			3

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

CRANE AGENCY

100 N BROADWAY
#900
ST. LOUIS, MO 63102

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1512			3

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

BROKER-SOURCE

4601 COLLEGE BLVD
SUITE 210
LEAWOOD, KS 66211

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
1134			3

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

SUNSTAR INS. GROUP DBA TIG ADVISORS

200 SOUTHAMPTON DRIVE
COLUMBIA, MO 65203

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
972			3

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

MARSH MCLENNAN AGENCY

825 MARYVILLE CENTRE DRIVE
SUITE 200
ST. LOUIS, MO 63017

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
972			3

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

INSURANCE RESOURCES & CONSULTANTS

520 N CENTENNIAL BLVD
NEVADA, MO 64772

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
972			3

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

ASSURED PARTNERS

12645 OLIVE BLVD
SUITE 300
ST. LOUIS, MO 63141

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
945			3

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

THE BLUE CHIP CONSORTIUM, LLC

390 S. WOODS MILL ROAD
SUITE 100
CHESTERFIELD, MO 63017

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
864			3

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

ARNOLD INSURANCE SERVICES

115 E 4TH STREET
SUITE 2
MARYVILLE, MO 64468

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
648			3

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

WINTER-DENT & COMPANY

2700 FORUM BLVD
COLUMBIA, MO 65203

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
648			3

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

LEWER BENEFITS GROUP

4534 WORNALL ROAD
KANSAS CITY, MO 64111

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
486			3

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

USI INSURANCE SERVICES

13075 MANCHESTER ROAD
SUITE 325
ST. LOUIS, MO 63131

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
405			3

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

WALLSTREET GROUP ADVISORS DBA WALLS

1530 RAX COURT
ST. LOUIS, MO 63017

(b) Amount of sales and base commissions paid	Fees and other commissions paid		**(e)** Organization code
	(c) Amount	**(d)** Purpose	
324			3

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	6721730
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 06/01/2024 and ending 05/31/2025

A Name of plan	**B** Three-digit plan number (PN) ▶
MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST	501
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)
MISSOURI CHAMBER FEDERATION BENEFIT PLAN	82-0907005

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)

RIGHTCHOICE MANAGED CARE, INC.

43-0303080

(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	8100939	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CONSOLIPLEX MISSOURI BENEFITS

30-0994005

(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	2225203	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARSH & MCLENNAN COMPANIES, INC.

36-2668272

(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?
16	N/A	583157	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)

THP INSURANCE COMPANY

55-0765726

(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	379584	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

PAYTIENT TECHNOLOGIES, INC.

82-5100129

(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?
16	N/A	295833	Yes [ ] No [X]	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	184155	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)

THE CENTRAL TRUST BANK DBA HSA CENT

43-6232349

(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 28	N/A	176556	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	66463	Yes ☐ No ☒	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	60000	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 06/01/2024 and ending 05/31/2025

A Name of plan
MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

B Three-digit plan number (PN) ▶ 501

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
MISSOURI CHAMBER FEDERATION BENEFIT PLAN

D Employer Identification Number (EIN)
82-0907005

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	1103 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	1103 LLC	**c** EIN-PN	42-1642012-501
a Plan name	A BOMMARITO WINE CO MCF BENEFIT PLAN		
b Name of plan sponsor	A BOMMARITO WINE CO	**c** EIN-PN	43-1590569-501
a Plan name	ACCORD MORTGAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ACCORD MORTGAGE LLC	**c** EIN-PN	47-2193708-501
a Plan name	ACCOUNTING PLUS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACCOUNTING PLUS INC	**c** EIN-PN	06-1650270-501
a Plan name	ADDED INNOVATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADDED INNOVATION LLC	**c** EIN-PN	81-5050317-501
a Plan name	ALL CLEAR PUMPING AND SEWER MCF BENEFIT PLAN		
b Name of plan sponsor	ALL CLEAR PUMPING AND SEWER	**c** EIN-PN	27-0766697-501
a Plan name	ALL SEASONS SIGNS MCF BENEFIT PLAN		
b Name of plan sponsor	ALL SEASONS SIGNS	**c** EIN-PN	43-1487020-501
a Plan name	AMERICAN EAGLE WASTE MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN EAGLE WASTE	**c** EIN-PN	02-0709689-501
a Plan name	ANDRES ROOFING MCF BENEFIT PLAN		
b Name of plan sponsor	ANDRES ROOFING	**c** EIN-PN	43-1460532-501
a Plan name	ANDYS LAWN & LANDSCAPE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDYS LAWN & LANDSCAPE LLC	**c** EIN-PN	47-2894563-501
a Plan name	ART GLASS UNLIMITED INC MCF BENEFIT PLAN		
b Name of plan sponsor	ART GLASS UNLIMITED INC	**c** EIN-PN	43-1054399-501
a Plan name	ASHE LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASHE LAW LLC	**c** EIN-PN	82-1040615-501

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

a Plan name	ATLAS SECURITY SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ATLAS SECURITY SERVICE INC	**c** EIN-PN	43-0812888-501
a Plan name	ATON BROS CONSTRUCTION COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	ATON BROS CONSTRUCTION COMPANY	**c** EIN-PN	20-1818825-501
a Plan name	AW HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AW HOLDINGS LLC	**c** EIN-PN	20-0939911-501
a Plan name	AWTREY HEATING & AIR CONDITIONING MCF BENEFIT PLAN		
b Name of plan sponsor	AWTREY HEATING & AIR CONDITIONING	**c** EIN-PN	45-2525676-501
a Plan name	BALLS N STRIKE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BALLS N STRIKE LLC	**c** EIN-PN	90-0150507-501
a Plan name	BASS LITHO COLOR INC MCF BENEFIT PLAN		
b Name of plan sponsor	BASS LITHO COLOR INC	**c** EIN-PN	43-1375905-501
a Plan name	BAVARIAN ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	BAVARIAN ENTERPRISES INC	**c** EIN-PN	43-1595086-501
a Plan name	BEE CLEAN CARPET AND RESTORATION MCF BENEFIT PLAN		
b Name of plan sponsor	BEE CLEAN CARPET AND RESTORATION	**c** EIN-PN	27-4547032-501
a Plan name	BOBBI D CLARK CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOBBI D CLARK CPA LLC	**c** EIN-PN	90-1120012-501
a Plan name	BRAKER AG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRAKER AG LLC	**c** EIN-PN	82-2858012-501
a Plan name	BRENTWOOD PHYSICAL THERAPY LP MCF BENEFIT PLAN		
b Name of plan sponsor	BRENTWOOD PHYSICAL THERAPY LP	**c** EIN-PN	76-0402382-501
a Plan name	BROWN DOG NETWORKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROWN DOG NETWORKS LLC	**c** EIN-PN	04-3758206-501

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

a Plan name	BRS CUSTOM PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRS CUSTOM PAINTING LLC	**c** EIN-PN	27-0544998-501
a Plan name	BUCKLEY & BUCKLEY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUCKLEY & BUCKLEY LLC	**c** EIN-PN	43-1759637-501
a Plan name	BURR OAK CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BURR OAK CONSULTING LLC	**c** EIN-PN	82-3420174-501
a Plan name	CADENCE TECHNOLOGY SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CADENCE TECHNOLOGY SERVICE LLC	**c** EIN-PN	46-3537915-501
a Plan name	CAPITAL CITY CASA MCF BENEFIT PLAN		
b Name of plan sponsor	CAPITAL CITY CASA	**c** EIN-PN	45-4136412-501
a Plan name	CAPTAIN ASSET MGMT MCF BENEFIT PLAN		
b Name of plan sponsor	CAPTAIN ASSET MGMT	**c** EIN-PN	82-5167722-501
a Plan name	CAPTIVA MARKETING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAPTIVA MARKETING LLC	**c** EIN-PN	72-1538347-501
a Plan name	CARROLLTON SPECIALTY PRODUCTS CO MCF BENEFIT PLAN		
b Name of plan sponsor	CARROLLTON SPECIALTY PRODUCTS CO	**c** EIN-PN	43-1557848-501
a Plan name	CARSON MITCHELL INC MCF BENEFIT PLAN		
b Name of plan sponsor	CARSON MITCHELL INC	**c** EIN-PN	44-0522493-501
a Plan name	CERTIFIED NETS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CERTIFIED NETS INC	**c** EIN-PN	43-1776919-501
a Plan name	CERTIFIED TRACTOR REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CERTIFIED TRACTOR REPAIR LLC	**c** EIN-PN	80-0931133-501
a Plan name	CHANCES OF HOPE ISL MCF BENEFIT PLAN		
b Name of plan sponsor	CHANCES OF HOPE ISL	**c** EIN-PN	81-0688917-501

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

a Plan name	CHASE PATTON DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHASE PATTON DDS LLC	**c** EIN-PN	82-3139802-501
a Plan name	CKK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CKK LLC	**c** EIN-PN	47-3885968-501
a Plan name	CLAYTON ASSET MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	CLAYTON ASSET MANAGEMENT	**c** EIN-PN	43-1600173-501
a Plan name	COLUMBIA PRIMARY CARE ASSOC MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA PRIMARY CARE ASSOC	**c** EIN-PN	48-1267799-501
a Plan name	COOL BLUE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COOL BLUE LLC	**c** EIN-PN	37-1774398-501
a Plan name	COVENANT TECHNOLOGY PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COVENANT TECHNOLOGY PARTNERS LLC	**c** EIN-PN	20-1437365-501
a Plan name	CRISPY EDGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CRISPY EDGE LLC	**c** EIN-PN	46-2965560-501
a Plan name	CT SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	CT SOLUTIONS	**c** EIN-PN	43-1562394-501
a Plan name	D & B HVAC SYSTEMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D & B HVAC SYSTEMS LLC	**c** EIN-PN	56-2430073-501
a Plan name	DALLAS COUNTY HEALTH DEPARTMENT MCF BENEFIT PLAN		
b Name of plan sponsor	DALLAS COUNTY HEALTH DEPARTMENT	**c** EIN-PN	43-1268846-501
a Plan name	DAVID C UKENA DDS MCF BENEFIT PLAN		
b Name of plan sponsor	DAVID C UKENA DDS	**c** EIN-PN	20-0568165-501
a Plan name	DETAILERS & MORE INC MCF BENEFIT PLAN		
b Name of plan sponsor	DETAILERS & MORE INC	**c** EIN-PN	43-1612544-501

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

a Plan name	DIMENSIONS IN WOOD MCF BENEFIT PLAN		
b Name of plan sponsor	DIMENSIONS IN WOOD	**c** EIN-PN	43-1765873-501
a Plan name	DISSEN ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	DISSEN ENTERPRISES INC	**c** EIN-PN	43-1261495-501
a Plan name	DOERHOFF & ASSOCIATES CPA MCF BENEFIT PLAN		
b Name of plan sponsor	DOERHOFF & ASSOCIATES CPA	**c** EIN-PN	43-1564516-501
a Plan name	DON HEIL OIL COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	DON HEIL OIL COMPANY INC	**c** EIN-PN	43-1155295-501
a Plan name	DPS MEDIA INC MCF BENEFIT PLAN		
b Name of plan sponsor	DPS MEDIA INC	**c** EIN-PN	01-0756182-501
a Plan name	DR. LANE NUTT OD MCF BENEFIT PLAN		
b Name of plan sponsor	DR. LANE NUTT OD	**c** EIN-PN	43-1235711-501
a Plan name	DRAPER PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DRAPER PLUMBING LLC	**c** EIN-PN	90-0957135-501
a Plan name	DTLS INC MCF BENEFIT PLAN		
b Name of plan sponsor	DTLS INC	**c** EIN-PN	46-1106903-501
a Plan name	ECOWATER SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	ECOWATER SYSTEMS	**c** EIN-PN	43-1805148-501
a Plan name	EMERGENCE TELERADIOLOGY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EMERGENCE TELERADIOLOGY LLC	**c** EIN-PN	26-3830027-501
a Plan name	EMPLOYEE BENEFIT DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	EMPLOYEE BENEFIT DESIGN	**c** EIN-PN	43-1787778-501
a Plan name	FARM & POWER LAWN & LEISURE INC MCF BENEFIT PLAN		
b Name of plan sponsor	FARM & POWER LAWN & LEISURE INC	**c** EIN-PN	43-1022437-501

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

a Plan name	FIRETECH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIRETECH LLC	**c** EIN-PN	20-0544010-501
a Plan name	FNGS INC MCF BENEFIT PLAN		
b Name of plan sponsor	FNGS INC	**c** EIN-PN	43-1835036-501
a Plan name	FORSYTH ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FORSYTH ADVISORS LLC	**c** EIN-PN	45-1554830-501
a Plan name	FYRA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FYRA LLC	**c** EIN-PN	83-1345620-501
a Plan name	GARDNER EXPRESS CARE MCF BENEFIT PLAN		
b Name of plan sponsor	GARDNER EXPRESS CARE	**c** EIN-PN	82-5431200-501
a Plan name	GATEWAY CAPITAL ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY CAPITAL ADVISORS LLC	**c** EIN-PN	83-1489480-501
a Plan name	GATEWAY PYROTECHNIC PRODUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY PYROTECHNIC PRODUCTION	**c** EIN-PN	73-1722423-501
a Plan name	GENFINITY WEALTH MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	GENFINITY WEALTH MANAGEMENT	**c** EIN-PN	47-4571767-501
a Plan name	GILLESPIE EXCAVATING COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GILLESPIE EXCAVATING COMPANY LLC	**c** EIN-PN	43-1412625-501
a Plan name	GLASS TINT USA INC MCF BENEFIT PLAN		
b Name of plan sponsor	GLASS TINT USA INC	**c** EIN-PN	43-1827886-501
a Plan name	GLENDALE CAPITAL PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GLENDALE CAPITAL PARTNERS LLC	**c** EIN-PN	81-4997359-501
a Plan name	GLOBAL FOOTWEAR INTERNATIONAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GLOBAL FOOTWEAR INTERNATIONAL LLC	**c** EIN-PN	83-2408969-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GO AUTOMOTIVE LLC	**c** EIN-PN	26-4689514-501
a Plan name	GO TRAVEL AND TOURS INC MCF BENEFIT PLAN		
b Name of plan sponsor	GO TRAVEL AND TOURS INC	**c** EIN-PN	27-4287216-501
a Plan name	GRIFFIN AUTOMOTIVE DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRIFFIN AUTOMOTIVE DESIGN LLC	**c** EIN-PN	82-1551869-501
a Plan name	GUARANTEE CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GUARANTEE CONSTRUCTION LLC	**c** EIN-PN	46-0856031-501
a Plan name	H DESIGN GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H DESIGN GROUP, LLC	**c** EIN-PN	43-1895077-501
a Plan name	HANKS FAMILY LP MCF BENEFIT PLAN		
b Name of plan sponsor	HANKS FAMILY LP	**c** EIN-PN	43-1876049-501
a Plan name	HD MEDIA SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	HD MEDIA SYSTEMS	**c** EIN-PN	20-8143086-501
a Plan name	HDM ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	HDM ASSOCIATES	**c** EIN-PN	47-5310438-501
a Plan name	HERMANN HILL VINEYARDS INC MCF BENEFIT PLAN		
b Name of plan sponsor	HERMANN HILL VINEYARDS INC	**c** EIN-PN	43-1476014-501
a Plan name	HIEB TRANS LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HIEB TRANS LOGISTICS LLC	**c** EIN-PN	20-8940202-501
a Plan name	HOFFMAN CLARK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOFFMAN CLARK LLC	**c** EIN-PN	05-0559592-501
a Plan name	HOME SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	HOME SYSTEMS INC	**c** EIN-PN	43-1711941-501

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

a Plan name	HOOPAI HOLDINGS INC MCF BENEFIT PLAN		
b Name of plan sponsor	HOOPAI HOLDINGS INC	**c** EIN-PN	82-3367196-501
a Plan name	HOUGHTON RESORTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOUGHTON RESORTS LLC	**c** EIN-PN	47-2752065-501
a Plan name	HUFF ASPHALT & SEALING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUFF ASPHALT & SEALING LLC	**c** EIN-PN	27-2896926-501
a Plan name	HUGHES CORP MCF BENEFIT PLAN		
b Name of plan sponsor	HUGHES CORP	**c** EIN-PN	20-1323850-501
a Plan name	HURST POOL AND SPA INC MCF BENEFIT PLAN		
b Name of plan sponsor	HURST POOL AND SPA INC	**c** EIN-PN	03-0512152-501
a Plan name	INSITE ADVICE MCF BENEFIT PLAN		
b Name of plan sponsor	INSITE ADVICE	**c** EIN-PN	03-0506017-501
a Plan name	ISC, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ISC, LLC	**c** EIN-PN	20-1526532-501
a Plan name	J S WEINMANN INC MCF BENEFIT PLAN		
b Name of plan sponsor	J S WEINMANN INC	**c** EIN-PN	43-1077623-501
a Plan name	JAMES GEORGE TERGIN INC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES GEORGE TERGIN INC	**c** EIN-PN	43-1194579-501
a Plan name	JASON A DUNVILLE DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	JASON A DUNVILLE DDS PC	**c** EIN-PN	03-0453669-501
a Plan name	JAY ELECTRIC COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAY ELECTRIC COMPANY LLC	**c** EIN-PN	20-4004894-501
a Plan name	JEFFERSON CITY AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON CITY AREA CHAMBER OF COMMERCE	**c** EIN-PN	44-0299950-501

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

a Plan name	JOHNSTON PAINT AND DECORATING MCF BENEFIT PLAN		
b Name of plan sponsor	JOHNSTON PAINT AND DECORATING	**c** EIN-PN	43-1322838-501
a Plan name	JPRX MCF BENEFIT PLAN		
b Name of plan sponsor	JPRX	**c** EIN-PN	43-1771264-501
a Plan name	KAIZEN ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KAIZEN ENTERPRISES LLC	**c** EIN-PN	81-4744805-501
a Plan name	KC TWINS INC MCF BENEFIT PLAN		
b Name of plan sponsor	KC TWINS INC	**c** EIN-PN	43-1506763-501
a Plan name	KIKI KING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KIKI KING LLC	**c** EIN-PN	26-3097566-501
a Plan name	KIRKSVILLE DENTAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	KIRKSVILLE DENTAL GROUP	**c** EIN-PN	43-1816207-501
a Plan name	KUAT INNOVATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KUAT INNOVATIONS LLC	**c** EIN-PN	41-2232999-501
a Plan name	KYMO ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	KYMO ENTERPRISES	**c** EIN-PN	27-1766737-501
a Plan name	L & J DEVELOPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	L & J DEVELOPMENT	**c** EIN-PN	43-1766764-501
a Plan name	L&R MERCANTILE MCF BENEFIT PLAN		
b Name of plan sponsor	L&R MERCANTILE	**c** EIN-PN	43-1147608-501
a Plan name	LARSON LAW FIRM MCF BENEFIT PLAN		
b Name of plan sponsor	LARSON LAW FIRM	**c** EIN-PN	50-0000187-501
a Plan name	LAW OFFICE OF JONATHAN E FORTMAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF JONATHAN E FORTMAN LLC	**c** EIN-PN	20-2709045-501

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

a Plan name	LEAN MEDIA INC MCF BENEFIT PLAN		
b Name of plan sponsor	LEAN MEDIA INC	**c** EIN-PN	47-1871102-501
a Plan name	LEAP CLIXX MCF BENEFIT PLAN		
b Name of plan sponsor	LEAP CLIXX	**c** EIN-PN	45-5477106-501
a Plan name	LEAPS AND BOUNDS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LEAPS AND BOUNDS INC	**c** EIN-PN	20-1858218-501
a Plan name	LEFT BANK BOOKS MCF BENEFIT PLAN		
b Name of plan sponsor	LEFT BANK BOOKS	**c** EIN-PN	43-0919138-501
a Plan name	LEONARD SEED SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEONARD SEED SERVICE LLC	**c** EIN-PN	45-2568229-501
a Plan name	LITTLE GRINS DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	LITTLE GRINS DENTAL	**c** EIN-PN	46-0983563-501
a Plan name	LOGOS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LOGOS INC	**c** EIN-PN	43-0968673-501
a Plan name	LONG LIFE MINISTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	LONG LIFE MINISTRIES INC	**c** EIN-PN	45-5283900-501
a Plan name	LSK LEBANON INC MCF BENEFIT PLAN		
b Name of plan sponsor	LSK LEBANON INC	**c** EIN-PN	43-1430391-501
a Plan name	MAHAFFEY FAMILY DENTISTRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAHAFFEY FAMILY DENTISTRY LLC	**c** EIN-PN	26-1356151-501
a Plan name	MARBLE TECH INDUSTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	MARBLE TECH INDUSTRIES INC	**c** EIN-PN	43-1446489-501
a Plan name	MARKETING MATTERS MCF BENEFIT PLAN		
b Name of plan sponsor	MARKETING MATTERS	**c** EIN-PN	43-1764449-501

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

a Plan name	MARY LEE JOHNSTON COMMUNITY LEARNING CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	MARY LEE JOHNSTON COMMUNITY LEARNING CENTER	**c** EIN-PN	43-0662462-501
a Plan name	MASS SALES CO MCF BENEFIT PLAN		
b Name of plan sponsor	MASS SALES CO	**c** EIN-PN	43-0925535-501
a Plan name	MB CONSULTING GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	MB CONSULTING GROUP	**c** EIN-PN	43-1840936-501
a Plan name	MCVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCVESTMENTS LLC	**c** EIN-PN	82-1348394-501
a Plan name	MEA FINANCIAL ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	MEA FINANCIAL ENTERPRISES	**c** EIN-PN	04-3653508-501
a Plan name	MERAMEC CAVERNS ENT. INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MERAMEC CAVERNS ENT. INC.	**c** EIN-PN	43-1389266-501
a Plan name	MICHAEL A WHITE DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL A WHITE DDS LLC	**c** EIN-PN	47-3320843-501
a Plan name	MICHAEL H JONES DMD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL H JONES DMD LLC	**c** EIN-PN	82-1563478-501
a Plan name	MID MISSOURI ANESTHESIOLOGISTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MID MISSOURI ANESTHESIOLOGISTS INC	**c** EIN-PN	43-1575840-501
a Plan name	MID STATE PETROLEUM EQUIPMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	MID STATE PETROLEUM EQUIPMENT INC	**c** EIN-PN	43-1414130-501
a Plan name	MIGRANT AND IMMIGRANT COMMUNITY ACTION PROJECT MCF BENEFIT PLAN		
b Name of plan sponsor	MIGRANT AND IMMIGRANT COMMUNITY ACTION PROJECT	**c** EIN-PN	45-3236640-501
a Plan name	MINERAL AREA CPRC INC MCF BENEFIT PLAN		
b Name of plan sponsor	MINERAL AREA CPRC INC	**c** EIN-PN	43-1728120-501

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

a Plan name	MINERS TOWING CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	MINERS TOWING CO INC	**c** EIN-PN	43-1911932-501
a Plan name	MISSOURI CHAMBER OF COMMERCE AND INDUSTRY MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI CHAMBER OF COMMERCE AND INDUSTRY	**c** EIN-PN	44-0357621-501
a Plan name	MISSOURI COMMUNITY COLLEGE ASSOC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI COMMUNITY COLLEGE ASSOC	**c** EIN-PN	23-7344633-501
a Plan name	MISSOURI PACIFIC LUMBER CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI PACIFIC LUMBER CO INC	**c** EIN-PN	37-0898600-501
a Plan name	MISSOURI PHARMACY ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI PHARMACY ASSOCIATION	**c** EIN-PN	44-0357135-501
a Plan name	MOBERLY AREA ECONOMIC DEVELOPMENT CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	MOBERLY AREA ECONOMIC DEVELOPMENT CORPORATION	**c** EIN-PN	43-1475001-501
a Plan name	MULTILIST SERVICE OF SPRINGFIELD REALTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MULTILIST SERVICE OF SPRINGFIELD REALTORS INC	**c** EIN-PN	44-0595044-501
a Plan name	MUSTAIN INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	MUSTAIN INVESTMENTS	**c** EIN-PN	43-1857575-501
a Plan name	MYBLUESKY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MYBLUESKY LLC	**c** EIN-PN	46-5766459-501
a Plan name	NEILL TRANSPORTATION CO MCF BENEFIT PLAN		
b Name of plan sponsor	NEILL TRANSPORTATION CO	**c** EIN-PN	43-1839408-501
a Plan name	NETHERTONS TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NETHERTONS TRUCKING LLC	**c** EIN-PN	47-3648412-501
a Plan name	NEVILLE & SONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	NEVILLE & SONS INC	**c** EIN-PN	43-1549748-501

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

a Plan name	NEWTONS JEWELRY CO. MCF BENEFIT PLAN		
b Name of plan sponsor	NEWTONS JEWELRY CO.	**c** EIN-PN	44-0613699-501
a Plan name	NEXT PROJECT STUDIO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEXT PROJECT STUDIO LLC	**c** EIN-PN	46-2203419-501
a Plan name	NEXUS STRATEGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEXUS STRATEGIES LLC	**c** EIN-PN	82-3858398-501
a Plan name	OBJEX DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OBJEX DESIGN LLC	**c** EIN-PN	65-1202977-501
a Plan name	OSBORNE CAPITAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	OSBORNE CAPITAL GROUP	**c** EIN-PN	43-1870121-501
a Plan name	OSBURN HINE AND YATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OSBURN HINE AND YATES LLC	**c** EIN-PN	43-1724013-501
a Plan name	OTIS AND CLARK PROPERTIES MCF BENEFIT PLAN		
b Name of plan sponsor	OTIS AND CLARK PROPERTIES	**c** EIN-PN	43-1339070-501
a Plan name	OUTBOUND REHABILITATION & WELLNESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OUTBOUND REHABILITATION & WELLNESS LLC	**c** EIN-PN	45-3770424-501
a Plan name	OZARK CAPITAL ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK CAPITAL ADVISORS LLC	**c** EIN-PN	42-1725644-501
a Plan name	OZARKS PUMPING SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS PUMPING SERVICE	**c** EIN-PN	11-3815633-501
a Plan name	PAH INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PAH INVESTMENTS LLC	**c** EIN-PN	46-1266189-501
a Plan name	PECKHAM & WRIGHT ARCHITECTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	PECKHAM & WRIGHT ARCHITECTS INC	**c** EIN-PN	43-1144612-501

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

a Plan name	PERFORMANCE ENGINEERING & MANUFACTURING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERFORMANCE ENGINEERING & MANUFACTURING LLC	**c** EIN-PN	20-5894910-501
a Plan name	PERRY LEGEND COLLISION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	PERRY LEGEND COLLISION CENTER	**c** EIN-PN	43-1415284-501
a Plan name	POOLS MADE POSSIBLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POOLS MADE POSSIBLE LLC	**c** EIN-PN	55-0890257-501
a Plan name	PORTER SEED HOUSE INC MCF BENEFIT PLAN		
b Name of plan sponsor	PORTER SEED HOUSE INC	**c** EIN-PN	43-1207319-501
a Plan name	PRENGER FLOOR COVERING MCF BENEFIT PLAN		
b Name of plan sponsor	PRENGER FLOOR COVERING	**c** EIN-PN	20-1344468-501
a Plan name	PROACTIVE MONEY MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	PROACTIVE MONEY MANAGEMENT	**c** EIN-PN	43-1225590-501
a Plan name	RAIDER MECHANICAL MCF BENEFIT PLAN		
b Name of plan sponsor	RAIDER MECHANICAL	**c** EIN-PN	26-0039536-501
a Plan name	RANGE LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RANGE LOGISTICS LLC	**c** EIN-PN	46-3575835-501
a Plan name	RAY F MCKOWEN DDS MCF BENEFIT PLAN		
b Name of plan sponsor	RAY F MCKOWEN DDS	**c** EIN-PN	83-0380509-501
a Plan name	REALTY APPRAISALS MCF BENEFIT PLAN		
b Name of plan sponsor	REALTY APPRAISALS	**c** EIN-PN	43-0896009-501
a Plan name	REHAB SPECIALTY MEDICAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	REHAB SPECIALTY MEDICAL INC	**c** EIN-PN	20-2339464-501
a Plan name	RISING ABOVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RISING ABOVE LLC	**c** EIN-PN	26-3300547-501

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

a Plan name	ROARK AND SUTTON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROARK AND SUTTON LLC	**c** EIN-PN	82-3378896-501
a Plan name	ROBERT COX CPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERT COX CPA PC	**c** EIN-PN	45-2520559-501
a Plan name	ROBERTS PALLET CO MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS PALLET CO	**c** EIN-PN	43-1143201-501
a Plan name	ROOFUS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROOFUS CONSTRUCTION LLC	**c** EIN-PN	27-2775913-501
a Plan name	RPA CONSTRUCTION SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	RPA CONSTRUCTION SERVICES	**c** EIN-PN	43-1037753-501
a Plan name	RRK AND B INC MCF BENEFIT PLAN		
b Name of plan sponsor	RRK AND B INC	**c** EIN-PN	43-1522988-501
a Plan name	RYVAN RENOVATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	RYVAN RENOVATION INC	**c** EIN-PN	46-5649097-501
a Plan name	SALON VALISE MCF BENEFIT PLAN		
b Name of plan sponsor	SALON VALISE	**c** EIN-PN	46-4036110-501
a Plan name	SANDBOTHE CONCRETE DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	SANDBOTHE CONCRETE DESIGN	**c** EIN-PN	43-1666176-501
a Plan name	SANNING CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	SANNING CONSTRUCTION	**c** EIN-PN	20-4971445-501
a Plan name	SAW CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAW CONSTRUCTION LLC	**c** EIN-PN	47-3648159-501
a Plan name	SCHROEPFER INC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHROEPFER INC	**c** EIN-PN	43-1426027-501

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

a Plan name	SCHWARTZ BROTHERS PRINTING MCF BENEFIT PLAN		
b Name of plan sponsor	SCHWARTZ BROTHERS PRINTING	**c** EIN-PN	81-5469596-501
a Plan name	SHEPHERD OF THE HILLS VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	SHEPHERD OF THE HILLS VETERINARY CLINIC	**c** EIN-PN	81-4393631-501
a Plan name	SILVERTREE COMPANIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SILVERTREE COMPANIES LLC	**c** EIN-PN	32-0034289-501
a Plan name	SKINNER ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	SKINNER ENTERPRISES	**c** EIN-PN	81-2068712-501
a Plan name	SPECTRUM GLASS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SPECTRUM GLASS INC	**c** EIN-PN	42-1640927-501
a Plan name	SPRINGFIELD EYE SPECIALISTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD EYE SPECIALISTS LLC	**c** EIN-PN	82-3347191-501
a Plan name	SPRINGFIELD FAMILY VISION MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD FAMILY VISION	**c** EIN-PN	47-4697310-501
a Plan name	SS & B HEATING & COOLING INC MCF BENEFIT PLAN		
b Name of plan sponsor	SS & B HEATING & COOLING INC	**c** EIN-PN	43-1182740-501
a Plan name	ST LOUIS FIREFIGHTERS CREDIT UNION MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS FIREFIGHTERS CREDIT UNION	**c** EIN-PN	43-0497473-501
a Plan name	STEPHANIE D IRELAND INC MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHANIE D IRELAND INC	**c** EIN-PN	43-1703871-501
a Plan name	STEPHEN LANG & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHEN LANG & ASSOCIATES	**c** EIN-PN	43-1887384-501
a Plan name	STOCKMAN CONSTRUCTION CORP MCF BENEFIT PLAN		
b Name of plan sponsor	STOCKMAN CONSTRUCTION CORP	**c** EIN-PN	20-2600105-501

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

a Plan name	STOCKMAN STONEWORKS INC MCF BENEFIT PLAN		
b Name of plan sponsor	STOCKMAN STONEWORKS INC	**c** EIN-PN	81-0591330-501
a Plan name	STONE CREEK HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STONE CREEK HOLDINGS LLC	**c** EIN-PN	86-1123622-501
a Plan name	STOVER MILLING MCF BENEFIT PLAN		
b Name of plan sponsor	STOVER MILLING	**c** EIN-PN	44-0660974-501
a Plan name	SUNSHINE EYE CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	SUNSHINE EYE CLINIC	**c** EIN-PN	43-0899795-501
a Plan name	TABLE ROCK LAKE AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	TABLE ROCK LAKE AREA CHAMBER OF COMMERCE	**c** EIN-PN	43-1144281-501
a Plan name	TAYLOR CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR CONTRACTING	**c** EIN-PN	27-1502857-501
a Plan name	TERRIL BROTHERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TERRIL BROTHERS INC	**c** EIN-PN	59-2003558-501
a Plan name	THE CHEST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CHEST LLC	**c** EIN-PN	20-3817716-501
a Plan name	THE DEVEREUX GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE DEVEREUX GROUP LLC	**c** EIN-PN	26-3317195-501
a Plan name	THE OTHER TRASHMAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE OTHER TRASHMAN LLC	**c** EIN-PN	27-0794220-501
a Plan name	THERAPY UNLIMITED MCF BENEFIT PLAN		
b Name of plan sponsor	THERAPY UNLIMITED	**c** EIN-PN	47-1894414-501
a Plan name	TML-MFG, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	TML-MFG, INC.	**c** EIN-PN	43-1627755-501

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

a Plan name	TOEDTMANN & GROSSE INC MCF BENEFIT PLAN		
b Name of plan sponsor	TOEDTMANN & GROSSE INC	**c** EIN-PN	43-1400020-501
a Plan name	TOWNER ELECTRONICS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TOWNER ELECTRONICS INC	**c** EIN-PN	43-1058665-501
a Plan name	TRAILER TRENDZ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRAILER TRENDZ LLC	**c** EIN-PN	26-4039275-501
a Plan name	TRANQUILITY INTERNET SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRANQUILITY INTERNET SERVICES INC	**c** EIN-PN	43-1775493-501
a Plan name	TRANSCHEMICAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRANSCHEMICAL INC	**c** EIN-PN	43-1022459-501
a Plan name	TRI COUNTY VETERINARY SERVICES PC MCF BENEFIT PLAN		
b Name of plan sponsor	TRI COUNTY VETERINARY SERVICES PC	**c** EIN-PN	43-1652016-501
a Plan name	TRI-L MFG INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-L MFG INC	**c** EIN-PN	43-1188807-501
a Plan name	TRINITY LOGISTICS SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRINITY LOGISTICS SOLUTIONS LLC	**c** EIN-PN	46-1560746-501
a Plan name	ULRICH SOFTWARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ULRICH SOFTWARE INC	**c** EIN-PN	43-1541703-501
a Plan name	VARIO CONSULTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	VARIO CONSULTING INC	**c** EIN-PN	47-5580073-501
a Plan name	VILLA DI MARIA MONTESSORI MCF BENEFIT PLAN		
b Name of plan sponsor	VILLA DI MARIA MONTESSORI	**c** EIN-PN	43-0896280-501
a Plan name	VITTORINA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VITTORINA LLC	**c** EIN-PN	01-0972102-501

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

a Plan name	WALTER GENERAL AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	WALTER GENERAL AGENCY INC	**c** EIN-PN	43-1780797-501
a Plan name	WEBSTER DENTAL CARE MCF BENEFIT PLAN		
b Name of plan sponsor	WEBSTER DENTAL CARE	**c** EIN-PN	43-1723175-501
a Plan name	WEHRENBERG DESIGN COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	WEHRENBERG DESIGN COMPANY	**c** EIN-PN	43-1877349-501
a Plan name	WESTIN TRADING INC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTIN TRADING INC	**c** EIN-PN	43-1691494-501
a Plan name	WHAN TOWING AND RECOVERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WHAN TOWING AND RECOVERY LLC	**c** EIN-PN	47-4209389-501
a Plan name	WILLIS AND ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILLIS AND ASSOCIATES LLC	**c** EIN-PN	43-0892383-501
a Plan name	WINTER TECHNOLOGIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	WINTER TECHNOLOGIES INC	**c** EIN-PN	73-1652013-501
a Plan name	WOLFE INTERNATIONAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	WOLFE INTERNATIONAL INC	**c** EIN-PN	20-2502505-501
a Plan name	WREX GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WREX GROUP LLC	**c** EIN-PN	61-1651267-501
a Plan name	180 HEALTH LIFESTYLE WELLNESSCENTERS MCF BENEFIT PLAN		
b Name of plan sponsor	180 HEALTH LIFESTYLE WELLNESSCENTERS	**c** EIN-PN	84-3555182-501
a Plan name	1ST CHOICE HEALTHCARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	1ST CHOICE HEALTHCARE LLC	**c** EIN-PN	01-0659861-501
a Plan name	2 BROS THAT MOW LAWN & LANDSCAPE MCF BENEFIT PLAN		
b Name of plan sponsor	2 BROS THAT MOW LAWN & LANDSCAPE	**c** EIN-PN	83-3522317-501

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

a Plan name	2 HOLDERS PLUMBING MCF BENEFIT PLAN		
b Name of plan sponsor	2 HOLDERS PLUMBING	**c** EIN-PN	83-2754284-501
a Plan name	27 NORTH MCF BENEFIT PLAN		
b Name of plan sponsor	27 NORTH	**c** EIN-PN	87-3657245-501
a Plan name	29 AND 79 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	29 AND 79 LLC	**c** EIN-PN	84-2551934-501
a Plan name	2BFF, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	2BFF, LLC	**c** EIN-PN	86-2131693-501
a Plan name	3 GENERATIONS STL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	3 GENERATIONS STL, LLC	**c** EIN-PN	82-2191345-501
a Plan name	3 K S ENTERPRISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	3 K S ENTERPRISE LLC	**c** EIN-PN	47-1415624-501
a Plan name	3 TRAILS BREWING MCF BENEFIT PLAN		
b Name of plan sponsor	3 TRAILS BREWING	**c** EIN-PN	82-3075516-501
a Plan name	303RD ENGINEERING GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	303RD ENGINEERING GROUP	**c** EIN-PN	87-0755103-501
a Plan name	314 PRINT HOUSE MCF BENEFIT PLAN		
b Name of plan sponsor	314 PRINT HOUSE	**c** EIN-PN	47-2311445-501
a Plan name	314 SPORTS MANAGEMENT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	314 SPORTS MANAGEMENT, LLC	**c** EIN-PN	81-2405555-501
a Plan name	333 S. KIRKWOOD MCF BENEFIT PLAN		
b Name of plan sponsor	333 S. KIRKWOOD	**c** EIN-PN	26-1451471-501
a Plan name	360 AUTO SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	360 AUTO SERVICE	**c** EIN-PN	47-3695499-501

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

a Plan name	360 FIRE PROTECTION MCF BENEFIT PLAN		
b Name of plan sponsor	360 FIRE PROTECTION	**c** EIN-PN	92-1927280-501
a Plan name	360 FLIGHT OPS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	360 FLIGHT OPS, LLC	**c** EIN-PN	87-3242579-501
a Plan name	3B MACHINE & WELD MCF BENEFIT PLAN		
b Name of plan sponsor	3B MACHINE & WELD	**c** EIN-PN	81-2831590-501
a Plan name	3D BUILD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	3D BUILD LLC	**c** EIN-PN	87-1364064-501
a Plan name	3-D TANKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	3-D TANKS LLC	**c** EIN-PN	93-3289110-501
a Plan name	4 BY 4 BREWING COMPANY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	4 BY 4 BREWING COMPANY, LLC	**c** EIN-PN	81-4403098-501
a Plan name	4 GUYS & 3 WIVES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	4 GUYS & 3 WIVES LLC	**c** EIN-PN	47-4044917-501
a Plan name	417 BUSINESS & ELDER LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	417 BUSINESS & ELDER LAW, LLC	**c** EIN-PN	46-4422642-501
a Plan name	417 EXPRESS DELIVERY MCF BENEFIT PLAN		
b Name of plan sponsor	417 EXPRESS DELIVERY	**c** EIN-PN	81-3817920-501
a Plan name	4DOG CAPITAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	4DOG CAPITAL GROUP LLC	**c** EIN-PN	93-2556615-501
a Plan name	4STATES ADVERTISING MCF BENEFIT PLAN		
b Name of plan sponsor	4STATES ADVERTISING	**c** EIN-PN	33-1086226-501
a Plan name	5 STAR AUTO PLAZA MCF BENEFIT PLAN		
b Name of plan sponsor	5 STAR AUTO PLAZA	**c** EIN-PN	43-1818887-501

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

a Plan name	5 STAR HOUSEBOATS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	5 STAR HOUSEBOATS, LLC	**c** EIN-PN	88-2172619-501
a Plan name	5 STAR IMPRESSIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	5 STAR IMPRESSIONS LLC	**c** EIN-PN	81-1003693-501
a Plan name	5 STONE CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	5 STONE CONSTRUCTION LLC	**c** EIN-PN	82-0769703-501
a Plan name	5H FABRICATION & DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	5H FABRICATION & DESIGN LLC	**c** EIN-PN	83-4631670-501
a Plan name	6 H RANCH MCF BENEFIT PLAN		
b Name of plan sponsor	6 H RANCH	**c** EIN-PN	20-4443646-501
a Plan name	6 TURTLES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	6 TURTLES LLC	**c** EIN-PN	88-0991742-501
a Plan name	610 INSULATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	610 INSULATION LLC	**c** EIN-PN	85-3071904-501
a Plan name	63 AUTO & TRUCK PARTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	63 AUTO & TRUCK PARTS LLC	**c** EIN-PN	82-2858280-501
a Plan name	636CARS.COM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	636CARS.COM LLC	**c** EIN-PN	35-2345496-501
a Plan name	66 TRUCK & FOREIGN SALVAGE INC MCF BENEFIT PLAN		
b Name of plan sponsor	66 TRUCK & FOREIGN SALVAGE INC	**c** EIN-PN	20-8147148-501
a Plan name	7336 MANCHESTERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	7336 MANCHESTERS LLC	**c** EIN-PN	45-2995313-501
a Plan name	9-1-1 ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	9-1-1 ENTERPRISES LLC	**c** EIN-PN	81-2621064-501

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

a Plan name	9LINE SOFTWARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	9LINE SOFTWARE LLC	**c** EIN-PN	86-3055445-501
a Plan name	A & D CONSTRUCTION SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A & D CONSTRUCTION SERVICES, LLC	**c** EIN-PN	27-0165086-501
a Plan name	A & E ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	A & E ELECTRIC	**c** EIN-PN	27-2958180-501
a Plan name	A & J DRAIN SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A & J DRAIN SERVICE LLC	**c** EIN-PN	20-5678933-501
a Plan name	A & L LICKER LAW FIRM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A & L LICKER LAW FIRM, LLC	**c** EIN-PN	54-2179860-501
a Plan name	A ALL LOCK & KEY CO INC. MCF BENEFIT PLAN		
b Name of plan sponsor	A ALL LOCK & KEY CO INC.	**c** EIN-PN	43-1573891-501
a Plan name	A AND G RESTAURANT INC. MCF BENEFIT PLAN		
b Name of plan sponsor	A AND G RESTAURANT INC.	**c** EIN-PN	43-0908824-501
a Plan name	A C GRINGOS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A C GRINGOS LLC	**c** EIN-PN	35-2290962-501
a Plan name	A DUNN INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A DUNN INVESTMENTS LLC	**c** EIN-PN	87-1347742-501
a Plan name	A JOHNSON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A JOHNSON LLC	**c** EIN-PN	11-3694673-501
a Plan name	A JOSHUA MONTGOMERY DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	A JOSHUA MONTGOMERY DDS PC	**c** EIN-PN	76-0790247-501
a Plan name	A LOVELAND VENTURE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A LOVELAND VENTURE LLC	**c** EIN-PN	46-5196719-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 T R LIGHTING MCF BENEFIT PLAN		
b Name of plan sponsor	A T R LIGHTING	**c** EIN-PN	43-1488489-501
a Plan name	A TO Z AUTO CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	A TO Z AUTO CENTER	**c** EIN-PN	43-1408626-501
a Plan name	A TO Z PROFESSIONAL FINISHES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	A TO Z PROFESSIONAL FINISHES LLC	**c** EIN-PN	47-2720693-501
a Plan name	A WHITE DRYWALL MCF BENEFIT PLAN		
b Name of plan sponsor	A WHITE DRYWALL	**c** EIN-PN	81-2093365-501
a Plan name	A. SCOTT MITCHELL D.D.S. MCF BENEFIT PLAN		
b Name of plan sponsor	A. SCOTT MITCHELL D.D.S.	**c** EIN-PN	43-1719488-501
a Plan name	A.M. FINANCIAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	A.M. FINANCIAL GROUP	**c** EIN-PN	81-2479432-501
a Plan name	A.M.C.I, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	A.M.C.I, INC.	**c** EIN-PN	43-1512074-501
a Plan name	A1 MOVING & STORAGE MCF BENEFIT PLAN		
b Name of plan sponsor	A1 MOVING & STORAGE	**c** EIN-PN	43-1193251-501
a Plan name	A-1 TOOL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	A-1 TOOL, INC	**c** EIN-PN	43-1712314-501
a Plan name	A2A EXCAVATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	A2A EXCAVATION INC	**c** EIN-PN	86-2997764-501
a Plan name	AAA TRAILER LEASING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AAA TRAILER LEASING LLC	**c** EIN-PN	45-0509991-501
a Plan name	AARDVARK RESIDENTIAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	AARDVARK RESIDENTIAL SERVICES	**c** EIN-PN	27-0676285-501

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

a Plan name	AARON BRAUN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AARON BRAUN LLC	**c** EIN-PN	27-2674035-501
a Plan name	AARON HAGENHOFF TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AARON HAGENHOFF TRUCKING LLC	**c** EIN-PN	46-1379528-501
a Plan name	AARON'S HOME REMODELING AND REPAIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AARONS HOME REMODELING AND REPAIR, LLC	**c** EIN-PN	82-4568490-501
a Plan name	AASBY AUTOMOTIVE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AASBY AUTOMOTIVE INC.	**c** EIN-PN	43-1887680-502
a Plan name	AB COMMERCIAL PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AB COMMERCIAL PROPERTIES, LLC	**c** EIN-PN	81-2156801-501
a Plan name	ABBCO PLUMBING & DRAIN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ABBCO PLUMBING & DRAIN, LLC	**c** EIN-PN	27-2609841-501
a Plan name	ABBEY LANE LPG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ABBEY LANE LPG LLC	**c** EIN-PN	26-4439931-501
a Plan name	ABBOTT & ANGERER CPAS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ABBOTT & ANGERER CPAS LLC	**c** EIN-PN	27-4445748-501
a Plan name	ABC ANIMAL AND INSECT INNOVATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ABC ANIMAL AND INSECT INNOVATIONS LLC	**c** EIN-PN	43-1904666-501
a Plan name	ABCHIROPRACTIC FAMILY & WELLNESS MCF BENEFIT PLAN		
b Name of plan sponsor	ABCHIROPRACTIC FAMILY & WELLNESS	**c** EIN-PN	87-0696847-501
a Plan name	ABERNATHY ROOFING & CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	ABERNATHY ROOFING & CONSTRUCTION	**c** EIN-PN	82-2636673-501
a Plan name	ABF LEASING MCF BENEFIT PLAN		
b Name of plan sponsor	ABF LEASING	**c** EIN-PN	48-0871135-501

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

a Plan name	ABILITY NETWORK, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ABILITY NETWORK, INC	**c** EIN-PN	43-1558991-501
a Plan name	ABM FEDERAL SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	ABM FEDERAL SALES INC	**c** EIN-PN	43-1015139-501
a Plan name	ABORTION ACTION MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	ABORTION ACTION MISSOURI	**c** EIN-PN	43-1044264-501
a Plan name	ABSOLUTE COMPUTER SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ABSOLUTE COMPUTER SOLUTIONS	**c** EIN-PN	57-1217333-501
a Plan name	ABSOLUTE ROOFING MCF BENEFIT PLAN		
b Name of plan sponsor	ABSOLUTE ROOFING	**c** EIN-PN	20-2488193-501
a Plan name	AC SWIMMING POOLS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AC SWIMMING POOLS, INC.	**c** EIN-PN	43-1631991-501
a Plan name	ACADEMY ANIMAL HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	ACADEMY ANIMAL HOSPITAL	**c** EIN-PN	46-0654351-501
a Plan name	ACCENT LAWN AND LANDSCAPE MCF BENEFIT PLAN		
b Name of plan sponsor	ACCENT LAWN AND LANDSCAPE	**c** EIN-PN	20-4592257-501
a Plan name	ACCESS BUILDERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACCESS BUILDERS INC	**c** EIN-PN	43-1852094-502
a Plan name	ACCESS II INDEPENDENT LIVING MCF BENEFIT PLAN		
b Name of plan sponsor	ACCESS II INDEPENDENT LIVING	**c** EIN-PN	43-1721357-502
a Plan name	ACCOUNT RESOLUTION CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	ACCOUNT RESOLUTION CORPORATION	**c** EIN-PN	86-1057736-501
a Plan name	ACCOUNTING & TAX SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACCOUNTING & TAX SERVICES INC	**c** EIN-PN	43-1397156-501

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

a Plan name	ACCOUNTING LEGAL & LOGISTICS SOLUTIONS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACCOUNTING LEGAL & LOGISTICS SOLUTIONS, INC	**c** EIN-PN	45-2191032-501
a Plan name	ACCOUNTING SOLUTIONS GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	ACCOUNTING SOLUTIONS GROUP	**c** EIN-PN	27-0902253-501
a Plan name	ACE FLEET MAINTENANCE MCF BENEFIT PLAN		
b Name of plan sponsor	ACE FLEET MAINTENANCE	**c** EIN-PN	26-1985322-501
a Plan name	ACE LAB SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACE LAB SYSTEMS INC	**c** EIN-PN	43-1808390-501
a Plan name	ACEC OF MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	ACEC OF MISSOURI	**c** EIN-PN	43-0813170-501
a Plan name	ACHIEVE PRIVATE WEALTH MCF BENEFIT PLAN		
b Name of plan sponsor	ACHIEVE PRIVATE WEALTH	**c** EIN-PN	32-0203243-501
a Plan name	ACKRIT INC MCF BENEFIT PLAN		
b Name of plan sponsor	ACKRIT INC	**c** EIN-PN	43-1451734-501
a Plan name	ACM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ACM LLC	**c** EIN-PN	46-2312870-501
a Plan name	ACR CONCRETE REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ACR CONCRETE REPAIR LLC	**c** EIN-PN	86-3033206-501
a Plan name	ACROSS THE BOARD MCF BENEFIT PLAN		
b Name of plan sponsor	ACROSS THE BOARD	**c** EIN-PN	26-3763655-501
a Plan name	ACSI CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ACSI CONSTRUCTION LLC	**c** EIN-PN	47-3620408-501
a Plan name	ACUMAXUM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ACUMAXUM, LLC	**c** EIN-PN	85-1646188-501

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

a Plan name	AD CREATIONS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AD CREATIONS, INC.	**c** EIN-PN	43-1582900-501
a Plan name	ADAIR COUNTY PUBLIC LIBRARY MCF BENEFIT PLAN		
b Name of plan sponsor	ADAIR COUNTY PUBLIC LIBRARY	**c** EIN-PN	43-1345654-501
a Plan name	ADAIR COUNTY VETERINARY CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADAIR COUNTY VETERINARY CLINIC LLC	**c** EIN-PN	93-4062331-501
a Plan name	ADAMS HOME INSPECTION, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ADAMS HOME INSPECTION, INC.	**c** EIN-PN	32-0068514-501
a Plan name	ADAPTIVE INDUSTRIAL SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ADAPTIVE INDUSTRIAL SOLUTIONS	**c** EIN-PN	81-1791005-501
a Plan name	ADDISON BIOLOGICAL LABORATORY INC MCF BENEFIT PLAN		
b Name of plan sponsor	ADDISON BIOLOGICAL LABORATORY INC	**c** EIN-PN	48-0955069-501
a Plan name	ADRIANS FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ADRIANS FARMS INC	**c** EIN-PN	43-1026311-501
a Plan name	ADSMITH COMMUNICATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ADSMITH COMMUNICATIONS	**c** EIN-PN	43-1919171-501
a Plan name	ADVANCE GUARD MILITARIA MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCE GUARD MILITARIA	**c** EIN-PN	85-0532910-501
a Plan name	ADVANCE INDUSTRIAL EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCE INDUSTRIAL EQUIPMENT	**c** EIN-PN	87-3706136-501
a Plan name	ADVANCED AUDIOLOGY ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED AUDIOLOGY ASSOCIATES LLC	**c** EIN-PN	47-1061976-501
a Plan name	ADVANCED AUTOMOTIVE ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED AUTOMOTIVE ELECTRIC LLC	**c** EIN-PN	43-1825345-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 CRAFTSMANSHIP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED CRAFTSMANSHIP LLC	**c** EIN-PN	55-0901608-501
a Plan name	ADVANCED DENTISTRY OF NEVADA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED DENTISTRY OF NEVADA LLC	**c** EIN-PN	87-1342219-501
a Plan name	ADVANCED DIESEL AND AUTO REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED DIESEL AND AUTO REPAIR	**c** EIN-PN	46-1102880-501
a Plan name	ADVANCED INJURY CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED INJURY CARE LLC	**c** EIN-PN	82-2699429-501
a Plan name	ADVANCED PLUMBING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED PLUMBING, LLC	**c** EIN-PN	38-3974438-501
a Plan name	ADVANCED RESTORATIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED RESTORATIONS, LLC	**c** EIN-PN	81-0815892-501
a Plan name	ADVANCED ROOFING SYSTEMS & CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANCED ROOFING SYSTEMS & CONSTRUCTION	**c** EIN-PN	83-1881038-501
a Plan name	ADVANTAGE AIR MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE AIR	**c** EIN-PN	43-1869498-501
a Plan name	ADVANTAGE CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANTAGE CONSTRUCTION INC	**c** EIN-PN	43-1687622-501
a Plan name	ADVANTES DEVELOPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	ADVANTES DEVELOPMENT	**c** EIN-PN	45-4030661-501
a Plan name	ADVERTISING SAVANTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ADVERTISING SAVANTS INC	**c** EIN-PN	43-1589881-501
a Plan name	ADVISER COMPLIANCE SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	ADVISER COMPLIANCE SERVICES	**c** EIN-PN	45-5053246-501

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

a Plan name	AEC SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	AEC SYSTEMS	**c** EIN-PN	82-4454061-501
a Plan name	AEKTRA LEGAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AEKTRA LEGAL, LLC	**c** EIN-PN	45-3622608-501
a Plan name	AERO SPECIALTY FINANCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AERO SPECIALTY FINANCE, LLC	**c** EIN-PN	46-4314730-501
a Plan name	AESTHETIC MED STUDIO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AESTHETIC MED STUDIO LLC	**c** EIN-PN	27-3797419-501
a Plan name	AFFORDABLE EXTERIORS MCF BENEFIT PLAN		
b Name of plan sponsor	AFFORDABLE EXTERIORS	**c** EIN-PN	56-2406510-501
a Plan name	AFFORDABLE SYSTEMS FURNITURE MCF BENEFIT PLAN		
b Name of plan sponsor	AFFORDABLE SYSTEMS FURNITURE	**c** EIN-PN	88-0584825-501
a Plan name	AFFTON ATHLETIC ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	AFFTON ATHLETIC ASSOCIATION	**c** EIN-PN	43-1003962-501
a Plan name	AFTERMARKET TECHNOLOGIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	AFTERMARKET TECHNOLOGIES INC	**c** EIN-PN	95-4866076-501
a Plan name	AG SERVICE OF LOCKWOOD MCF BENEFIT PLAN		
b Name of plan sponsor	AG SERVICE OF LOCKWOOD	**c** EIN-PN	20-3967967-501
a Plan name	AGAN CHIROPRACTIC CLINICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AGAN CHIROPRACTIC CLINICS LLC	**c** EIN-PN	82-5423323-501
a Plan name	AGRI SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	AGRI SYSTEMS INC	**c** EIN-PN	45-5410409-501
a Plan name	AGRI SYSTEMS OF CAPE AND JACKSON MCF BENEFIT PLAN		
b Name of plan sponsor	AGRI SYSTEMS OF CAPE AND JACKSON	**c** EIN-PN	84-4425417-502

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	AHM CONSTRUCTORS MCF BENEFIT PLAN		
b Name of plan sponsor	AHM CONSTRUCTORS	**c** EIN-PN	86-1870062-501
a Plan name	AIR MECHANICAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AIR MECHANICAL SERVICES LLC	**c** EIN-PN	87-1389580-501
a Plan name	AIR SPECIALISTS WORLDWIDE MCF BENEFIT PLAN		
b Name of plan sponsor	AIR SPECIALISTS WORLDWIDE	**c** EIN-PN	26-3034898-501
a Plan name	AIRPORT 63 STORAGE MCF BENEFIT PLAN		
b Name of plan sponsor	AIRPORT 63 STORAGE	**c** EIN-PN	86-2632829-501
a Plan name	AJ HEALTH SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	AJ HEALTH SERVICES	**c** EIN-PN	85-2961637-501
a Plan name	AJ HEATING AND AIR CONDITIONING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AJ HEATING AND AIR CONDITIONING LLC	**c** EIN-PN	85-3436190-501
a Plan name	AJ SEAMLESS GUTTERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AJ SEAMLESS GUTTERING LLC	**c** EIN-PN	84-2280627-501
a Plan name	AJA CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AJA CONSULTING LLC	**c** EIN-PN	82-0548127-501
a Plan name	AK TRANSPORTATION, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AK TRANSPORTATION, INC.	**c** EIN-PN	43-1655193-501
a Plan name	AKCIRE GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	AKCIRE GROUP INC	**c** EIN-PN	26-0142149-501
a Plan name	AL WEST CHRYSLER INC MCF BENEFIT PLAN		
b Name of plan sponsor	AL WEST CHRYSLER INC	**c** EIN-PN	43-0918975-501
a Plan name	ALCHEMY ACUPUNCTURE & WELLNESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALCHEMY ACUPUNCTURE & WELLNESS LLC	**c** EIN-PN	81-2968724-501

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

a Plan name	ALCOTEK INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALCOTEK INC.	**c** EIN-PN	43-1181161-501
a Plan name	ALDWINS AUTO BODY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALDWINS AUTO BODY LLC	**c** EIN-PN	84-2076749-501
a Plan name	ALERTONE SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALERTONE SERVICE INC	**c** EIN-PN	47-5503206-501
a Plan name	ALEX L. WULFF, ATTORNEY AT LAW, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALEX L. WULFF, ATTORNEY AT LAW, LLC.	**c** EIN-PN	83-2934550-501
a Plan name	ALIEN ARC TECHNOLOGIES MCF BENEFIT PLAN		
b Name of plan sponsor	ALIEN ARC TECHNOLOGIES	**c** EIN-PN	46-5238989-501
a Plan name	ALIGNED EQUITY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALIGNED EQUITY GROUP LLC	**c** EIN-PN	84-3464999-501
a Plan name	ALL ABOUT PETS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL ABOUT PETS LLC	**c** EIN-PN	20-8871544-501
a Plan name	ALL ABOUT TREES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL ABOUT TREES LLC	**c** EIN-PN	26-3894975-501
a Plan name	ALL AMERICAN MOTORSPORT AND POWERSPORTS MCF BENEFIT PLAN		
b Name of plan sponsor	ALL AMERICAN MOTORSPORT AND POWERSPORTS	**c** EIN-PN	83-2567139-501
a Plan name	ALL CLIMATE MECHANICAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL CLIMATE MECHANICAL, LLC	**c** EIN-PN	84-3820424-501
a Plan name	ALL COMM BUSINESS SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	ALL COMM BUSINESS SYSTEMS	**c** EIN-PN	43-1099063-501
a Plan name	ALL DETAINMENT SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ALL DETAINMENT SOLUTIONS	**c** EIN-PN	81-5398252-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 GAS INSTALLATION AND FIREPLACE SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL GAS INSTALLATION AND FIREPLACE SERVICES, LLC	**c** EIN-PN	26-3177453-501
a Plan name	ALL N 1 FITNESS MCF BENEFIT PLAN		
b Name of plan sponsor	ALL N 1 FITNESS	**c** EIN-PN	26-4714635-501
a Plan name	ALL ONE MEDICAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL ONE MEDICAL, LLC	**c** EIN-PN	47-1792232-501
a Plan name	ALL OUT ALUMINUM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL OUT ALUMINUM LLC	**c** EIN-PN	85-3546509-501
a Plan name	ALL PRO AUTOMOTIVE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALL PRO AUTOMOTIVE INC.	**c** EIN-PN	43-1666496-501
a Plan name	ALL SEASONS COMFORT SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL SEASONS COMFORT SYSTEMS INC	**c** EIN-PN	81-5230862-501
a Plan name	ALL SEASONS ROOFING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL SEASONS ROOFING LLC	**c** EIN-PN	20-4885966-501
a Plan name	ALL SERVICE INS. AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	ALL SERVICE INS. AGENCY	**c** EIN-PN	20-1721870-501
a Plan name	ALL WEATHER SEWER SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALL WEATHER SEWER SERVICE INC	**c** EIN-PN	43-1706146-501
a Plan name	ALLEN KEMPKER TRUCKING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLEN KEMPKER TRUCKING, LLC	**c** EIN-PN	20-3106785-501
a Plan name	ALLENS AUTO REPAIR AND QUICK LUBE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLENS AUTO REPAIR AND QUICK LUBE, LLC	**c** EIN-PN	81-5196746-501
a Plan name	ALLERGY AND ASTHMA CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	ALLERGY AND ASTHMA CONSULTANTS	**c** EIN-PN	43-1787640-501

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

a Plan name	ALLERGY, ASTHMA AND FOOD ALLERGY CENTERS MCF BENEFIT PLAN		
b Name of plan sponsor	ALLERGY, ASTHMA AND FOOD ALLERGY CENTERS	**c** EIN-PN	20-5170557-501
a Plan name	ALLIANCE AG SOLUTIONS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIANCE AG SOLUTIONS INC.	**c** EIN-PN	13-4280586-501
a Plan name	ALLIANCE SYSTEMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIANCE SYSTEMS LLC	**c** EIN-PN	84-3014846-501
a Plan name	ALLIED ARTS COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIED ARTS COUNCIL	**c** EIN-PN	43-0810827-501
a Plan name	ALLIED CONTROLS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIED CONTROLS LLC	**c** EIN-PN	20-2676688-501
a Plan name	ALLIED HVAC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIED HVAC LLC	**c** EIN-PN	81-5168601-501
a Plan name	ALLIED INTELLIGENCE MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIED INTELLIGENCE	**c** EIN-PN	47-3151026-501
a Plan name	ALLIED SAWING AND SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLIED SAWING AND SERVICES INC	**c** EIN-PN	11-3807999-501
a Plan name	ALL-STAR PERFORMANCE BASEBALL/SOFTBALL TRAININGCTR MCF BENEFIT PLAN		
b Name of plan sponsor	ALL-STAR PERFORMANCE BASEBALL/SOFTBALL TRAININGCTR	**c** EIN-PN	41-2216491-501
a Plan name	ALLVATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALLVATION LLC	**c** EIN-PN	36-4690086-501
a Plan name	ALOFIA MEDICAL PC MCF BENEFIT PLAN		
b Name of plan sponsor	ALOFIA MEDICAL PC	**c** EIN-PN	87-4012224-501
a Plan name	ALONZO AGENCY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALONZO AGENCY INC.	**c** EIN-PN	43-1192118-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 ENGINEERING & SURVEYING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALPHA ENGINEERING & SURVEYING LLC	**c** EIN-PN	93-2158612-501
a Plan name	ALPHA FOUNDRY INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALPHA FOUNDRY INC	**c** EIN-PN	43-0787532-501
a Plan name	ALPHA KILO CONSULTING MCF BENEFIT PLAN		
b Name of plan sponsor	ALPHA KILO CONSULTING	**c** EIN-PN	87-3103910-501
a Plan name	ALPHA TOOL TECH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALPHA TOOL TECH LLC	**c** EIN-PN	93-4445939-501
a Plan name	ALPHA ZERO GLOBAL LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALPHA ZERO GLOBAL LOGISTICS LLC	**c** EIN-PN	88-3324625-501
a Plan name	AL'S AUTO SALVAGE AND SALES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALS AUTO SALVAGE AND SALES, INC	**c** EIN-PN	43-1033832-501
a Plan name	ALS WYDOWN LAUNDRY AND DRY CLEANERS MCF BENEFIT PLAN		
b Name of plan sponsor	ALS WYDOWN LAUNDRY AND DRY CLEANERS	**c** EIN-PN	43-1230574-501
a Plan name	ALSARA CLINIC MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	ALSARA CLINIC MISSOURI	**c** EIN-PN	81-1162595-501
a Plan name	ALT CONSULTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	ALT CONSULTING INC	**c** EIN-PN	20-2756717-501
a Plan name	ALTEC DESIGN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALTEC DESIGN, LLC	**c** EIN-PN	43-1846360-501
a Plan name	ALTEC IT SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ALTEC IT SOLUTIONS	**c** EIN-PN	50-0003206-501
a Plan name	ALWAYS CLEAN LAWN CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ALWAYS CLEAN LAWN CARE, LLC	**c** EIN-PN	20-4454494-501

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

a Plan name	ALWAYS GREEN RECYCLING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ALWAYS GREEN RECYCLING INC.	**c** EIN-PN	26-2398395-501
a Plan name	AM PYROTECHNICS MCF BENEFIT PLAN		
b Name of plan sponsor	AM PYROTECHNICS	**c** EIN-PN	75-2984619-501
a Plan name	AMALACO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMALACO LLC	**c** EIN-PN	45-5541119-501
a Plan name	AMANDA M. HILLIS DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMANDA M. HILLIS DDS LLC	**c** EIN-PN	45-5609135-501
a Plan name	AMANDA SHIPMAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMANDA SHIPMAN LLC	**c** EIN-PN	82-3827501-501
a Plan name	AMAZING GLAZING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMAZING GLAZING LLC	**c** EIN-PN	47-3627301-501
a Plan name	AMB VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMB VENTURES LLC	**c** EIN-PN	86-3382145-501
a Plan name	AME CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AME CONSTRUCTION LLC	**c** EIN-PN	81-4515345-501
a Plan name	AMENDMENT 2 CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	AMENDMENT 2 CONSULTANTS	**c** EIN-PN	83-2968279-501
a Plan name	AMERICAN BATTERY & ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN BATTERY & ELECTRIC	**c** EIN-PN	43-0977848-501
a Plan name	AMERICAN DEVELOPMENT SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN DEVELOPMENT SERVICES	**c** EIN-PN	45-2049524-501
a Plan name	AMERICAN FLEET INC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN FLEET INC	**c** EIN-PN	33-1182940-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 GLASS AND OVERHEAD DOOR INC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN GLASS AND OVERHEAD DOOR INC	**c** EIN-PN	43-1611635-501
a Plan name	AMERICAN LEGAL & FINANCIAL NETWORK MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN LEGAL & FINANCIAL NETWORK	**c** EIN-PN	04-3601831-501
a Plan name	AMERICAN MACHINING & FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN MACHINING & FABRICATION	**c** EIN-PN	81-4862844-501
a Plan name	AMERICAN SERVICES ST LOUIS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN SERVICES ST LOUIS LLC	**c** EIN-PN	16-1683656-501
a Plan name	AMERICAN TAX STRATEGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN TAX STRATEGIES LLC	**c** EIN-PN	81-4425775-501
a Plan name	AMERICAN TECHNOLOGY CORP MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN TECHNOLOGY CORP	**c** EIN-PN	43-1349274-501
a Plan name	AMERICAN WELDING ACADEMY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICAN WELDING ACADEMY LLC	**c** EIN-PN	83-3316974-501
a Plan name	AMERICHICKEN, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICHICKEN, INC.	**c** EIN-PN	20-2483413-501
a Plan name	AMERICLOCK INC. MCF BENEFIT PLAN		
b Name of plan sponsor	AMERICLOCK INC.	**c** EIN-PN	06-1525570-501
a Plan name	AMEX FOODS MCF BENEFIT PLAN		
b Name of plan sponsor	AMEX FOODS	**c** EIN-PN	87-4831151-501
a Plan name	AMPLIFIED ELECTRICAL CONTRACTORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AMPLIFIED ELECTRICAL CONTRACTORS LLC	**c** EIN-PN	85-4089851-501
a Plan name	AMPLIFY GOODS MCF BENEFIT PLAN		
b Name of plan sponsor	AMPLIFY GOODS	**c** EIN-PN	81-3335288-501

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

a Plan name	AMY S BECK, DO PC MCF BENEFIT PLAN		
b Name of plan sponsor	AMY S BECK, DO PC	**c** EIN-PN	88-3048162-501
a Plan name	ANCHOR HOUSE OF WARREN COUNTY MCF BENEFIT PLAN		
b Name of plan sponsor	ANCHOR HOUSE OF WARREN COUNTY	**c** EIN-PN	87-1857183-501
a Plan name	ANDERSON AND GREEN INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDERSON AND GREEN INSURANCE AGENCY LLC	**c** EIN-PN	20-5489631-501
a Plan name	ANDERSON EXCAVATING & TRUCKING INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDERSON EXCAVATING & TRUCKING INC	**c** EIN-PN	61-1314761-501
a Plan name	ANDLEE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDLEE, LLC	**c** EIN-PN	27-1342586-501
a Plan name	ANDORO AND SONS PIZZA MCF BENEFIT PLAN		
b Name of plan sponsor	ANDORO AND SONS PIZZA	**c** EIN-PN	46-0648853-501
a Plan name	ANDREW G MITCHELL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDREW G MITCHELL, INC	**c** EIN-PN	43-0994511-501
a Plan name	ANDREW PETERS INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDREW PETERS INSURANCE AGENCY INC	**c** EIN-PN	46-3734735-501
a Plan name	ANDREW W DIELMANN REALTY CO,INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANDREW W DIELMANN REALTY CO,INC	**c** EIN-PN	20-2357564-501
a Plan name	ANDREWS FARM AND SEED, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ANDREWS FARM AND SEED, INC.	**c** EIN-PN	43-1406312-501
a Plan name	ANDY'S GARAGE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	ANDYS GARAGE SERVICE	**c** EIN-PN	26-2163469-501
a Plan name	ANESTHESIA PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	ANESTHESIA PARTNERS	**c** EIN-PN	43-1851649-501

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

a Plan name	ANGELA MEYER CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANGELA MEYER CPA LLC	**c** EIN-PN	11-3800022-501
a Plan name	ANGIE DELL FOSTER AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANGIE DELL FOSTER AGENCY INC	**c** EIN-PN	81-3056729-501
a Plan name	ANGSTROM MANUFACTURING INC MCF BENEFIT PLAN		
b Name of plan sponsor	ANGSTROM MANUFACTURING INC	**c** EIN-PN	43-1863147-501
a Plan name	ANIMAL CLINIC OF DIAMOND MCF BENEFIT PLAN		
b Name of plan sponsor	ANIMAL CLINIC OF DIAMOND	**c** EIN-PN	20-5631773-501
a Plan name	ANNE ROBERTS MD MCF BENEFIT PLAN		
b Name of plan sponsor	ANNE ROBERTS MD	**c** EIN-PN	27-1669055-501
a Plan name	ANSRWARE HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANSRWARE HOLDINGS LLC	**c** EIN-PN	20-4663723-501
a Plan name	ANTHONY DUNCAN ARCHITECT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANTHONY DUNCAN ARCHITECT, LLC	**c** EIN-PN	41-2210132-501
a Plan name	ANTHONY W DAMERON MCF BENEFIT PLAN		
b Name of plan sponsor	ANTHONY W DAMERON	**c** EIN-PN	43-1672965-501
a Plan name	ANVIL CUSTOMS MCF BENEFIT PLAN		
b Name of plan sponsor	ANVIL CUSTOMS	**c** EIN-PN	13-4357711-501
a Plan name	ANXIETY & DEPRESSION CLINIC OF COLUMBIA MCF BENEFIT PLAN		
b Name of plan sponsor	ANXIETY & DEPRESSION CLINIC OF COLUMBIA	**c** EIN-PN	81-3542476-501
a Plan name	ANY SYSTEMS INSTALLATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANY SYSTEMS INSTALLATIONS LLC	**c** EIN-PN	84-3946049-501
a Plan name	ANZ LENDING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ANZ LENDING LLC	**c** EIN-PN	88-3420078-501

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

a Plan name	AP PARKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AP PARKS LLC	**c** EIN-PN	84-4647351-501
a Plan name	APC ENTERPRISES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	APC ENTERPRISES, INC.	**c** EIN-PN	16-1695628-501
a Plan name	APC MECHANICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	APC MECHANICAL LLC	**c** EIN-PN	46-3440018-501
a Plan name	APEX CERTIFIED RESTORATION AND CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	APEX CERTIFIED RESTORATION AND CONSTRUCTION LLC	**c** EIN-PN	47-1860077-501
a Plan name	APLUS PAYROLL MCF BENEFIT PLAN		
b Name of plan sponsor	APLUS PAYROLL	**c** EIN-PN	43-1908852-501
a Plan name	APPERSON UTILITY CONTRACTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	APPERSON UTILITY CONTRACTING INC	**c** EIN-PN	04-3634772-501
a Plan name	APPLE CREEK ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	APPLE CREEK ENTERPRISES LLC	**c** EIN-PN	71-1020278-501
a Plan name	APPLETON MEDICAL SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	APPLETON MEDICAL SERVICES INC	**c** EIN-PN	43-1896675-501
a Plan name	APPLIANCE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	APPLIANCE INC.	**c** EIN-PN	88-1177119-501
a Plan name	APPRILL ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	APPRILL ELECTRIC LLC	**c** EIN-PN	20-1019308-501
a Plan name	APTITUDE INTERNET SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	APTITUDE INTERNET SOLUTIONS	**c** EIN-PN	27-1926131-501
a Plan name	AQM COMPUTER HELP MCF BENEFIT PLAN		
b Name of plan sponsor	AQM COMPUTER HELP	**c** EIN-PN	43-1802329-501

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

a Plan name	AQUA VITAE PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AQUA VITAE PLUMBING LLC	**c** EIN-PN	45-1606947-501
a Plan name	AQUINAS INSTITUTE OF THEOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	AQUINAS INSTITUTE OF THEOLOGY	**c** EIN-PN	43-1233793-501
a Plan name	AR HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AR HOLDINGS, LLC	**c** EIN-PN	82-1450244-502
a Plan name	AR PROCESS SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AR PROCESS SOLUTIONS LLC	**c** EIN-PN	81-0746561-501
a Plan name	ARCADE PRINTING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	ARCADE PRINTING COMPANY	**c** EIN-PN	43-1225455-501
a Plan name	ARCH ADVANCED PAIN MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH ADVANCED PAIN MANAGEMENT	**c** EIN-PN	46-1632266-501
a Plan name	ARCH BROKERAGE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH BROKERAGE INC	**c** EIN-PN	43-1903427-501
a Plan name	ARCH CITY AUDIO VISUAL SERVCIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH CITY AUDIO VISUAL SERVCIES LLC	**c** EIN-PN	45-2538809-501
a Plan name	ARCH CITY ENDO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH CITY ENDO LLC	**c** EIN-PN	84-3568471-501
a Plan name	ARCH EXPRESS MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH EXPRESS	**c** EIN-PN	43-1884536-501
a Plan name	ARCH MATERIAL HANDLING INC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH MATERIAL HANDLING INC	**c** EIN-PN	43-1816608-501
a Plan name	ARCH PACKAGING TECHNOLOGIES MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH PACKAGING TECHNOLOGIES	**c** EIN-PN	47-3098731-501

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

a Plan name	ARCH TRANSIT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCH TRANSIT LLC	**c** EIN-PN	82-2244574-501
a Plan name	ARCHANGEL KARTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHANGEL KARTING LLC	**c** EIN-PN	45-4302897-501
a Plan name	ARCHGEO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHGEO LLC	**c** EIN-PN	88-1558791-501
a Plan name	ARCHITECTURAL DESIGN GUILD CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHITECTURAL DESIGN GUILD CORPORATION	**c** EIN-PN	43-1268774-501
a Plan name	ARCHTECH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHTECH LLC	**c** EIN-PN	46-1371170-501
a Plan name	ARCHWAY ANODIZE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHWAY ANODIZE LLC	**c** EIN-PN	26-3371884-501
a Plan name	ARCHWAY ORAL SURGERY AND DENTAL IMPLANTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARCHWAY ORAL SURGERY AND DENTAL IMPLANTS LLC	**c** EIN-PN	33-2358449-501
a Plan name	ARCTOS, LP MCF BENEFIT PLAN		
b Name of plan sponsor	ARCTOS, LP	**c** EIN-PN	83-0873910-501
a Plan name	ARDENT IT SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARDENT IT SOLUTIONS LLC	**c** EIN-PN	47-4936089-501
a Plan name	AREA 51 STL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AREA 51 STL LLC	**c** EIN-PN	85-3356490-501
a Plan name	ARENZ PEST MANAGEMENT SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ARENZ PEST MANAGEMENT SOLUTIONS	**c** EIN-PN	43-1915106-501
a Plan name	ARKIFEX STUDIOS MCF BENEFIT PLAN		
b Name of plan sponsor	ARKIFEX STUDIOS	**c** EIN-PN	47-1461407-501

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

a Plan name	ARLO BANK MCF BENEFIT PLAN		
b Name of plan sponsor	ARLO BANK	**c** EIN-PN	99-0786066-501
a Plan name	ARMSTRONGS HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	ARMSTRONGS HEATING & COOLING	**c** EIN-PN	81-5233400-501
a Plan name	ARNOLD A SEITTER MCF BENEFIT PLAN		
b Name of plan sponsor	ARNOLD A SEITTER	**c** EIN-PN	43-0958484-501
a Plan name	ARROW HEATING AND COOLING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ARROW HEATING AND COOLING, INC.	**c** EIN-PN	43-1649333-501
a Plan name	ARROWHEAD INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	ARROWHEAD INDUSTRIES	**c** EIN-PN	33-1067114-501
a Plan name	ARROWPOINT ENERGY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARROWPOINT ENERGY, LLC	**c** EIN-PN	82-4520115-501
a Plan name	ARSENAL BUSINESS GROWTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARSENAL BUSINESS GROWTH LLC	**c** EIN-PN	83-3920969-501
a Plan name	ARTECO GLOBAL MCF BENEFIT PLAN		
b Name of plan sponsor	ARTECO GLOBAL	**c** EIN-PN	20-2069624-501
a Plan name	ARTICULATE VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARTICULATE VENTURES LLC	**c** EIN-PN	32-1723196-501
a Plan name	ARTISAN CONSTRUCTORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARTISAN CONSTRUCTORS LLC	**c** EIN-PN	27-0275542-501
a Plan name	ARTISAN FABRICATION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARTISAN FABRICATION, LLC	**c** EIN-PN	27-3619328-501
a Plan name	ARTISAN II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ARTISAN II LLC	**c** EIN-PN	47-2631436-501

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

a Plan name	ARTMART, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ARTMART, INC	**c** EIN-PN	43-1293558-501
a Plan name	ASCEND BUSINESS STRATEGIES MCF BENEFIT PLAN		
b Name of plan sponsor	ASCEND BUSINESS STRATEGIES	**c** EIN-PN	27-0968447-501
a Plan name	ASKINOSIE CHOCOLATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASKINOSIE CHOCOLATE LLC	**c** EIN-PN	65-1260712-501
a Plan name	ASPEN CHEMICAL AND SUPPLY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASPEN CHEMICAL AND SUPPLY LLC	**c** EIN-PN	46-2366775-501
a Plan name	ASPEN NETWORK INC MCF BENEFIT PLAN		
b Name of plan sponsor	ASPEN NETWORK INC	**c** EIN-PN	92-2806043-501
a Plan name	ASPEN RISK MANAGEMENT GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	ASPEN RISK MANAGEMENT GROUP	**c** EIN-PN	92-3118961-501
a Plan name	ASPHALT SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASPHALT SERVICES LLC	**c** EIN-PN	85-1110113-501
a Plan name	ASPIRE CONSTRUCTION SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASPIRE CONSTRUCTION SERVICES LLC	**c** EIN-PN	83-3204377-501
a Plan name	ASPIRE HEALTH INNOVATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASPIRE HEALTH INNOVATIONS LLC	**c** EIN-PN	88-2566366-501
a Plan name	ASSET MARKETING CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	ASSET MARKETING CONSULTANTS	**c** EIN-PN	20-0492917-501
a Plan name	ASSISTED LIVING SOLUTIONS STAFFING FIRM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ASSISTED LIVING SOLUTIONS STAFFING FIRM LLC	**c** EIN-PN	86-3069388-501
a Plan name	ASTRO HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	ASTRO HEATING & COOLING	**c** EIN-PN	43-1707436-501

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

a Plan name	AT HOME REAL ESTATE PROPERTY MGMT MCF BENEFIT PLAN		
b Name of plan sponsor	AT HOME REAL ESTATE PROPERTY MGMT	**c** EIN-PN	81-3370480-501
a Plan name	AT HOME REAL ESTATE SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	AT HOME REAL ESTATE SERVICES	**c** EIN-PN	20-8955470-501
a Plan name	ATAJ ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	ATAJ ENTERPRISES	**c** EIN-PN	30-0448358-501
a Plan name	ATCHITY EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ATCHITY EXCAVATING LLC	**c** EIN-PN	84-3967041-501
a Plan name	ATECH INDUSTRIAL ELECTRONICS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ATECH INDUSTRIAL ELECTRONICS INC	**c** EIN-PN	43-1691995-501
a Plan name	ATHA BROTHER AG MCF BENEFIT PLAN		
b Name of plan sponsor	ATHA BROTHER AG	**c** EIN-PN	46-1256849-501
a Plan name	ATI MCF BENEFIT PLAN		
b Name of plan sponsor	ATI	**c** EIN-PN	82-4219757-501
a Plan name	ATLASTA SPECIALTY INK CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	ATLASTA SPECIALTY INK CO INC	**c** EIN-PN	43-1450876-501
a Plan name	ATON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ATON LLC	**c** EIN-PN	45-5436484-502
a Plan name	AUBURN RIDGE LIVING CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUBURN RIDGE LIVING CENTER LLC	**c** EIN-PN	83-2156161-501
a Plan name	AURAGENT BIOSCIENCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AURAGENT BIOSCIENCE, LLC	**c** EIN-PN	82-5071625-501
a Plan name	AUSTIN INVESTMENTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	AUSTIN INVESTMENTS INC	**c** EIN-PN	43-1707430-501

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

a Plan name	AUSTIN ORTHODONTICS AUSTIN KEVIN R DDS MCF BENEFIT PLAN		
b Name of plan sponsor	AUSTIN ORTHODONTICS AUSTIN KEVIN R DDS	**c** EIN-PN	20-1528518-501
a Plan name	AUTO PAINT HQ, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUTO PAINT HQ, LLC	**c** EIN-PN	82-3261642-501
a Plan name	AUTO WORLD TIRE AND AUTO MCF BENEFIT PLAN		
b Name of plan sponsor	AUTO WORLD TIRE AND AUTO	**c** EIN-PN	92-1541055-501
a Plan name	AUTOCRAFT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUTOCRAFT LLC	**c** EIN-PN	81-0769068-501
a Plan name	AUTOMATIC ICE SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	AUTOMATIC ICE SYSTEMS	**c** EIN-PN	43-1183785-501
a Plan name	AUTOMOTIVE ID LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUTOMOTIVE ID LLC	**c** EIN-PN	20-5494303-501
a Plan name	AUTOPRO CAR CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUTOPRO CAR CARE LLC	**c** EIN-PN	80-0323777-501
a Plan name	AUTUMN EXTERIORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AUTUMN EXTERIORS, LLC	**c** EIN-PN	43-1884530-501
a Plan name	AVANT SUPPORTED LIVING MCF BENEFIT PLAN		
b Name of plan sponsor	AVANT SUPPORTED LIVING	**c** EIN-PN	83-3394918-501
a Plan name	AVERY INJURY LAW MCF BENEFIT PLAN		
b Name of plan sponsor	AVERY INJURY LAW	**c** EIN-PN	82-3954955-501
a Plan name	AVOCA SEARCH MCF BENEFIT PLAN		
b Name of plan sponsor	AVOCA SEARCH	**c** EIN-PN	82-4199704-501
a Plan name	AXIOM AVIATION GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AXIOM AVIATION GROUP LLC	**c** EIN-PN	84-2825730-501

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

a Plan name	AXIUS FINANCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AXIUS FINANCIAL LLC	**c** EIN-PN	27-2120568-501
a Plan name	AYRES SIGN COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	AYRES SIGN COMPANY	**c** EIN-PN	43-1785582-501
a Plan name	AZIMUTH ENERGY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AZIMUTH ENERGY, LLC	**c** EIN-PN	38-3933059-501
a Plan name	AZZIP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	AZZIP LLC	**c** EIN-PN	81-1726181-501
a Plan name	B & B HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	B & B HEATING & COOLING	**c** EIN-PN	83-1254565-501
a Plan name	B & B TREE & LANDSCAPES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	B & B TREE & LANDSCAPES, LLC	**c** EIN-PN	82-3846297-501
a Plan name	B & D BRIDAL ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	B & D BRIDAL ENTERPRISES LLC	**c** EIN-PN	81-1280930-501
a Plan name	B & G DRAFTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	B & G DRAFTING INC	**c** EIN-PN	43-1290968-501
a Plan name	B & L EDWARDS INC MCF BENEFIT PLAN		
b Name of plan sponsor	B & L EDWARDS INC	**c** EIN-PN	43-2015209-501
a Plan name	B & V ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	B & V ENTERPRISES	**c** EIN-PN	43-1913751-501
a Plan name	B AND N CAPITOL SUPPLIES MCF BENEFIT PLAN		
b Name of plan sponsor	B AND N CAPITOL SUPPLIES	**c** EIN-PN	47-2767242-501
a Plan name	B&P EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	B&P EXCAVATING LLC	**c** EIN-PN	43-1911942-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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&R ADJUSTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	B&R ADJUSTING, LLC	**c** EIN-PN	82-4149417-501
a Plan name	B.E. SCAIFE PLUMBING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	B.E. SCAIFE PLUMBING COMPANY	**c** EIN-PN	43-1919470-501
a Plan name	B2 TELECOM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	B2 TELECOM LLC	**c** EIN-PN	27-4634120-501
a Plan name	BACK ON TRACK CHIROPRACTIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BACK ON TRACK CHIROPRACTIC LLC	**c** EIN-PN	26-2574129-501
a Plan name	BACKES & TOELKE AGRI PRODUCTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BACKES & TOELKE AGRI PRODUCTS INC	**c** EIN-PN	43-1342306-501
a Plan name	BADER CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	BADER CORPORATION	**c** EIN-PN	43-1728675-501
a Plan name	BAHRS FURNITURE MCF BENEFIT PLAN		
b Name of plan sponsor	BAHRS FURNITURE	**c** EIN-PN	43-1624110-501
a Plan name	BAILEY CHEVROLET GMC CO MCF BENEFIT PLAN		
b Name of plan sponsor	BAILEY CHEVROLET GMC CO	**c** EIN-PN	43-1785479-501
a Plan name	BAILEY'S AUTO BODY,INC MCF BENEFIT PLAN		
b Name of plan sponsor	BAILEYS AUTO BODY,INC	**c** EIN-PN	43-1562557-501
a Plan name	BAILEYS EATS AND SWEETS MCF BENEFIT PLAN		
b Name of plan sponsor	BAILEYS EATS AND SWEETS	**c** EIN-PN	84-3435181-501
a Plan name	BAIRD LAWYERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BAIRD LAWYERS LLC	**c** EIN-PN	99-0481271-501
a Plan name	BAIRD REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BAIRD REAL ESTATE LLC	**c** EIN-PN	77-0623977-501

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

a Plan name	BAIRD REFRIGERATION MCF BENEFIT PLAN		
b Name of plan sponsor	BAIRD REFRIGERATION	**c** EIN-PN	43-1586503-501
a Plan name	BAKER LANDSCAPING & CONCRETE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BAKER LANDSCAPING & CONCRETE LLC	**c** EIN-PN	26-4146590-501
a Plan name	BALES MOVING AND STORAGE MCF BENEFIT PLAN		
b Name of plan sponsor	BALES MOVING AND STORAGE	**c** EIN-PN	43-1479033-501
a Plan name	BALL PAVING MCF BENEFIT PLAN		
b Name of plan sponsor	BALL PAVING	**c** EIN-PN	43-1663974-501
a Plan name	BALLEW SAW & TOOL INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BALLEW SAW & TOOL INC.	**c** EIN-PN	43-1173280-501
a Plan name	BANKS MOTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BANKS MOTORS INC	**c** EIN-PN	82-0802547-501
a Plan name	BARBER MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	BARBER MANAGEMENT	**c** EIN-PN	43-1600912-501
a Plan name	BARNARD HEATING & COOLING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BARNARD HEATING & COOLING, LLC	**c** EIN-PN	81-5434244-501
a Plan name	BARNETT'S MARKET INC MCF BENEFIT PLAN		
b Name of plan sponsor	BARNETTS MARKET INC	**c** EIN-PN	43-1731891-501
a Plan name	BARNSTORMERS LAWN CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BARNSTORMERS LAWN CARE LLC	**c** EIN-PN	82-5412022-501
a Plan name	BARNZ B MCF BENEFIT PLAN		
b Name of plan sponsor	BARNZ B	**c** EIN-PN	43-1874907-501
a Plan name	BARON SPICES MCF BENEFIT PLAN		
b Name of plan sponsor	BARON SPICES	**c** EIN-PN	43-1469146-501

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

a Plan name	BARRETT BERRERA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BARRETT BERRERA LLC	**c** EIN-PN	27-4204319-501
a Plan name	BARRETT STATION VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	BARRETT STATION VETERINARY CLINIC	**c** EIN-PN	20-3533396-501
a Plan name	BARRON CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BARRON CONSTRUCTION LLC	**c** EIN-PN	27-2430760-501
a Plan name	BARRON MIRROR INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BARRON MIRROR INC.	**c** EIN-PN	43-1153569-501
a Plan name	BARRY LAWRENCE COUNTY AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	BARRY LAWRENCE COUNTY AMBULANCE DISTRICT	**c** EIN-PN	43-1043561-501
a Plan name	BARTON COUNTY TITLE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	BARTON COUNTY TITLE COMPANY	**c** EIN-PN	43-1534408-501
a Plan name	BASIS FINANCIAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BASIS FINANCIAL GROUP LLC	**c** EIN-PN	84-4167691-501
a Plan name	BASLER FUNERAL HOME, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BASLER FUNERAL HOME, INC	**c** EIN-PN	43-1457784-501
a Plan name	BASTA OUTDOOR LIVING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BASTA OUTDOOR LIVING LLC	**c** EIN-PN	88-2889654-501
a Plan name	BATES BUILDING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BATES BUILDING LLC	**c** EIN-PN	27-1184101-502
a Plan name	BATH PLANET MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	BATH PLANET MISSOURI	**c** EIN-PN	85-3979199-501
a Plan name	BATTLEFIELD FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	BATTLEFIELD FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1405707-501

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

a Plan name	BAUMAN BROTHERS EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	BAUMAN BROTHERS EQUIPMENT	**c** EIN-PN	83-4377391-501
a Plan name	BAUMANN ENTERPRISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BAUMANN ENTERPRISE LLC	**c** EIN-PN	45-4686050-501
a Plan name	BAX ENGINEERING MCF BENEFIT PLAN		
b Name of plan sponsor	BAX ENGINEERING	**c** EIN-PN	43-1231153-501
a Plan name	BAXLEY INC MCF BENEFIT PLAN		
b Name of plan sponsor	BAXLEY INC	**c** EIN-PN	47-0961059-501
a Plan name	BAZAN PAINTING CO MCF BENEFIT PLAN		
b Name of plan sponsor	BAZAN PAINTING CO	**c** EIN-PN	43-1116593-501
a Plan name	BC KING DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	BC KING DDS PC	**c** EIN-PN	43-1241116-501
a Plan name	BC&C ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BC&C ENTERPRISES LLC	**c** EIN-PN	87-3784971-501
a Plan name	BCDM CAPITAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	BCDM CAPITAL GROUP	**c** EIN-PN	81-2813908-501
a Plan name	BCL FABRICATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BCL FABRICATION LLC	**c** EIN-PN	84-4447463-501
a Plan name	BEACONSTAR COUNSELING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEACONSTAR COUNSELING LLC	**c** EIN-PN	47-3929213-501
a Plan name	BEANSTALK WEB SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	BEANSTALK WEB SOLUTIONS	**c** EIN-PN	47-2829023-501
a Plan name	BEAR CREEK VETERINARY CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEAR CREEK VETERINARY CLINIC LLC	**c** EIN-PN	99-3029862-501

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

a Plan name	BEAR RIDGE MANAGEMENT CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEAR RIDGE MANAGEMENT CO LLC	**c** EIN-PN	88-1984504-501
a Plan name	BEARD ENTERPRISE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEARD ENTERPRISE, LLC	**c** EIN-PN	47-4492833-501
a Plan name	BEARD VET SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEARD VET SERVICES, LLC	**c** EIN-PN	20-4406716-501
a Plan name	BEAUTY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEAUTY LLC	**c** EIN-PN	81-1803295-501
a Plan name	BECK FLORAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BECK FLORAL LLC	**c** EIN-PN	88-2956311-501
a Plan name	BECKEMEIER LEMOINE LAW MCF BENEFIT PLAN		
b Name of plan sponsor	BECKEMEIER LEMOINE LAW	**c** EIN-PN	85-4165371-501
a Plan name	BECKERLE FINANCIAL GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BECKERLE FINANCIAL GROUP, LLC	**c** EIN-PN	74-3048191-501
a Plan name	BECKETT'S LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BECKETTS LLC	**c** EIN-PN	20-8554866-501
a Plan name	BECKY ROBBINS DESIGNS MCF BENEFIT PLAN		
b Name of plan sponsor	BECKY ROBBINS DESIGNS	**c** EIN-PN	46-2886793-501
a Plan name	BEECH MANUFACTURING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BEECH MANUFACTURING INC.	**c** EIN-PN	43-1616000-501
a Plan name	BEEF 360 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEEF 360 LLC	**c** EIN-PN	46-2315139-501
a Plan name	BEE'S KNEES BREWING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	BEES KNEES BREWING COMPANY	**c** EIN-PN	82-4059329-501

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

a Plan name	BEESON ARCHITECTURAL METAL FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	BEESON ARCHITECTURAL METAL FABRICATION	**c** EIN-PN	88-3620571-501
a Plan name	BEGINNING FUTURES MCF BENEFIT PLAN		
b Name of plan sponsor	BEGINNING FUTURES	**c** EIN-PN	80-0184970-501
a Plan name	BEHAVIORAL HEALTH NETWORK OF GREATER ST. LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	BEHAVIORAL HEALTH NETWORK OF GREATER ST. LOUIS	**c** EIN-PN	90-0656137-501
a Plan name	BELL & OSBORN AUTO BODY MCF BENEFIT PLAN		
b Name of plan sponsor	BELL & OSBORN AUTO BODY	**c** EIN-PN	43-1563942-501
a Plan name	BELL CPA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BELL CPA, LLC	**c** EIN-PN	47-3868216-501
a Plan name	BELLA & BERK PAYMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BELLA & BERK PAYMENTS LLC	**c** EIN-PN	99-4510154-501
a Plan name	BELLERIVE CEMETERY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BELLERIVE CEMETERY, LLC	**c** EIN-PN	45-5634978-501
a Plan name	BELLIN GENERAL CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	BELLIN GENERAL CONTRACTING	**c** EIN-PN	83-3958787-501
a Plan name	BELMONT PARTY RENTALS MCF BENEFIT PLAN		
b Name of plan sponsor	BELMONT PARTY RENTALS	**c** EIN-PN	26-2194575-501
a Plan name	BEN R. BROWN TRUCKING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BEN R. BROWN TRUCKING, INC.	**c** EIN-PN	43-1797155-501
a Plan name	BEN RISTER INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	BEN RISTER INSURANCE AGENCY INC	**c** EIN-PN	47-1319057-501
a Plan name	BEN WEEKS INSURANCE AGENCY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BEN WEEKS INSURANCE AGENCY INC.	**c** EIN-PN	84-3176942-501

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

a Plan name	BENCHMARK OFFICE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BENCHMARK OFFICE SOLUTIONS LLC	**c** EIN-PN	43-1933152-501
a Plan name	BENING AUTOMOTIVE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BENING AUTOMOTIVE GROUP LLC	**c** EIN-PN	20-0363461-501
a Plan name	BENNAT PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BENNAT PROPERTIES LLC	**c** EIN-PN	82-0964473-501
a Plan name	BENNETT ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BENNETT ELECTRIC LLC	**c** EIN-PN	20-3578894-501
a Plan name	BENNETTS SERVICE STATION MCF BENEFIT PLAN		
b Name of plan sponsor	BENNETTS SERVICE STATION	**c** EIN-PN	43-1914721-501
a Plan name	BENTLEY BUILDING CO MCF BENEFIT PLAN		
b Name of plan sponsor	BENTLEY BUILDING CO	**c** EIN-PN	46-1065728-501
a Plan name	BERENDZEN CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	BERENDZEN CONSTRUCTION INC	**c** EIN-PN	33-2305542-501
a Plan name	BERGEN HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	BERGEN HEATING AND COOLING	**c** EIN-PN	33-2269598-501
a Plan name	BERGHOFFS CAFE MCF BENEFIT PLAN		
b Name of plan sponsor	BERGHOFFS CAFE	**c** EIN-PN	35-2282709-501
a Plan name	BERGMAN ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BERGMAN ENTERPRISES LLC	**c** EIN-PN	43-1948330-501
a Plan name	BERKLEY REAL ESTATE MCF BENEFIT PLAN		
b Name of plan sponsor	BERKLEY REAL ESTATE	**c** EIN-PN	20-3644708-501
a Plan name	BERNARD A BUCKMAN ENTERPRISE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BERNARD A BUCKMAN ENTERPRISE INC.	**c** EIN-PN	43-1054925-501

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

a Plan name	BERNSKOETTER CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BERNSKOETTER CONSTRUCTION LLC	**c** EIN-PN	81-5470984-501
a Plan name	BERRY SILBERBERG STOKES, PC MCF BENEFIT PLAN		
b Name of plan sponsor	BERRY SILBERBERG STOKES, PC	**c** EIN-PN	82-2977415-501
a Plan name	BERWALD SURGICAL-MEDICAL, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BERWALD SURGICAL-MEDICAL, INC.	**c** EIN-PN	43-1227305-501
a Plan name	BESCHEINEN FAMILY FURNITURE MCF BENEFIT PLAN		
b Name of plan sponsor	BESCHEINEN FAMILY FURNITURE	**c** EIN-PN	43-1907263-501
a Plan name	BESHEARS PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BESHEARS PROPERTIES LLC	**c** EIN-PN	82-4782183-501
a Plan name	BESPOKE APPAREL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BESPOKE APPAREL LLC	**c** EIN-PN	90-0944040-501
a Plan name	BEST BUY POOLS MCF BENEFIT PLAN		
b Name of plan sponsor	BEST BUY POOLS	**c** EIN-PN	84-4973240-501
a Plan name	BEST CHOICE REALTY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEST CHOICE REALTY LLC	**c** EIN-PN	43-1915873-501
a Plan name	BEST SEAT IN THE HOUSE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BEST SEAT IN THE HOUSE, INC.	**c** EIN-PN	20-4989089-501
a Plan name	BEST TRANSPORTATION AND ST. LOUIS COUNTY CAB MCF BENEFIT PLAN		
b Name of plan sponsor	BEST TRANSPORTATION AND ST. LOUIS COUNTY CAB	**c** EIN-PN	43-1143268-502
a Plan name	BESTWAY MOVING & STORAGE MCF BENEFIT PLAN		
b Name of plan sponsor	BESTWAY MOVING & STORAGE	**c** EIN-PN	43-1089877-501
a Plan name	BETTER BY DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BETTER BY DESIGN LLC	**c** EIN-PN	27-0231691-501

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

a Plan name	BETTERMENT INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BETTERMENT INVESTMENTS LLC	**c** EIN-PN	88-4169992-501
a Plan name	BETZ GOLF CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BETZ GOLF CENTER LLC	**c** EIN-PN	82-3527663-501
a Plan name	BEUSSINK TRANSMISSION AND REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEUSSINK TRANSMISSION AND REPAIR LLC	**c** EIN-PN	45-2957649-501
a Plan name	BEV PAK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BEV PAK LLC	**c** EIN-PN	88-3187893-501
a Plan name	BEVEL FINANCIAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	BEVEL FINANCIAL INC	**c** EIN-PN	86-3846733-501
a Plan name	BEX CONSTRUCTION SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	BEX CONSTRUCTION SERVICES	**c** EIN-PN	47-1108296-501
a Plan name	BEYERS LUMBER AND HARDWARE MCF BENEFIT PLAN		
b Name of plan sponsor	BEYERS LUMBER AND HARDWARE	**c** EIN-PN	43-0613750-501
a Plan name	BFAH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BFAH LLC	**c** EIN-PN	83-2200041-501
a Plan name	BFF THERMAL SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BFF THERMAL SOLUTIONS LLC	**c** EIN-PN	92-3133059-501
a Plan name	BICHSEL SPREADING SERVICE, LLP MCF BENEFIT PLAN		
b Name of plan sponsor	BICHSEL SPREADING SERVICE, LLP	**c** EIN-PN	43-1774175-501
a Plan name	BIERBAUM FARMS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BIERBAUM FARMS INC.	**c** EIN-PN	43-1269484-501
a Plan name	BIERMANN STRAATMANN PC MCF BENEFIT PLAN		
b Name of plan sponsor	BIERMANN STRAATMANN PC	**c** EIN-PN	83-2798475-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 BALLIN HAULIN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG BALLIN HAULIN, LLC	**c** EIN-PN	86-2984813-501
a Plan name	BIG BEND AUTO SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG BEND AUTO SERVICE INC	**c** EIN-PN	81-2191040-501
a Plan name	BIG BEND LANDSCAPING MCF BENEFIT PLAN		
b Name of plan sponsor	BIG BEND LANDSCAPING	**c** EIN-PN	43-1854121-501
a Plan name	BIG BROTHERS BIG SISTERS OF CENTRAL MO MCF BENEFIT PLAN		
b Name of plan sponsor	BIG BROTHERS BIG SISTERS OF CENTRAL MO	**c** EIN-PN	43-1599644-501
a Plan name	BIG ENTERPRISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG ENTERPRISE LLC	**c** EIN-PN	45-4303846-501
a Plan name	BIG OL HOG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG OL HOG, LLC	**c** EIN-PN	26-4298449-501
a Plan name	BIG RIVER RACE MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG RIVER RACE MANAGEMENT LLC	**c** EIN-PN	27-4174041-501
a Plan name	BIG RIVER RUNNING CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIG RIVER RUNNING CO LLC	**c** EIN-PN	20-4223786-501
a Plan name	BIG SHARK BICYCLE CO MCF BENEFIT PLAN		
b Name of plan sponsor	BIG SHARK BICYCLE CO	**c** EIN-PN	43-1655794-501
a Plan name	BIGPXL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIGPXL LLC	**c** EIN-PN	84-4002067-501
a Plan name	BILL MCCOY O D P C MCF BENEFIT PLAN		
b Name of plan sponsor	BILL MCCOY O D P C	**c** EIN-PN	43-1330850-501
a Plan name	BILL THOMAS CAMPER SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	BILL THOMAS CAMPER SALES INC	**c** EIN-PN	43-0894421-501

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

a Plan name	BILLINGS SPEECH PATHOLOGY SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BILLINGS SPEECH PATHOLOGY SERVICES, LLC	**c** EIN-PN	61-1601961-501
a Plan name	BILLY GS FINER DINER MCF BENEFIT PLAN		
b Name of plan sponsor	BILLY GS FINER DINER	**c** EIN-PN	84-3769020-501
a Plan name	BIOBALANCE HEALTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIOBALANCE HEALTH LLC	**c** EIN-PN	76-0709161-501
a Plan name	BIOHEURIS MCF BENEFIT PLAN		
b Name of plan sponsor	BIOHEURIS	**c** EIN-PN	37-1953158-501
a Plan name	BIOSPHERE MEDICAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIOSPHERE MEDICAL GROUP LLC	**c** EIN-PN	85-3341172-501
a Plan name	BIRDS POINT AG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BIRDS POINT AG, LLC	**c** EIN-PN	82-5448084-501
a Plan name	BISHOP & HAYES P C MCF BENEFIT PLAN		
b Name of plan sponsor	BISHOP & HAYES P C	**c** EIN-PN	43-1820346-501
a Plan name	BK PODIATRY CENTERS MCF BENEFIT PLAN		
b Name of plan sponsor	BK PODIATRY CENTERS	**c** EIN-PN	47-1627445-501
a Plan name	BKB ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BKB ENTERPRISES, LLC	**c** EIN-PN	87-2398959-501
a Plan name	BKI SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BKI SERVICES, LLC	**c** EIN-PN	27-4812108-501
a Plan name	BLACK FAMILY ENTERPRISES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BLACK FAMILY ENTERPRISES INC.	**c** EIN-PN	46-4444354-501
a Plan name	BLACK JACK ROOFING MCF BENEFIT PLAN		
b Name of plan sponsor	BLACK JACK ROOFING	**c** EIN-PN	76-0759334-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 LAB DEVELOPMENT IN GATE DISTRICT WEST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLACK LAB DEVELOPMENT IN GATE DISTRICT WEST LLC	**c** EIN-PN	84-3662532-501
a Plan name	BLACK SHEEP AMMUNITION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLACK SHEEP AMMUNITION LLC	**c** EIN-PN	92-0626313-501
a Plan name	BLACKTOP SAILOR MCF BENEFIT PLAN		
b Name of plan sponsor	BLACKTOP SAILOR	**c** EIN-PN	93-2669231-501
a Plan name	BLACKWELL CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLACKWELL CONTRACTING, LLC	**c** EIN-PN	47-3692992-501
a Plan name	BLACKWELL FARMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLACKWELL FARMS, LLC	**c** EIN-PN	35-2650269-501
a Plan name	BLAKE FLOOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	BLAKE FLOOR COMPANY	**c** EIN-PN	43-1628530-501
a Plan name	BLAKEMORE SALES CORP MCF BENEFIT PLAN		
b Name of plan sponsor	BLAKEMORE SALES CORP	**c** EIN-PN	43-1004453-501
a Plan name	BLAKES ECONOLIFT MCF BENEFIT PLAN		
b Name of plan sponsor	BLAKES ECONOLIFT	**c** EIN-PN	87-2241786-501
a Plan name	BLAN MAN ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	BLAN MAN ENTERPRISES	**c** EIN-PN	43-0918190-501
a Plan name	BLATTNER STEEL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	BLATTNER STEEL COMPANY	**c** EIN-PN	43-1427661-501
a Plan name	BLECKMAN MACHINE & SUPPLY INC MCF BENEFIT PLAN		
b Name of plan sponsor	BLECKMAN MACHINE & SUPPLY INC	**c** EIN-PN	43-1063079-501
a Plan name	BLEY & EVANS LC MCF BENEFIT PLAN		
b Name of plan sponsor	BLEY & EVANS LC	**c** EIN-PN	27-5165877-501

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

a Plan name	BLINDSPOT MARKETING SOLUTIONS I LP MCF BENEFIT PLAN		
b Name of plan sponsor	BLINDSPOT MARKETING SOLUTIONS I LP	**c** EIN-PN	83-0881179-501
a Plan name	BLOOM LAWN AND LANDSCAPE MCF BENEFIT PLAN		
b Name of plan sponsor	BLOOM LAWN AND LANDSCAPE	**c** EIN-PN	81-1064211-501
a Plan name	BLOOMSDALE BANK MCF BENEFIT PLAN		
b Name of plan sponsor	BLOOMSDALE BANK	**c** EIN-PN	43-0169770-501
a Plan name	BLOSS VETERINARY SERVICES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BLOSS VETERINARY SERVICES, INC	**c** EIN-PN	43-1820553-501
a Plan name	BLUE IGUANA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLUE IGUANA LLC	**c** EIN-PN	85-1186263-501
a Plan name	BLUE MESA CREATIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLUE MESA CREATIVE LLC	**c** EIN-PN	87-3634676-501
a Plan name	BLUE SUN HEALTHCARE MCF BENEFIT PLAN		
b Name of plan sponsor	BLUE SUN HEALTHCARE	**c** EIN-PN	81-2852096-501
a Plan name	BLUFF PROSTHETICS & ORTHOTICS MCF BENEFIT PLAN		
b Name of plan sponsor	BLUFF PROSTHETICS & ORTHOTICS	**c** EIN-PN	26-1265579-501
a Plan name	BLV WHISKEY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BLV WHISKEY LLC	**c** EIN-PN	92-0683911-501
a Plan name	BMI TECHNOLOGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BMI TECHNOLOGIES LLC	**c** EIN-PN	20-2397832-501
a Plan name	BOBBIE JOYCE MCF BENEFIT PLAN		
b Name of plan sponsor	BOBBIE JOYCE	**c** EIN-PN	46-2399318-501
a Plan name	BOCO TRANSPORT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOCO TRANSPORT LLC	**c** EIN-PN	81-4257612-501

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

a Plan name	BODAVULA MD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BODAVULA MD LLC	**c** EIN-PN	47-2579446-501
a Plan name	BODENHAMER EYE CONSULTANTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BODENHAMER EYE CONSULTANTS LLC	**c** EIN-PN	46-4034451-501
a Plan name	BODY20 DES PERES MCF BENEFIT PLAN		
b Name of plan sponsor	BODY20 DES PERES	**c** EIN-PN	87-3902316-501
a Plan name	BOHL AND HOUSE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOHL AND HOUSE LLC	**c** EIN-PN	45-3075239-501
a Plan name	BOLD MARKETING MCF BENEFIT PLAN		
b Name of plan sponsor	BOLD MARKETING	**c** EIN-PN	90-0955039-501
a Plan name	BOLD SPOON CREAMERY MCF BENEFIT PLAN		
b Name of plan sponsor	BOLD SPOON CREAMERY	**c** EIN-PN	84-3637363-501
a Plan name	BOLIN HYDRAULIC, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BOLIN HYDRAULIC, INC.	**c** EIN-PN	43-1913845-501
a Plan name	BOLLINGER COUNTY VETERINARY SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	BOLLINGER COUNTY VETERINARY SERVICE	**c** EIN-PN	30-0385503-501
a Plan name	BONFYRE INC MCF BENEFIT PLAN		
b Name of plan sponsor	BONFYRE INC	**c** EIN-PN	46-3917160-501
a Plan name	BONNE TERRE CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	BONNE TERRE CHAMBER OF COMMERCE	**c** EIN-PN	43-1113283-501
a Plan name	BONNE TERRE HEALTHCARE CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BONNE TERRE HEALTHCARE CLINIC LLC	**c** EIN-PN	84-3113375-501
a Plan name	BONO BURNS DISTRIBUTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	BONO BURNS DISTRIBUTING INC	**c** EIN-PN	43-1166896-501

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

a Plan name	BOO CAT CATERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOO CAT CATERING LLC	**c** EIN-PN	46-5607310-501
a Plan name	BOOTHEEL RECYCLING MCF BENEFIT PLAN		
b Name of plan sponsor	BOOTHEEL RECYCLING	**c** EIN-PN	20-2690092-501
a Plan name	BOOTHEEL REGIONAL PLANNING MCF BENEFIT PLAN		
b Name of plan sponsor	BOOTHEEL REGIONAL PLANNING	**c** EIN-PN	43-0907112-501
a Plan name	BOOTHEEL TRACTOR PARTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BOOTHEEL TRACTOR PARTS INC	**c** EIN-PN	20-0507238-501
a Plan name	BOPP COLLISION CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOPP COLLISION CENTER LLC	**c** EIN-PN	81-3531609-501
a Plan name	BOPP LANDSCAPING & LAWNCARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOPP LANDSCAPING & LAWNCARE LLC	**c** EIN-PN	04-3596713-501
a Plan name	BOREAS FREEZE DRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOREAS FREEZE DRY LLC	**c** EIN-PN	99-2844112-501
a Plan name	BORES SEWER SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	BORES SEWER SERVICE INC	**c** EIN-PN	43-1738389-501
a Plan name	BOROVIC CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOROVIC CONTRACTING LLC	**c** EIN-PN	26-2991839-501
a Plan name	BOSSVILLE WHOLESALERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BOSSVILLE WHOLESALERS INC	**c** EIN-PN	43-1282108-501
a Plan name	BOULDER CANYON GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOULDER CANYON GROUP LLC	**c** EIN-PN	99-3307232-501
a Plan name	BOURGEOIS DOOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	BOURGEOIS DOOR COMPANY	**c** EIN-PN	43-1349634-501

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

a Plan name	BOUSE CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOUSE CONTRACTING LLC	**c** EIN-PN	11-3713987-501
a Plan name	BOYD & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOYD & ASSOCIATES, LLC	**c** EIN-PN	87-1708664-501
a Plan name	BOYLE VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BOYLE VENTURES LLC	**c** EIN-PN	82-0825532-501
a Plan name	BOYLES FARM SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	BOYLES FARM SERVICE INC	**c** EIN-PN	43-0961450-501
a Plan name	BOZICH CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	BOZICH CONSTRUCTION INC	**c** EIN-PN	20-1307500-501
a Plan name	BP FABRICATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BP FABRICATION LLC	**c** EIN-PN	83-0652425-501
a Plan name	BP TOOL SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	BP TOOL SALES INC	**c** EIN-PN	47-2369629-501
a Plan name	BPE MANAGEMENT GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BPE MANAGEMENT GROUP, LLC	**c** EIN-PN	82-5273364-501
a Plan name	BRACKET ROAD SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRACKET ROAD SERVICE LLC	**c** EIN-PN	46-5236672-501
a Plan name	BRACO ELECTRICAL MCF BENEFIT PLAN		
b Name of plan sponsor	BRACO ELECTRICAL	**c** EIN-PN	47-1229519-501
a Plan name	BRAD BRADSHAW MD JD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRAD BRADSHAW MD JD LLC	**c** EIN-PN	43-1701866-501
a Plan name	BRAD WOOTEN AUTO BODY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRAD WOOTEN AUTO BODY, LLC	**c** EIN-PN	47-1095798-501

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

a Plan name	BRADLEY AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRADLEY AUTOMOTIVE LLC	**c** EIN-PN	82-4547577-501
a Plan name	BRADLEY D LANCE DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	BRADLEY D LANCE DDS PC	**c** EIN-PN	86-1460550-501
a Plan name	BRADLEY J. BAKULA MCF BENEFIT PLAN		
b Name of plan sponsor	BRADLEY J. BAKULA	**c** EIN-PN	43-1781965-501
a Plan name	BRADLEY J. SMITH DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	BRADLEY J. SMITH DDS PC	**c** EIN-PN	43-1905073-501
a Plan name	BRADLEY S SHANKER DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	BRADLEY S SHANKER DDS PC	**c** EIN-PN	43-1448742-501
a Plan name	BRADY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRADY DENTAL LLC	**c** EIN-PN	20-4418803-501
a Plan name	BRAKE AUTO AND TIRE BOYS MCF BENEFIT PLAN		
b Name of plan sponsor	BRAKE AUTO AND TIRE BOYS	**c** EIN-PN	20-5880806-501
a Plan name	BRANCH METALS PROCESSING CORP MCF BENEFIT PLAN		
b Name of plan sponsor	BRANCH METALS PROCESSING CORP	**c** EIN-PN	43-1169286-501
a Plan name	BRANHAM OVERHEAD DOOR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRANHAM OVERHEAD DOOR LLC	**c** EIN-PN	84-4519856-501
a Plan name	BRANING BUILDING SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	BRANING BUILDING SOLUTIONS	**c** EIN-PN	81-4456086-501
a Plan name	BRANSON AIRPORT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRANSON AIRPORT, LLC	**c** EIN-PN	52-2270033-501
a Plan name	BRANSON HOT TUBS AND POOLS MCF BENEFIT PLAN		
b Name of plan sponsor	BRANSON HOT TUBS AND POOLS	**c** EIN-PN	03-0439236-501

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

a Plan name	BRANSON SHORES RESORT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRANSON SHORES RESORT LLC	**c** EIN-PN	61-1581817-501
a Plan name	BRANSON VACATION CABINS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRANSON VACATION CABINS LLC	**c** EIN-PN	06-1836777-501
a Plan name	BRANSONS WILD WORLD INC MCF BENEFIT PLAN		
b Name of plan sponsor	BRANSONS WILD WORLD INC	**c** EIN-PN	61-1582587-501
a Plan name	BRAUER K&D ENTERPRISES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BRAUER K&D ENTERPRISES, INC	**c** EIN-PN	46-5326251-502
a Plan name	BRAUNGARDT AGRICULTURAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRAUNGARDT AGRICULTURAL SERVICES LLC	**c** EIN-PN	45-2715934-501
a Plan name	BREAST IMAGING OF THE OZARKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BREAST IMAGING OF THE OZARKS LLC	**c** EIN-PN	87-3188939-501
a Plan name	BREEVES CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	BREEVES CORPORATION	**c** EIN-PN	81-4555001-501
a Plan name	BREIHAN PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BREIHAN PROPERTIES LLC	**c** EIN-PN	20-1953726-501
a Plan name	BRENTWOOD VETERINARY MANAGEMENT CORP PC MCF BENEFIT PLAN		
b Name of plan sponsor	BRENTWOOD VETERINARY MANAGEMENT CORP PC	**c** EIN-PN	43-1890919-501
a Plan name	BRETTS AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	BRETTS AUTOMOTIVE	**c** EIN-PN	43-1737598-501
a Plan name	BREWER INDUSTRIAL & MACHINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BREWER INDUSTRIAL & MACHINE LLC	**c** EIN-PN	47-1559367-501
a Plan name	BREWER QUILT AND DESIGN INC MCF BENEFIT PLAN		
b Name of plan sponsor	BREWER QUILT AND DESIGN INC	**c** EIN-PN	43-1595278-501

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

a Plan name	BREWSTER TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BREWSTER TRUCKING LLC	**c** EIN-PN	87-2859841-501
a Plan name	BRIAN A REAVLEY DDS MCF BENEFIT PLAN		
b Name of plan sponsor	BRIAN A REAVLEY DDS	**c** EIN-PN	84-2184137-501
a Plan name	BRIAN HALLER DMD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRIAN HALLER DMD LLC	**c** EIN-PN	26-1743040-501
a Plan name	BRIGHT BEAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRIGHT BEAM LLC	**c** EIN-PN	27-4324772-501
a Plan name	BRIGHT ELECTRIC, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRIGHT ELECTRIC, LLC	**c** EIN-PN	43-1946842-501
a Plan name	BRIGHT FLOORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRIGHT FLOORS LLC	**c** EIN-PN	43-1864190-501
a Plan name	BRINES TOWING SERVICE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRINES TOWING SERVICE, LLC	**c** EIN-PN	85-4260193-501
a Plan name	BRINK ENGINEERING SOLUTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRINK ENGINEERING SOLUTIONS, LLC	**c** EIN-PN	27-1779666-501
a Plan name	BRITT DEVELOPMENT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRITT DEVELOPMENT, LLC	**c** EIN-PN	26-1100375-501
a Plan name	BRITTAIN AUTOMOTIVE CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	BRITTAIN AUTOMOTIVE CORPORATION	**c** EIN-PN	87-2839894-501
a Plan name	BROADCAST PROPERTIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	BROADCAST PROPERTIES INC	**c** EIN-PN	20-1201026-501
a Plan name	BROADWAY PHARMACY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROADWAY PHARMACY LLC	**c** EIN-PN	45-1558215-501

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

a Plan name	BROCKES TIRE AND AUTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROCKES TIRE AND AUTO LLC	**c** EIN-PN	47-2473932-501
a Plan name	BROOKFIELD BOX AND BRIDGE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROOKFIELD BOX AND BRIDGE, LLC	**c** EIN-PN	26-1968406-502
a Plan name	BROOKFIELD VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	BROOKFIELD VETERINARY CLINIC	**c** EIN-PN	43-1410763-501
a Plan name	BROTHERS HOSPITALITY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROTHERS HOSPITALITY LLC	**c** EIN-PN	92-0834655-501
a Plan name	BROTHERS LAWN MAINTENANCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BROTHERS LAWN MAINTENANCE LLC	**c** EIN-PN	88-4067210-501
a Plan name	BROWN FURNITURE AND APPLIANCE MCF BENEFIT PLAN		
b Name of plan sponsor	BROWN FURNITURE AND APPLIANCE	**c** EIN-PN	43-1568572-501
a Plan name	BRUCE TERMINIX SERVICE CO MCF BENEFIT PLAN		
b Name of plan sponsor	BRUCE TERMINIX SERVICE CO	**c** EIN-PN	43-0912779-501
a Plan name	BRUSH'S HEATING & COOLING CO., INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BRUSHS HEATING & COOLING CO., INC.	**c** EIN-PN	20-2677329-501
a Plan name	BRYAN L MITCHELL VETERINARY CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BRYAN L MITCHELL VETERINARY CLINIC LLC	**c** EIN-PN	80-0393280-501
a Plan name	BT EXPRESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BT EXPRESS LLC	**c** EIN-PN	45-3309076-502
a Plan name	BUCKET MEDIA INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUCKET MEDIA INC	**c** EIN-PN	20-5561687-501
a Plan name	BUCKRIDGE FENCING AND EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUCKRIDGE FENCING AND EXCAVATING LLC	**c** EIN-PN	83-3831703-501

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

a Plan name	BUD SHELL FORD INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUD SHELL FORD INC	**c** EIN-PN	43-1063481-501
a Plan name	BUDS PAINT AND BODY SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	BUDS PAINT AND BODY SHOP	**c** EIN-PN	43-1451386-502
a Plan name	BUECHLEIN TRANSPORTATION MCF BENEFIT PLAN		
b Name of plan sponsor	BUECHLEIN TRANSPORTATION	**c** EIN-PN	83-4481899-501
a Plan name	BUESCHER FRANKENBERG ASSOCIATES INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUESCHER FRANKENBERG ASSOCIATES INC	**c** EIN-PN	43-1027228-502
a Plan name	BUFFALO LIVESTOCK MARKET MCF BENEFIT PLAN		
b Name of plan sponsor	BUFFALO LIVESTOCK MARKET	**c** EIN-PN	43-1840142-501
a Plan name	BUFORD MOUNTAIN STOCK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUFORD MOUNTAIN STOCK LLC	**c** EIN-PN	82-2650413-501
a Plan name	BUG ZERO INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUG ZERO INC	**c** EIN-PN	43-1769323-501
a Plan name	BUILDERS GLASS AND PRODUCTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUILDERS GLASS AND PRODUCTS INC	**c** EIN-PN	43-1756490-501
a Plan name	BUILDING FUTURES DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	BUILDING FUTURES DESIGN	**c** EIN-PN	45-4670246-501
a Plan name	BUILDING IMPROVEMENTS & REPAIRS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUILDING IMPROVEMENTS & REPAIRS LLC	**c** EIN-PN	84-4393767-501
a Plan name	BUILDING TWO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUILDING TWO, LLC	**c** EIN-PN	84-3454108-501
a Plan name	BULLARD SEED CO MCF BENEFIT PLAN		
b Name of plan sponsor	BULLARD SEED CO	**c** EIN-PN	43-1769260-501

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

a Plan name	BULLDOG PIPE MCF BENEFIT PLAN		
b Name of plan sponsor	BULLDOG PIPE	**c** EIN-PN	84-3403554-501
a Plan name	BULLSEYE EQUIPMENT RENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BULLSEYE EQUIPMENT RENTAL LLC	**c** EIN-PN	84-4529690-501
a Plan name	BUNCH CONSTRUCTION SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUNCH CONSTRUCTION SERVICES LLC	**c** EIN-PN	87-2866348-501
a Plan name	BUNTON FARMS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BUNTON FARMS, INC.	**c** EIN-PN	43-1045622-501
a Plan name	BURGESS AIRCRAFT MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	BURGESS AIRCRAFT MANAGEMENT	**c** EIN-PN	20-8072522-501
a Plan name	BURKE FINANCIAL ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BURKE FINANCIAL ADVISORS LLC	**c** EIN-PN	86-3093303-501
a Plan name	BURKHEAD & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BURKHEAD & ASSOCIATES LLC	**c** EIN-PN	43-1834774-501
a Plan name	BURLIS LAWSON GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	BURLIS LAWSON GROUP	**c** EIN-PN	48-1141047-501
a Plan name	BURTON TRANSPORT INC MCF BENEFIT PLAN		
b Name of plan sponsor	BURTON TRANSPORT INC	**c** EIN-PN	26-1749210-501
a Plan name	BUSCH PET PRODUCTS & CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUSCH PET PRODUCTS & CARE, LLC	**c** EIN-PN	90-2104819-501
a Plan name	BUSH AGRONOMY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUSH AGRONOMY SERVICES LLC	**c** EIN-PN	84-4866024-501
a Plan name	BUSH RAMLOW & SHORE PC MCF BENEFIT PLAN		
b Name of plan sponsor	BUSH RAMLOW & SHORE PC	**c** EIN-PN	20-5694382-501

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

a Plan name	BUSINESS FORMS MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	BUSINESS FORMS MANAGEMENT	**c** EIN-PN	43-1190263-501
a Plan name	BUSINESS INSURANCE MANAGEMENT, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUSINESS INSURANCE MANAGEMENT, INC	**c** EIN-PN	26-0037549-501
a Plan name	BUSSEN UNDERGROUND MCF BENEFIT PLAN		
b Name of plan sponsor	BUSSEN UNDERGROUND	**c** EIN-PN	87-4508174-501
a Plan name	BUSTER CRABBE POOLS INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUSTER CRABBE POOLS INC	**c** EIN-PN	43-1733285-501
a Plan name	BUTLER HEATING AND AIR MCF BENEFIT PLAN		
b Name of plan sponsor	BUTLER HEATING AND AIR	**c** EIN-PN	43-1814970-501
a Plan name	BUTLER ROSENBURY AND PARTNERS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	BUTLER ROSENBURY AND PARTNERS INC.	**c** EIN-PN	43-1645408-501
a Plan name	BUTTERSCOTCH SHENANIGANS MCF BENEFIT PLAN		
b Name of plan sponsor	BUTTERSCOTCH SHENANIGANS	**c** EIN-PN	45-5506776-501
a Plan name	BUTTONWOOD FARM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	BUTTONWOOD FARM LLC	**c** EIN-PN	27-3151610-501
a Plan name	BUXTON KUBIK DODD, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BUXTON KUBIK DODD, INC	**c** EIN-PN	20-0081970-501
a Plan name	BUZZED BULL CREAMERY ST. CHARLES MCF BENEFIT PLAN		
b Name of plan sponsor	BUZZED BULL CREAMERY ST. CHARLES	**c** EIN-PN	87-4078754-501
a Plan name	BYRD PLUMBING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	BYRD PLUMBING, INC	**c** EIN-PN	43-0924955-501
a Plan name	C & B LIFT TRUCK SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	C & B LIFT TRUCK SERVICE INC	**c** EIN-PN	43-1168774-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 & C IRRIGATION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C & C IRRIGATION, LLC	**c** EIN-PN	43-1860214-501
a Plan name	C & M HESS CORP MCF BENEFIT PLAN		
b Name of plan sponsor	C & M HESS CORP	**c** EIN-PN	43-1826336-501
a Plan name	C & S METALWORKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C & S METALWORKS LLC	**c** EIN-PN	92-2799542-501
a Plan name	C AND C MANNINO MCF BENEFIT PLAN		
b Name of plan sponsor	C AND C MANNINO	**c** EIN-PN	43-1823613-501
a Plan name	C AND K AUTOBODY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C AND K AUTOBODY LLC	**c** EIN-PN	88-0751756-501
a Plan name	C AND L GREASE AND WASTEWATER SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C AND L GREASE AND WASTEWATER SERVICES LLC	**c** EIN-PN	82-2208920-501
a Plan name	C AND S BUSINESS SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	C AND S BUSINESS SERVICES INC	**c** EIN-PN	43-1698924-501
a Plan name	C L MENTOR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C L MENTOR LLC	**c** EIN-PN	33-1060893-501
a Plan name	C MURPHY EXTERIORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C MURPHY EXTERIORS LLC	**c** EIN-PN	83-3513587-501
a Plan name	C RIORDAN BROKERAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C RIORDAN BROKERAGE LLC	**c** EIN-PN	46-1893581-501
a Plan name	C U SMILE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C U SMILE LLC	**c** EIN-PN	46-3303510-501
a Plan name	C&C FARM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C&C FARM LLC	**c** EIN-PN	43-1914586-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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&H HEATING AIR CONDITIONING AND REFRIGERATION MCF BENEFIT PLAN		
b Name of plan sponsor	C&H HEATING AIR CONDITIONING AND REFRIGERATION	**c** EIN-PN	46-1396722-502
a Plan name	C&K DISTRIBUTION COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	C&K DISTRIBUTION COMPANY INC	**c** EIN-PN	82-5195237-501
a Plan name	C&W ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	C&W ASSOCIATES	**c** EIN-PN	43-1494786-501
a Plan name	C. PETERSON CONSTRUCTION CO. INC. MCF BENEFIT PLAN		
b Name of plan sponsor	C. PETERSON CONSTRUCTION CO. INC.	**c** EIN-PN	43-1820843-501
a Plan name	C.A. BIANCO INC MCF BENEFIT PLAN		
b Name of plan sponsor	C.A. BIANCO INC	**c** EIN-PN	43-0716521-501
a Plan name	C.A.G. PRODUCTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C.A.G. PRODUCTS LLC	**c** EIN-PN	45-4690966-501
a Plan name	C.E.L. CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C.E.L. CONSTRUCTION, LLC	**c** EIN-PN	77-0607056-501
a Plan name	C2 BUILDERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C2 BUILDERS LLC	**c** EIN-PN	85-2616110-501
a Plan name	CABRAL COLLISION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	CABRAL COLLISION CENTER	**c** EIN-PN	81-2479509-501
a Plan name	CAHILL FAMILY GREEHOUSES INC MCF BENEFIT PLAN		
b Name of plan sponsor	CAHILL FAMILY GREEHOUSES INC	**c** EIN-PN	86-1094102-501
a Plan name	CAL-AIR MECHANICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAL-AIR MECHANICAL LLC	**c** EIN-PN	45-2925859-501
a Plan name	CALEDON VIRTUAL MCF BENEFIT PLAN		
b Name of plan sponsor	CALEDON VIRTUAL	**c** EIN-PN	26-2539006-501

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

a Plan name	CALIFORNIA COUNTRY CLUB MCF BENEFIT PLAN		
b Name of plan sponsor	CALIFORNIA COUNTRY CLUB	**c** EIN-PN	44-0623389-501
a Plan name	CALL AND GENTRY LAW GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	CALL AND GENTRY LAW GROUP	**c** EIN-PN	46-3173296-501
a Plan name	CALLAWAY DETAILING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	CALLAWAY DETAILING COMPANY	**c** EIN-PN	43-1768877-501
a Plan name	CALLIER & THOMPSON KITCHENS AND BATHS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CALLIER & THOMPSON KITCHENS AND BATHS, INC	**c** EIN-PN	43-1156371-501
a Plan name	CAM HOME AND LAWN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAM HOME AND LAWN, LLC	**c** EIN-PN	82-5473814-501
a Plan name	CAM MO AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	CAM MO AMBULANCE DISTRICT	**c** EIN-PN	43-1111568-501
a Plan name	CAMPAIGNIUM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAMPAIGNIUM, LLC	**c** EIN-PN	45-5193909-501
a Plan name	CAMPBELL HOUSE & HOME LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL HOUSE & HOME LLC	**c** EIN-PN	87-0866903-501
a Plan name	CAMPBELL STREET AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	CAMPBELL STREET AUTOMOTIVE	**c** EIN-PN	43-1212868-501
a Plan name	CAN AM CARS LTD MCF BENEFIT PLAN		
b Name of plan sponsor	CAN AM CARS LTD	**c** EIN-PN	43-1231803-501
a Plan name	CANDY HOUSE SPRINGFIELD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CANDY HOUSE SPRINGFIELD LLC	**c** EIN-PN	47-4162727-501
a Plan name	CANTON VETERINARY CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CANTON VETERINARY CLINIC LLC	**c** EIN-PN	56-2347596-501

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

a Plan name	CAPITAL AUTOMATIC SPRINKLER MCF BENEFIT PLAN		
b Name of plan sponsor	CAPITAL AUTOMATIC SPRINKLER	**c** EIN-PN	46-4467960-501
a Plan name	CAPITAL MACHINE CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	CAPITAL MACHINE CO INC	**c** EIN-PN	43-1688406-501
a Plan name	CAPITOL FOODS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CAPITOL FOODS INC	**c** EIN-PN	43-0835161-501
a Plan name	CAPSTONE INDUSTRIES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CAPSTONE INDUSTRIES INC.	**c** EIN-PN	84-3607804-501
a Plan name	CAR CHASE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAR CHASE LLC	**c** EIN-PN	80-0473848-501
a Plan name	CAR MOTIVATORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAR MOTIVATORS, LLC	**c** EIN-PN	82-4490031-501
a Plan name	CARDENAS, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	CARDENAS, LLC.	**c** EIN-PN	83-2674856-501
a Plan name	CARDINAL BIOLOGICALS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CARDINAL BIOLOGICALS INC	**c** EIN-PN	75-2258843-501
a Plan name	CARDINAL BLINDS AND SHUTTERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARDINAL BLINDS AND SHUTTERS LLC	**c** EIN-PN	27-2554650-501
a Plan name	CARDINAL POINTS CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	CARDINAL POINTS CONSTRUCTION	**c** EIN-PN	82-2721716-501
a Plan name	CARE TO LEARN MCF BENEFIT PLAN		
b Name of plan sponsor	CARE TO LEARN	**c** EIN-PN	47-1494384-501
a Plan name	CAREPOINT CHRISTIAN COUNSELING MCF BENEFIT PLAN		
b Name of plan sponsor	CAREPOINT CHRISTIAN COUNSELING	**c** EIN-PN	45-3124980-501

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

a Plan name	CAREY & DANIS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAREY & DANIS LLC	**c** EIN-PN	43-1710525-501
a Plan name	CARRIAGE HOUSE SOLUTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARRIAGE HOUSE SOLUTIONS, LLC	**c** EIN-PN	85-3830199-501
a Plan name	CARROLL FAMILY FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CARROLL FAMILY FARMS INC	**c** EIN-PN	43-1218517-501
a Plan name	CARROLL INDUSTRIES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CARROLL INDUSTRIES, INC.	**c** EIN-PN	86-2245216-501
a Plan name	CARRY ON TRAVEL AND TOURS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARRY ON TRAVEL AND TOURS, LLC	**c** EIN-PN	85-1047766-501
a Plan name	CARSON INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARSON INSURANCE AGENCY LLC	**c** EIN-PN	88-1671874-501
a Plan name	CARSONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARSONS LLC	**c** EIN-PN	88-2846899-501
a Plan name	CARTER & SPARLIN, P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	CARTER & SPARLIN, P.C.	**c** EIN-PN	43-1628045-501
a Plan name	CARTER LAW OFFICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CARTER LAW OFFICES, LLC	**c** EIN-PN	68-0597081-501
a Plan name	CARTHAGE ANIMAL CLINIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	CARTHAGE ANIMAL CLINIC INC	**c** EIN-PN	43-1852709-501
a Plan name	CARUTHERSVILLE GIN, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CARUTHERSVILLE GIN, INC	**c** EIN-PN	43-1566504-501
a Plan name	CASA DE SALUD MCF BENEFIT PLAN		
b Name of plan sponsor	CASA DE SALUD	**c** EIN-PN	27-0732049-501

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

a Plan name	CASA OF SOUTH CENTRAL MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	CASA OF SOUTH CENTRAL MISSOURI	**c** EIN-PN	20-2021790-501
a Plan name	CAS-CO CONSTRUCTION SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAS-CO CONSTRUCTION SERVICES LLC	**c** EIN-PN	20-8780299-501
a Plan name	CASE EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CASE EXCAVATING LLC	**c** EIN-PN	43-1919245-501
a Plan name	CASEY BUILDING GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CASEY BUILDING GROUP LLC	**c** EIN-PN	87-3375223-501
a Plan name	CASEY MING AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CASEY MING AGENCY LLC	**c** EIN-PN	46-5673901-501
a Plan name	CASH FAMILY ORTHODONTICS MCF BENEFIT PLAN		
b Name of plan sponsor	CASH FAMILY ORTHODONTICS	**c** EIN-PN	43-1126048-501
a Plan name	CASH GILL & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CASH GILL & ASSOCIATES LLC	**c** EIN-PN	85-1581722-501
a Plan name	CASSIDY DENTAL STUDIO MCF BENEFIT PLAN		
b Name of plan sponsor	CASSIDY DENTAL STUDIO	**c** EIN-PN	87-0984741-501
a Plan name	CASTLE ADVISORS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CASTLE ADVISORS, INC.	**c** EIN-PN	47-3997639-501
a Plan name	CATARACT & EYE DISEASE SPECIALISTS MCF BENEFIT PLAN		
b Name of plan sponsor	CATARACT & EYE DISEASE SPECIALISTS	**c** EIN-PN	43-1444392-501
a Plan name	CAYCE DERMATOLOGY CENTER AND MEDICAL SPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	CAYCE DERMATOLOGY CENTER AND MEDICAL SPA PC	**c** EIN-PN	43-1900707-501
a Plan name	CAYE 53 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CAYE 53 LLC	**c** EIN-PN	83-2682233-503

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	CC SPECIALTY CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	CC SPECIALTY CONTRACTORS	**c** EIN-PN	83-3825147-501
a Plan name	CDKING CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CDKING CONSTRUCTION, LLC	**c** EIN-PN	84-2838932-501
a Plan name	CEDAR COUNTY AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	CEDAR COUNTY AMBULANCE DISTRICT	**c** EIN-PN	43-1130893-501
a Plan name	CEDAR RIDGE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	CEDAR RIDGE SERVICE	**c** EIN-PN	81-4811836-501
a Plan name	CELLECTIVE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CELLECTIVE SOLUTIONS LLC	**c** EIN-PN	20-0821062-501
a Plan name	CENTORBI, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CENTORBI, LLC	**c** EIN-PN	26-4594310-501
a Plan name	CENTRAL AIR HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL AIR HEATING AND COOLING	**c** EIN-PN	47-4701868-501
a Plan name	CENTRAL DISPATCH OF POLK COUNTY MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL DISPATCH OF POLK COUNTY	**c** EIN-PN	05-0558078-501
a Plan name	CENTRAL MISSOURI ORTHODONTICS MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL MISSOURI ORTHODONTICS	**c** EIN-PN	43-2040570-501
a Plan name	CENTRAL MISSOURI PIZZA, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL MISSOURI PIZZA, INC.	**c** EIN-PN	43-1202541-502
a Plan name	CENTRAL MISSOURI WORKFORCE MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL MISSOURI WORKFORCE	**c** EIN-PN	43-1893333-501
a Plan name	CENTRAL MO TURF MANAGEMENT, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL MO TURF MANAGEMENT, INC	**c** EIN-PN	43-1913802-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 OZARKS PRIVATE INDUSTRY COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL OZARKS PRIVATE INDUSTRY COUNCIL	**c** EIN-PN	43-1501858-501
a Plan name	CENTRAL SIGN & LIGHTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL SIGN & LIGHTING LLC	**c** EIN-PN	84-5082293-501
a Plan name	CENTRAL STATE CORE SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL STATE CORE SUPPLY	**c** EIN-PN	26-0890400-501
a Plan name	CENTRAL WEST END NAIL & SPA MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRAL WEST END NAIL & SPA	**c** EIN-PN	81-1986169-501
a Plan name	CENTRIC HEART AND VASCULAR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CENTRIC HEART AND VASCULAR LLC	**c** EIN-PN	82-4435355-501
a Plan name	CENTURY 21 - LIFETIME REALTY MCF BENEFIT PLAN		
b Name of plan sponsor	CENTURY 21 - LIFETIME REALTY	**c** EIN-PN	84-3041845-501
a Plan name	CERTIFIED ELECTRICAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CERTIFIED ELECTRICAL SERVICES LLC	**c** EIN-PN	46-0546337-501
a Plan name	CERTIFIED PERFORMANCE & AUTO REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	CERTIFIED PERFORMANCE & AUTO REPAIR INC	**c** EIN-PN	20-1074697-501
a Plan name	CFX INC MCF BENEFIT PLAN		
b Name of plan sponsor	CFX INC	**c** EIN-PN	43-1913644-501
a Plan name	CFXPRESS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CFXPRESS INC	**c** EIN-PN	47-1476278-501
a Plan name	C-G FENCING & FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	C-G FENCING & FABRICATION	**c** EIN-PN	82-4294108-501
a Plan name	CH ELECTRICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CH ELECTRICAL LLC	**c** EIN-PN	86-3586671-501

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

a Plan name	CHAD BRODERSEN AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHAD BRODERSEN AGENCY LLC	**c** EIN-PN	45-2803208-501
a Plan name	CHAMBERLAIN HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHAMBERLAIN HOLDINGS LLC	**c** EIN-PN	20-4278605-501
a Plan name	CHAMPION FLOOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	CHAMPION FLOOR COMPANY	**c** EIN-PN	43-1637712-501
a Plan name	CHAMPION TRENCHLESS SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHAMPION TRENCHLESS SERVICES LLC	**c** EIN-PN	43-1847335-501
a Plan name	CHANDLER HILL VINEYARDS MCF BENEFIT PLAN		
b Name of plan sponsor	CHANDLER HILL VINEYARDS	**c** EIN-PN	80-0172197-501
a Plan name	CHANEY LAW GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHANEY LAW GROUP LLC	**c** EIN-PN	83-2295924-501
a Plan name	CHAPMAN & SONS SEPTIC SERVICES LLP MCF BENEFIT PLAN		
b Name of plan sponsor	CHAPMAN & SONS SEPTIC SERVICES LLP	**c** EIN-PN	81-2864782-501
a Plan name	CHAPPEL CASKET CO MCF BENEFIT PLAN		
b Name of plan sponsor	CHAPPEL CASKET CO	**c** EIN-PN	43-1839375-501
a Plan name	CHARITON HEALTH SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CHARITON HEALTH SYSTEMS INC	**c** EIN-PN	43-1766939-501
a Plan name	CHARLES BURT INC MCF BENEFIT PLAN		
b Name of plan sponsor	CHARLES BURT INC	**c** EIN-PN	43-1134390-501
a Plan name	CHART AUTOMOTIVE GROUP INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CHART AUTOMOTIVE GROUP INC.	**c** EIN-PN	43-1035976-501
a Plan name	CHB ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHB ADVISORS LLC	**c** EIN-PN	81-4730750-502

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	CHECKETT & PAULY PC MCF BENEFIT PLAN		
b Name of plan sponsor	CHECKETT & PAULY PC	**c** EIN-PN	43-1510973-501
a Plan name	CHEER ST. LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	CHEER ST. LOUIS	**c** EIN-PN	46-3752065-501
a Plan name	CHEM-SOLV CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHEM-SOLV CONSULTING LLC	**c** EIN-PN	83-2986345-501
a Plan name	CHEROKEE TREE CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHEROKEE TREE CARE LLC	**c** EIN-PN	47-1819630-501
a Plan name	CHESTERFIELD CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	CHESTERFIELD CHAMBER OF COMMERCE	**c** EIN-PN	43-1096294-501
a Plan name	CHESTERFIELD FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	CHESTERFIELD FAMILY DENTAL	**c** EIN-PN	45-5168053-501
a Plan name	CHESTERFIELD PLASTIC SURGERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHESTERFIELD PLASTIC SURGERY LLC	**c** EIN-PN	99-0742465-501
a Plan name	CHILDRENS MIRACLE NETWORK TELETHON MCF BENEFIT PLAN		
b Name of plan sponsor	CHILDRENS MIRACLE NETWORK TELETHON	**c** EIN-PN	43-1491803-501
a Plan name	CHIROPRACTIC AND ACUPUNCTURE ASSOC PC MCF BENEFIT PLAN		
b Name of plan sponsor	CHIROPRACTIC AND ACUPUNCTURE ASSOC PC	**c** EIN-PN	43-1760011-502
a Plan name	CHRIS ALTHEUSER TREE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRIS ALTHEUSER TREE SERVICE LLC	**c** EIN-PN	27-3712146-501
a Plan name	CHRIS BRANNAN AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRIS BRANNAN AGENCY LLC	**c** EIN-PN	45-3762849-501
a Plan name	CHRIS DOWNING 117 SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRIS DOWNING 117 SERVICE LLC	**c** EIN-PN	86-2139937-501

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

a Plan name	CHRIS LAWRENCE & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	CHRIS LAWRENCE & ASSOCIATES	**c** EIN-PN	27-0533784-501
a Plan name	CHRIS O BRIEN POOLS AND CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	CHRIS O BRIEN POOLS AND CONTRACTING	**c** EIN-PN	46-1702452-501
a Plan name	CHRISCO ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISCO ELECTRIC LLC	**c** EIN-PN	82-5500572-501
a Plan name	CHRISTENSEN CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISTENSEN CONSTRUCTION	**c** EIN-PN	43-1610378-501
a Plan name	CHRISTIAN COUNTY BUSINESS DEVELOPMENT CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISTIAN COUNTY BUSINESS DEVELOPMENT CORPORATION	**c** EIN-PN	38-4020191-501
a Plan name	CHRISTIANSEN DDS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISTIANSEN DDS, LLC	**c** EIN-PN	93-4222512-501
a Plan name	CHRISTOPHER F WICK, DDS & MICHAEL C JOURNEE, DDS, PC MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISTOPHER F WICK, DDS & MICHAEL C JOURNEE, DDS, PC	**c** EIN-PN	46-1798930-501
a Plan name	CHRISTOPHERS GIFTS MCF BENEFIT PLAN		
b Name of plan sponsor	CHRISTOPHERS GIFTS	**c** EIN-PN	47-1464389-501
a Plan name	CIFW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CIFW LLC	**c** EIN-PN	46-5669805-501
a Plan name	CIGNO SALES COMPANY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CIGNO SALES COMPANY, LLC	**c** EIN-PN	87-4764473-501
a Plan name	CIHP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CIHP, LLC	**c** EIN-PN	81-3960518-501
a Plan name	CINEMA ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	CINEMA ST LOUIS	**c** EIN-PN	43-1613176-501

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

a Plan name	CIS COMMUNICTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CIS COMMUNICTIONS, LLC	**c** EIN-PN	43-1723371-501
a Plan name	CITIZENS BANK OF ROGERSVILLE MCF BENEFIT PLAN		
b Name of plan sponsor	CITIZENS BANK OF ROGERSVILLE	**c** EIN-PN	44-0200190-501
a Plan name	CITY CIDER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CITY CIDER LLC	**c** EIN-PN	81-4384629-501
a Plan name	CITY LINE PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	CITY LINE PARTNERSHIP	**c** EIN-PN	43-1729575-501
a Plan name	CJ ARTISAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CJ ARTISAN LLC	**c** EIN-PN	90-1226549-501
a Plan name	CJD ENGINEERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CJD ENGINEERING LLC	**c** EIN-PN	20-3219161-501
a Plan name	CLARK COUNTY PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	CLARK COUNTY PHARMACY	**c** EIN-PN	43-1594558-501
a Plan name	CLARK FINANCIAL SERVICES GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	CLARK FINANCIAL SERVICES GROUP	**c** EIN-PN	43-1606959-501
a Plan name	CLARKS CUSTOM MEAT CO MCF BENEFIT PLAN		
b Name of plan sponsor	CLARKS CUSTOM MEAT CO	**c** EIN-PN	45-0511415-501
a Plan name	CLARKSTON NELSON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLARKSTON NELSON LLC	**c** EIN-PN	92-0971352-501
a Plan name	CLASSIC METAL CRAFT MCF BENEFIT PLAN		
b Name of plan sponsor	CLASSIC METAL CRAFT	**c** EIN-PN	20-8776258-501
a Plan name	CLASSIQUE WINES MCF BENEFIT PLAN		
b Name of plan sponsor	CLASSIQUE WINES	**c** EIN-PN	50-0003316-501

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

a Plan name	CLAUSS CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLAUSS CONSULTING LLC	**c** EIN-PN	26-1455445-501
a Plan name	CLAYMORE CONSULTING MCF BENEFIT PLAN		
b Name of plan sponsor	CLAYMORE CONSULTING	**c** EIN-PN	43-1806928-501
a Plan name	CLAYTON CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	CLAYTON CHAMBER OF COMMERCE	**c** EIN-PN	43-0701392-501
a Plan name	CLEAN STEAM RESTORATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLEAN STEAM RESTORATION LLC	**c** EIN-PN	81-1828464-501
a Plan name	CLEAR TO LAUNCH MEDIA INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CLEAR TO LAUNCH MEDIA INC.	**c** EIN-PN	47-2270154-501
a Plan name	CLEM HAGENHOFF TRUCKING INC MCF BENEFIT PLAN		
b Name of plan sponsor	CLEM HAGENHOFF TRUCKING INC	**c** EIN-PN	43-1438349-501
a Plan name	CLEMENT, VAN RONZELEN & SCHULTE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLEMENT, VAN RONZELEN & SCHULTE LLC	**c** EIN-PN	85-4253699-501
a Plan name	CLEMENTS PLUMBING, HEATING & AIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLEMENTS PLUMBING, HEATING & AIR, LLC	**c** EIN-PN	46-1636800-501
a Plan name	CLIMB SO ILL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CLIMB SO ILL, INC	**c** EIN-PN	27-0504888-501
a Plan name	CLINT HARRIS STATE FARM MCF BENEFIT PLAN		
b Name of plan sponsor	CLINT HARRIS STATE FARM	**c** EIN-PN	46-1835624-501
a Plan name	CLINTON LUEBBERING CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLINTON LUEBBERING CONSTRUCTION LLC	**c** EIN-PN	20-1578317-501
a Plan name	CLOCKWORK TECHNOLOGIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	CLOCKWORK TECHNOLOGIES INC	**c** EIN-PN	82-5352335-501

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

a Plan name	CLOSED LOOP RECYCLING MCF BENEFIT PLAN		
b Name of plan sponsor	CLOSED LOOP RECYCLING	**c** EIN-PN	27-3646003-501
a Plan name	CLOVERLEAF PEDIATRICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CLOVERLEAF PEDIATRICS LLC	**c** EIN-PN	47-2508917-502
a Plan name	CNC AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CNC AUTOMOTIVE LLC	**c** EIN-PN	83-1723698-501
a Plan name	CO-COUNTY PETROLEUM MCF BENEFIT PLAN		
b Name of plan sponsor	CO-COUNTY PETROLEUM	**c** EIN-PN	43-1561641-501
a Plan name	CODAY OWNERS GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CODAY OWNERS GROUP LLC	**c** EIN-PN	87-4467146-501
a Plan name	CODE SCIENTISTS MCF BENEFIT PLAN		
b Name of plan sponsor	CODE SCIENTISTS	**c** EIN-PN	81-1782929-501
a Plan name	CODY DONZE CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CODY DONZE CONSTRUCTION, LLC	**c** EIN-PN	20-8196271-501
a Plan name	COFFEE COUNSELING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COFFEE COUNSELING LLC	**c** EIN-PN	88-1269545-501
a Plan name	COHEN EYE ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	COHEN EYE ASSOCIATES	**c** EIN-PN	43-1730431-501
a Plan name	COIL CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	COIL CONSTRUCTION	**c** EIN-PN	43-1869632-501
a Plan name	COLE & COMPANY, PC MCF BENEFIT PLAN		
b Name of plan sponsor	COLE & COMPANY, PC	**c** EIN-PN	37-1731214-501
a Plan name	COLE CAMP EMS MCF BENEFIT PLAN		
b Name of plan sponsor	COLE CAMP EMS	**c** EIN-PN	43-1269775-501

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

a Plan name	COLIN A MALAKER DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	COLIN A MALAKER DDS PC	**c** EIN-PN	22-3902918-501
a Plan name	COLLECTIVE VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLLECTIVE VENTURES LLC	**c** EIN-PN	46-1610840-501
a Plan name	COLLECTOR CORNERS HOLDINGS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	COLLECTOR CORNERS HOLDINGS, INC.	**c** EIN-PN	45-4048077-501
a Plan name	COLLEGE BOUND MCF BENEFIT PLAN		
b Name of plan sponsor	COLLEGE BOUND	**c** EIN-PN	20-4768985-501
a Plan name	COLLEGE STATION THEATER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLLEGE STATION THEATER LLC	**c** EIN-PN	99-2338821-501
a Plan name	COLLEGIATE DEVELOPMENT GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	COLLEGIATE DEVELOPMENT GROUP	**c** EIN-PN	47-1051022-501
a Plan name	COLLINA DIGITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLLINA DIGITAL LLC	**c** EIN-PN	47-4227790-501
a Plan name	COLLINS & JONES MCF BENEFIT PLAN		
b Name of plan sponsor	COLLINS & JONES	**c** EIN-PN	27-0688996-501
a Plan name	COLLINS CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLLINS CONTRACTING LLC	**c** EIN-PN	27-3529181-501
a Plan name	COLOMBO CONSTRUCTION, INC MCF BENEFIT PLAN		
b Name of plan sponsor	COLOMBO CONSTRUCTION, INC	**c** EIN-PN	90-0212125-501
a Plan name	COLOR WORLD INC MCF BENEFIT PLAN		
b Name of plan sponsor	COLOR WORLD INC	**c** EIN-PN	43-1044409-501
a Plan name	COLT TREE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	COLT TREE SERVICE	**c** EIN-PN	37-1543063-501

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

a Plan name	COLUMBIA CENTER FOR URBAN AGRICULTURE MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA CENTER FOR URBAN AGRICULTURE	**c** EIN-PN	26-4486257-501
a Plan name	COLUMBIA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA CHAMBER OF COMMERCE	**c** EIN-PN	43-0223250-501
a Plan name	COLUMBIA CURB GUTTER MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA CURB GUTTER	**c** EIN-PN	43-0909116-501
a Plan name	COLUMBIA DENTISTRY FOR CHILDREN MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA DENTISTRY FOR CHILDREN	**c** EIN-PN	90-0532758-501
a Plan name	COLUMBIA FARMERS MARKET MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA FARMERS MARKET	**c** EIN-PN	43-1319005-501
a Plan name	COLUMBIA INTEGRATIVE HEALTH INC MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA INTEGRATIVE HEALTH INC	**c** EIN-PN	46-5559998-501
a Plan name	COLUMBIA PSYCHIATRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBIA PSYCHIATRY LLC	**c** EIN-PN	83-2479478-501
a Plan name	COLUMBUS CAPITAL PARTNERS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COLUMBUS CAPITAL PARTNERS, LLC	**c** EIN-PN	20-3500099-501
a Plan name	COMBS FAMILY VENTURES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMBS FAMILY VENTURES, LLC	**c** EIN-PN	81-1312783-501
a Plan name	COMFORT ENGINEERING MCF BENEFIT PLAN		
b Name of plan sponsor	COMFORT ENGINEERING	**c** EIN-PN	43-1809071-501
a Plan name	COMMANDER FINANCIAL SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMMANDER FINANCIAL SERVICES, LLC	**c** EIN-PN	46-4454517-501
a Plan name	COMMERCIAL OUTDOOR SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	COMMERCIAL OUTDOOR SERVICES	**c** EIN-PN	87-2519248-501

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

a Plan name	COMMUNIQUE INC MCF BENEFIT PLAN		
b Name of plan sponsor	COMMUNIQUE INC	**c** EIN-PN	43-1189028-501
a Plan name	COMMUNITY AND LONG TERM CARE PSYCHIATRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMMUNITY AND LONG TERM CARE PSYCHIATRY LLC	**c** EIN-PN	20-0808396-501
a Plan name	COMPASS ELECTRICAL SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPASS ELECTRICAL SOLUTIONS LLC	**c** EIN-PN	87-4418564-501
a Plan name	COMPLETE CANINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPLETE CANINE LLC	**c** EIN-PN	93-2552038-501
a Plan name	COMPLETE MUSIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPLETE MUSIC INC	**c** EIN-PN	43-1717891-501
a Plan name	COMPLETE REMODELING LTD MCF BENEFIT PLAN		
b Name of plan sponsor	COMPLETE REMODELING LTD	**c** EIN-PN	22-3894407-501
a Plan name	COMPLETE SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPLETE SERVICE INC	**c** EIN-PN	43-1776686-501
a Plan name	COMPREHENSIVE BENEFITS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE BENEFITS LLC	**c** EIN-PN	47-1082135-501
a Plan name	COMPREHENSIVE CARDIOVASCULAR CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE CARDIOVASCULAR CONSULTANTS	**c** EIN-PN	43-1905325-501
a Plan name	COMPREHENSIVE EYE CARE LTD MCF BENEFIT PLAN		
b Name of plan sponsor	COMPREHENSIVE EYE CARE LTD	**c** EIN-PN	43-1650794-501
a Plan name	COMPTON IRRIGATION INC. MCF BENEFIT PLAN		
b Name of plan sponsor	COMPTON IRRIGATION INC.	**c** EIN-PN	43-1397721-501
a Plan name	COMPUTER RECYCLING CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COMPUTER RECYCLING CENTER LLC	**c** EIN-PN	45-3571725-501

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

a Plan name	CONCANNON PLASTIC SURGERY MCF BENEFIT PLAN		
b Name of plan sponsor	CONCANNON PLASTIC SURGERY	**c** EIN-PN	36-4599576-501
a Plan name	CONCORD HILLS CAPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CONCORD HILLS CAPITAL LLC	**c** EIN-PN	84-5160425-501
a Plan name	CONCRETE CONCRETES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CONCRETE CONCRETES LLC	**c** EIN-PN	83-2205529-501
a Plan name	CONFLUENCE INVESTMENT MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	CONFLUENCE INVESTMENT MANAGEMENT	**c** EIN-PN	26-1764456-501
a Plan name	CONFLUENCE LIMITED LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CONFLUENCE LIMITED LLC	**c** EIN-PN	85-3959203-501
a Plan name	CONNECT2CULTURE MCF BENEFIT PLAN		
b Name of plan sponsor	CONNECT2CULTURE	**c** EIN-PN	45-1779223-501
a Plan name	CONTENT EXECUTIVE INC MCF BENEFIT PLAN		
b Name of plan sponsor	CONTENT EXECUTIVE INC	**c** EIN-PN	20-3512773-501
a Plan name	CONTRACT PAINTING SVC INC MCF BENEFIT PLAN		
b Name of plan sponsor	CONTRACT PAINTING SVC INC	**c** EIN-PN	43-1356940-501
a Plan name	CONVERGED TECHNOLOGY SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	CONVERGED TECHNOLOGY SOLUTIONS	**c** EIN-PN	46-2741505-501
a Plan name	CONVERSATION PEACE WELLNESS MCF BENEFIT PLAN		
b Name of plan sponsor	CONVERSATION PEACE WELLNESS	**c** EIN-PN	93-1610579-501
a Plan name	CONWAY CONTRACTING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CONWAY CONTRACTING, INC.	**c** EIN-PN	38-3670001-501
a Plan name	CONWAY DUNCAN, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CONWAY DUNCAN, INC.	**c** EIN-PN	46-5416567-501

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

a Plan name	COOL TOUCH GRAPHICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COOL TOUCH GRAPHICS LLC	**c** EIN-PN	47-2065105-501
a Plan name	COOP ASSOCIATION #130 MCF BENEFIT PLAN		
b Name of plan sponsor	COOP ASSOCIATION #130	**c** EIN-PN	43-0227855-501
a Plan name	COOPER DIESEL REPAIR 2 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COOPER DIESEL REPAIR 2 LLC	**c** EIN-PN	99-4743182-501
a Plan name	COOPER GEAR AND MANUFACTURING INC MCF BENEFIT PLAN		
b Name of plan sponsor	COOPER GEAR AND MANUFACTURING INC	**c** EIN-PN	93-1837241-501
a Plan name	COPELAND & BROWN, P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	COPELAND & BROWN, P.C.	**c** EIN-PN	47-3550585-501
a Plan name	COPELAND ACCOUNTING & TAX SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	COPELAND ACCOUNTING & TAX SERVICES INC	**c** EIN-PN	43-1768720-501
a Plan name	COPENHAVER CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COPENHAVER CONTRACTING LLC	**c** EIN-PN	38-3910276-501
a Plan name	CORAL REEF SEAFOOD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORAL REEF SEAFOOD LLC	**c** EIN-PN	43-1889767-501
a Plan name	CORALIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORALIC LLC	**c** EIN-PN	46-3839374-501
a Plan name	CORDA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORDA, LLC	**c** EIN-PN	84-2630065-501
a Plan name	CORE FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	CORE FAMILY DENTISTRY	**c** EIN-PN	81-4837987-501
a Plan name	COREY R EAGEN CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COREY R EAGEN CPA LLC	**c** EIN-PN	46-1020742-501

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

a Plan name	CORNEKE HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORNEKE HOLDINGS LLC	**c** EIN-PN	85-0883178-501
a Plan name	CORNELIUS CUSTOM CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	CORNELIUS CUSTOM CONSTRUCTION	**c** EIN-PN	85-0757561-501
a Plan name	CORNER STOP AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORNER STOP AUTOMOTIVE LLC	**c** EIN-PN	88-3149701-501
a Plan name	CORNERSTONE DENTAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	CORNERSTONE DENTAL GROUP	**c** EIN-PN	52-2222789-501
a Plan name	CORNERSTONE JEWELRY REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	CORNERSTONE JEWELRY REPAIR INC	**c** EIN-PN	43-1421422-501
a Plan name	CORNERSTONE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CORNERSTONE SOLUTIONS LLC	**c** EIN-PN	46-2813042-501
a Plan name	CORRPAK INC MCF BENEFIT PLAN		
b Name of plan sponsor	CORRPAK INC	**c** EIN-PN	43-1592956-501
a Plan name	COUNTRYSIDE VETERINARY SMALL ANIMAL CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	COUNTRYSIDE VETERINARY SMALL ANIMAL CLINIC	**c** EIN-PN	47-0862441-502
a Plan name	COUNTY OF SULLIVAN MCF BENEFIT PLAN		
b Name of plan sponsor	COUNTY OF SULLIVAN	**c** EIN-PN	44-6000606-501
a Plan name	COVENANT FOR LIFE CHILD DEVELOPMENT CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	COVENANT FOR LIFE CHILD DEVELOPMENT CENTER	**c** EIN-PN	94-3457461-501
a Plan name	COVENE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COVENE LLC	**c** EIN-PN	45-4982286-501
a Plan name	COVIDIUS DISTRIBUTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	COVIDIUS DISTRIBUTION LLC	**c** EIN-PN	83-2698100-501

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

a Plan name	COWTOWN USA INC MCF BENEFIT PLAN		
b Name of plan sponsor	COWTOWN USA INC	**c** EIN-PN	43-1873182-501
a Plan name	COX BROTHERS HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	COX BROTHERS HEATING & COOLING	**c** EIN-PN	75-3106655-502
a Plan name	CRAFTY CHAMELEON MCF BENEFIT PLAN		
b Name of plan sponsor	CRAFTY CHAMELEON	**c** EIN-PN	46-1561086-501
a Plan name	CRAIG & SONS CONCRETE, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CRAIG & SONS CONCRETE, INC	**c** EIN-PN	46-1710556-501
a Plan name	CRAIGS TREE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CRAIGS TREE SERVICE LLC	**c** EIN-PN	45-2488429-501
a Plan name	CRANE FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	CRANE FAMILY DENTISTRY	**c** EIN-PN	20-0626467-501
a Plan name	CRANE SYSTEMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CRANE SYSTEMS, LLC	**c** EIN-PN	86-1373566-501
a Plan name	CRATEX CONTAINER CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	CRATEX CONTAINER CORPORATION	**c** EIN-PN	43-1536644-501
a Plan name	CRAVE COFFEEHOUSE MCF BENEFIT PLAN		
b Name of plan sponsor	CRAVE COFFEEHOUSE	**c** EIN-PN	82-4455284-501
a Plan name	CREATIVE AUTO TRIM MCF BENEFIT PLAN		
b Name of plan sponsor	CREATIVE AUTO TRIM	**c** EIN-PN	11-3751895-501
a Plan name	CREATIVE FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	CREATIVE FABRICATION	**c** EIN-PN	47-2754229-501
a Plan name	CREATIVE PATHWAYS RESIDENTIAL SUPPORTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CREATIVE PATHWAYS RESIDENTIAL SUPPORTS, INC	**c** EIN-PN	47-2844683-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 VALUE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CREATIVE VALUE, LLC	**c** EIN-PN	93-2486440-501
a Plan name	CREDIT UNION LENDING SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	CREDIT UNION LENDING SYSTEMS	**c** EIN-PN	43-1855475-501
a Plan name	CREECH HORSE TRANSPORTATION MCF BENEFIT PLAN		
b Name of plan sponsor	CREECH HORSE TRANSPORTATION	**c** EIN-PN	43-1585196-501
a Plan name	CRIBBS MOBILE VETERINARY SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	CRIBBS MOBILE VETERINARY SERVICES	**c** EIN-PN	84-3869230-501
a Plan name	CRIPPS AND SIMMONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CRIPPS AND SIMMONS LLC	**c** EIN-PN	20-3980145-501
a Plan name	CRISIS NURSERY OF THE OZARKS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CRISIS NURSERY OF THE OZARKS, INC.	**c** EIN-PN	20-4574229-501
a Plan name	CRITICAL MINERAL RECOVERY MCF BENEFIT PLAN		
b Name of plan sponsor	CRITICAL MINERAL RECOVERY	**c** EIN-PN	87-4682230-501
a Plan name	CRITZAS INDUSTRIES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CRITZAS INDUSTRIES, INC	**c** EIN-PN	43-0671228-502
a Plan name	CROCKETT CHIROPRACTIC PC MCF BENEFIT PLAN		
b Name of plan sponsor	CROCKETT CHIROPRACTIC PC	**c** EIN-PN	20-2069415-501
a Plan name	CROFT BEDDING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	CROFT BEDDING COMPANY	**c** EIN-PN	83-0904622-501
a Plan name	CROLEY INSURANCE & FINANCIAL MCF BENEFIT PLAN		
b Name of plan sponsor	CROLEY INSURANCE & FINANCIAL	**c** EIN-PN	43-1844736-501
a Plan name	CROOKED FEATHERS STC3 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CROOKED FEATHERS STC3 LLC	**c** EIN-PN	86-2261620-501

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

a Plan name	CROSS INVESTMENT PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CROSS INVESTMENT PROPERTIES LLC	**c** EIN-PN	20-8810420-501
a Plan name	CROSS LOGISTICS MCF BENEFIT PLAN		
b Name of plan sponsor	CROSS LOGISTICS	**c** EIN-PN	20-5188221-501
a Plan name	CROSSFIRE UNDERGROUND CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	CROSSFIRE UNDERGROUND CONSTRUCTION INC	**c** EIN-PN	99-2679815-501
a Plan name	CROSSROADS CHRISTIAN COUNSELING MCF BENEFIT PLAN		
b Name of plan sponsor	CROSSROADS CHRISTIAN COUNSELING	**c** EIN-PN	43-1504015-501
a Plan name	CROWN RESTORATION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CROWN RESTORATION, LLC	**c** EIN-PN	47-4355940-502
a Plan name	CRUZ REALTY COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CRUZ REALTY COMPANY LLC	**c** EIN-PN	20-1066188-501
a Plan name	CRYSTAL LAKES FISHERIES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	CRYSTAL LAKES FISHERIES, INC	**c** EIN-PN	43-1645758-501
a Plan name	CSH TRAILERS & AUTOMOTIVE SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	CSH TRAILERS & AUTOMOTIVE SERVICES	**c** EIN-PN	43-1856865-501
a Plan name	CSP II, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CSP II, LLC	**c** EIN-PN	81-3953070-501
a Plan name	C-SQUARED EMBROIDERY MCF BENEFIT PLAN		
b Name of plan sponsor	C-SQUARED EMBROIDERY	**c** EIN-PN	81-4477189-501
a Plan name	CTM TECHNOLOGY GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	CTM TECHNOLOGY GROUP	**c** EIN-PN	47-4017438-501
a Plan name	CUIVRE CREEK PEDIATRIC DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	CUIVRE CREEK PEDIATRIC DENTISTRY	**c** EIN-PN	84-3530875-501

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

a Plan name	CULTURE FLOCK CLOTHING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CULTURE FLOCK CLOTHING LLC	**c** EIN-PN	46-2560707-501
a Plan name	CULVER'S MCF BENEFIT PLAN		
b Name of plan sponsor	CULVERS	**c** EIN-PN	20-5861184-501
a Plan name	CURRENT ELECTRICAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	CURRENT ELECTRICAL SERVICES	**c** EIN-PN	45-3838560-501
a Plan name	CURRENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	CURRENT INC	**c** EIN-PN	43-1576465-501
a Plan name	CURRENT RIVER FORD MCF BENEFIT PLAN		
b Name of plan sponsor	CURRENT RIVER FORD	**c** EIN-PN	43-1372591-502
a Plan name	CURTIS PACKAGING MACHINERY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CURTIS PACKAGING MACHINERY INC.	**c** EIN-PN	43-1503983-501
a Plan name	CUSTOM DIFFERENTIALS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM DIFFERENTIALS INC	**c** EIN-PN	38-3685066-501
a Plan name	CUSTOM FIT AUTO ACCESSORIES MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM FIT AUTO ACCESSORIES	**c** EIN-PN	20-2860544-501
a Plan name	CUSTOM II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM II LLC	**c** EIN-PN	27-0964057-501
a Plan name	CUSTOM SCREEN PRINTING AND EMBROIDERY MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM SCREEN PRINTING AND EMBROIDERY	**c** EIN-PN	04-3594317-501
a Plan name	CUSTOM STONE INTERIORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM STONE INTERIORS INC	**c** EIN-PN	20-3214828-501
a Plan name	CUSTOM TINTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	CUSTOM TINTS, INC.	**c** EIN-PN	83-0435631-501

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

a Plan name	CUTTING EDGE PROPERTIES MCF BENEFIT PLAN		
b Name of plan sponsor	CUTTING EDGE PROPERTIES	**c** EIN-PN	46-2330218-501
a Plan name	C-V GLASS COMPANY OF NEOSHO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	C-V GLASS COMPANY OF NEOSHO LLC	**c** EIN-PN	43-1087317-501
a Plan name	CYPRESS CREEK MOTORSPORTS MCF BENEFIT PLAN		
b Name of plan sponsor	CYPRESS CREEK MOTORSPORTS	**c** EIN-PN	81-0868039-501
a Plan name	D & H TRUCKING CO, INC MCF BENEFIT PLAN		
b Name of plan sponsor	D & H TRUCKING CO, INC	**c** EIN-PN	43-1273455-501
a Plan name	D & R MATERIALS MCF BENEFIT PLAN		
b Name of plan sponsor	D & R MATERIALS	**c** EIN-PN	43-1898806-501
a Plan name	D AND D TIRE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D AND D TIRE LLC	**c** EIN-PN	43-1514795-501
a Plan name	D AND K MASONRY INC MCF BENEFIT PLAN		
b Name of plan sponsor	D AND K MASONRY INC	**c** EIN-PN	43-1854998-501
a Plan name	D DUNCAN FLORISTRY AND BOUTIQUE MCF BENEFIT PLAN		
b Name of plan sponsor	D DUNCAN FLORISTRY AND BOUTIQUE	**c** EIN-PN	84-4025746-501
a Plan name	D W RYCKMAN & ASSOCIATES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	D W RYCKMAN & ASSOCIATES INC.	**c** EIN-PN	43-1053881-501
a Plan name	D Y RAFAELI INC MCF BENEFIT PLAN		
b Name of plan sponsor	D Y RAFAELI INC	**c** EIN-PN	46-4472243-501
a Plan name	D&A WINDSOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	D&A WINDSOR COMPANY	**c** EIN-PN	82-3174659-501
a Plan name	D&D DESIGNS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D&D DESIGNS LLC	**c** EIN-PN	26-4579899-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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&D HARDWOOD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D&D HARDWOOD LLC	**c** EIN-PN	20-2066281-501
a Plan name	D&J AUTO SALES MCF BENEFIT PLAN		
b Name of plan sponsor	D&J AUTO SALES	**c** EIN-PN	20-0581348-501
a Plan name	D&S ERECTORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D&S ERECTORS, LLC	**c** EIN-PN	75-2982556-501
a Plan name	D. COLIN YOUNG LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D. COLIN YOUNG LAW, LLC	**c** EIN-PN	85-3325128-501
a Plan name	D. FREIHAUT AGENCY & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D. FREIHAUT AGENCY & ASSOCIATES LLC	**c** EIN-PN	81-4162114-501
a Plan name	D.S. & F. PLUMBING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D.S. & F. PLUMBING, LLC	**c** EIN-PN	90-0190580-501
a Plan name	D2R CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D2R CONTRACTING LLC	**c** EIN-PN	61-1684817-501
a Plan name	D4 ENERGY SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	D4 ENERGY SOLUTIONS LLC	**c** EIN-PN	85-2607606-501
a Plan name	DA BURKE AND ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	DA BURKE AND ASSOCIATES	**c** EIN-PN	20-2343016-501
a Plan name	DAILY DISCO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DAILY DISCO LLC	**c** EIN-PN	82-1916128-501
a Plan name	DAKE WELLS ARCHITECTURE MCF BENEFIT PLAN		
b Name of plan sponsor	DAKE WELLS ARCHITECTURE	**c** EIN-PN	20-1378755-501
a Plan name	DALE A SANDY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DALE A SANDY, LLC	**c** EIN-PN	88-1171471-501

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

a Plan name	DALE ADAMS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	DALE ADAMS, INC	**c** EIN-PN	43-1703439-501
a Plan name	DALE MOSIER AUTO BODY & SALES MCF BENEFIT PLAN		
b Name of plan sponsor	DALE MOSIER AUTO BODY & SALES	**c** EIN-PN	43-1911685-501
a Plan name	DAN GRAHAM CPA MCF BENEFIT PLAN		
b Name of plan sponsor	DAN GRAHAM CPA	**c** EIN-PN	83-0855379-501
a Plan name	DANIEL FOWLER AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL FOWLER AGENCY	**c** EIN-PN	73-1688743-501
a Plan name	DANIEL FUNERAL HOME MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL FUNERAL HOME	**c** EIN-PN	82-4767322-501
a Plan name	DANIEL GAITAN HEALTHCARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL GAITAN HEALTHCARE INC	**c** EIN-PN	84-4096063-501
a Plan name	DANIEL HELFERT MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL HELFERT	**c** EIN-PN	81-3660950-501
a Plan name	DANIEL SCHMITT & CO MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL SCHMITT & CO	**c** EIN-PN	43-1521250-501
a Plan name	DANIEL T MOORE MCF BENEFIT PLAN		
b Name of plan sponsor	DANIEL T MOORE	**c** EIN-PN	46-4189335-501
a Plan name	DANS AUTO BODY AND REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DANS AUTO BODY AND REPAIR LLC	**c** EIN-PN	88-3754205-501
a Plan name	DANSTONE CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DANSTONE CONSTRUCTION LLC	**c** EIN-PN	46-0689950-501
a Plan name	DARRELL D DITTO AGENCY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	DARRELL D DITTO AGENCY, INC	**c** EIN-PN	80-0124650-501

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

a Plan name	DARRYL C JONES AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	DARRYL C JONES AGENCY	**c** EIN-PN	45-2404632-501
a Plan name	DASH ABA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DASH ABA LLC	**c** EIN-PN	87-2905586-501
a Plan name	DATA DASH INC MCF BENEFIT PLAN		
b Name of plan sponsor	DATA DASH INC	**c** EIN-PN	43-1583723-501
a Plan name	DAVES CUSTOM WOODWORKING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DAVES CUSTOM WOODWORKING INC.	**c** EIN-PN	43-0994920-501
a Plan name	DAVID J. BORGMEYER DDS, PC MCF BENEFIT PLAN		
b Name of plan sponsor	DAVID J. BORGMEYER DDS, PC	**c** EIN-PN	20-1767678-501
a Plan name	DAVID L NAUMANN & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	DAVID L NAUMANN & ASSOCIATES	**c** EIN-PN	43-1285969-501
a Plan name	DAVID PATTERSON CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	DAVID PATTERSON CONSTRUCTION	**c** EIN-PN	84-3913748-501
a Plan name	DAVIS HEATING & AIR CONDITIONING AND REFRIGERATION MCF BENEFIT PLAN		
b Name of plan sponsor	DAVIS HEATING & AIR CONDITIONING AND REFRIGERATION	**c** EIN-PN	90-1077171-502
a Plan name	DAVIS MEAT PROCESSING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DAVIS MEAT PROCESSING LLC	**c** EIN-PN	43-1767521-501
a Plan name	DAVISON DISTRIBUTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DAVISON DISTRIBUTION LLC	**c** EIN-PN	20-8791912-501
a Plan name	DAWNTAYLER BOUTIQUE MCF BENEFIT PLAN		
b Name of plan sponsor	DAWNTAYLER BOUTIQUE	**c** EIN-PN	82-2639667-501
a Plan name	DAY SOLUTIONS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	DAY SOLUTIONS, INC	**c** EIN-PN	46-5140139-501

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

a Plan name	DAYNES WASTE DISPOSAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	DAYNES WASTE DISPOSAL INC	**c** EIN-PN	81-0603947-501
a Plan name	DB DISPOSAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DB DISPOSAL LLC	**c** EIN-PN	27-4159734-501
a Plan name	DB2 REGENERATIVE WELLNESS CLINICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DB2 REGENERATIVE WELLNESS CLINICS LLC	**c** EIN-PN	92-1971658-501
a Plan name	DBD GOURMET, INC MCF BENEFIT PLAN		
b Name of plan sponsor	DBD GOURMET, INC	**c** EIN-PN	43-1940698-501
a Plan name	DC HAULING MCF BENEFIT PLAN		
b Name of plan sponsor	DC HAULING	**c** EIN-PN	82-4145307-501
a Plan name	DCS INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	DCS INDUSTRIES	**c** EIN-PN	88-0886674-501
a Plan name	DD ENGRAVING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DD ENGRAVING LLC	**c** EIN-PN	27-1881003-501
a Plan name	DD HAMILTON COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	DD HAMILTON COMPANY INC	**c** EIN-PN	43-1015135-501
a Plan name	DDJ ENTERPRISES, LLC, MCF BENEFIT PLAN		
b Name of plan sponsor	DDJ ENTERPRISES, LLC,	**c** EIN-PN	27-4667503-502
a Plan name	DEASON CONTRACTING AND INSTALLATIONS, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	DEASON CONTRACTING AND INSTALLATIONS, LLC.	**c** EIN-PN	45-4949335-501
a Plan name	DEASON DECKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEASON DECKING LLC	**c** EIN-PN	47-3181411-501
a Plan name	DEBT DOCTORS OF MISSOURI, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEBT DOCTORS OF MISSOURI, LLC	**c** EIN-PN	87-2536615-501

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

a Plan name	DECISION WEALTH MCF BENEFIT PLAN		
b Name of plan sponsor	DECISION WEALTH	**c** EIN-PN	83-2642772-501
a Plan name	DECK THE DOOR DECOR MCF BENEFIT PLAN		
b Name of plan sponsor	DECK THE DOOR DECOR	**c** EIN-PN	46-3505521-501
a Plan name	DECOTA & DECOTA, DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	DECOTA & DECOTA, DDS PC	**c** EIN-PN	43-1936766-501
a Plan name	DEEP 6 MARINE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DEEP 6 MARINE, INC.	**c** EIN-PN	37-1603133-501
a Plan name	DEEP WATER SOFTWARE MCF BENEFIT PLAN		
b Name of plan sponsor	DEEP WATER SOFTWARE	**c** EIN-PN	47-3239647-501
a Plan name	DEEPER CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEEPER CONSULTING LLC	**c** EIN-PN	47-1345282-501
a Plan name	DEGRAFFENREID HEATING AND COOLING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEGRAFFENREID HEATING AND COOLING LLC	**c** EIN-PN	27-3161811-501
a Plan name	DELBERT L HAWKINS AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	DELBERT L HAWKINS AGENCY INC	**c** EIN-PN	43-0769175-501
a Plan name	DELLWOOD TIRE AND AUTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DELLWOOD TIRE AND AUTO LLC	**c** EIN-PN	47-3827229-501
a Plan name	DELTA CENTER FOR INDEPENDENT LIVING MCF BENEFIT PLAN		
b Name of plan sponsor	DELTA CENTER FOR INDEPENDENT LIVING	**c** EIN-PN	43-1752410-501
a Plan name	DELTA INVESTMENT SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	DELTA INVESTMENT SERVICES	**c** EIN-PN	43-1161479-501
a Plan name	DEM-CON INVESTMENTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEM-CON INVESTMENTS, LLC	**c** EIN-PN	85-3123064-501

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

a Plan name	DENNIS G GLORE INC MCF BENEFIT PLAN		
b Name of plan sponsor	DENNIS G GLORE INC	**c** EIN-PN	43-1185414-501
a Plan name	DENNYS DOCK SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DENNYS DOCK SERVICE LLC	**c** EIN-PN	20-4087086-501
a Plan name	DENTISTRY BY DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	DENTISTRY BY DESIGN	**c** EIN-PN	99-3949554-501
a Plan name	DEPPE FARMS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DEPPE FARMS, INC.	**c** EIN-PN	43-1057214-501
a Plan name	DEREK BELL INSURANCE AND FINANCIAL SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	DEREK BELL INSURANCE AND FINANCIAL SERVICES INC	**c** EIN-PN	20-5933174-501
a Plan name	DEREKS EXCAVATION SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	DEREKS EXCAVATION SERVICES	**c** EIN-PN	33-1155361-501
a Plan name	DERMATOLOGY OFFICE PC MCF BENEFIT PLAN		
b Name of plan sponsor	DERMATOLOGY OFFICE PC	**c** EIN-PN	26-3291791-501
a Plan name	DERRICK SOAP PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	DERRICK SOAP PRODUCTS	**c** EIN-PN	43-0745916-501
a Plan name	DESCOMBES AGRI BUSINESS MCF BENEFIT PLAN		
b Name of plan sponsor	DESCOMBES AGRI BUSINESS	**c** EIN-PN	42-9654000-501
a Plan name	DESIGN AMERICA INC MCF BENEFIT PLAN		
b Name of plan sponsor	DESIGN AMERICA INC	**c** EIN-PN	46-5659578-501
a Plan name	DESIGN COLLECTIVE STL MCF BENEFIT PLAN		
b Name of plan sponsor	DESIGN COLLECTIVE STL	**c** EIN-PN	88-3588587-501
a Plan name	DESKIN SCALE MCF BENEFIT PLAN		
b Name of plan sponsor	DESKIN SCALE	**c** EIN-PN	43-0901649-501

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

a Plan name	DESLOGE CHIROPRACTIC HEALTH CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DESLOGE CHIROPRACTIC HEALTH CENTER LLC	**c** EIN-PN	85-4299065-501
a Plan name	DETAIL 360 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DETAIL 360 LLC	**c** EIN-PN	83-0612577-501
a Plan name	DETROIT ELECTRICAL MCF BENEFIT PLAN		
b Name of plan sponsor	DETROIT ELECTRICAL	**c** EIN-PN	43-1683762-501
a Plan name	DEVBUILDZERO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEVBUILDZERO LLC	**c** EIN-PN	87-3702920-501
a Plan name	DEVELOPMENT STRATEGIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	DEVELOPMENT STRATEGIES INC	**c** EIN-PN	43-1472565-501
a Plan name	DEVOY BAKER INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	DEVOY BAKER INSURANCE	**c** EIN-PN	81-0925915-501
a Plan name	DEWITT'S REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DEWITTS REPAIR LLC	**c** EIN-PN	47-5099463-501
a Plan name	DF STL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DF STL, LLC	**c** EIN-PN	85-0710340-501
a Plan name	DGD HOLDINGS MCF BENEFIT PLAN		
b Name of plan sponsor	DGD HOLDINGS	**c** EIN-PN	82-4436637-501
a Plan name	DHANIELE MILLER DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DHANIELE MILLER DDS LLC	**c** EIN-PN	85-3965106-501
a Plan name	DHM MCF BENEFIT PLAN		
b Name of plan sponsor	DHM	**c** EIN-PN	46-2455022-501
a Plan name	DHS OPERATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	DHS OPERATIONS	**c** EIN-PN	85-1847955-501

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

a Plan name	DIAL ARCHITECTS MCF BENEFIT PLAN		
b Name of plan sponsor	DIAL ARCHITECTS	**c** EIN-PN	43-1803602-501
a Plan name	DIAMOND HAULING MCF BENEFIT PLAN		
b Name of plan sponsor	DIAMOND HAULING	**c** EIN-PN	45-2240967-501
a Plan name	DIAMOND R EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	DIAMOND R EQUIPMENT	**c** EIN-PN	75-3153652-501
a Plan name	DIBO ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	DIBO ENTERPRISES INC	**c** EIN-PN	43-1231760-501
a Plan name	DICK WEHDE INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	DICK WEHDE INSURANCE AGENCY INC	**c** EIN-PN	26-1224178-501
a Plan name	DICKERSON CONCRETE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DICKERSON CONCRETE LLC	**c** EIN-PN	83-1277234-501
a Plan name	DICKEY & HUMBARD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DICKEY & HUMBARD LLC	**c** EIN-PN	43-1688484-501
a Plan name	DIE TECH MACHINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIE TECH MACHINE LLC	**c** EIN-PN	26-0971251-501
a Plan name	DIEGO'S CANTINA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIEGOS CANTINA, LLC	**c** EIN-PN	83-4699721-501
a Plan name	DIESEL ENGINE WORKS AND AUTO SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	DIESEL ENGINE WORKS AND AUTO SERVICE	**c** EIN-PN	84-2282894-501
a Plan name	DIFFACTCORY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIFFACTCORY, LLC	**c** EIN-PN	47-2750966-501
a Plan name	DIG WISE HYDRO, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DIG WISE HYDRO, INC.	**c** EIN-PN	26-1343317-501

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

a Plan name	DIGITAL MIDDLE GROUND LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIGITAL MIDDLE GROUND LLC	**c** EIN-PN	87-2489721-501
a Plan name	DINGS N THINGS COLLISION MCF BENEFIT PLAN		
b Name of plan sponsor	DINGS N THINGS COLLISION	**c** EIN-PN	82-2373447-501
a Plan name	DINZEBACH CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	DINZEBACH CONSTRUCTION	**c** EIN-PN	27-1282921-501
a Plan name	DIODE DIRECT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DIODE DIRECT, INC.	**c** EIN-PN	93-1552373-501
a Plan name	DIRTCO EXCAVATING & TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIRTCO EXCAVATING & TRUCKING LLC	**c** EIN-PN	84-3636649-501
a Plan name	DISSEN REPAIR, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DISSEN REPAIR, INC.	**c** EIN-PN	43-1835424-501
a Plan name	DIVEBOMB INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	DIVEBOMB INDUSTRIES	**c** EIN-PN	27-4689035-501
a Plan name	DIVERSIFIED CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED CONTRACTORS	**c** EIN-PN	43-1611320-501
a Plan name	DIVERSIFIED FINANCIAL PLANNERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED FINANCIAL PLANNERS INC	**c** EIN-PN	43-1446662-501
a Plan name	DIVERSIFIED STRUCTURE SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	DIVERSIFIED STRUCTURE SOLUTIONS	**c** EIN-PN	81-3454084-501
a Plan name	DIVERTERPLUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DIVERTERPLUS LLC	**c** EIN-PN	32-0510500-501
a Plan name	DIXON INCORPORATED MCF BENEFIT PLAN		
b Name of plan sponsor	DIXON INCORPORATED	**c** EIN-PN	43-1806367-501

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

a Plan name	DK DOORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DK DOORS LLC	**c** EIN-PN	84-3879602-501
a Plan name	DK POWER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DK POWER LLC	**c** EIN-PN	27-4488266-501
a Plan name	DM CRAIG INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DM CRAIG INVESTMENTS LLC	**c** EIN-PN	86-1340301-501
a Plan name	DMCR UNDERGROUND MCF BENEFIT PLAN		
b Name of plan sponsor	DMCR UNDERGROUND	**c** EIN-PN	83-2021060-501
a Plan name	DMR EVENTS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DMR EVENTS INC.	**c** EIN-PN	43-1535823-501
a Plan name	DO RITE CONSTRUCTION & EXCAVATING MCF BENEFIT PLAN		
b Name of plan sponsor	DO RITE CONSTRUCTION & EXCAVATING	**c** EIN-PN	83-3665939-502
a Plan name	DOBBELARE DISTRIBUTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DOBBELARE DISTRIBUTING LLC	**c** EIN-PN	20-4578622-501
a Plan name	DOC HOLLOWAY S AUTO REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	DOC HOLLOWAY S AUTO REPAIR INC	**c** EIN-PN	43-1514096-501
a Plan name	DOCKS PLUS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DOCKS PLUS, LLC	**c** EIN-PN	87-4349592-501
a Plan name	DOGWOOD ENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DOGWOOD ENT LLC	**c** EIN-PN	87-1789645-501
a Plan name	DOMASH DESIGN SOURCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DOMASH DESIGN SOURCE, LLC	**c** EIN-PN	43-1778202-501
a Plan name	DONAHUE CHIROPRACTIC MCF BENEFIT PLAN		
b Name of plan sponsor	DONAHUE CHIROPRACTIC	**c** EIN-PN	81-4024233-501

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

a Plan name	DONNELLY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DONNELLY GROUP LLC	**c** EIN-PN	47-1823230-501
a Plan name	DONOVAN ROOFING AND CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DONOVAN ROOFING AND CONSTRUCTION LLC	**c** EIN-PN	26-1627810-501
a Plan name	DONUT PALACE MCF BENEFIT PLAN		
b Name of plan sponsor	DONUT PALACE	**c** EIN-PN	83-0571932-501
a Plan name	DORSETT VAPOR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DORSETT VAPOR, LLC	**c** EIN-PN	43-3494028-501
a Plan name	DOTSON & GIBBS INC MCF BENEFIT PLAN		
b Name of plan sponsor	DOTSON & GIBBS INC	**c** EIN-PN	43-1244760-501
a Plan name	DOTY TRASH SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	DOTY TRASH SERVICE	**c** EIN-PN	43-1785156-501
a Plan name	DOUBLE K LEATHER SALES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DOUBLE K LEATHER SALES, LLC	**c** EIN-PN	20-4069422-501
a Plan name	DOUG BAKER INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	DOUG BAKER INSURANCE AGENCY	**c** EIN-PN	20-2069280-501
a Plan name	DOWNEY CONSTRUCTION, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DOWNEY CONSTRUCTION, INC.	**c** EIN-PN	20-3801377-501
a Plan name	DOWNTOWN SPFLD CID MCF BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN SPFLD CID	**c** EIN-PN	43-1914448-501
a Plan name	DOWNTOWN WASHINGTON INC MCF BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN WASHINGTON INC	**c** EIN-PN	43-1014796-501
a Plan name	DOWNTOWN WEST PLAINS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DOWNTOWN WEST PLAINS INC.	**c** EIN-PN	43-1881237-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 BLIGH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DR BLIGH, LLC	**c** EIN-PN	14-1878924-501
a Plan name	DR LISA B DIBLER MCF BENEFIT PLAN		
b Name of plan sponsor	DR LISA B DIBLER	**c** EIN-PN	83-0380967-501
a Plan name	DR MARK AND LYDIA BAKER AND CHARLES V BAKER MCF BENEFIT PLAN		
b Name of plan sponsor	DR MARK AND LYDIA BAKER AND CHARLES V BAKER	**c** EIN-PN	20-3873870-501
a Plan name	DR. JAMES REHM MCF BENEFIT PLAN		
b Name of plan sponsor	DR. JAMES REHM	**c** EIN-PN	47-2427511-501
a Plan name	DR. KENT B. HILL OPTOMETRIST PC MCF BENEFIT PLAN		
b Name of plan sponsor	DR. KENT B. HILL OPTOMETRIST PC	**c** EIN-PN	43-1018353-501
a Plan name	DRACO MECHANICAL SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	DRACO MECHANICAL SUPPLY	**c** EIN-PN	43-0925774-501
a Plan name	DRAFAHL LAW FIRM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DRAFAHL LAW FIRM LLC	**c** EIN-PN	82-2752639-501
a Plan name	DRAINSCAPES STL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DRAINSCAPES STL LLC	**c** EIN-PN	20-1313465-501
a Plan name	DREAM FORGE INC MCF BENEFIT PLAN		
b Name of plan sponsor	DREAM FORGE INC	**c** EIN-PN	92-1126593-501
a Plan name	DREWES BROTHERS LAND & CATTLE MCF BENEFIT PLAN		
b Name of plan sponsor	DREWES BROTHERS LAND & CATTLE	**c** EIN-PN	46-1127958-501
a Plan name	DRIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DRIVE LLC	**c** EIN-PN	35-2627995-501
a Plan name	DRYFORK DIESEL & AUTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DRYFORK DIESEL & AUTO LLC	**c** EIN-PN	46-5103453-501

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

a Plan name	DS INDUSTRIAL SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	DS INDUSTRIAL SOLUTIONS	**c** EIN-PN	45-2093563-501
a Plan name	DTC ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DTC ADVISORS LLC	**c** EIN-PN	27-4605653-501
a Plan name	DUBAIL JUDGE MCF BENEFIT PLAN		
b Name of plan sponsor	DUBAIL JUDGE	**c** EIN-PN	43-1435172-501
a Plan name	DUBLIN WORLDWIDE PRODUCTIONS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DUBLIN WORLDWIDE PRODUCTIONS INC.	**c** EIN-PN	51-0390635-501
a Plan name	DUCK INVESTMENTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	DUCK INVESTMENTS INC	**c** EIN-PN	50-0000553-501
a Plan name	DUGGER TRASH SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	DUGGER TRASH SERVICE	**c** EIN-PN	46-1135890-501
a Plan name	DULLE OVERHEAD DOOR, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DULLE OVERHEAD DOOR, INC.	**c** EIN-PN	43-1607701-501
a Plan name	DUNCAN PAINTING & WALLCOVERING MCF BENEFIT PLAN		
b Name of plan sponsor	DUNCAN PAINTING & WALLCOVERING	**c** EIN-PN	46-1626132-501
a Plan name	DUNLAP CONSTRUCTION AND RENOVATION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DUNLAP CONSTRUCTION AND RENOVATION, LLC	**c** EIN-PN	84-4234298-501
a Plan name	DUNN CPA FIRM, LLP MCF BENEFIT PLAN		
b Name of plan sponsor	DUNN CPA FIRM, LLP	**c** EIN-PN	81-4288867-501
a Plan name	DUPREE & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DUPREE & ASSOCIATES LLC	**c** EIN-PN	26-0844139-501
a Plan name	DURABARN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DURABARN LLC	**c** EIN-PN	85-1138975-501

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

a Plan name	DUSTY ROGERS LOGGING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DUSTY ROGERS LOGGING LLC	**c** EIN-PN	82-1717275-501
a Plan name	DUTZELS CATERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DUTZELS CATERING LLC	**c** EIN-PN	27-4529127-501
a Plan name	DUVALL LAWN CARE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	DUVALL LAWN CARE INC.	**c** EIN-PN	43-1915653-501
a Plan name	DWAYNE DOZA AUTO BODY & SALES MCF BENEFIT PLAN		
b Name of plan sponsor	DWAYNE DOZA AUTO BODY & SALES	**c** EIN-PN	27-4251605-501
a Plan name	DWIGHT TRUCK REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	DWIGHT TRUCK REPAIR INC	**c** EIN-PN	43-1716471-501
a Plan name	DYNAMIC AUTOMATION CORP MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC AUTOMATION CORP	**c** EIN-PN	84-4947920-501
a Plan name	DYNAMIC DNA LABORATORIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC DNA LABORATORIES LLC	**c** EIN-PN	47-2007158-501
a Plan name	DYNAMIC FITNESS MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC FITNESS MANAGEMENT	**c** EIN-PN	57-1215060-501
a Plan name	DYNAMIC LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC LOGISTICS LLC	**c** EIN-PN	86-2060070-501
a Plan name	DYNAMIC PHYSICAL THERAPY AND SPORTS PERFORMANCE MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIC PHYSICAL THERAPY AND SPORTS PERFORMANCE	**c** EIN-PN	88-1029709-501
a Plan name	DYNAMIX MFG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	DYNAMIX MFG LLC	**c** EIN-PN	86-3441786-501
a Plan name	DYNA-PROP INC MCF BENEFIT PLAN		
b Name of plan sponsor	DYNA-PROP INC	**c** EIN-PN	43-1858587-501

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

a Plan name	E & E HYDRAULICS AND INDUSTRIAL MAINTENANCE, INC MCF BENEFIT PLAN		
b Name of plan sponsor	E & E HYDRAULICS AND INDUSTRIAL MAINTENANCE, INC	**c** EIN-PN	43-1830960-501
a Plan name	E & S PHARMACY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	E & S PHARMACY, INC	**c** EIN-PN	43-1340813-501
a Plan name	E W HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	E W HOLDINGS LLC	**c** EIN-PN	27-3507983-501
a Plan name	E3 TAX-KC, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	E3 TAX-KC, LLC	**c** EIN-PN	88-3977127-501
a Plan name	EAGLE ENTERPRISES 1 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EAGLE ENTERPRISES 1 LLC	**c** EIN-PN	46-1464998-501
a Plan name	EAGLES NEST OF EDINA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EAGLES NEST OF EDINA LLC	**c** EIN-PN	88-4128625-501
a Plan name	EARTHBOUND RECYCLING MCF BENEFIT PLAN		
b Name of plan sponsor	EARTHBOUND RECYCLING	**c** EIN-PN	43-1802369-501
a Plan name	EARTHDANCE MCF BENEFIT PLAN		
b Name of plan sponsor	EARTHDANCE	**c** EIN-PN	27-4160056-501
a Plan name	EASTBURN VETERINARY SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	EASTBURN VETERINARY SERVICES	**c** EIN-PN	81-2837561-501
a Plan name	EASTER LAW FIRM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EASTER LAW FIRM, LLC	**c** EIN-PN	26-2900478-501
a Plan name	EASTERN MISSOURI BUILDERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EASTERN MISSOURI BUILDERS LLC	**c** EIN-PN	83-4212339-501
a Plan name	EBELING ADVISERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EBELING ADVISERS LLC	**c** EIN-PN	85-1864077-501

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

a Plan name	EBENEZER FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	EBENEZER FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1627390-501
a Plan name	EBERLIN BOATS - MOTORS MCF BENEFIT PLAN		
b Name of plan sponsor	EBERLIN BOATS - MOTORS	**c** EIN-PN	43-1133669-501
a Plan name	EBS RECRUITERS MCF BENEFIT PLAN		
b Name of plan sponsor	EBS RECRUITERS	**c** EIN-PN	92-2832543-501
a Plan name	ECCELLERE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ECCELLERE LLC	**c** EIN-PN	47-2223952-501
a Plan name	ECHOBRANDGEEKS MCF BENEFIT PLAN		
b Name of plan sponsor	ECHOBRANDGEEKS	**c** EIN-PN	47-4610754-501
a Plan name	ECKELKAMP & ASSOCIATES CPAS MCF BENEFIT PLAN		
b Name of plan sponsor	ECKELKAMP & ASSOCIATES CPAS	**c** EIN-PN	43-1754340-501
a Plan name	ECO SOLUTIONS 4 U LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ECO SOLUTIONS 4 U LLC	**c** EIN-PN	46-5499744-501
a Plan name	ECONSULTANTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ECONSULTANTS, LLC	**c** EIN-PN	80-0460831-501
a Plan name	ECOPOWER ELECTRIC CORP MCF BENEFIT PLAN		
b Name of plan sponsor	ECOPOWER ELECTRIC CORP	**c** EIN-PN	82-4308980-501
a Plan name	ED ROEHR RADIO CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	ED ROEHR RADIO CO INC	**c** EIN-PN	43-0624955-501
a Plan name	EDGE MEDICAL MCF BENEFIT PLAN		
b Name of plan sponsor	EDGE MEDICAL	**c** EIN-PN	85-3738720-501
a Plan name	EDGE SAWING & DRILLING CO. MCF BENEFIT PLAN		
b Name of plan sponsor	EDGE SAWING & DRILLING CO.	**c** EIN-PN	83-4535336-501

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

a Plan name	ED'S SERVICE CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EDS SERVICE CENTER LLC	**c** EIN-PN	43-1899609-501
a Plan name	EDWARD G STEPHENS DDS MCF BENEFIT PLAN		
b Name of plan sponsor	EDWARD G STEPHENS DDS	**c** EIN-PN	43-1791417-501
a Plan name	EDWARD J RICE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	EDWARD J RICE COMPANY	**c** EIN-PN	43-1485785-501
a Plan name	EF HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EF HOLDINGS LLC	**c** EIN-PN	83-1053395-501
a Plan name	EFFING CANDLE CO MCF BENEFIT PLAN		
b Name of plan sponsor	EFFING CANDLE CO	**c** EIN-PN	88-1026742-501
a Plan name	EFTINK ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	EFTINK ENTERPRISES	**c** EIN-PN	43-1726687-501
a Plan name	EHPN MCF BENEFIT PLAN		
b Name of plan sponsor	EHPN	**c** EIN-PN	82-3277980-501
a Plan name	EJ HENDRICKSON MCF BENEFIT PLAN		
b Name of plan sponsor	EJ HENDRICKSON	**c** EIN-PN	27-2210037-501
a Plan name	EL RODEO MCF BENEFIT PLAN		
b Name of plan sponsor	EL RODEO	**c** EIN-PN	43-1824665-501
a Plan name	ELDER INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELDER INSURANCE AGENCY LLC	**c** EIN-PN	84-4405895-501
a Plan name	ELECTRIC DESIGN AND SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ELECTRIC DESIGN AND SERVICE INC	**c** EIN-PN	45-1296373-501
a Plan name	ELECTRICAL ACCESSORIES MIDWEST MCF BENEFIT PLAN		
b Name of plan sponsor	ELECTRICAL ACCESSORIES MIDWEST	**c** EIN-PN	46-3773326-502

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	ELECTRONIC SUPPORT SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ELECTRONIC SUPPORT SYSTEMS INC	**c** EIN-PN	43-1623592-501
a Plan name	ELECTRONIC TECHNICIAN SECURITY & FIRE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELECTRONIC TECHNICIAN SECURITY & FIRE, LLC	**c** EIN-PN	90-1259045-501
a Plan name	ELEMENT ELEVEN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELEMENT ELEVEN LLC	**c** EIN-PN	20-8397741-501
a Plan name	ELEMENTS CONSTRUCTIONS CONCEPTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ELEMENTS CONSTRUCTIONS CONCEPTS INC	**c** EIN-PN	92-1230781-501
a Plan name	ELEMENTS PARTNERSHIP INC MCF BENEFIT PLAN		
b Name of plan sponsor	ELEMENTS PARTNERSHIP INC	**c** EIN-PN	36-4708200-501
a Plan name	ELENTIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELENTIC LLC	**c** EIN-PN	45-1256913-501
a Plan name	ELEVATE INVESTMENT GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELEVATE INVESTMENT GROUP LLC	**c** EIN-PN	99-2025646-501
a Plan name	ELIAS MORTLAND SMITH & COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELIAS MORTLAND SMITH & COMPANY LLC	**c** EIN-PN	92-1269601-501
a Plan name	ELISSA'S LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELISSAS LLC	**c** EIN-PN	82-2675276-501
a Plan name	ELITE AUTO SALES OF SIKESTON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELITE AUTO SALES OF SIKESTON LLC	**c** EIN-PN	88-2416691-501
a Plan name	ELITE MECHANICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELITE MECHANICAL LLC	**c** EIN-PN	41-2080883-501
a Plan name	ELITE STORAGE CENTERS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELITE STORAGE CENTERS, LLC	**c** EIN-PN	06-1713905-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 TECHNOLOGY SOLUTIONS GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELITE TECHNOLOGY SOLUTIONS GROUP LLC	**c** EIN-PN	85-3887839-501
a Plan name	ELIZABETH & JAMES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELIZABETH & JAMES, LLC	**c** EIN-PN	88-3530096-501
a Plan name	ELIZABETH R FASSLER DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	ELIZABETH R FASSLER DDS PC	**c** EIN-PN	43-1909984-501
a Plan name	ELLIOTT PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELLIOTT PAINTING LLC	**c** EIN-PN	20-2997034-501
a Plan name	ELLIOTT ROBINSON & COMPANY LLP MCF BENEFIT PLAN		
b Name of plan sponsor	ELLIOTT ROBINSON & COMPANY LLP	**c** EIN-PN	43-1189134-501
a Plan name	ELLIS ELLIS HAMMONS & JOHNSON PC MCF BENEFIT PLAN		
b Name of plan sponsor	ELLIS ELLIS HAMMONS & JOHNSON PC	**c** EIN-PN	43-1599942-501
a Plan name	ELLIS FARRIER SERVICE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELLIS FARRIER SERVICE, LLC	**c** EIN-PN	92-2143196-501
a Plan name	ELLIS FURNITURE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	ELLIS FURNITURE COMPANY	**c** EIN-PN	43-0919338-501
a Plan name	ELLISON-AUXIER ARCHITECTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ELLISON-AUXIER ARCHITECTS, INC.	**c** EIN-PN	43-1448241-501
a Plan name	ELM DENTAL CARE MCF BENEFIT PLAN		
b Name of plan sponsor	ELM DENTAL CARE	**c** EIN-PN	45-5374930-501
a Plan name	ELMER BUCHHEIT CONST MCF BENEFIT PLAN		
b Name of plan sponsor	ELMER BUCHHEIT CONST	**c** EIN-PN	43-1235945-501
a Plan name	ELMER COLLISION CENTER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ELMER COLLISION CENTER, LLC	**c** EIN-PN	86-2202074-501

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

a Plan name	EMBASSY EMBROIDERY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EMBASSY EMBROIDERY, LLC	**c** EIN-PN	37-1422005-501
a Plan name	EMERALD HEIGHTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EMERALD HEIGHTS LLC	**c** EIN-PN	84-4993961-501
a Plan name	EMI 2217 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EMI 2217 LLC	**c** EIN-PN	93-1803758-501
a Plan name	EMS BILLING MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	EMS BILLING MANAGEMENT	**c** EIN-PN	71-1029524-501
a Plan name	ENCOMPASS ACADEMY MCF BENEFIT PLAN		
b Name of plan sponsor	ENCOMPASS ACADEMY	**c** EIN-PN	85-1591747-501
a Plan name	ENDEAVOR AGENCY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ENDEAVOR AGENCY, INC.	**c** EIN-PN	46-1655363-501
a Plan name	ENDLESS OPTIONS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ENDLESS OPTIONS, INC.	**c** EIN-PN	43-1257945-501
a Plan name	ENERGY CONSERVATION MCF BENEFIT PLAN		
b Name of plan sponsor	ENERGY CONSERVATION	**c** EIN-PN	43-1524280-501
a Plan name	ENERGY PRODUCTS & SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ENERGY PRODUCTS & SOLUTIONS	**c** EIN-PN	43-1846525-501
a Plan name	ENERGY SUPPLY PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	ENERGY SUPPLY PARTNERS	**c** EIN-PN	82-4292794-501
a Plan name	ENERGYLINK MCF BENEFIT PLAN		
b Name of plan sponsor	ENERGYLINK	**c** EIN-PN	27-2563588-501
a Plan name	ENGELBRECHT ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	ENGELBRECHT ENTERPRISES	**c** EIN-PN	43-1518930-501

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

a Plan name	ENGINEERED SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ENGINEERED SOLUTIONS	**c** EIN-PN	45-4800594-501
a Plan name	ENGLERTS BODY SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	ENGLERTS BODY SHOP	**c** EIN-PN	26-0075701-501
a Plan name	ENGLISH APPAREL AND PROMOTIONAL MATERIALS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ENGLISH APPAREL AND PROMOTIONAL MATERIALS, LLC	**c** EIN-PN	46-4601315-501
a Plan name	ENGLISH SWEEP, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ENGLISH SWEEP, INC	**c** EIN-PN	43-1643648-501
a Plan name	ENVISION BY DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	ENVISION BY DESIGN	**c** EIN-PN	43-1883807-501
a Plan name	ENVISION FACILITY SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ENVISION FACILITY SOLUTIONS LLC	**c** EIN-PN	82-2966268-501
a Plan name	ENVISION LIGHTING DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ENVISION LIGHTING DESIGN LLC	**c** EIN-PN	45-3603861-501
a Plan name	EP CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EP CONSTRUCTION LLC	**c** EIN-PN	46-2507614-501
a Plan name	EPIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	EPIC INC	**c** EIN-PN	73-1650753-501
a Plan name	EPIK CONSTRUCTION & REMODELING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EPIK CONSTRUCTION & REMODELING LLC	**c** EIN-PN	47-4039377-501
a Plan name	EPSILON RESTAURANT GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	EPSILON RESTAURANT GROUP	**c** EIN-PN	43-1606571-501
a Plan name	EQUALITY HEALTH CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EQUALITY HEALTH CARE LLC	**c** EIN-PN	47-4696417-501

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

a Plan name	EQUIS GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EQUIS GROUP LLC	**c** EIN-PN	20-1602678-501
a Plan name	EQUITY ONE INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EQUITY ONE INSURANCE AGENCY LLC	**c** EIN-PN	59-3802296-501
a Plan name	ERB LEGAL INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ERB LEGAL INVESTMENTS LLC	**c** EIN-PN	26-3684182-501
a Plan name	ERDEL, OWINGS, TANZEY & NEWTON, P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	ERDEL, OWINGS, TANZEY & NEWTON, P.C.	**c** EIN-PN	43-1301192-501
a Plan name	ERIC BAILEY MCF BENEFIT PLAN		
b Name of plan sponsor	ERIC BAILEY	**c** EIN-PN	45-4391105-501
a Plan name	ERIC NORRIS INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	ERIC NORRIS INSURANCE AGENCY INC	**c** EIN-PN	46-1682886-501
a Plan name	ERIC PATTERSON FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	ERIC PATTERSON FARMS	**c** EIN-PN	04-3789400-501
a Plan name	ERIK LOWES ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ERIK LOWES ENTERPRISES LLC	**c** EIN-PN	26-2157377-501
a Plan name	ERIMISH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ERIMISH LLC	**c** EIN-PN	47-1749357-501
a Plan name	ERIN S. SCIMONE, D.M.D. LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ERIN S. SCIMONE, D.M.D. LLC	**c** EIN-PN	81-2233423-501
a Plan name	ERNEST ABRAMSON DMD MCF BENEFIT PLAN		
b Name of plan sponsor	ERNEST ABRAMSON DMD	**c** EIN-PN	43-1143243-501
a Plan name	ERNST LAW FIRM MCF BENEFIT PLAN		
b Name of plan sponsor	ERNST LAW FIRM	**c** EIN-PN	82-3991530-501

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

a Plan name	ERWAY INSURANCE & FINANCIAL SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	ERWAY INSURANCE & FINANCIAL SERVICES INC	**c** EIN-PN	46-5133373-501
a Plan name	ESA, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ESA, INC	**c** EIN-PN	43-1618867-501
a Plan name	ESI COMMUNICATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	ESI COMMUNICATIONS	**c** EIN-PN	43-1729610-501
a Plan name	ESSICK AUCTION & REALTY MCF BENEFIT PLAN		
b Name of plan sponsor	ESSICK AUCTION & REALTY	**c** EIN-PN	46-5043590-501
a Plan name	ESTERLY SCHNEIDER & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	ESTERLY SCHNEIDER & ASSOCIATES	**c** EIN-PN	43-1597998-501
a Plan name	ESTIMATED PROPHET MANAGEMENT COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	ESTIMATED PROPHET MANAGEMENT COMPANY	**c** EIN-PN	26-3815010-501
a Plan name	EUGENE HOLLOWAY FLOOR COVERING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	EUGENE HOLLOWAY FLOOR COVERING, INC	**c** EIN-PN	43-1080170-501
a Plan name	EUREKA CONTRACTING & ROOFING,LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EUREKA CONTRACTING & ROOFING,LLC	**c** EIN-PN	46-0794294-501
a Plan name	EVANS PAINTING CO. LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EVANS PAINTING CO. LLC	**c** EIN-PN	26-1878167-501
a Plan name	EVERY TRUE TIGER BRANDS MCF BENEFIT PLAN		
b Name of plan sponsor	EVERY TRUE TIGER BRANDS	**c** EIN-PN	93-1645829-501
a Plan name	EVOLUTION MD MCF BENEFIT PLAN		
b Name of plan sponsor	EVOLUTION MD	**c** EIN-PN	87-3615065-501
a Plan name	EVS CABINET SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	EVS CABINET SHOP	**c** EIN-PN	43-1638816-501

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

a Plan name	EXARIS PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXARIS PROPERTIES, LLC	**c** EIN-PN	88-1797918-501
a Plan name	EXCEL AUTO BODY LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	EXCEL AUTO BODY LLC.	**c** EIN-PN	84-3151979-501
a Plan name	EXCEL CREATIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXCEL CREATIVE LLC	**c** EIN-PN	83-3076972-501
a Plan name	EXECUTIVE CONSTRUCTION SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXECUTIVE CONSTRUCTION SERVICES, LLC	**c** EIN-PN	46-1359025-501
a Plan name	EXIT 11 COFFEE SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	EXIT 11 COFFEE SHOP	**c** EIN-PN	84-2526712-501
a Plan name	EXP SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXP SERVICES LLC	**c** EIN-PN	47-2942067-501
a Plan name	EXPANDABLE SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	EXPANDABLE SOLUTIONS	**c** EIN-PN	92-1892571-501
a Plan name	EXPERT EEG INTERPRETATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXPERT EEG INTERPRETATIONS LLC	**c** EIN-PN	83-3497792-501
a Plan name	EXTERIOR BUILDING SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	EXTERIOR BUILDING SOLUTIONS	**c** EIN-PN	43-1941307-501
a Plan name	EXTREME BUILDING SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	EXTREME BUILDING SERVICES, LLC	**c** EIN-PN	47-3306803-501
a Plan name	EYE SEE VISION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	EYE SEE VISION CENTER	**c** EIN-PN	93-1852225-501
a Plan name	F&L TRUCK REPAIR & EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	F&L TRUCK REPAIR & EQUIPMENT	**c** EIN-PN	46-1766583-501

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

a Plan name	F1 COMPUTING SOLUTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	F1 COMPUTING SOLUTIONS, LLC	**c** EIN-PN	55-0902261-501
a Plan name	FAB FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FAB FARMS LLC	**c** EIN-PN	43-6191512-501
a Plan name	FACILITEC INC MCF BENEFIT PLAN		
b Name of plan sponsor	FACILITEC INC	**c** EIN-PN	43-1645872-501
a Plan name	FACTORY OEM PARTS,LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FACTORY OEM PARTS,LLC	**c** EIN-PN	27-4550664-501
a Plan name	FAHRLANDER CUSTOM HOMES INC MCF BENEFIT PLAN		
b Name of plan sponsor	FAHRLANDER CUSTOM HOMES INC	**c** EIN-PN	20-5605606-501
a Plan name	FAIR GROVE FIRE DEPARTMENT MCF BENEFIT PLAN		
b Name of plan sponsor	FAIR GROVE FIRE DEPARTMENT	**c** EIN-PN	43-1513920-501
a Plan name	FAIRWAY AUTOMOTIVE SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FAIRWAY AUTOMOTIVE SERVICES LLC	**c** EIN-PN	47-2225697-501
a Plan name	FAIRWAY MEADOWS CORP MCF BENEFIT PLAN		
b Name of plan sponsor	FAIRWAY MEADOWS CORP	**c** EIN-PN	24-0393123-501
a Plan name	FALLERT BUS SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	FALLERT BUS SERVICE INC	**c** EIN-PN	43-1869799-501
a Plan name	FAMILY FINANCE MORTGAGE MCF BENEFIT PLAN		
b Name of plan sponsor	FAMILY FINANCE MORTGAGE	**c** EIN-PN	32-0029618-501
a Plan name	FAMILY FUN CENTRE MCF BENEFIT PLAN		
b Name of plan sponsor	FAMILY FUN CENTRE	**c** EIN-PN	88-4121910-501
a Plan name	FAMILY ORTHODONTIC CARE MCF BENEFIT PLAN		
b Name of plan sponsor	FAMILY ORTHODONTIC CARE	**c** EIN-PN	43-1945831-501

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

a Plan name	FAMILY PHARMACY OF MOUNTAIN GROVE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FAMILY PHARMACY OF MOUNTAIN GROVE, LLC	**c** EIN-PN	43-1908924-501
a Plan name	FAMILY VIOLENCE CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	FAMILY VIOLENCE CENTER	**c** EIN-PN	43-1082063-501
a Plan name	FANNING INC MCF BENEFIT PLAN		
b Name of plan sponsor	FANNING INC	**c** EIN-PN	43-1788404-501
a Plan name	FARM FIRST CROP INSURANCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARM FIRST CROP INSURANCE LLC	**c** EIN-PN	80-0539452-501
a Plan name	FARMER & FARLEY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARMER & FARLEY LLC	**c** EIN-PN	26-0165215-501
a Plan name	FARMERS 1ST AG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARMERS 1ST AG LLC	**c** EIN-PN	85-4202374-501
a Plan name	FARMERS MARKET OF BOLIVAR MO., INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FARMERS MARKET OF BOLIVAR MO., INC.	**c** EIN-PN	43-1039051-501
a Plan name	FARMERS MUTUAL INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	FARMERS MUTUAL INSURANCE	**c** EIN-PN	44-0561746-501
a Plan name	FARMINGTON ANIMAL HOSPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARMINGTON ANIMAL HOSPITAL LLC	**c** EIN-PN	82-3504398-501
a Plan name	FARMINGTON BLDG SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	FARMINGTON BLDG SUPPLY	**c** EIN-PN	43-0817235-501
a Plan name	FARMRIGHT SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARMRIGHT SOLUTIONS LLC	**c** EIN-PN	83-4100952-501
a Plan name	FARMTRUK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FARMTRUK LLC	**c** EIN-PN	47-5070282-501

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

a Plan name	FARON VENTURES INC MCF BENEFIT PLAN		
b Name of plan sponsor	FARON VENTURES INC	**c** EIN-PN	02-0665075-501
a Plan name	FAST GRANITE AND MARBLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FAST GRANITE AND MARBLE LLC	**c** EIN-PN	27-1904848-501
a Plan name	FASTDEMOCRACY CORP MCF BENEFIT PLAN		
b Name of plan sponsor	FASTDEMOCRACY CORP	**c** EIN-PN	83-1691638-501
a Plan name	FAUSETT GREENHOUSES INC MCF BENEFIT PLAN		
b Name of plan sponsor	FAUSETT GREENHOUSES INC	**c** EIN-PN	43-1610474-501
a Plan name	FCCC/WENTZVILLE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FCCC/WENTZVILLE INC.	**c** EIN-PN	82-4851245-501
a Plan name	FDG REALTY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FDG REALTY, LLC	**c** EIN-PN	27-3856047-501
a Plan name	FEATHER CRAFT FLY FISHING MCF BENEFIT PLAN		
b Name of plan sponsor	FEATHER CRAFT FLY FISHING	**c** EIN-PN	43-1070768-501
a Plan name	FEDERHOFERS BAKERY MCF BENEFIT PLAN		
b Name of plan sponsor	FEDERHOFERS BAKERY	**c** EIN-PN	43-0921427-501
a Plan name	FEEL STATE INC MCF BENEFIT PLAN		
b Name of plan sponsor	FEEL STATE INC	**c** EIN-PN	83-3879844-501
a Plan name	FEET FIRST PODIATRY MCF BENEFIT PLAN		
b Name of plan sponsor	FEET FIRST PODIATRY	**c** EIN-PN	42-1641296-501
a Plan name	FELIX STREET SPECIALTY MCF BENEFIT PLAN		
b Name of plan sponsor	FELIX STREET SPECIALTY	**c** EIN-PN	82-2875748-501
a Plan name	FENTON EMPLOYER ORGANIZATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FENTON EMPLOYER ORGANIZATION LLC	**c** EIN-PN	26-1439695-501

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

a Plan name	FENTON FAMILY EYECARE MCF BENEFIT PLAN		
b Name of plan sponsor	FENTON FAMILY EYECARE	**c** EIN-PN	46-4274827-501
a Plan name	FERGUSON & KATZMAN PHOTOGRAPHY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FERGUSON & KATZMAN PHOTOGRAPHY, INC.	**c** EIN-PN	43-1486488-501
a Plan name	FERMENTED PROJECTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FERMENTED PROJECTS, LLC	**c** EIN-PN	46-2516136-501
a Plan name	FERNANDEZ LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FERNANDEZ LAW, LLC	**c** EIN-PN	85-1564523-501
a Plan name	FESTUS CRYSTAL MONUMENT MCF BENEFIT PLAN		
b Name of plan sponsor	FESTUS CRYSTAL MONUMENT	**c** EIN-PN	43-1905720-501
a Plan name	FETE EVENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FETE EVENTS LLC	**c** EIN-PN	83-3163743-501
a Plan name	FGR MECHANICAL MCF BENEFIT PLAN		
b Name of plan sponsor	FGR MECHANICAL	**c** EIN-PN	43-1709536-501
a Plan name	FIBERSCOPE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIBERSCOPE LLC	**c** EIN-PN	47-3345506-501
a Plan name	FIDELITY COMMUNICATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	FIDELITY COMMUNICATIONS	**c** EIN-PN	43-1516149-501
a Plan name	FIELD TRIP ART ADVISORY MCF BENEFIT PLAN		
b Name of plan sponsor	FIELD TRIP ART ADVISORY	**c** EIN-PN	83-4411402-501
a Plan name	FIFTH & OAK AUTOMOTIVE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FIFTH & OAK AUTOMOTIVE, INC.	**c** EIN-PN	20-1739253-501
a Plan name	FIG TREE BOOKS AND MORE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIG TREE BOOKS AND MORE LLC	**c** EIN-PN	93-0960755-501

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

a Plan name	FILTECH CORP MCF BENEFIT PLAN		
b Name of plan sponsor	FILTECH CORP	**c** EIN-PN	27-4625691-501
a Plan name	FINANCIAL LIFE BOOKEEPING & SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL LIFE BOOKEEPING & SOLUTIONS LLC	**c** EIN-PN	84-2159082-501
a Plan name	FINANCIAL PLANNERS OF MISSOURI, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FINANCIAL PLANNERS OF MISSOURI, LLC	**c** EIN-PN	80-0327170-501
a Plan name	FINK DEVELOPMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	FINK DEVELOPMENTS	**c** EIN-PN	83-4386612-501
a Plan name	FIRST ALLY LAW GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST ALLY LAW GROUP	**c** EIN-PN	92-1944995-501
a Plan name	FIRST AUTO CREDIT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST AUTO CREDIT LLC	**c** EIN-PN	27-2208027-501
a Plan name	FIRST CAPITOL COURIER INC MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CAPITOL COURIER INC	**c** EIN-PN	43-1521358-501
a Plan name	FIRST CAPITOL DAIRY QUEEN MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CAPITOL DAIRY QUEEN	**c** EIN-PN	43-0962297-501
a Plan name	FIRST CHANCE FOR CHILDREN MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CHANCE FOR CHILDREN	**c** EIN-PN	11-3662636-501
a Plan name	FIRST CHOICE MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CHOICE	**c** EIN-PN	43-1716390-501
a Plan name	FIRST CHOICE AIR CONDITIONING HEATING & PLUMBING MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CHOICE AIR CONDITIONING HEATING & PLUMBING	**c** EIN-PN	86-3120497-501
a Plan name	FIRST CHOICE SNOW MANAGEMENT LP MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST CHOICE SNOW MANAGEMENT LP	**c** EIN-PN	84-3966328-501

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

a Plan name	FIRST ELEMENT INSURANCE PLANNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST ELEMENT INSURANCE PLANNERS LLC	**c** EIN-PN	81-3458000-501
a Plan name	FIRST IMPRESSIONS DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST IMPRESSIONS DENTAL	**c** EIN-PN	43-1945675-501
a Plan name	FIRST RATE FIELD SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	FIRST RATE FIELD SERVICES	**c** EIN-PN	47-5596778-501
a Plan name	FISCHER CHIROPRACTIC P C MCF BENEFIT PLAN		
b Name of plan sponsor	FISCHER CHIROPRACTIC P C	**c** EIN-PN	47-0874108-501
a Plan name	FISCHER OIL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	FISCHER OIL COMPANY	**c** EIN-PN	43-0995135-501
a Plan name	FISHER COUNSELING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	FISHER COUNSELING SERVICES	**c** EIN-PN	20-3690145-501
a Plan name	FITZ HEAVY HAUL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FITZ HEAVY HAUL LLC	**c** EIN-PN	87-2373852-501
a Plan name	FIX ST. LOUIS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIX ST. LOUIS, LLC	**c** EIN-PN	27-3400439-501
a Plan name	FIZERS GARAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FIZERS GARAGE LLC	**c** EIN-PN	88-3312529-501
a Plan name	FLAGG ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLAGG ENTERPRISES LLC	**c** EIN-PN	20-8349709-501
a Plan name	FLAIR HOME STAGINGS & DISPLAYS MCF BENEFIT PLAN		
b Name of plan sponsor	FLAIR HOME STAGINGS & DISPLAYS	**c** EIN-PN	43-1911125-501
a Plan name	FLANAGAN PAINT & SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	FLANAGAN PAINT & SUPPLY	**c** EIN-PN	43-1071867-501

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

a Plan name	FLASH FLYER PUBLICATIONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	FLASH FLYER PUBLICATIONS INC	**c** EIN-PN	43-1883055-501
a Plan name	FLAT CREEK EXCAVATING MCF BENEFIT PLAN		
b Name of plan sponsor	FLAT CREEK EXCAVATING	**c** EIN-PN	26-2062156-501
a Plan name	FLEMCO FREIGHT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLEMCO FREIGHT LLC	**c** EIN-PN	85-2902363-501
a Plan name	FLETCHER PERFORMANCE & PAINT MCF BENEFIT PLAN		
b Name of plan sponsor	FLETCHER PERFORMANCE & PAINT	**c** EIN-PN	46-4848884-501
a Plan name	FLINTROCK CONTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLINTROCK CONTRUCTION LLC	**c** EIN-PN	51-0615879-501
a Plan name	FLOYDS AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLOYDS AUTOMOTIVE LLC	**c** EIN-PN	27-2806930-501
a Plan name	FLYOVER COMO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLYOVER COMO LLC	**c** EIN-PN	47-2845381-501
a Plan name	FLYWHEEL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FLYWHEEL LLC	**c** EIN-PN	47-3543161-501
a Plan name	FMB BANK MCF BENEFIT PLAN		
b Name of plan sponsor	FMB BANK	**c** EIN-PN	43-0266010-501
a Plan name	FMP HOLDINGS MCF BENEFIT PLAN		
b Name of plan sponsor	FMP HOLDINGS	**c** EIN-PN	45-4933872-501
a Plan name	FMS METALS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FMS METALS LLC	**c** EIN-PN	26-2318458-501
a Plan name	FOAM EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	FOAM EQUIPMENT	**c** EIN-PN	43-1511777-501

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

a Plan name	FOAMKRAFTERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOAMKRAFTERS LLC	**c** EIN-PN	92-1226758-501
a Plan name	FOCUS ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	FOCUS ST LOUIS	**c** EIN-PN	43-1750172-501
a Plan name	FOCUSED ON PHYSICAL THERAPY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOCUSED ON PHYSICAL THERAPY, LLC	**c** EIN-PN	26-4832641-501
a Plan name	FOESTE NURSERY INC MCF BENEFIT PLAN		
b Name of plan sponsor	FOESTE NURSERY INC	**c** EIN-PN	43-1626422-502
a Plan name	FOGGY RIVER REALTY MCF BENEFIT PLAN		
b Name of plan sponsor	FOGGY RIVER REALTY	**c** EIN-PN	43-1691843-501
a Plan name	FOLIOTEK INC MCF BENEFIT PLAN		
b Name of plan sponsor	FOLIOTEK INC	**c** EIN-PN	43-1825441-501
a Plan name	FORDLAND CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	FORDLAND CLINIC	**c** EIN-PN	43-1791656-501
a Plan name	FORENSIC TESTING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	FORENSIC TESTING SERVICES	**c** EIN-PN	84-1662734-501
a Plan name	FOREST PARK PEDIATRICS MCF BENEFIT PLAN		
b Name of plan sponsor	FOREST PARK PEDIATRICS	**c** EIN-PN	43-1776101-501
a Plan name	FOREST RELEAF OF MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	FOREST RELEAF OF MISSOURI	**c** EIN-PN	43-1615929-501
a Plan name	FORESTAR INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	FORESTAR INDUSTRIES	**c** EIN-PN	83-3949671-501
a Plan name	FORESTRY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FORESTRY SERVICES LLC	**c** EIN-PN	83-3867784-501

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

a Plan name	FORKLIFT AMERICA MCF BENEFIT PLAN		
b Name of plan sponsor	FORKLIFT AMERICA	**c** EIN-PN	26-4037624-501
a Plan name	FORREST HOMES MCF BENEFIT PLAN		
b Name of plan sponsor	FORREST HOMES	**c** EIN-PN	84-2982391-501
a Plan name	FORWARD FITNESS MCF BENEFIT PLAN		
b Name of plan sponsor	FORWARD FITNESS	**c** EIN-PN	47-2199274-501
a Plan name	FORWARD GROUPCO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FORWARD GROUPCO LLC	**c** EIN-PN	84-3986090-501
a Plan name	FORWARD SLASH TECHNOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	FORWARD SLASH TECHNOLOGY	**c** EIN-PN	45-1303853-501
a Plan name	FOSTER CONSTRUCTION SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOSTER CONSTRUCTION SERVICES, LLC	**c** EIN-PN	47-2823302-501
a Plan name	FOSTER HOSPITALITY GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	FOSTER HOSPITALITY GROUP	**c** EIN-PN	43-1783965-501
a Plan name	FOUNDATION CREDIT UNION MCF BENEFIT PLAN		
b Name of plan sponsor	FOUNDATION CREDIT UNION	**c** EIN-PN	44-0444355-501
a Plan name	FOUNDATION WEALTH MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUNDATION WEALTH MANAGEMENT LLC	**c** EIN-PN	20-0686218-501
a Plan name	FOUNDRY SOFTWARE DEVELOPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	FOUNDRY SOFTWARE DEVELOPMENT	**c** EIN-PN	43-1723022-501
a Plan name	FOUR K CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR K CONSTRUCTION, LLC	**c** EIN-PN	88-2611821-501
a Plan name	FOUR POINTS LAND SURVEYING & ENGINEERING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR POINTS LAND SURVEYING & ENGINEERING, INC	**c** EIN-PN	27-3489730-501

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

a Plan name	FOUR SEASONS LANDSCAPING MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR SEASONS LANDSCAPING	**c** EIN-PN	43-1485846-501
a Plan name	FOUR STATE DENTAL CARE MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR STATE DENTAL CARE	**c** EIN-PN	20-1954016-501
a Plan name	FOUR STATE DOORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR STATE DOORS LLC	**c** EIN-PN	27-1516016-501
a Plan name	FOUR STATE FOOD EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR STATE FOOD EQUIPMENT	**c** EIN-PN	84-4932102-501
a Plan name	FOUR STATES BANCSHARES INC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR STATES BANCSHARES INC	**c** EIN-PN	92-2194518-501
a Plan name	FOUR STATES CHAMPIONS FEED LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR STATES CHAMPIONS FEED LLC	**c** EIN-PN	82-4298951-501
a Plan name	FOUR T INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR T INVESTMENTS LLC	**c** EIN-PN	83-3979156-501
a Plan name	FOUR WISE GUYS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOUR WISE GUYS LLC	**c** EIN-PN	46-2034606-501
a Plan name	FOURTH STONE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOURTH STONE LLC	**c** EIN-PN	46-3780351-501
a Plan name	FOX ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOX ELECTRIC LLC	**c** EIN-PN	47-4695118-501
a Plan name	FOX FINANCIAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	FOX FINANCIAL GROUP	**c** EIN-PN	90-2226023-501
a Plan name	FOX FUNERAL HOME AK MORTUARIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOX FUNERAL HOME AK MORTUARIES LLC	**c** EIN-PN	82-3068183-501

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

a Plan name	FOX GRAPE FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	FOX GRAPE FAMILY DENTISTRY	**c** EIN-PN	43-1732130-501
a Plan name	FOX LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FOX LAW LLC	**c** EIN-PN	99-0981270-501
a Plan name	FOXBORO INDUSTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	FOXBORO INDUSTRIES INC	**c** EIN-PN	43-1533837-501
a Plan name	FRANCIS ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	FRANCIS ENTERPRISES	**c** EIN-PN	26-4267359-501
a Plan name	FRANCO AMERICAN PLUMBING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	FRANCO AMERICAN PLUMBING SERVICES	**c** EIN-PN	27-0962953-501
a Plan name	FRANK A SHARP DDS MS PC MCF BENEFIT PLAN		
b Name of plan sponsor	FRANK A SHARP DDS MS PC	**c** EIN-PN	43-1909991-501
a Plan name	FRANKLIN COUNTY ANIMAL MEDICAL CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN COUNTY ANIMAL MEDICAL CENTER	**c** EIN-PN	90-0685612-501
a Plan name	FRANKLIN COUNTY CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN COUNTY CONSTRUCTION	**c** EIN-PN	26-0282045-501
a Plan name	FRANKLIN COUNTY LAB LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN COUNTY LAB LLC	**c** EIN-PN	26-1211097-501
a Plan name	FRANKLIN COUNTY RECYCLING & SALVAGE MCF BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN COUNTY RECYCLING & SALVAGE	**c** EIN-PN	81-1183910-501
a Plan name	FRANKLIN GRAPHICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FRANKLIN GRAPHICS LLC	**c** EIN-PN	43-1848429-501
a Plan name	FRAZIER UNDERGROUND LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FRAZIER UNDERGROUND LLC	**c** EIN-PN	26-3888050-501

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

a Plan name	FRED HARLE STATE FARM INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	FRED HARLE STATE FARM INSURANCE	**c** EIN-PN	43-1424280-502
a Plan name	FREDERICK INVESTIGATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	FREDERICK INVESTIGATIONS	**c** EIN-PN	43-1662512-502
a Plan name	FREDERICKTOWN FAMILY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FREDERICKTOWN FAMILY DENTAL LLC	**c** EIN-PN	47-4093542-501
a Plan name	FREEMAN LANDWORX, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FREEMAN LANDWORX, LLC	**c** EIN-PN	84-4253143-501
a Plan name	FREIGHTWISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FREIGHTWISE LLC	**c** EIN-PN	84-2375002-501
a Plan name	FREISTATT FARMERS EXCHANGE MCF BENEFIT PLAN		
b Name of plan sponsor	FREISTATT FARMERS EXCHANGE	**c** EIN-PN	43-0836600-501
a Plan name	FREITAG SWIFTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FREITAG SWIFTS LLC	**c** EIN-PN	46-4232459-501
a Plan name	FRESH MARKETING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FRESH MARKETING LLC	**c** EIN-PN	27-4708597-501
a Plan name	FRIENDS OF KIDS WITH CANCER MCF BENEFIT PLAN		
b Name of plan sponsor	FRIENDS OF KIDS WITH CANCER	**c** EIN-PN	43-1614563-501
a Plan name	FRONT ROW PROPERTY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FRONT ROW PROPERTY LLC	**c** EIN-PN	45-2815565-501
a Plan name	FRONTENAC PAINTING MCF BENEFIT PLAN		
b Name of plan sponsor	FRONTENAC PAINTING	**c** EIN-PN	82-0539468-501
a Plan name	FRONTIER INTEGRATED HEALTH CENTER, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FRONTIER INTEGRATED HEALTH CENTER, INC.	**c** EIN-PN	43-1864893-501

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

a Plan name	FRUITLAND AREA FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	FRUITLAND AREA FIRE PROTECTION DISTRICT	**c** EIN-PN	46-3552904-501
a Plan name	F-STOP MCF BENEFIT PLAN		
b Name of plan sponsor	F-STOP	**c** EIN-PN	27-5055967-501
a Plan name	FUGATE MOTORS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	FUGATE MOTORS, INC	**c** EIN-PN	43-0914180-501
a Plan name	FULL CIRCLE CHEMICAL SUPPLY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FULL CIRCLE CHEMICAL SUPPLY, LLC	**c** EIN-PN	26-1323063-501
a Plan name	FULL SERVICE AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	FULL SERVICE AUTOMOTIVE	**c** EIN-PN	46-2222517-501
a Plan name	FULLCIRCLE PLACEMENT PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FULLCIRCLE PLACEMENT PARTNERS LLC	**c** EIN-PN	82-0609049-501
a Plan name	FURNITURE SALES OF THE MIDWEST, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FURNITURE SALES OF THE MIDWEST, LLC	**c** EIN-PN	46-0850701-501
a Plan name	FUSCAP INC. MCF BENEFIT PLAN		
b Name of plan sponsor	FUSCAP INC.	**c** EIN-PN	43-1852808-501
a Plan name	FUSION TECHNOLOGIES MCF BENEFIT PLAN		
b Name of plan sponsor	FUSION TECHNOLOGIES	**c** EIN-PN	43-1922321-501
a Plan name	FWMG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	FWMG, LLC	**c** EIN-PN	86-1568790-501
a Plan name	G & P CONCRETE MCF BENEFIT PLAN		
b Name of plan sponsor	G & P CONCRETE	**c** EIN-PN	46-4443611-501
a Plan name	G & W MEAT & BAVARIAN STYLE SAUSAGE CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	G & W MEAT & BAVARIAN STYLE SAUSAGE CO INC	**c** EIN-PN	43-0828362-501

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

a Plan name	G B COOK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	G B COOK LLC	**c** EIN-PN	03-0384831-501
a Plan name	G2 MATERIAL HANDLING INC MCF BENEFIT PLAN		
b Name of plan sponsor	G2 MATERIAL HANDLING INC	**c** EIN-PN	26-1972565-501
a Plan name	G3 ENTERTAINMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	G3 ENTERTAINMENT LLC	**c** EIN-PN	88-3057342-501
a Plan name	GABBIT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GABBIT LLC	**c** EIN-PN	46-3545701-502
a Plan name	GAEBE CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	GAEBE CONTRACTING	**c** EIN-PN	43-1941232-501
a Plan name	GAFFNEY & CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GAFFNEY & CO LLC	**c** EIN-PN	84-3385184-501
a Plan name	GAHR TRUCK & EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	GAHR TRUCK & EQUIPMENT	**c** EIN-PN	43-1291514-501
a Plan name	GALAXY MAINTENANCE INC MCF BENEFIT PLAN		
b Name of plan sponsor	GALAXY MAINTENANCE INC	**c** EIN-PN	43-1585811-501
a Plan name	GALE CREATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GALE CREATION LLC	**c** EIN-PN	80-0892725-501
a Plan name	GAMEL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	GAMEL COMPANY	**c** EIN-PN	43-1471859-501
a Plan name	GANDER INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	GANDER INSURANCE	**c** EIN-PN	46-4392083-501
a Plan name	GARAGE DOOR GUY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GARAGE DOOR GUY, LLC	**c** EIN-PN	82-4141841-501

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

a Plan name	GARCIA PROPERTIES SALES CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	GARCIA PROPERTIES SALES CORPORATION	**c** EIN-PN	20-4007228-501
a Plan name	GARCIA PROPERTY MANAGEMENT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GARCIA PROPERTY MANAGEMENT, INC.	**c** EIN-PN	20-8199152-501
a Plan name	GARCO FILTRATION MCF BENEFIT PLAN		
b Name of plan sponsor	GARCO FILTRATION	**c** EIN-PN	43-1115345-501
a Plan name	GARCON, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GARCON, INC.	**c** EIN-PN	47-5093181-501
a Plan name	GARDEN HEIGHTS NURSERY,INC MCF BENEFIT PLAN		
b Name of plan sponsor	GARDEN HEIGHTS NURSERY,INC	**c** EIN-PN	43-1714149-501
a Plan name	GARDNER FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	GARDNER FAMILY DENTISTRY	**c** EIN-PN	43-1890268-501
a Plan name	GARRETT AND CAMPBELL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	GARRETT AND CAMPBELL, INC	**c** EIN-PN	43-1699870-501
a Plan name	GARRISON ROOFING & GUTTERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GARRISON ROOFING & GUTTERING LLC	**c** EIN-PN	86-3803554-501
a Plan name	GARY GERSHILEVICH DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	GARY GERSHILEVICH DDS PC	**c** EIN-PN	43-1831925-501
a Plan name	GARY UNNERSTALL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	GARY UNNERSTALL, INC	**c** EIN-PN	43-1400349-501
a Plan name	GASCON CFO MCF BENEFIT PLAN		
b Name of plan sponsor	GASCON CFO	**c** EIN-PN	81-4045622-501
a Plan name	GASCONADE COUNTY HEALTH DEPARTMENT MCF BENEFIT PLAN		
b Name of plan sponsor	GASCONADE COUNTY HEALTH DEPARTMENT	**c** EIN-PN	43-1167596-501

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

a Plan name	GASKIN HILL NORCROSS OF MISSOUI INC MCF BENEFIT PLAN		
b Name of plan sponsor	GASKIN HILL NORCROSS OF MISSOUI INC	**c** EIN-PN	74-2182038-501
a Plan name	GATEWAY APPRAISAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY APPRAISAL INC	**c** EIN-PN	43-1755485-501
a Plan name	GATEWAY CAR CONNECTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY CAR CONNECTION LLC	**c** EIN-PN	82-2499396-501
a Plan name	GATEWAY CITY INSURORS MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY CITY INSURORS	**c** EIN-PN	03-0496487-501
a Plan name	GATEWAY COMPOSITES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY COMPOSITES, LLC	**c** EIN-PN	26-0829578-501
a Plan name	GATEWAY DESIGN & BUILD MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY DESIGN & BUILD	**c** EIN-PN	27-0135502-501
a Plan name	GATEWAY DISPOSAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY DISPOSAL LLC	**c** EIN-PN	83-2500601-501
a Plan name	GATEWAY EXTERIORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY EXTERIORS INC	**c** EIN-PN	43-1488258-501
a Plan name	GATEWAY FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY FOUNDATION	**c** EIN-PN	20-6294706-501
a Plan name	GATEWAY ORAL & MAXILLOFACIAL SURGEONS OF ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY ORAL & MAXILLOFACIAL SURGEONS OF ST LOUIS	**c** EIN-PN	43-1564758-501
a Plan name	GATEWAY PAIN CENTER INC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY PAIN CENTER INC	**c** EIN-PN	43-1471574-501
a Plan name	GATEWAY PALLET LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY PALLET LLC	**c** EIN-PN	27-2923317-501

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

a Plan name	GATEWAY SEED LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY SEED LLC	**c** EIN-PN	85-4371301-501
a Plan name	GATEWAY TITLE RESEARCH, INC MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY TITLE RESEARCH, INC	**c** EIN-PN	47-1548491-501
a Plan name	GATEWAY UPFITTERS LLC LINE-X OF JEFFERSON COUNTY MCF BENEFIT PLAN		
b Name of plan sponsor	GATEWAY UPFITTERS LLC LINE-X OF JEFFERSON COUNTY	**c** EIN-PN	83-3605033-501
a Plan name	GATTI MICRO-SURGICAL & LABS MCF BENEFIT PLAN		
b Name of plan sponsor	GATTI MICRO-SURGICAL & LABS	**c** EIN-PN	43-1810265-501
a Plan name	GAYLORD, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GAYLORD, LLC	**c** EIN-PN	77-0663498-501
a Plan name	GB ENGINEERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GB ENGINEERING LLC	**c** EIN-PN	87-1437832-501
a Plan name	GB ENTERTAINMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GB ENTERTAINMENT LLC	**c** EIN-PN	47-4691723-501
a Plan name	GB PIONEERING GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	GB PIONEERING GROUP INC	**c** EIN-PN	93-3633549-501
a Plan name	GBE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GBE LLC	**c** EIN-PN	20-2839345-501
a Plan name	GEGG SALES AND MARKETING MCF BENEFIT PLAN		
b Name of plan sponsor	GEGG SALES AND MARKETING	**c** EIN-PN	43-1927961-501
a Plan name	GEHIRN CORP MCF BENEFIT PLAN		
b Name of plan sponsor	GEHIRN CORP	**c** EIN-PN	45-2387519-501
a Plan name	GENERAL VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	GENERAL VETERINARY CLINIC	**c** EIN-PN	33-1196925-501

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

a Plan name	GENERATION HOME BUILDERS MCF BENEFIT PLAN		
b Name of plan sponsor	GENERATION HOME BUILDERS	**c** EIN-PN	86-1608513-501
a Plan name	GENERATIONS DRYWALL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GENERATIONS DRYWALL LLC	**c** EIN-PN	46-3405699-501
a Plan name	GENESIS ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	GENESIS ENTERPRISES INC	**c** EIN-PN	37-1748426-501
a Plan name	GENESIS POWDER COATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GENESIS POWDER COATING LLC	**c** EIN-PN	83-3823876-501
a Plan name	GENTGES ROOFING MCF BENEFIT PLAN		
b Name of plan sponsor	GENTGES ROOFING	**c** EIN-PN	99-2765565-501
a Plan name	GEORGE A. SPIVA CENTER FOR THE ARTS MCF BENEFIT PLAN		
b Name of plan sponsor	GEORGE A. SPIVA CENTER FOR THE ARTS	**c** EIN-PN	44-6006139-501
a Plan name	GEORGE DERMATOLOGY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GEORGE DERMATOLOGY, LLC	**c** EIN-PN	20-8878540-501
a Plan name	GERDING, KORTE & CHITWOOD, CPAS MCF BENEFIT PLAN		
b Name of plan sponsor	GERDING, KORTE & CHITWOOD, CPAS	**c** EIN-PN	43-1260512-501
a Plan name	GERINGER CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	GERINGER CONSTRUCTION	**c** EIN-PN	81-0961103-501
a Plan name	GERMAN ST VINCENT ORPHAN ASSOC MCF BENEFIT PLAN		
b Name of plan sponsor	GERMAN ST VINCENT ORPHAN ASSOC	**c** EIN-PN	43-0653319-501
a Plan name	GEROMINI CONCRETE PAVING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GEROMINI CONCRETE PAVING, LLC	**c** EIN-PN	47-5565813-502
a Plan name	GFS INCORPORATED MCF BENEFIT PLAN		
b Name of plan sponsor	GFS INCORPORATED	**c** EIN-PN	43-1585000-501

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

a Plan name	GHN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GHN LLC	**c** EIN-PN	82-1593126-501
a Plan name	GIANINOS PASTA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIANINOS PASTA LLC	**c** EIN-PN	20-5624617-501
a Plan name	GIANINOS PIZZA DEN MCF BENEFIT PLAN		
b Name of plan sponsor	GIANINOS PIZZA DEN	**c** EIN-PN	43-0996609-501
a Plan name	GIBBONS WORKMAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIBBONS WORKMAN LLC	**c** EIN-PN	47-1913048-501
a Plan name	GIBBS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIBBS CONSTRUCTION LLC	**c** EIN-PN	47-5406307-501
a Plan name	GIBBS POOL AND TURNER PC MCF BENEFIT PLAN		
b Name of plan sponsor	GIBBS POOL AND TURNER PC	**c** EIN-PN	43-1791260-501
a Plan name	GIBSON PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIBSON PARTNERS LLC	**c** EIN-PN	43-1926995-501
a Plan name	GIBSON'S GARAGE MCF BENEFIT PLAN		
b Name of plan sponsor	GIBSONS GARAGE	**c** EIN-PN	81-5162512-501
a Plan name	GIESSING ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIESSING ENTERPRISES LLC	**c** EIN-PN	86-3517021-501
a Plan name	GIFFORD LUMBER COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	GIFFORD LUMBER COMPANY INC	**c** EIN-PN	43-0746656-501
a Plan name	GIGI R DRAPER MCF BENEFIT PLAN		
b Name of plan sponsor	GIGI R DRAPER	**c** EIN-PN	43-1639166-501
a Plan name	GILBERT'S MOBILE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	GILBERTS MOBILE SERVICE	**c** EIN-PN	75-3194890-501

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

a Plan name	GILLIAM ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	GILLIAM ELECTRIC INC	**c** EIN-PN	43-1545276-501
a Plan name	GINCO FACILITIES MAINTENANCE MCF BENEFIT PLAN		
b Name of plan sponsor	GINCO FACILITIES MAINTENANCE	**c** EIN-PN	20-4972790-501
a Plan name	GIO'S IN THE VALLEY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GIOS IN THE VALLEY LLC	**c** EIN-PN	46-3574066-501
a Plan name	GITTEMEIER GROUP, INC MCF BENEFIT PLAN		
b Name of plan sponsor	GITTEMEIER GROUP, INC	**c** EIN-PN	30-0841138-501
a Plan name	GLENNON INC MCF BENEFIT PLAN		
b Name of plan sponsor	GLENNON INC	**c** EIN-PN	35-2653236-501
a Plan name	GLH1 CONSULTING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GLH1 CONSULTING INC.	**c** EIN-PN	30-0004755-501
a Plan name	GLOBAL DATA SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GLOBAL DATA SERVICES, LLC	**c** EIN-PN	82-3256821-501
a Plan name	GLOBAL GATEWAY LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GLOBAL GATEWAY LOGISTICS LLC	**c** EIN-PN	82-2886120-501
a Plan name	GLOBAL SALES & MARKETING INC MCF BENEFIT PLAN		
b Name of plan sponsor	GLOBAL SALES & MARKETING INC	**c** EIN-PN	82-0554139-501
a Plan name	GLS INSURANCE GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	GLS INSURANCE GROUP	**c** EIN-PN	82-2865943-501
a Plan name	GOBELS COLLISION REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	GOBELS COLLISION REPAIR INC	**c** EIN-PN	83-0437944-501
a Plan name	GOBRANDGO! MCF BENEFIT PLAN		
b Name of plan sponsor	GOBRANDGO!	**c** EIN-PN	27-3115389-501

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

a Plan name	GOCO ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOCO ENTERPRISES, LLC	**c** EIN-PN	85-3139786-501
a Plan name	GOEDEKER INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOEDEKER INVESTMENTS LLC	**c** EIN-PN	26-3325703-501
a Plan name	GOFORTH CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	GOFORTH CONSTRUCTION	**c** EIN-PN	84-3865871-501
a Plan name	GOGA FREIGHT MCF BENEFIT PLAN		
b Name of plan sponsor	GOGA FREIGHT	**c** EIN-PN	93-3744448-501
a Plan name	GOHEEN ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOHEEN ELECTRIC LLC	**c** EIN-PN	74-3171712-501
a Plan name	GOLD PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOLD PROPERTIES LLC	**c** EIN-PN	03-0406161-501
a Plan name	GOLD STAR VEHICLE SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	GOLD STAR VEHICLE SERVICES	**c** EIN-PN	82-3051539-501
a Plan name	GOLDEN EAGLE PRODUCTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	GOLDEN EAGLE PRODUCTS INC	**c** EIN-PN	43-1528352-501
a Plan name	GOLDEN RULE INS AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	GOLDEN RULE INS AGENCY	**c** EIN-PN	43-1869426-501
a Plan name	GOLF DISCOUNT MCF BENEFIT PLAN		
b Name of plan sponsor	GOLF DISCOUNT	**c** EIN-PN	27-3212329-501
a Plan name	GOOCH APPRAISAL SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOOCH APPRAISAL SERVICES, LLC	**c** EIN-PN	93-2372281-501
a Plan name	GOOD GUYS GLASS & AUTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOOD GUYS GLASS & AUTO LLC	**c** EIN-PN	47-1958211-501

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

a Plan name	GOODHOUSE AI LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GOODHOUSE AI LLC	**c** EIN-PN	86-3382109-501
a Plan name	GORILLA PRODUCTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GORILLA PRODUCTS LLC	**c** EIN-PN	27-0758316-501
a Plan name	GOTCHURBACK CORP MCF BENEFIT PLAN		
b Name of plan sponsor	GOTCHURBACK CORP	**c** EIN-PN	26-1432507-501
a Plan name	GOTTENSTROETER FUNERAL HOME MCF BENEFIT PLAN		
b Name of plan sponsor	GOTTENSTROETER FUNERAL HOME	**c** EIN-PN	43-1383478-501
a Plan name	GOVERNMENTAL SERVICES GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	GOVERNMENTAL SERVICES GROUP	**c** EIN-PN	43-1797595-502
a Plan name	GPM INC MCF BENEFIT PLAN		
b Name of plan sponsor	GPM INC	**c** EIN-PN	03-0488287-501
a Plan name	GPS-KC, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GPS-KC, LLC	**c** EIN-PN	86-3632485-501
a Plan name	GRACE ACCOUNTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRACE ACCOUNTING LLC	**c** EIN-PN	84-2436529-501
a Plan name	GRACE AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRACE AUTOMOTIVE LLC	**c** EIN-PN	87-3694908-501
a Plan name	GRACE ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRACE ENTERPRISES LLC	**c** EIN-PN	81-2176395-501
a Plan name	GRADEL HEATING & COOLING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRADEL HEATING & COOLING LLC	**c** EIN-PN	45-2951435-501
a Plan name	GRADEX COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRADEX COMPANY LLC	**c** EIN-PN	43-1880822-502

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	GRAHAM GROUP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GRAHAM GROUP, INC.	**c** EIN-PN	43-1784532-501
a Plan name	GRAND RIVER WELDING INSTITUTE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRAND RIVER WELDING INSTITUTE LLC	**c** EIN-PN	81-2883230-501
a Plan name	GRAND SLAM SPORTS BAR & GRILL MCF BENEFIT PLAN		
b Name of plan sponsor	GRAND SLAM SPORTS BAR & GRILL	**c** EIN-PN	26-0869308-501
a Plan name	GRANDVIEW GARAGE DOORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRANDVIEW GARAGE DOORS LLC	**c** EIN-PN	92-3660444-501
a Plan name	GRANITE BUSTERS MCF BENEFIT PLAN		
b Name of plan sponsor	GRANITE BUSTERS	**c** EIN-PN	26-2458856-501
a Plan name	GRANT INVESTMENT MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRANT INVESTMENT MANAGEMENT LLC	**c** EIN-PN	26-4304461-501
a Plan name	GRAPHIC CONNECTIONS GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	GRAPHIC CONNECTIONS GROUP	**c** EIN-PN	43-1828865-501
a Plan name	GRASS ROOTS MOTORCYCLES BMW MCF BENEFIT PLAN		
b Name of plan sponsor	GRASS ROOTS MOTORCYCLES BMW	**c** EIN-PN	43-1639186-501
a Plan name	GRATEFUL PETS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRATEFUL PETS LLC	**c** EIN-PN	81-2405965-501
a Plan name	GRAY AND ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRAY AND ASSOCIATES LLC	**c** EIN-PN	20-8445082-501
a Plan name	GREAT OUTDOOR STUDIOS MCF BENEFIT PLAN		
b Name of plan sponsor	GREAT OUTDOOR STUDIOS	**c** EIN-PN	43-1862998-501
a Plan name	GREAT WHITE PRINTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	GREAT WHITE PRINTING INC	**c** EIN-PN	47-2642882-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MARYVILLE CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER MARYVILLE CHAMBER OF COMMERCE	**c** EIN-PN	44-0340772-501
a Plan name	GREATER NORTH COUNTY CHAMBER MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER NORTH COUNTY CHAMBER	**c** EIN-PN	43-0787393-501
a Plan name	GREATER POPLAR BLUFF AREA MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER POPLAR BLUFF AREA	**c** EIN-PN	43-1423790-501
a Plan name	GREATER SPRINGFIELD ENDODONTICS MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER SPRINGFIELD ENDODONTICS	**c** EIN-PN	42-1620829-501
a Plan name	GREATER SPRINGFIELD REALTY MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER SPRINGFIELD REALTY	**c** EIN-PN	14-1884912-501
a Plan name	GREATER ST CHARLES COUNTY CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	GREATER ST CHARLES COUNTY CHAMBER OF COMMERCE	**c** EIN-PN	43-0620157-501
a Plan name	GREEN 2 GO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN 2 GO LLC	**c** EIN-PN	81-0748974-501
a Plan name	GREEN BRIDGE WEALTH ADVISORS MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN BRIDGE WEALTH ADVISORS	**c** EIN-PN	82-4128512-501
a Plan name	GREEN CITY LIVESTOCK MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN CITY LIVESTOCK	**c** EIN-PN	46-1870581-501
a Plan name	GREEN EARTH & LANDSCAPE SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN EARTH & LANDSCAPE SOLUTIONS	**c** EIN-PN	43-1740927-501
a Plan name	GREEN ELEMENTS LAWN CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN ELEMENTS LAWN CARE LLC	**c** EIN-PN	82-4351732-501
a Plan name	GREEN HILLS PHARMACY INC MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN HILLS PHARMACY INC	**c** EIN-PN	43-1776004-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MEADOWS INC MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN MEADOWS INC	**c** EIN-PN	43-1069463-501
a Plan name	GREEN THUMB LAWNCARE AND LANDSCAPE DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN THUMB LAWNCARE AND LANDSCAPE DESIGN	**c** EIN-PN	27-0123385-501
a Plan name	GREEN TURF IRRIGATION HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GREEN TURF IRRIGATION HOLDINGS LLC	**c** EIN-PN	99-2927113-501
a Plan name	GREG ABBOTT EQUIPMENT SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	GREG ABBOTT EQUIPMENT SALES INC	**c** EIN-PN	43-1749435-501
a Plan name	GREGS BODY SHOP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GREGS BODY SHOP LLC	**c** EIN-PN	47-2980020-501
a Plan name	GREIN VALLEY PALLET CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GREIN VALLEY PALLET CO LLC	**c** EIN-PN	43-1869821-501
a Plan name	GREYSTONE HOLDINGS & MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	GREYSTONE HOLDINGS & MANAGEMENT	**c** EIN-PN	85-2094143-501
a Plan name	GRIFFIN LOG HOMES SALES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRIFFIN LOG HOMES SALES LLC	**c** EIN-PN	45-0535692-501
a Plan name	GRILLOS CHOP & BARREL MCF BENEFIT PLAN		
b Name of plan sponsor	GRILLOS CHOP & BARREL	**c** EIN-PN	02-6224232-501
a Plan name	GRIMSHAW & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRIMSHAW & ASSOCIATES LLC	**c** EIN-PN	20-3637614-501
a Plan name	GROSCH DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GROSCH DENTAL LLC	**c** EIN-PN	27-0367664-501
a Plan name	GROUND CONTROL LAWN FERTILIZING INC MCF BENEFIT PLAN		
b Name of plan sponsor	GROUND CONTROL LAWN FERTILIZING INC	**c** EIN-PN	43-1868297-501

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

a Plan name	GROUNDWORK MORTGAGE MCF BENEFIT PLAN		
b Name of plan sponsor	GROUNDWORK MORTGAGE	**c** EIN-PN	61-1739380-501
a Plan name	GROUP TOURS INC MCF BENEFIT PLAN		
b Name of plan sponsor	GROUP TOURS INC	**c** EIN-PN	43-1235455-501
a Plan name	GROUSE ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GROUSE ASSOCIATES, LLC	**c** EIN-PN	86-2038755-501
a Plan name	GROW AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GROW AUTOMOTIVE LLC	**c** EIN-PN	27-5033346-501
a Plan name	GROW TOGETHER GAMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GROW TOGETHER GAMES LLC	**c** EIN-PN	46-3146993-501
a Plan name	GRUBAUGH-BIRD DEWEZE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRUBAUGH-BIRD DEWEZE, LLC	**c** EIN-PN	46-0854620-501
a Plan name	GRUS FOUNDATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GRUS FOUNDATIONS LLC	**c** EIN-PN	43-1936099-501
a Plan name	GSC INTERNATIONAL, INC MCF BENEFIT PLAN		
b Name of plan sponsor	GSC INTERNATIONAL, INC	**c** EIN-PN	43-1630254-501
a Plan name	G'SELL CONTRACTING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GSELL CONTRACTING, INC.	**c** EIN-PN	04-3689609-501
a Plan name	GSRNSB, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GSRNSB, LLC	**c** EIN-PN	85-4140347-501
a Plan name	GUARDIAN WEALTH MANAGEMENT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GUARDIAN WEALTH MANAGEMENT, LLC	**c** EIN-PN	45-4528302-501
a Plan name	GULLET CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GULLET CONTRACTING LLC	**c** EIN-PN	35-2350197-501

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

a Plan name	GUMP, FAIELLA, & BUGALSKI, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	GUMP, FAIELLA, & BUGALSKI, LLC	**c** EIN-PN	43-1193501-501
a Plan name	GUTHRIE ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	GUTHRIE ENTERPRISES INC	**c** EIN-PN	43-1648127-501
a Plan name	GUTHRIE STODDARD, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GUTHRIE STODDARD, INC.	**c** EIN-PN	33-1010881-501
a Plan name	GWS CONTRACTORS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	GWS CONTRACTORS INC.	**c** EIN-PN	43-0903324-501
a Plan name	GYER POWER SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	GYER POWER SYSTEMS	**c** EIN-PN	84-3564232-501
a Plan name	GYNECOLOGIC & RECONSTRUCTIVE SURGERY LTD MCF BENEFIT PLAN		
b Name of plan sponsor	GYNECOLOGIC & RECONSTRUCTIVE SURGERY LTD	**c** EIN-PN	43-1867749-501
a Plan name	H & E CONCRETE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H & E CONCRETE LLC	**c** EIN-PN	20-8736743-501
a Plan name	H & W POOLS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H & W POOLS, LLC	**c** EIN-PN	86-2397842-501
a Plan name	H AND W AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H AND W AUTOMOTIVE LLC	**c** EIN-PN	26-1974974-501
a Plan name	H&H BUILDERS & SONS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	H&H BUILDERS & SONS, INC.	**c** EIN-PN	43-1518998-501
a Plan name	H&H INVESTMENTS LC MCF BENEFIT PLAN		
b Name of plan sponsor	H&H INVESTMENTS LC	**c** EIN-PN	20-4257707-501
a Plan name	H&M MACHINE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	H&M MACHINE SERVICE	**c** EIN-PN	43-1500934-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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.A. HAMMER INC MCF BENEFIT PLAN		
b Name of plan sponsor	H.A. HAMMER INC	**c** EIN-PN	43-1556396-501
a Plan name	H.E. & T.A. RECHTIN, D.D.S., P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	H.E. & T.A. RECHTIN, D.D.S., P.C.	**c** EIN-PN	43-1891504-501
a Plan name	H2G LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H2G LLC	**c** EIN-PN	65-1292785-501
a Plan name	H2LTG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H2LTG, LLC	**c** EIN-PN	83-1504789-501
a Plan name	H2O TECHNOLOGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H2O TECHNOLOGIES LLC	**c** EIN-PN	82-3904490-501
a Plan name	H4 MANUFACTURING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H4 MANUFACTURING LLC	**c** EIN-PN	83-4120046-501
a Plan name	H4 PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	H4 PLUMBING LLC	**c** EIN-PN	88-3751541-501
a Plan name	HADEN'S MOTORSPORTS CENTER, INC MCF BENEFIT PLAN		
b Name of plan sponsor	HADENS MOTORSPORTS CENTER, INC	**c** EIN-PN	43-1714615-501
a Plan name	HAIK INVESTMENT MCF BENEFIT PLAN		
b Name of plan sponsor	HAIK INVESTMENT	**c** EIN-PN	43-1817464-501
a Plan name	HALE COMMUNICATIONS MCF BENEFIT PLAN		
b Name of plan sponsor	HALE COMMUNICATIONS	**c** EIN-PN	20-4324650-501
a Plan name	HALL BROTHERS LUMBER CO. MCF BENEFIT PLAN		
b Name of plan sponsor	HALL BROTHERS LUMBER CO.	**c** EIN-PN	43-0799543-501
a Plan name	HALL LEGAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HALL LEGAL GROUP LLC	**c** EIN-PN	92-1015083-501

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

a Plan name	HALL SEED AND CHEMICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HALL SEED AND CHEMICAL LLC	**c** EIN-PN	32-0391845-501
a Plan name	HALLMARK MANAGEMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	HALLMARK MANAGEMENT INC	**c** EIN-PN	43-1848275-501
a Plan name	HALVORSEN KLOTE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HALVORSEN KLOTE LLC	**c** EIN-PN	82-1605533-501
a Plan name	HAMBEY CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HAMBEY CONSTRUCTION LLC	**c** EIN-PN	20-8067833-501
a Plan name	HAMMER POWERS STRONG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HAMMER POWERS STRONG LLC	**c** EIN-PN	85-2408397-501
a Plan name	HAMTIL CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HAMTIL CONSTRUCTION LLC	**c** EIN-PN	26-1533184-501
a Plan name	HANDYMAN SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	HANDYMAN SOLUTIONS	**c** EIN-PN	43-1874811-501
a Plan name	HANNEKES LOGOWEAR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HANNEKES LOGOWEAR LLC	**c** EIN-PN	43-1933484-501
a Plan name	HAPPYS APPLIANCES MCF BENEFIT PLAN		
b Name of plan sponsor	HAPPYS APPLIANCES	**c** EIN-PN	92-0472896-501
a Plan name	HARDIN & SCHAEFER MCF BENEFIT PLAN		
b Name of plan sponsor	HARDIN & SCHAEFER	**c** EIN-PN	43-1416673-501
a Plan name	HARNESS FINANCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARNESS FINANCIAL LLC	**c** EIN-PN	81-1328762-501
a Plan name	HARPER SCHOOL-/FRONTENAC-LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARPER SCHOOL-/FRONTENAC-LLC	**c** EIN-PN	83-1523498-501

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

a Plan name	HARRIS COLLISION CENTER INC MCF BENEFIT PLAN		
b Name of plan sponsor	HARRIS COLLISION CENTER INC	**c** EIN-PN	27-1827600-501
a Plan name	HARRIS CONSULTING ENGINEERS MCF BENEFIT PLAN		
b Name of plan sponsor	HARRIS CONSULTING ENGINEERS	**c** EIN-PN	43-1375756-501
a Plan name	HARRIS MECHANICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARRIS MECHANICAL LLC	**c** EIN-PN	20-1685862-501
a Plan name	HARRISON AND ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARRISON AND ASSOCIATES LLC	**c** EIN-PN	47-2629652-501
a Plan name	HARRISON CREEK FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	HARRISON CREEK FARMS	**c** EIN-PN	43-1662985-501
a Plan name	HARRY BLACKWELL CHEVROLET BUICK GMC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARRY BLACKWELL CHEVROLET BUICK GMC LLC	**c** EIN-PN	45-3530333-501
a Plan name	HARRY C WINFREY CPA MCF BENEFIT PLAN		
b Name of plan sponsor	HARRY C WINFREY CPA	**c** EIN-PN	43-1686337-501
a Plan name	HARRY S TRUMAN COORDINATING COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	HARRY S TRUMAN COORDINATING COUNCIL	**c** EIN-PN	43-1595408-501
a Plan name	HARSHMAN MACHINE & TOOL MCF BENEFIT PLAN		
b Name of plan sponsor	HARSHMAN MACHINE & TOOL	**c** EIN-PN	43-1624297-501
a Plan name	HART ADVANCED MACHINING AND AUTOMATION MCF BENEFIT PLAN		
b Name of plan sponsor	HART ADVANCED MACHINING AND AUTOMATION	**c** EIN-PN	42-1482013-501
a Plan name	HART COLLISION AND CUSTOM MCF BENEFIT PLAN		
b Name of plan sponsor	HART COLLISION AND CUSTOM	**c** EIN-PN	83-0616456-501
a Plan name	HARTER HOUSE/ EASTGATE INC MCF BENEFIT PLAN		
b Name of plan sponsor	HARTER HOUSE/ EASTGATE INC	**c** EIN-PN	20-2551906-501

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

a Plan name	HARTLEYS CLIMATE CONTROL MCF BENEFIT PLAN		
b Name of plan sponsor	HARTLEYS CLIMATE CONTROL	**c** EIN-PN	27-2897300-501
a Plan name	HARTMANN DUFFE & PEGRAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HARTMANN DUFFE & PEGRAM LLC	**c** EIN-PN	45-3990750-501
a Plan name	HASELHORST DEVELOPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HASELHORST DEVELOPMENT LLC	**c** EIN-PN	83-2156831-501
a Plan name	HASLAG LANDSCAPE & DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HASLAG LANDSCAPE & DESIGN LLC	**c** EIN-PN	81-2635232-501
a Plan name	HATFIELD REPAIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HATFIELD REPAIR LLC	**c** EIN-PN	46-2169078-502
a Plan name	HATFIELD SMOKED MEATS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HATFIELD SMOKED MEATS LLC	**c** EIN-PN	43-1881891-501
a Plan name	HAVEN RECOVERY HOMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HAVEN RECOVERY HOMES LLC	**c** EIN-PN	82-1464064-501
a Plan name	HAVENERS TERMITE AND INSECT CONTROL INC MCF BENEFIT PLAN		
b Name of plan sponsor	HAVENERS TERMITE AND INSECT CONTROL INC	**c** EIN-PN	43-1938520-501
a Plan name	HAVILAND CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	HAVILAND CORPORATION	**c** EIN-PN	43-0623060-501
a Plan name	HAWK RIDGE ANIMAL HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	HAWK RIDGE ANIMAL HOSPITAL	**c** EIN-PN	86-1709987-501
a Plan name	HAWTHORNE CAPITAL WEALTH ADVISORS MCF BENEFIT PLAN		
b Name of plan sponsor	HAWTHORNE CAPITAL WEALTH ADVISORS	**c** EIN-PN	92-0652718-501
a Plan name	HAWTHORNE INN MCF BENEFIT PLAN		
b Name of plan sponsor	HAWTHORNE INN	**c** EIN-PN	43-1675250-501

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

a Plan name	HAYS ROCK WORKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HAYS ROCK WORKS LLC	**c** EIN-PN	26-0506025-501
a Plan name	HAZELRIGGS PROFESSIONAL AUTO SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	HAZELRIGGS PROFESSIONAL AUTO SERVICE	**c** EIN-PN	47-1568839-502
a Plan name	HBA OF GREATER SPRINGFIELD MCF BENEFIT PLAN		
b Name of plan sponsor	HBA OF GREATER SPRINGFIELD	**c** EIN-PN	44-0607302-502
a Plan name	HBC INC MCF BENEFIT PLAN		
b Name of plan sponsor	HBC INC	**c** EIN-PN	43-1364772-501
a Plan name	HC ROGERS CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	HC ROGERS CONSTRUCTION	**c** EIN-PN	47-1777090-501
a Plan name	HD PRECISION ANALYTICS MCF BENEFIT PLAN		
b Name of plan sponsor	HD PRECISION ANALYTICS	**c** EIN-PN	27-1598583-501
a Plan name	HD REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HD REAL ESTATE LLC	**c** EIN-PN	83-1003669-501
a Plan name	HEADLINE PRODUCTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEADLINE PRODUCTIONS LLC	**c** EIN-PN	47-2540716-501
a Plan name	HEADS UP INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	HEADS UP INVESTMENTS	**c** EIN-PN	47-2970042-501
a Plan name	HEALTHCARE CONNECTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEALTHCARE CONNECTIONS LLC	**c** EIN-PN	46-3091404-501
a Plan name	HEALTHY LIFESTYLES WELLNESS CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	HEALTHY LIFESTYLES WELLNESS CENTER	**c** EIN-PN	20-8468071-501
a Plan name	HEARTLAND AUTO BODY AND TOWING MCF BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND AUTO BODY AND TOWING	**c** EIN-PN	37-1282613-501

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

a Plan name	HEARTLAND CHIROPRACTIC CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND CHIROPRACTIC CENTER LLC	**c** EIN-PN	81-3739886-501
a Plan name	HEARTLAND ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND ENTERPRISES LLC	**c** EIN-PN	84-2420822-501
a Plan name	HEARTLAND GROUP INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND GROUP INSURANCE AGENCY INC	**c** EIN-PN	43-1844094-501
a Plan name	HEARTLAND HOMES STL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEARTLAND HOMES STL LLC	**c** EIN-PN	93-2939290-501
a Plan name	HEATHER T HUDKINS DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	HEATHER T HUDKINS DDS PC	**c** EIN-PN	20-4277392-501
a Plan name	HEATHER WILSON DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEATHER WILSON DDS LLC	**c** EIN-PN	84-4690538-501
a Plan name	HEAVY RIFF BREWING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HEAVY RIFF BREWING COMPANY	**c** EIN-PN	45-4781773-501
a Plan name	HEENAN CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEENAN CONSTRUCTION, LLC	**c** EIN-PN	46-0888258-501
a Plan name	HEETCO INC. MCF BENEFIT PLAN		
b Name of plan sponsor	HEETCO INC.	**c** EIN-PN	43-6038195-501
a Plan name	HEIMAN AGRI-SERVICE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	HEIMAN AGRI-SERVICE, INC.	**c** EIN-PN	43-1325939-501
a Plan name	HELIO PRECISION TECH LTD MCF BENEFIT PLAN		
b Name of plan sponsor	HELIO PRECISION TECH LTD	**c** EIN-PN	45-5246481-501
a Plan name	HELLMICH, HILL AND RETTER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HELLMICH, HILL AND RETTER, LLC	**c** EIN-PN	83-3383152-501

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

a Plan name	HEMPHILL CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEMPHILL CONTRACTING LLC	**c** EIN-PN	83-4299602-501
a Plan name	HEMPSTEAD FINANCIAL GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HEMPSTEAD FINANCIAL GROUP, LLC	**c** EIN-PN	45-3329556-501
a Plan name	HENDEL LAWNCARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	HENDEL LAWNCARE INC	**c** EIN-PN	43-1284449-501
a Plan name	HENDELS MARKET CAFE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HENDELS MARKET CAFE LLC	**c** EIN-PN	43-1683465-501
a Plan name	HENRY CO MUTUAL INSURANCE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HENRY CO MUTUAL INSURANCE COMPANY	**c** EIN-PN	44-0242570-501
a Plan name	HERCULES PHARMACY INC MCF BENEFIT PLAN		
b Name of plan sponsor	HERCULES PHARMACY INC	**c** EIN-PN	27-0504077-501
a Plan name	HERITAGE HOSPITALITY MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HERITAGE HOSPITALITY MANAGEMENT LLC	**c** EIN-PN	88-2246051-501
a Plan name	HERITAGE LIVESTOCK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HERITAGE LIVESTOCK LLC	**c** EIN-PN	20-2358804-501
a Plan name	HI TECH AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	HI TECH AUTOMOTIVE	**c** EIN-PN	84-1713264-501
a Plan name	HICKAMO COUNTRY STORE MCF BENEFIT PLAN		
b Name of plan sponsor	HICKAMO COUNTRY STORE	**c** EIN-PN	20-0618916-501
a Plan name	HICKORY COUNTY FARMERS MUTUAL INS CO MCF BENEFIT PLAN		
b Name of plan sponsor	HICKORY COUNTY FARMERS MUTUAL INS CO	**c** EIN-PN	43-6049229-501
a Plan name	HICKSCO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HICKSCO LLC	**c** EIN-PN	92-2191367-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 5 COMMUNICATIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HIGH 5 COMMUNICATIONS, LLC	**c** EIN-PN	84-3959308-501
a Plan name	HIGHER FOCUS PHOTOGRAPHY MCF BENEFIT PLAN		
b Name of plan sponsor	HIGHER FOCUS PHOTOGRAPHY	**c** EIN-PN	27-1549977-501
a Plan name	HIGHER GROUND RECOVERY CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	HIGHER GROUND RECOVERY CENTER	**c** EIN-PN	46-1275370-501
a Plan name	HIGHLINE VETERINARY SERVICE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HIGHLINE VETERINARY SERVICE, LLC	**c** EIN-PN	82-0712266-501
a Plan name	HIGHWAY APPLIANCE MCF BENEFIT PLAN		
b Name of plan sponsor	HIGHWAY APPLIANCE	**c** EIN-PN	43-1778093-501
a Plan name	HILGEDICK ELECTRIC SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	HILGEDICK ELECTRIC SERVICES INC	**c** EIN-PN	43-1610381-501
a Plan name	HILLERMANN & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HILLERMANN & ASSOCIATES LLC	**c** EIN-PN	46-1557581-501
a Plan name	HILLIN AND COMPANY PC MCF BENEFIT PLAN		
b Name of plan sponsor	HILLIN AND COMPANY PC	**c** EIN-PN	43-1182376-501
a Plan name	HILLS AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HILLS AUTOMOTIVE LLC	**c** EIN-PN	81-2020784-501
a Plan name	HILLSBORO DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	HILLSBORO DENTAL	**c** EIN-PN	20-4751474-501
a Plan name	HILLSBORO FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	HILLSBORO FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1036073-501
a Plan name	HINES FARMS EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HINES FARMS EXCAVATING LLC	**c** EIN-PN	47-3163467-501

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

a Plan name	HINES PERFORMANCE PARTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HINES PERFORMANCE PARTS LLC	**c** EIN-PN	43-1319270-501
a Plan name	HISPANIC CHAMBER OF COMMERCE OF METRO ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	HISPANIC CHAMBER OF COMMERCE OF METRO ST LOUIS	**c** EIN-PN	43-1323271-501
a Plan name	HISTORY MUSEUM FOR SPRINGFIELD GREENE COUNTY INC MCF BENEFIT PLAN		
b Name of plan sponsor	HISTORY MUSEUM FOR SPRINGFIELD GREENE COUNTY INC	**c** EIN-PN	51-0148860-501
a Plan name	HIU TECHNOLOGIES MCF BENEFIT PLAN		
b Name of plan sponsor	HIU TECHNOLOGIES	**c** EIN-PN	88-0994283-501
a Plan name	HIVE HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HIVE HOLDINGS LLC	**c** EIN-PN	92-3307395-501
a Plan name	HLM HOSPITALITY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HLM HOSPITALITY LLC	**c** EIN-PN	83-2741852-501
a Plan name	HLS PROPERTIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	HLS PROPERTIES INC	**c** EIN-PN	43-1809231-501
a Plan name	HM SUNSHINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HM SUNSHINE LLC	**c** EIN-PN	88-1989255-501
a Plan name	HOFF FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	HOFF FARMS INC	**c** EIN-PN	43-1083700-501
a Plan name	HOFFMAN GENERAL CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	HOFFMAN GENERAL CONTRACTING	**c** EIN-PN	04-3744358-501
a Plan name	HOGAN LAND TITLE CO MCF BENEFIT PLAN		
b Name of plan sponsor	HOGAN LAND TITLE CO	**c** EIN-PN	43-0799985-501
a Plan name	HOHENSHELL AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOHENSHELL AGENCY LLC	**c** EIN-PN	47-1947915-501

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

a Plan name	HOLEKAMP DO IT CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	HOLEKAMP DO IT CENTER	**c** EIN-PN	43-0643132-501
a Plan name	HOLLAND INJURY LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOLLAND INJURY LAW LLC	**c** EIN-PN	82-5313774-501
a Plan name	HOLLINGSHEAD LAW FIRM, P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	HOLLINGSHEAD LAW FIRM, P.C.	**c** EIN-PN	46-1144613-501
a Plan name	HOLLY FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOLLY FARMS LLC	**c** EIN-PN	46-1637597-501
a Plan name	HOLLYWOOD MOTOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HOLLYWOOD MOTOR COMPANY	**c** EIN-PN	43-1599270-501
a Plan name	HOLMES AND GRIFFETH FINANCIAL PLANNERS MCF BENEFIT PLAN		
b Name of plan sponsor	HOLMES AND GRIFFETH FINANCIAL PLANNERS	**c** EIN-PN	43-1944008-501
a Plan name	HOLTZMAN-BECHTEL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HOLTZMAN-BECHTEL COMPANY	**c** EIN-PN	43-0996999-501
a Plan name	HOME CARE ALLIANCE MCF BENEFIT PLAN		
b Name of plan sponsor	HOME CARE ALLIANCE	**c** EIN-PN	43-1808910-501
a Plan name	HOME ELEMENTS DESIGN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOME ELEMENTS DESIGN, LLC	**c** EIN-PN	46-5594919-501
a Plan name	HOME KRAFT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOME KRAFT LLC	**c** EIN-PN	83-2078591-501
a Plan name	HOME OIL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOME OIL LLC	**c** EIN-PN	87-2131727-501
a Plan name	HOME SHIELD ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOME SHIELD ADVISORS LLC	**c** EIN-PN	85-0943150-501

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

a Plan name	HOMEPRIDE BANK MCF BENEFIT PLAN		
b Name of plan sponsor	HOMEPRIDE BANK	**c** EIN-PN	44-0162160-501
a Plan name	HOMETOWN JOURNAL MCF BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN JOURNAL	**c** EIN-PN	43-1578758-501
a Plan name	HOMETOWN PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	HOMETOWN PHARMACY	**c** EIN-PN	27-3439565-501
a Plan name	HOOCKS HANDYWORK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOOCKS HANDYWORK LLC	**c** EIN-PN	82-3750663-501
a Plan name	HOPE RANCH OF MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	HOPE RANCH OF MISSOURI	**c** EIN-PN	47-2328446-501
a Plan name	HOPKINS LUMBER COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HOPKINS LUMBER COMPANY	**c** EIN-PN	43-0820075-501
a Plan name	HORIZON SIGN COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	HORIZON SIGN COMPANY	**c** EIN-PN	99-1477050-501
a Plan name	HORNBUCKLE HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	HORNBUCKLE HEATING & COOLING	**c** EIN-PN	27-1284609-502
a Plan name	HORTON AUTO SALES MCF BENEFIT PLAN		
b Name of plan sponsor	HORTON AUTO SALES	**c** EIN-PN	46-2813710-501
a Plan name	HOSCO FOODS MCF BENEFIT PLAN		
b Name of plan sponsor	HOSCO FOODS	**c** EIN-PN	47-3042884-501
a Plan name	HOSMER KING AND ROYCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOSMER KING AND ROYCE LLC	**c** EIN-PN	26-2209490-501
a Plan name	HOT SHOTZ MOBILE POWER WASH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOT SHOTZ MOBILE POWER WASH, LLC	**c** EIN-PN	43-1702984-501

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

a Plan name	HOTSHOT ASPHALT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOTSHOT ASPHALT LLC	**c** EIN-PN	82-3479589-501
a Plan name	HOUSE IN STYLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOUSE IN STYLE LLC	**c** EIN-PN	90-1188690-501
a Plan name	HOUSTON HOUSING AUTHORITY MCF BENEFIT PLAN		
b Name of plan sponsor	HOUSTON HOUSING AUTHORITY	**c** EIN-PN	43-0864339-501
a Plan name	HOWARD E OLIVER MCF BENEFIT PLAN		
b Name of plan sponsor	HOWARD E OLIVER	**c** EIN-PN	92-0980164-501
a Plan name	HOWELL AND SONS CARPET OUTLET LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HOWELL AND SONS CARPET OUTLET LLC	**c** EIN-PN	43-1535125-501
a Plan name	HOWELL COMMERCIAL REFRIGERATION MCF BENEFIT PLAN		
b Name of plan sponsor	HOWELL COMMERCIAL REFRIGERATION	**c** EIN-PN	44-0614884-501
a Plan name	HPIG ENTERPRISE MCF BENEFIT PLAN		
b Name of plan sponsor	HPIG ENTERPRISE	**c** EIN-PN	84-2872753-501
a Plan name	HUB CITY SPORTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	HUB CITY SPORTS, INC	**c** EIN-PN	43-1543725-501
a Plan name	HUBLER AUTO SALES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	HUBLER AUTO SALES, INC.	**c** EIN-PN	45-2620465-501
a Plan name	HUCKSTEP BODY & PAINT SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	HUCKSTEP BODY & PAINT SHOP	**c** EIN-PN	43-1273983-502
a Plan name	HUFFMAN CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUFFMAN CONSTRUCTION LLC	**c** EIN-PN	45-0584639-502
a Plan name	HUFFMAN SECURITY COMPANY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	HUFFMAN SECURITY COMPANY, INC.	**c** EIN-PN	43-1625157-501

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

a Plan name	HUFFS LAWN CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUFFS LAWN CARE, LLC	**c** EIN-PN	27-3082711-501
a Plan name	HUGH PALMER MOTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	HUGH PALMER MOTORS INC	**c** EIN-PN	43-0820356-501
a Plan name	HUGHES AUTO BODY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	HUGHES AUTO BODY INC.	**c** EIN-PN	43-1303854-501
a Plan name	HULETT & COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HULETT & COMPANY LLC	**c** EIN-PN	26-4366920-501
a Plan name	HULL TRUCKING INC MCF BENEFIT PLAN		
b Name of plan sponsor	HULL TRUCKING INC	**c** EIN-PN	43-1680107-501
a Plan name	HULSEY INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HULSEY INSURANCE AGENCY LLC	**c** EIN-PN	46-2855560-501
a Plan name	HUMAN RESOURCE STAFFING MCF BENEFIT PLAN		
b Name of plan sponsor	HUMAN RESOURCE STAFFING	**c** EIN-PN	43-1914965-501
a Plan name	HUMANWELL PHARMACEUTICAL US INC MCF BENEFIT PLAN		
b Name of plan sponsor	HUMANWELL PHARMACEUTICAL US INC	**c** EIN-PN	47-5006593-501
a Plan name	HUMPHREY ORTHODONTICS MCF BENEFIT PLAN		
b Name of plan sponsor	HUMPHREY ORTHODONTICS	**c** EIN-PN	81-5173819-501
a Plan name	HUNGRY PLANET, INC MCF BENEFIT PLAN		
b Name of plan sponsor	HUNGRY PLANET, INC	**c** EIN-PN	82-3723186-501
a Plan name	HUNSAKER ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUNSAKER ENTERPRISES LLC	**c** EIN-PN	20-4495400-501
a Plan name	HUNTER JESSUP EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUNTER JESSUP EXCAVATING LLC	**c** EIN-PN	85-0709276-501

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

a Plan name	HURA RA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HURA RA LLC	**c** EIN-PN	26-0770542-501
a Plan name	HURLEY FAMILY DENTISTRY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HURLEY FAMILY DENTISTRY, LLC	**c** EIN-PN	47-5373139-501
a Plan name	HURSTER SMITH INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	HURSTER SMITH INSURANCE	**c** EIN-PN	47-4572361-501
a Plan name	HUTCHINS ADVERTISING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUTCHINS ADVERTISING LLC	**c** EIN-PN	26-0537916-501
a Plan name	HUTSON CPAS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HUTSON CPAS, LLC	**c** EIN-PN	93-1585561-501
a Plan name	HVAC MASTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HVAC MASTER LLC	**c** EIN-PN	45-2401392-501
a Plan name	HW HENKLE ENTERPRISES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	HW HENKLE ENTERPRISES, INC	**c** EIN-PN	74-2805381-501
a Plan name	HYPERTOWER ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	HYPERTOWER ENTERPRISES LLC	**c** EIN-PN	84-4118691-501
a Plan name	I POUR LIFE MCF BENEFIT PLAN		
b Name of plan sponsor	I POUR LIFE	**c** EIN-PN	27-3482070-501
a Plan name	ICD HOLDINGS MCF BENEFIT PLAN		
b Name of plan sponsor	ICD HOLDINGS	**c** EIN-PN	38-4123889-501
a Plan name	ICR RESOURCES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ICR RESOURCES LLC	**c** EIN-PN	45-5579384-501
a Plan name	IDEAL COMFORT HEATING & AIR CONDITIONING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IDEAL COMFORT HEATING & AIR CONDITIONING, LLC	**c** EIN-PN	82-1304495-501

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

a Plan name	IDEAL EYE SURGERY MCF BENEFIT PLAN		
b Name of plan sponsor	IDEAL EYE SURGERY	**c** EIN-PN	82-2324444-501
a Plan name	IDEAL MEDICAL PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	IDEAL MEDICAL PRODUCTS	**c** EIN-PN	43-1559897-501
a Plan name	IDEAL RECOVERY INC MCF BENEFIT PLAN		
b Name of plan sponsor	IDEAL RECOVERY INC	**c** EIN-PN	47-2968695-501
a Plan name	IFG ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IFG ADVISORS LLC	**c** EIN-PN	43-1649208-501
a Plan name	ILMG CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	ILMG CORPORATION	**c** EIN-PN	47-1186259-501
a Plan name	IMAGE AUTO STYLING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IMAGE AUTO STYLING LLC	**c** EIN-PN	81-2704099-501
a Plan name	IMAGE SOLUTIONS USA INC MCF BENEFIT PLAN		
b Name of plan sponsor	IMAGE SOLUTIONS USA INC	**c** EIN-PN	20-0081427-501
a Plan name	IMOVEPT MCF BENEFIT PLAN		
b Name of plan sponsor	IMOVEPT	**c** EIN-PN	85-0489504-501
a Plan name	IMPACT BENEFITS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IMPACT BENEFITS LLC	**c** EIN-PN	82-0660130-501
a Plan name	IMPACT MARKETPLACE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IMPACT MARKETPLACE LLC	**c** EIN-PN	93-2287589-501
a Plan name	IMPACT TRANSPORTATION SOLUTIONS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	IMPACT TRANSPORTATION SOLUTIONS INC.	**c** EIN-PN	43-1933573-501
a Plan name	IMPERIAL AUTO FINANCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IMPERIAL AUTO FINANCE LLC	**c** EIN-PN	99-4083009-501

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

a Plan name	IMPERIAL PDR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IMPERIAL PDR LLC	**c** EIN-PN	85-2578436-501
a Plan name	IMRAN PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	IMRAN PHARMACY	**c** EIN-PN	27-3033059-501
a Plan name	INCENTIVE SOURCE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	INCENTIVE SOURCE, INC.	**c** EIN-PN	43-1834816-501
a Plan name	INCITE PERFORMANCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INCITE PERFORMANCE LLC	**c** EIN-PN	20-0587258-501
a Plan name	INDEPENDENT BROKERS AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT BROKERS AGENCY LLC	**c** EIN-PN	41-2075683-501
a Plan name	INDEPENDENT LIVING CENTER OF MID MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT LIVING CENTER OF MID MISSOURI	**c** EIN-PN	43-1238407-501
a Plan name	INDEPENDENT LIVING CENTER OF SE MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	INDEPENDENT LIVING CENTER OF SE MISSOURI	**c** EIN-PN	43-1762646-501
a Plan name	INDUSTRIAL MECHANICAL FAB MCF BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL MECHANICAL FAB	**c** EIN-PN	84-4098023-501
a Plan name	INDUSTRIAL PHYSICAL THERAPY INC MCF BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL PHYSICAL THERAPY INC	**c** EIN-PN	43-1860189-501
a Plan name	INDUSTRIAL SHELVING SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	INDUSTRIAL SHELVING SYSTEMS	**c** EIN-PN	43-1137229-501
a Plan name	INERTIA GARAGE CORP MCF BENEFIT PLAN		
b Name of plan sponsor	INERTIA GARAGE CORP	**c** EIN-PN	84-3522984-502
a Plan name	INFINITY ONLINE MARKETPLACE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INFINITY ONLINE MARKETPLACE, LLC	**c** EIN-PN	47-2766971-501

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

a Plan name	INFORMATION MANAGEMENT & SECURITIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INFORMATION MANAGEMENT & SECURITIES LLC	**c** EIN-PN	26-3074110-501
a Plan name	INGREDIENT EXCHANGE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	INGREDIENT EXCHANGE COMPANY	**c** EIN-PN	43-1694545-501
a Plan name	INKBLOT NARRATIVES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INKBLOT NARRATIVES LLC	**c** EIN-PN	82-5527352-501
a Plan name	INKWELL PRINTING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	INKWELL PRINTING COMPANY	**c** EIN-PN	43-1612610-501
a Plan name	INNOVATIVE EYE CARE SPECIALISTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE EYE CARE SPECIALISTS LLC	**c** EIN-PN	82-3561643-501
a Plan name	INNOVATIVE INSTALLATIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE INSTALLATIONS, LLC	**c** EIN-PN	81-4469827-501
a Plan name	INNOVATIVE INSURANCE CONSULTANTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE INSURANCE CONSULTANTS LLC	**c** EIN-PN	27-0856166-501
a Plan name	INNOVATIVE MEDICAL CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE MEDICAL CLINIC	**c** EIN-PN	87-2368128-501
a Plan name	INNOVATIVE NATURAL SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE NATURAL SOLUTIONS LLC	**c** EIN-PN	47-4174307-501
a Plan name	INNOVATIVE TIMING SYSTEMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INNOVATIVE TIMING SYSTEMS, LLC	**c** EIN-PN	26-3027470-501
a Plan name	INREACH CAPITAL, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	INREACH CAPITAL, INC.	**c** EIN-PN	83-1253696-501
a Plan name	INSIDE THE LINES MCF BENEFIT PLAN		
b Name of plan sponsor	INSIDE THE LINES	**c** EIN-PN	43-1873689-501

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

a Plan name	INSPIRED FREEDOM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INSPIRED FREEDOM LLC	**c** EIN-PN	20-2042660-501
a Plan name	INTEGRATION TECHNOLOGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRATION TECHNOLOGIES LLC	**c** EIN-PN	26-4486822-501
a Plan name	INTEGRATIVE MEDICINE MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRATIVE MEDICINE	**c** EIN-PN	83-1533440-501
a Plan name	INTEGRITEL INC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRITEL INC	**c** EIN-PN	81-4406677-501
a Plan name	INTEGRITY AIRE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY AIRE LLC	**c** EIN-PN	87-4386603-501
a Plan name	INTEGRITY ANIMAL SURGERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY ANIMAL SURGERY LLC	**c** EIN-PN	99-2974975-501
a Plan name	INTEGRITY INSURANCE & FINANCIAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY INSURANCE & FINANCIAL SERVICES LLC	**c** EIN-PN	20-8233486-501
a Plan name	INTEGRITY ROOFING & RENOVATIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTEGRITY ROOFING & RENOVATIONS, LLC	**c** EIN-PN	81-1198083-501
a Plan name	INTERNATIONAL ASSOCIATION OF FAIRS AND EXPOS MCF BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL ASSOCIATION OF FAIRS AND EXPOS	**c** EIN-PN	56-0603707-501
a Plan name	INTERNATIONAL SCHOOLHOUSE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL SCHOOLHOUSE LLC	**c** EIN-PN	30-0539726-501
a Plan name	INTERNATIONAL TECHNOLOGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTERNATIONAL TECHNOLOGIES LLC	**c** EIN-PN	48-6088937-501
a Plan name	INTERNET DESIGN AND PUBLISHING MCF BENEFIT PLAN		
b Name of plan sponsor	INTERNET DESIGN AND PUBLISHING	**c** EIN-PN	06-1696711-501

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

a Plan name	INTERPRES BUILDING SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	INTERPRES BUILDING SOLUTIONS	**c** EIN-PN	46-2269268-501
a Plan name	INTERVENTIONAL PAIN MGMT SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	INTERVENTIONAL PAIN MGMT SERVICES	**c** EIN-PN	75-3174196-501
a Plan name	INTRINSIC DEVELOPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INTRINSIC DEVELOPMENT LLC	**c** EIN-PN	88-0642618-501
a Plan name	INVENTION HOUSE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	INVENTION HOUSE LLC	**c** EIN-PN	43-1912300-501
a Plan name	IP SYMPHONY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IP SYMPHONY, LLC	**c** EIN-PN	20-1650544-501
a Plan name	IPOCK ELECTRIC & SOLAR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IPOCK ELECTRIC & SOLAR LLC	**c** EIN-PN	86-3109533-501
a Plan name	IQCOMPUTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IQCOMPUTING LLC	**c** EIN-PN	26-3449355-501
a Plan name	IRISH GYPSY BAR AND GRILL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IRISH GYPSY BAR AND GRILL LLC	**c** EIN-PN	84-3680098-501
a Plan name	IRONMASTERS STEEL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	IRONMASTERS STEEL LLC	**c** EIN-PN	81-0986083-501
a Plan name	ISE INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ISE INVESTMENTS LLC	**c** EIN-PN	83-0793046-501
a Plan name	ISENHOWER LUMBER COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	ISENHOWER LUMBER COMPANY	**c** EIN-PN	43-0893683-501
a Plan name	ISITE MEDIA GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ISITE MEDIA GROUP LLC	**c** EIN-PN	82-2451775-501

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

a Plan name	ITSTL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ITSTL LLC	**c** EIN-PN	47-3679950-501
a Plan name	IV A CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	IV A CONSTRUCTION INC	**c** EIN-PN	87-3402458-501
a Plan name	J & A POOLS & SPAS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J & A POOLS & SPAS LLC	**c** EIN-PN	45-4522359-501
a Plan name	J & H PIZZA VENTURES MCF BENEFIT PLAN		
b Name of plan sponsor	J & H PIZZA VENTURES	**c** EIN-PN	26-1339394-501
a Plan name	J & J LIGHTING AND ELECTRICAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	J & J LIGHTING AND ELECTRICAL INC	**c** EIN-PN	43-1842527-501
a Plan name	J & J PLUMBING MCF BENEFIT PLAN		
b Name of plan sponsor	J & J PLUMBING	**c** EIN-PN	43-1333425-501
a Plan name	J & J SALES REPS., INC. MCF BENEFIT PLAN		
b Name of plan sponsor	J & J SALES REPS., INC.	**c** EIN-PN	43-1142902-501
a Plan name	J & M AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	J & M AUTOMOTIVE	**c** EIN-PN	99-1612676-501
a Plan name	J & P BROTHERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J & P BROTHERS LLC	**c** EIN-PN	92-2532833-501
a Plan name	J AND J FLOORCOVERING MCF BENEFIT PLAN		
b Name of plan sponsor	J AND J FLOORCOVERING	**c** EIN-PN	43-1941310-501
a Plan name	J AND J WOOD SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	J AND J WOOD SOLUTIONS	**c** EIN-PN	27-2434643-502
a Plan name	J AND K TIRE AND AUTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J AND K TIRE AND AUTO LLC	**c** EIN-PN	87-3705238-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 B GURY MANUFACTURING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	J B GURY MANUFACTURING COMPANY	**c** EIN-PN	43-1114776-501
a Plan name	J B WARD,LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J B WARD,LLC	**c** EIN-PN	43-1923362-502
a Plan name	J BRUCE REAL ESTATE TEAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J BRUCE REAL ESTATE TEAM LLC	**c** EIN-PN	88-3947114-501
a Plan name	J C BECK ENTERPRISES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	J C BECK ENTERPRISES INC.	**c** EIN-PN	81-0934482-501
a Plan name	J D SCHLEGEL LANDSCAPING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	J D SCHLEGEL LANDSCAPING COMPANY	**c** EIN-PN	43-0954655-502
a Plan name	J HOLLAND ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	J HOLLAND ELECTRIC	**c** EIN-PN	45-4550354-501
a Plan name	J JONES HOMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J JONES HOMES LLC	**c** EIN-PN	88-3130137-501
a Plan name	J LOUIS CRUM CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	J LOUIS CRUM CORPORATION	**c** EIN-PN	43-0746653-501
a Plan name	J R HOLMAN EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J R HOLMAN EXCAVATING LLC	**c** EIN-PN	20-4695032-501
a Plan name	J S CLEMENT CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J S CLEMENT CONSTRUCTION LLC	**c** EIN-PN	27-0152230-502
a Plan name	J S HEARD DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	J S HEARD DDS PC	**c** EIN-PN	26-0882225-501
a Plan name	J TAYLOR FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J TAYLOR FARMS LLC	**c** EIN-PN	83-3343669-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 TURNER CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J TURNER CONSTRUCTION LLC	**c** EIN-PN	20-2836077-501
a Plan name	J&B MOATS CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	J&B MOATS CORPORATION	**c** EIN-PN	43-1833027-501
a Plan name	J&C GOLDSMITH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J&C GOLDSMITH, LLC	**c** EIN-PN	20-4991604-501
a Plan name	J. SCOTT DELAPLAIN DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	J. SCOTT DELAPLAIN DDS PC	**c** EIN-PN	01-0548466-501
a Plan name	J.D.'S HEATING & COOLING SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J.D.S HEATING & COOLING SERVICES, LLC	**c** EIN-PN	45-5440789-501
a Plan name	J.J. MICRO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	J.J. MICRO, LLC	**c** EIN-PN	27-1847852-501
a Plan name	J.M. CARTON, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	J.M. CARTON, INC.	**c** EIN-PN	43-1758829-501
a Plan name	JAC3 CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAC3 CONTRACTING LLC	**c** EIN-PN	84-3923150-501
a Plan name	JACK PATTERSON, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JACK PATTERSON, INC.	**c** EIN-PN	43-1506618-501
a Plan name	JACK'D CARTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JACKD CARTS, LLC	**c** EIN-PN	87-1081215-501
a Plan name	JACKSON ELECTRIC AND SIGN INC MCF BENEFIT PLAN		
b Name of plan sponsor	JACKSON ELECTRIC AND SIGN INC	**c** EIN-PN	43-1797102-501
a Plan name	JACKSON FAMILY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JACKSON FAMILY DENTAL LLC	**c** EIN-PN	27-2635365-501

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

a Plan name	JACOB SONN DMD, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JACOB SONN DMD, LLC	**c** EIN-PN	85-3561518-501
a Plan name	JACOBS FLOORS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	JACOBS FLOORS, INC	**c** EIN-PN	43-1793620-501
a Plan name	JADE ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JADE ELECTRIC LLC	**c** EIN-PN	84-5039163-501
a Plan name	JADE MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JADE MANAGEMENT LLC	**c** EIN-PN	47-2609448-501
a Plan name	JAKS INC MCF BENEFIT PLAN		
b Name of plan sponsor	JAKS INC	**c** EIN-PN	33-1129921-501
a Plan name	JAM ASSETS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAM ASSETS, LLC	**c** EIN-PN	87-1087054-501
a Plan name	JAMES AND JAMES LAW PC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES AND JAMES LAW PC	**c** EIN-PN	33-1610366-501
a Plan name	JAMES CARLTON AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES CARLTON AGENCY LLC	**c** EIN-PN	45-2900100-501
a Plan name	JAMES FINANCIAL PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES FINANCIAL PARTNERS	**c** EIN-PN	80-0498817-503
a Plan name	JAMES J DIXSON, DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES J DIXSON, DDS LLC	**c** EIN-PN	84-1665295-501
a Plan name	JAMES J ODONNELL FUNERAL HOME INC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES J ODONNELL FUNERAL HOME INC	**c** EIN-PN	43-1232352-501
a Plan name	JAMES LAW GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES LAW GROUP, LLC	**c** EIN-PN	47-0856131-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 N GUIRL, II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES N GUIRL, II LLC	**c** EIN-PN	43-1840339-501
a Plan name	JAMES OTIS LAW GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES OTIS LAW GROUP, LLC	**c** EIN-PN	47-4251861-501
a Plan name	JAMES RIVER BASIN PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES RIVER BASIN PARTNERSHIP	**c** EIN-PN	31-1613753-501
a Plan name	JAMES TERRILL AUTOMOTIVE REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES TERRILL AUTOMOTIVE REPAIR	**c** EIN-PN	36-4914546-501
a Plan name	JAMES W VANN INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JAMES W VANN INC.	**c** EIN-PN	43-1578855-501
a Plan name	JAMPLAST INC MCF BENEFIT PLAN		
b Name of plan sponsor	JAMPLAST INC	**c** EIN-PN	36-3948927-501
a Plan name	JANES SURVEYING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	JANES SURVEYING, INC	**c** EIN-PN	43-1774082-501
a Plan name	JAPANESE AUTO MAINTENANCE CO MCF BENEFIT PLAN		
b Name of plan sponsor	JAPANESE AUTO MAINTENANCE CO	**c** EIN-PN	43-1208323-501
a Plan name	JARED MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JARED MANAGEMENT LLC	**c** EIN-PN	27-4454074-502
a Plan name	JARED REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JARED REAL ESTATE LLC	**c** EIN-PN	85-1614168-501
a Plan name	JASON B AMATO MD MCF BENEFIT PLAN		
b Name of plan sponsor	JASON B AMATO MD	**c** EIN-PN	43-1924238-501
a Plan name	JASON BEELER FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	JASON BEELER FARMS INC	**c** EIN-PN	43-1876448-501

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

a Plan name	JASPER COUNTY CASA MCF BENEFIT PLAN		
b Name of plan sponsor	JASPER COUNTY CASA	**c** EIN-PN	82-3934601-501
a Plan name	JASPER GRAIN INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JASPER GRAIN INC.	**c** EIN-PN	43-1873960-501
a Plan name	JAY R HEDDELL CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JAY R HEDDELL CPA LLC	**c** EIN-PN	81-3804820-501
a Plan name	JAY RICE CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	JAY RICE CONTRACTING	**c** EIN-PN	43-1332958-501
a Plan name	JAYNE F. SCHERRMAN DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	JAYNE F. SCHERRMAN DDS PC	**c** EIN-PN	43-1237976-501
a Plan name	JAYSON JEWELERS MCF BENEFIT PLAN		
b Name of plan sponsor	JAYSON JEWELERS	**c** EIN-PN	43-1664181-501
a Plan name	JB DRYWALL MCF BENEFIT PLAN		
b Name of plan sponsor	JB DRYWALL	**c** EIN-PN	87-4002818-501
a Plan name	J-BAR CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	J-BAR CONSTRUCTION INC	**c** EIN-PN	43-1360334-502
a Plan name	JC PEDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JC PEDS LLC	**c** EIN-PN	86-2854010-501
a Plan name	JC TECH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JC TECH LLC	**c** EIN-PN	33-1780016-501
a Plan name	JCE ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	JCE ENTERPRISES INC	**c** EIN-PN	81-2018076-501
a Plan name	JCE HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JCE HOLDINGS LLC	**c** EIN-PN	82-4349150-501

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

a Plan name	JCG CPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	JCG CPA PC	**c** EIN-PN	47-1277409-501
a Plan name	JCS LAW MCF BENEFIT PLAN		
b Name of plan sponsor	JCS LAW	**c** EIN-PN	27-3648167-501
a Plan name	JCSC INVESTMENT MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JCSC INVESTMENT MANAGEMENT LLC	**c** EIN-PN	82-4102350-501
a Plan name	JD INDUSTRIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JD INDUSTRIES LLC	**c** EIN-PN	27-3306485-501
a Plan name	JD'S FINANCING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JDS FINANCING LLC	**c** EIN-PN	87-2640201-501
a Plan name	JEFF DEWITT AUCTION CO MCF BENEFIT PLAN		
b Name of plan sponsor	JEFF DEWITT AUCTION CO	**c** EIN-PN	43-1072600-501
a Plan name	JEFFERSON CITY DENTAL CARE MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON CITY DENTAL CARE	**c** EIN-PN	26-2881839-501
a Plan name	JEFFERSON CITY MAGAZINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON CITY MAGAZINE LLC	**c** EIN-PN	83-4387444-501
a Plan name	JEFFERSON CITY REGIONAL ECONOMIC PARTNERSHIP INC MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON CITY REGIONAL ECONOMIC PARTNERSHIP INC	**c** EIN-PN	85-4396997-501
a Plan name	JEFFERSON NATIONAL PARKS ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON NATIONAL PARKS ASSOCIATION	**c** EIN-PN	43-6062751-501
a Plan name	JEFFERSON R-7 FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERSON R-7 FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1039512-501
a Plan name	JEFFERY L CHILDS MCF BENEFIT PLAN		
b Name of plan sponsor	JEFFERY L CHILDS	**c** EIN-PN	20-8626509-501

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

a Plan name	JENKINS CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JENKINS CPA LLC	**c** EIN-PN	20-1229034-501
a Plan name	JEREMY ARNOLD MCF BENEFIT PLAN		
b Name of plan sponsor	JEREMY ARNOLD	**c** EIN-PN	99-4066206-501
a Plan name	JESSE OWENS HEATING & AIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JESSE OWENS HEATING & AIR, LLC	**c** EIN-PN	81-5256376-501
a Plan name	JET PHYSICAL THERAPY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JET PHYSICAL THERAPY LLC	**c** EIN-PN	46-4913131-501
a Plan name	JF FARM CATTLE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	JF FARM CATTLE COMPANY	**c** EIN-PN	32-0495633-501
a Plan name	JHI INC MCF BENEFIT PLAN		
b Name of plan sponsor	JHI INC	**c** EIN-PN	43-1703612-501
a Plan name	JIM BOLLINGER & SON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JIM BOLLINGER & SON LLC	**c** EIN-PN	46-5236486-501
a Plan name	JIM MILES GARAGE MCF BENEFIT PLAN		
b Name of plan sponsor	JIM MILES GARAGE	**c** EIN-PN	93-1687974-501
a Plan name	JIMM'S STEAKHOUSE & PUB MCF BENEFIT PLAN		
b Name of plan sponsor	JIMMS STEAKHOUSE & PUB	**c** EIN-PN	80-0448801-501
a Plan name	JIMMY MICHEL MOTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	JIMMY MICHEL MOTORS INC	**c** EIN-PN	43-1180427-501
a Plan name	JIMS AUTO SERVICE CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	JIMS AUTO SERVICE CENTER	**c** EIN-PN	43-1698155-502
a Plan name	JIRA HEATING AND COOLING SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	JIRA HEATING AND COOLING SERVICE INC	**c** EIN-PN	43-1001789-501

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

a Plan name	JJG SELECT HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JJG SELECT HOLDINGS LLC	**c** EIN-PN	88-1137529-501
a Plan name	JJN ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JJN ENTERPRISES, LLC	**c** EIN-PN	82-1594015-501
a Plan name	JK ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JK ELECTRIC LLC	**c** EIN-PN	83-1809269-501
a Plan name	JKLM MEDICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JKLM MEDICAL LLC	**c** EIN-PN	84-1772931-501
a Plan name	JKMYERS PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JKMYERS PROPERTIES LLC	**c** EIN-PN	45-4627936-502
a Plan name	JLH LIGHTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JLH LIGHTING, LLC	**c** EIN-PN	83-4163754-501
a Plan name	JLJ WHEELER FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	JLJ WHEELER FARMS	**c** EIN-PN	45-2281774-501
a Plan name	JM EQUIPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JM EQUIPMENT LLC	**c** EIN-PN	81-3606459-501
a Plan name	JMM HOLDING GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JMM HOLDING GROUP LLC	**c** EIN-PN	85-4062143-501
a Plan name	JMO HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JMO HOLDINGS, LLC	**c** EIN-PN	27-2841074-501
a Plan name	JMSS PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JMSS PROPERTIES LLC	**c** EIN-PN	88-0606574-501
a Plan name	JND MASONRY MCF BENEFIT PLAN		
b Name of plan sponsor	JND MASONRY	**c** EIN-PN	27-2865589-501

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

a Plan name	JOAN M. SWARTZ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOAN M. SWARTZ LLC	**c** EIN-PN	43-1879116-501
a Plan name	JOANNA LEE VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOANNA LEE VENTURES LLC	**c** EIN-PN	82-3994645-501
a Plan name	JOE HARDING SALES & SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	JOE HARDING SALES & SERVICE	**c** EIN-PN	45-2886876-501
a Plan name	JOE TOBBEN CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOE TOBBEN CONSTRUCTION INC	**c** EIN-PN	43-1882649-501
a Plan name	JOELS AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	JOELS AUTOMOTIVE	**c** EIN-PN	46-4586639-501
a Plan name	JOE'S BRIDGE AND GRADING INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOES BRIDGE AND GRADING INC	**c** EIN-PN	20-1998434-501
a Plan name	JOHN A BARNETT ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN A BARNETT ENTERPRISES LLC	**c** EIN-PN	43-1424055-501
a Plan name	JOHN D HEARD DDS P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN D HEARD DDS P.C.	**c** EIN-PN	43-1846635-501
a Plan name	JOHN D. MCGURKS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN D. MCGURKS INC.	**c** EIN-PN	43-1153797-501
a Plan name	JOHN G TUTT INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN G TUTT INVESTMENTS LLC	**c** EIN-PN	26-0893285-501
a Plan name	JOHN HOWELL PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN HOWELL PAINTING LLC	**c** EIN-PN	20-0939136-501
a Plan name	JOHN J KRUMREY INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN J KRUMREY INC	**c** EIN-PN	43-1735266-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MARION CUSTOM HOMES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN MARION CUSTOM HOMES, LLC	**c** EIN-PN	13-4255479-501
a Plan name	JOHN S APPELBAUM LAW OFFICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHN S APPELBAUM LAW OFFICES, LLC	**c** EIN-PN	46-2185009-501
a Plan name	JOHNSON COUNTY FIRE PROTECTION MCF BENEFIT PLAN		
b Name of plan sponsor	JOHNSON COUNTY FIRE PROTECTION	**c** EIN-PN	43-1400381-501
a Plan name	JOHNSON VORHEES AND MARTUCCI MCF BENEFIT PLAN		
b Name of plan sponsor	JOHNSON VORHEES AND MARTUCCI	**c** EIN-PN	06-1773256-501
a Plan name	JOHNSON, SCHNEIDER & FERRELL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOHNSON, SCHNEIDER & FERRELL, LLC	**c** EIN-PN	43-1910079-501
a Plan name	JOKERST INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOKERST INC	**c** EIN-PN	43-1810112-501
a Plan name	JOPLIMO MATTRESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIMO MATTRESS LLC	**c** EIN-PN	27-1351391-501
a Plan name	JOPLIN AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIN AREA CHAMBER OF COMMERCE	**c** EIN-PN	44-0304705-501
a Plan name	JOPLIN FAMILY YMCA MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIN FAMILY YMCA	**c** EIN-PN	44-0552026-501
a Plan name	JOPLIN FIREPLACE SHOP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIN FIREPLACE SHOP LLC	**c** EIN-PN	87-0861944-501
a Plan name	JOPLIN PEDIATRIC DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIN PEDIATRIC DENTISTRY	**c** EIN-PN	46-2081908-501
a Plan name	JOPLIN POOL AND SPA MCF BENEFIT PLAN		
b Name of plan sponsor	JOPLIN POOL AND SPA	**c** EIN-PN	43-1534105-501

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

a Plan name	JORDAN CPA SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	JORDAN CPA SERVICES	**c** EIN-PN	82-1255532-502
a Plan name	JOSEPH E RICHARDSON III DDS MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH E RICHARDSON III DDS	**c** EIN-PN	43-1352101-501
a Plan name	JOSEPH E. GOOD INSURANCE AGENCY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH E. GOOD INSURANCE AGENCY, INC	**c** EIN-PN	47-5164204-501
a Plan name	JOSEPH L RECKER INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH L RECKER INSURANCE AGENCY	**c** EIN-PN	20-1489096-501
a Plan name	JOSEPH R. KOFRON, DDS, PC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH R. KOFRON, DDS, PC	**c** EIN-PN	92-0178888-501
a Plan name	JOSEPH SCOTT LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH SCOTT LAW, LLC	**c** EIN-PN	86-1980214-501
a Plan name	JOSEPH T KELLY DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH T KELLY DDS PC	**c** EIN-PN	81-1137914-501
a Plan name	JOSEPH W BARNHART DDS MCF BENEFIT PLAN		
b Name of plan sponsor	JOSEPH W BARNHART DDS	**c** EIN-PN	45-2572563-501
a Plan name	JOSETTE INC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSETTE INC	**c** EIN-PN	20-0158490-501
a Plan name	JOSH A WANSING CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSH A WANSING CPA LLC	**c** EIN-PN	84-4707356-501
a Plan name	JOSHUA PECK & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOSHUA PECK & ASSOCIATES, LLC	**c** EIN-PN	92-3030037-501
a Plan name	JOURNEY HOSPICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JOURNEY HOSPICE LLC	**c** EIN-PN	93-4005203-501

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

a Plan name	JOY CONSTRUCTION CO MCF BENEFIT PLAN		
b Name of plan sponsor	JOY CONSTRUCTION CO	**c** EIN-PN	43-1594144-501
a Plan name	JPF CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JPF CONSULTING LLC	**c** EIN-PN	45-3355893-501
a Plan name	JPS & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	JPS & ASSOCIATES	**c** EIN-PN	43-1673537-501
a Plan name	JQ DISTRIBUTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JQ DISTRIBUTING LLC	**c** EIN-PN	85-1621883-501
a Plan name	JR PLUMBING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JR PLUMBING INC.	**c** EIN-PN	43-1500127-501
a Plan name	JR WEAVER, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	JR WEAVER, INC.	**c** EIN-PN	43-0891823-501
a Plan name	JRG SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	JRG SOLUTIONS	**c** EIN-PN	47-3512652-501
a Plan name	JSR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JSR LLC	**c** EIN-PN	61-1459059-501
a Plan name	JSRW ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JSRW ENTERPRISES LLC	**c** EIN-PN	83-4551516-501
a Plan name	JT MARTIN ENTERPRISE MCF BENEFIT PLAN		
b Name of plan sponsor	JT MARTIN ENTERPRISE	**c** EIN-PN	45-2473636-501
a Plan name	JT PROPERTIES OF SOUTHWEST MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	JT PROPERTIES OF SOUTHWEST MISSOURI	**c** EIN-PN	82-0702453-501
a Plan name	JTL LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JTL LANDSCAPING LLC	**c** EIN-PN	20-1618803-501

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

a Plan name	JTS HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JTS HOLDINGS LLC	**c** EIN-PN	20-1924301-501
a Plan name	JUDGE SURGICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUDGE SURGICAL LLC	**c** EIN-PN	85-2968326-501
a Plan name	JULIA HAMPTON CPA MCF BENEFIT PLAN		
b Name of plan sponsor	JULIA HAMPTON CPA	**c** EIN-PN	33-0999072-501
a Plan name	JULIE BLANNER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JULIE BLANNER LLC	**c** EIN-PN	83-3580414-501
a Plan name	JUNIE MOON MARKET CAFE MCF BENEFIT PLAN		
b Name of plan sponsor	JUNIE MOON MARKET CAFE	**c** EIN-PN	20-2037779-501
a Plan name	JUNIOR SINN AUTO PARTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUNIOR SINN AUTO PARTS LLC	**c** EIN-PN	43-1886489-501
a Plan name	JUNKET FOOD, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUNKET FOOD, LLC	**c** EIN-PN	83-3144075-501
a Plan name	JUPITER CONSULTING SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUPITER CONSULTING SERVICES, LLC	**c** EIN-PN	43-1825999-501
a Plan name	JUST AROUND THE CORNER FLOORING INC MCF BENEFIT PLAN		
b Name of plan sponsor	JUST AROUND THE CORNER FLOORING INC	**c** EIN-PN	99-1795736-501
a Plan name	JUST COMMERCIAL KITCHENS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUST COMMERCIAL KITCHENS, LLC	**c** EIN-PN	87-2452270-501
a Plan name	JUST IN TIME CLEANING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUST IN TIME CLEANING LLC	**c** EIN-PN	52-2388648-501
a Plan name	JUST IN TIME LAWNCARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUST IN TIME LAWNCARE LLC	**c** EIN-PN	26-3977207-501

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

a Plan name	JUST WOODEN FENCES INC MCF BENEFIT PLAN		
b Name of plan sponsor	JUST WOODEN FENCES INC	**c** EIN-PN	72-1539626-501
a Plan name	JUSTICE JEWELERS MCF BENEFIT PLAN		
b Name of plan sponsor	JUSTICE JEWELERS	**c** EIN-PN	32-0176291-501
a Plan name	JUSTIN FOUST AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUSTIN FOUST AGENCY LLC	**c** EIN-PN	81-4833039-501
a Plan name	JUSTMISH ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUSTMISH ENTERPRISES LLC	**c** EIN-PN	46-4952546-501
a Plan name	JUUL SPINE & SPORT CHIROPRACTIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JUUL SPINE & SPORT CHIROPRACTIC LLC	**c** EIN-PN	86-2980794-501
a Plan name	JVR ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JVR ENTERPRISES, LLC	**c** EIN-PN	20-2688070-501
a Plan name	JZ VACTION RENTAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	JZ VACTION RENTAL, LLC	**c** EIN-PN	82-2596681-501
a Plan name	K & L REPAIR, INC MCF BENEFIT PLAN		
b Name of plan sponsor	K & L REPAIR, INC	**c** EIN-PN	43-1402994-501
a Plan name	K FLYNN INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	K FLYNN INSURANCE AGENCY	**c** EIN-PN	43-1834325-501
a Plan name	K JOHNSON CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	K JOHNSON CONSTRUCTION LLC	**c** EIN-PN	45-2851156-501
a Plan name	K MUDD AUTO BODY INC MCF BENEFIT PLAN		
b Name of plan sponsor	K MUDD AUTO BODY INC	**c** EIN-PN	20-1858279-501
a Plan name	K YORK ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	K YORK ELECTRIC	**c** EIN-PN	43-1872591-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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&F INSULATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	K&F INSULATION LLC	**c** EIN-PN	20-5832261-501
a Plan name	K&J MEATS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	K&J MEATS LLC	**c** EIN-PN	93-2358689-501
a Plan name	K.D WALLACE DMD PC MCF BENEFIT PLAN		
b Name of plan sponsor	K.D WALLACE DMD PC	**c** EIN-PN	43-1663322-501
a Plan name	K2M GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	K2M GROUP INC	**c** EIN-PN	47-1785945-501
a Plan name	KAHOKA MOTOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	KAHOKA MOTOR COMPANY	**c** EIN-PN	43-1242892-501
a Plan name	KALEIDOSCOPE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	KALEIDOSCOPE, INC.	**c** EIN-PN	43-0989689-501
a Plan name	KANSAS CITY FACIAL AND ORAL SURGERY MCF BENEFIT PLAN		
b Name of plan sponsor	KANSAS CITY FACIAL AND ORAL SURGERY	**c** EIN-PN	84-2443958-501
a Plan name	KAPP FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	KAPP FARMS	**c** EIN-PN	47-2797058-501
a Plan name	KARE HEALTH & WELLNESS MCF BENEFIT PLAN		
b Name of plan sponsor	KARE HEALTH & WELLNESS	**c** EIN-PN	45-3942561-501
a Plan name	KARRENBROCK TRANSPORT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KARRENBROCK TRANSPORT LLC	**c** EIN-PN	82-4585201-501
a Plan name	KASSING FURNITURE CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KASSING FURNITURE CO LLC	**c** EIN-PN	26-0554073-501
a Plan name	KATAKIS PHYSICAL MEDICINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KATAKIS PHYSICAL MEDICINE LLC	**c** EIN-PN	84-2086698-501

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

a Plan name	KATHRYN JERGER AND ASSOCIATES INC MCF BENEFIT PLAN		
b Name of plan sponsor	KATHRYN JERGER AND ASSOCIATES INC	**c** EIN-PN	43-1860574-501
a Plan name	KAYE WILLIAM & CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KAYE WILLIAM & CO LLC	**c** EIN-PN	88-0949003-501
a Plan name	KC METRO RESTORATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KC METRO RESTORATION LLC	**c** EIN-PN	81-1906271-501
a Plan name	KDP CAPITAL 20-20 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KDP CAPITAL 20-20 LLC	**c** EIN-PN	99-4950657-501
a Plan name	KDS FLOORING AND MATTRESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KDS FLOORING AND MATTRESS LLC	**c** EIN-PN	26-4806577-501
a Plan name	KEANE LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KEANE LAW LLC	**c** EIN-PN	47-3697557-501
a Plan name	KEAT PROPERTIES MCF BENEFIT PLAN		
b Name of plan sponsor	KEAT PROPERTIES	**c** EIN-PN	43-1917560-501
a Plan name	KEEFE & GRIFFITHS, PC MCF BENEFIT PLAN		
b Name of plan sponsor	KEEFE & GRIFFITHS, PC	**c** EIN-PN	43-1144527-501
a Plan name	KEEVEN HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	KEEVEN HEATING & COOLING	**c** EIN-PN	43-1330685-501
a Plan name	KEEWES SERVICE COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	KEEWES SERVICE COMPANY INC	**c** EIN-PN	43-1097392-501
a Plan name	KEITH CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KEITH CONTRACTING LLC	**c** EIN-PN	43-1935806-501
a Plan name	KEITH F. ANDERSON, D.M.D., P.C MCF BENEFIT PLAN		
b Name of plan sponsor	KEITH F. ANDERSON, D.M.D., P.C	**c** EIN-PN	43-1803691-501

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

a Plan name	KEKEISEN HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	KEKEISEN HEATING AND COOLING	**c** EIN-PN	27-1031715-501
a Plan name	KELLAN FOSTER INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	KELLAN FOSTER INSURANCE AGENCY	**c** EIN-PN	45-4973628-501
a Plan name	KELLEHER HOME IMPROVEMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KELLEHER HOME IMPROVEMENTS LLC	**c** EIN-PN	82-5142705-501
a Plan name	KELLER TRANSPORT, INC MCF BENEFIT PLAN		
b Name of plan sponsor	KELLER TRANSPORT, INC	**c** EIN-PN	27-1916746-502
a Plan name	KELLEY ENERGY MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	KELLEY ENERGY MANAGEMENT	**c** EIN-PN	84-3994352-501
a Plan name	KELLY PROBERT INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	KELLY PROBERT INSURANCE AGENCY	**c** EIN-PN	46-3516819-501
a Plan name	KELLY SHANNON JOHNSON DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KELLY SHANNON JOHNSON DESIGN LLC	**c** EIN-PN	27-4737930-501
a Plan name	KELSO SALES & SERVICE IN MCF BENEFIT PLAN		
b Name of plan sponsor	KELSO SALES & SERVICE IN	**c** EIN-PN	43-1559865-501
a Plan name	KEMNA PROPERTIES AND MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	KEMNA PROPERTIES AND MANAGEMENT	**c** EIN-PN	93-1620216-501
a Plan name	KEN OTKE CONSTRUCTION CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	KEN OTKE CONSTRUCTION CO INC	**c** EIN-PN	26-1697422-501
a Plan name	KENDALL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENDALL, LLC	**c** EIN-PN	45-5270420-501
a Plan name	KENDRICK HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENDRICK HOLDINGS LLC	**c** EIN-PN	82-2301479-501

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

a Plan name	KENDRICK NUTRIENT MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENDRICK NUTRIENT MANAGEMENT LLC	**c** EIN-PN	27-0400007-501
a Plan name	KENNEDY PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENNEDY PAINTING LLC	**c** EIN-PN	90-0435389-501
a Plan name	KENNEDY, KENNEDY, ROBBINS AND YARBRO MCF BENEFIT PLAN		
b Name of plan sponsor	KENNEDY, KENNEDY, ROBBINS AND YARBRO	**c** EIN-PN	43-1877653-501
a Plan name	KENNETH GIDEON MCF BENEFIT PLAN		
b Name of plan sponsor	KENNETH GIDEON	**c** EIN-PN	20-8505047-501
a Plan name	KENNYS POOL & SPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENNYS POOL & SPA LLC	**c** EIN-PN	26-2599018-501
a Plan name	KENRICK DESIGN CONSTRUCTION SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	KENRICK DESIGN CONSTRUCTION SERVICES	**c** EIN-PN	43-1819682-501
a Plan name	KENT MOHLER EXTERIORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KENT MOHLER EXTERIORS, LLC	**c** EIN-PN	27-0084434-501
a Plan name	KERR MILLWORK MCF BENEFIT PLAN		
b Name of plan sponsor	KERR MILLWORK	**c** EIN-PN	43-1475958-501
a Plan name	KESSELS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KESSELS LLC	**c** EIN-PN	88-0570625-501
a Plan name	KESSLER ACCOUNTING MCF BENEFIT PLAN		
b Name of plan sponsor	KESSLER ACCOUNTING	**c** EIN-PN	47-5524442-501
a Plan name	KESSLER FARMS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	KESSLER FARMS, INC.	**c** EIN-PN	43-1109712-501
a Plan name	KESSLER HEASLEY ARTIFICIAL LIMB CO INC. MCF BENEFIT PLAN		
b Name of plan sponsor	KESSLER HEASLEY ARTIFICIAL LIMB CO INC.	**c** EIN-PN	43-1216122-501

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

a Plan name	KEVIN BALL AUTO BODY AND SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	KEVIN BALL AUTO BODY AND SALES INC	**c** EIN-PN	43-1711667-501
a Plan name	KEVIN E MEDLIN DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	KEVIN E MEDLIN DDS PC	**c** EIN-PN	43-1580123-501
a Plan name	KEVIN KAISER DDS MS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KEVIN KAISER DDS MS LLC	**c** EIN-PN	83-2962748-501
a Plan name	KEVIN R. DUNIVEN, DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	KEVIN R. DUNIVEN, DDS PC	**c** EIN-PN	47-4099037-501
a Plan name	KEVIN'S AUTO REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	KEVINS AUTO REPAIR	**c** EIN-PN	83-4345350-501
a Plan name	KEYES TILE AND MARBLE MCF BENEFIT PLAN		
b Name of plan sponsor	KEYES TILE AND MARBLE	**c** EIN-PN	43-1828480-501
a Plan name	KEYSTONE MUTUAL INSURANCE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	KEYSTONE MUTUAL INSURANCE COMPANY	**c** EIN-PN	26-1695235-501
a Plan name	KG VENTURES MCF BENEFIT PLAN		
b Name of plan sponsor	KG VENTURES	**c** EIN-PN	45-4757474-501
a Plan name	KHANKEO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KHANKEO LLC	**c** EIN-PN	11-3831183-501
a Plan name	KILLEEN & KILLEEN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KILLEEN & KILLEEN, LLC	**c** EIN-PN	43-1911909-501
a Plan name	KINCAID SEED COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KINCAID SEED COMPANY LLC	**c** EIN-PN	41-2223910-501
a Plan name	KINETIC DESIGN & DEVELOPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	KINETIC DESIGN & DEVELOPMENT	**c** EIN-PN	88-3548786-501

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

a Plan name	KING INVESTMENT STRATEGIES MCF BENEFIT PLAN		
b Name of plan sponsor	KING INVESTMENT STRATEGIES	**c** EIN-PN	85-3876568-501
a Plan name	KINGSMEN SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KINGSMEN SERVICES LLC	**c** EIN-PN	46-1426361-501
a Plan name	KINNEY AMUSEMENT CO MCF BENEFIT PLAN		
b Name of plan sponsor	KINNEY AMUSEMENT CO	**c** EIN-PN	43-1548419-501
a Plan name	KINSMEN JOURNAL MCF BENEFIT PLAN		
b Name of plan sponsor	KINSMEN JOURNAL	**c** EIN-PN	86-1275203-501
a Plan name	KIRK KUSTOMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KIRK KUSTOMS LLC	**c** EIN-PN	45-4264478-501
a Plan name	KIRKSVILLE AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	KIRKSVILLE AREA CHAMBER OF COMMERCE	**c** EIN-PN	43-0356240-501
a Plan name	KIRKSVILLE COUNTRY CLUB MCF BENEFIT PLAN		
b Name of plan sponsor	KIRKSVILLE COUNTRY CLUB	**c** EIN-PN	43-0356255-501
a Plan name	KIRKWOOD CHILDRENS HOUSE MCF BENEFIT PLAN		
b Name of plan sponsor	KIRKWOOD CHILDRENS HOUSE	**c** EIN-PN	46-1171932-501
a Plan name	KISTNER, HAMILTON,ELAM & MARTIN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KISTNER, HAMILTON,ELAM & MARTIN, LLC	**c** EIN-PN	85-1876504-501
a Plan name	KITARA INC MCF BENEFIT PLAN		
b Name of plan sponsor	KITARA INC	**c** EIN-PN	43-1849567-501
a Plan name	KJFM EAGLE 102 MCF BENEFIT PLAN		
b Name of plan sponsor	KJFM EAGLE 102	**c** EIN-PN	43-1302236-501
a Plan name	KJH FINANCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KJH FINANCIAL LLC	**c** EIN-PN	88-0559512-501

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

a Plan name	KLUBA MACHINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KLUBA MACHINE LLC	**c** EIN-PN	46-0912165-501
a Plan name	KMC MCF BENEFIT PLAN		
b Name of plan sponsor	KMC	**c** EIN-PN	83-3008637-501
a Plan name	KMI CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	KMI CONSTRUCTION	**c** EIN-PN	90-0339596-501
a Plan name	KNAUST & BROWN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KNAUST & BROWN LLC	**c** EIN-PN	81-1373313-501
a Plan name	KNOX COUNTY AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	KNOX COUNTY AMBULANCE DISTRICT	**c** EIN-PN	43-1049039-501
a Plan name	KNOX MORTGAGE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KNOX MORTGAGE, LLC	**c** EIN-PN	92-3911512-501
a Plan name	KODIAK TRAILERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KODIAK TRAILERS LLC	**c** EIN-PN	83-1823865-501
a Plan name	KOHRS TRUCK & AUTO REPAIR INC MCF BENEFIT PLAN		
b Name of plan sponsor	KOHRS TRUCK & AUTO REPAIR INC	**c** EIN-PN	43-1239003-501
a Plan name	KOKOMO JOES MCF BENEFIT PLAN		
b Name of plan sponsor	KOKOMO JOES	**c** EIN-PN	46-1512033-501
a Plan name	KOLLAR ABERNETHY & CO. MCF BENEFIT PLAN		
b Name of plan sponsor	KOLLAR ABERNETHY & CO.	**c** EIN-PN	36-4555319-501
a Plan name	KONRAD CONCRETE & CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	KONRAD CONCRETE & CONSTRUCTION	**c** EIN-PN	27-2272416-501
a Plan name	KOPP CONCRETE CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	KOPP CONCRETE CONTRACTORS	**c** EIN-PN	43-0965509-501

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

a Plan name	KOPPEIS HEATING COOLING AND ELECTRICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KOPPEIS HEATING COOLING AND ELECTRICAL LLC	**c** EIN-PN	68-0571874-501
a Plan name	KOPPEL FABRICATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	KOPPEL FABRICATION INC	**c** EIN-PN	20-5135099-502
a Plan name	KORB ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	KORB ELECTRIC	**c** EIN-PN	20-4706365-501
a Plan name	KPAC LP MCF BENEFIT PLAN		
b Name of plan sponsor	KPAC LP	**c** EIN-PN	43-1690794-501
a Plan name	KRAMER AND NEWCOMB OD PC MCF BENEFIT PLAN		
b Name of plan sponsor	KRAMER AND NEWCOMB OD PC	**c** EIN-PN	43-1681651-501
a Plan name	KRANER FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	KRANER FAMILY DENTISTRY	**c** EIN-PN	20-3118172-501
a Plan name	KRATO PRODUCTS CORP MCF BENEFIT PLAN		
b Name of plan sponsor	KRATO PRODUCTS CORP	**c** EIN-PN	43-0744422-501
a Plan name	KRAWITZ SERVICE STATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	KRAWITZ SERVICE STATION INC	**c** EIN-PN	43-1720547-501
a Plan name	KREIS RESTAURANT INC MCF BENEFIT PLAN		
b Name of plan sponsor	KREIS RESTAURANT INC	**c** EIN-PN	43-1167030-501
a Plan name	KREKELER ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	KREKELER ENTERPRISES	**c** EIN-PN	43-4768713-501
a Plan name	KREKELER JEWELERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	KREKELER JEWELERS INC	**c** EIN-PN	43-1513728-501
a Plan name	KT COMMUNICATION CONSULTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	KT COMMUNICATION CONSULTING INC	**c** EIN-PN	43-1911660-501

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

a Plan name	KUIGPAK RIVER PROPERTIES MCF BENEFIT PLAN		
b Name of plan sponsor	KUIGPAK RIVER PROPERTIES	**c** EIN-PN	20-4510927-501
a Plan name	KULTEVAT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	KULTEVAT, INC.	**c** EIN-PN	46-4780469-501
a Plan name	KURTZ MEDICAL AESTHETICS MCF BENEFIT PLAN		
b Name of plan sponsor	KURTZ MEDICAL AESTHETICS	**c** EIN-PN	46-1620763-501
a Plan name	KV INVESTCO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	KV INVESTCO LLC	**c** EIN-PN	92-1869762-501
a Plan name	KWIK PERFORMANCE INC MCF BENEFIT PLAN		
b Name of plan sponsor	KWIK PERFORMANCE INC	**c** EIN-PN	26-1154225-501
a Plan name	KYLE HICKAM INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	KYLE HICKAM INSURANCE AGENCY INC	**c** EIN-PN	46-2228181-501
a Plan name	L & F GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	L & F GROUP INC	**c** EIN-PN	43-1426762-502
a Plan name	L & L BP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	L & L BP, LLC	**c** EIN-PN	20-0000219-501
a Plan name	L & M MOTOR INC MCF BENEFIT PLAN		
b Name of plan sponsor	L & M MOTOR INC	**c** EIN-PN	20-5775599-501
a Plan name	L & R PHILLIPS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	L & R PHILLIPS CONSTRUCTION LLC	**c** EIN-PN	46-1717048-501
a Plan name	L ARCHE ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	L ARCHE ST LOUIS	**c** EIN-PN	26-0252481-501
a Plan name	L&M LAW GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	L&M LAW GROUP LLC	**c** EIN-PN	99-1689929-501

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

a Plan name	LAB STORAGE SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	LAB STORAGE SYSTEMS	**c** EIN-PN	43-1446271-501
a Plan name	LABERICK INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LABERICK INVESTMENTS LLC	**c** EIN-PN	27-2365978-501
a Plan name	LABONNE BOUCHEE DE ST LOUIS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LABONNE BOUCHEE DE ST LOUIS INC	**c** EIN-PN	43-1241649-501
a Plan name	LACEFIELD MUSIC INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LACEFIELD MUSIC INC.	**c** EIN-PN	43-1767845-501
a Plan name	LACHANCE VINEYARDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LACHANCE VINEYARDS LLC	**c** EIN-PN	46-0907715-501
a Plan name	LACROIX PET HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	LACROIX PET HOSPITAL	**c** EIN-PN	47-4000462-501
a Plan name	LAD FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	LAD FOUNDATION	**c** EIN-PN	20-1355957-501
a Plan name	LADD SUYDAM CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LADD SUYDAM CONTRACTING, LLC	**c** EIN-PN	27-1559745-501
a Plan name	LADEDA ENTERTAINMENT + EVENTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LADEDA ENTERTAINMENT + EVENTS INC	**c** EIN-PN	43-1621696-501
a Plan name	LADIES AND FENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LADIES AND FENTS LLC	**c** EIN-PN	88-3570192-501
a Plan name	LADY SAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LADY SAGE LLC	**c** EIN-PN	93-4640085-501
a Plan name	LAFAYETTE WINE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LAFAYETTE WINE COMPANY	**c** EIN-PN	46-1998725-501

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

a Plan name	LAFOLLETTE EXCAVATING MCF BENEFIT PLAN		
b Name of plan sponsor	LAFOLLETTE EXCAVATING	**c** EIN-PN	43-1697941-501
a Plan name	LAGESSE PRODUCTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAGESSE PRODUCTS, LLC	**c** EIN-PN	43-1834059-501
a Plan name	LAKE AREA CHAMBER OF COMM MCF BENEFIT PLAN		
b Name of plan sponsor	LAKE AREA CHAMBER OF COMM	**c** EIN-PN	43-1356331-501
a Plan name	LAKE AVIATION CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAKE AVIATION CENTER LLC	**c** EIN-PN	20-8959456-501
a Plan name	LAKE OZARK FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	LAKE OZARK FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1139399-501
a Plan name	LAKE SHERWOOD ESTATES ASSN. MCF BENEFIT PLAN		
b Name of plan sponsor	LAKE SHERWOOD ESTATES ASSN.	**c** EIN-PN	43-1025328-501
a Plan name	LAKE WEST MARINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAKE WEST MARINE, LLC	**c** EIN-PN	46-1098852-501
a Plan name	LAKESHORE HOLDINGS & DEVELOPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	LAKESHORE HOLDINGS & DEVELOPMENT	**c** EIN-PN	27-0856608-501
a Plan name	LAKESIDE TRAILER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAKESIDE TRAILER LLC	**c** EIN-PN	43-1469302-501
a Plan name	LAMAR ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	LAMAR ENTERPRISES INC	**c** EIN-PN	43-1021020-501
a Plan name	LAMAR TRAVEL PLAZA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAMAR TRAVEL PLAZA LLC	**c** EIN-PN	43-1803227-501
a Plan name	LAMBETH AUTO INC MCF BENEFIT PLAN		
b Name of plan sponsor	LAMBETH AUTO INC	**c** EIN-PN	43-1401254-501

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

a Plan name	LAMINAR WEALTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAMINAR WEALTH LLC	**c** EIN-PN	47-2348725-501
a Plan name	LAMONSTER GARAGE MCF BENEFIT PLAN		
b Name of plan sponsor	LAMONSTER GARAGE	**c** EIN-PN	47-5132618-501
a Plan name	LAND TREE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAND TREE SERVICE LLC	**c** EIN-PN	87-3949182-501
a Plan name	LANDERS FLOWERS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LANDERS FLOWERS, LLC	**c** EIN-PN	86-3281430-501
a Plan name	LANDMARK ENVIRONMENTAL ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	LANDMARK ENVIRONMENTAL ASSOCIATES	**c** EIN-PN	43-1811341-501
a Plan name	LANE B GARNER MD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LANE B GARNER MD LLC	**c** EIN-PN	46-3703890-501
a Plan name	LANGENBERG, STRUBBERG, ARAND, & KING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LANGENBERG, STRUBBERG, ARAND, & KING LLC	**c** EIN-PN	43-1906896-501
a Plan name	LANGENDORF SUPPLY COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LANGENDORF SUPPLY COMPANY	**c** EIN-PN	43-0958181-501
a Plan name	LANIT SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LANIT SERVICES, LLC	**c** EIN-PN	27-2880826-501
a Plan name	LANSERV INC MCF BENEFIT PLAN		
b Name of plan sponsor	LANSERV INC	**c** EIN-PN	43-1449438-501
a Plan name	LANZOTTI LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LANZOTTI LAW LLC	**c** EIN-PN	33-1711760-501
a Plan name	LARRAN INC MCF BENEFIT PLAN		
b Name of plan sponsor	LARRAN INC	**c** EIN-PN	43-1466868-501

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

a Plan name	LAS CAZUELAS MCF BENEFIT PLAN		
b Name of plan sponsor	LAS CAZUELAS	**c** EIN-PN	87-1768643-501
a Plan name	LAUBERTS AUTO SALES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAUBERTS AUTO SALES LLC	**c** EIN-PN	46-4417387-502
a Plan name	LAUER APPRAISAL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LAUER APPRAISAL COMPANY	**c** EIN-PN	43-1652858-501
a Plan name	LAUF EQUIPMENT COMPANY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	LAUF EQUIPMENT COMPANY, INC	**c** EIN-PN	43-0977286-501
a Plan name	LAURE FINANCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAURE FINANCIAL LLC	**c** EIN-PN	82-3813130-501
a Plan name	LAW OFFICE OF ADAM WOODY MCF BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF ADAM WOODY	**c** EIN-PN	46-4194791-501
a Plan name	LAW OFFICE OF MATT UHRIG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF MATT UHRIG LLC	**c** EIN-PN	26-3591779-501
a Plan name	LAW OFFICE OF RYAN F RICKETTS PC MCF BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICE OF RYAN F RICKETTS PC	**c** EIN-PN	43-1838045-501
a Plan name	LAW OFFICES OF MICHAEL C SEAMANDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAW OFFICES OF MICHAEL C SEAMANDS LLC	**c** EIN-PN	46-4014289-501
a Plan name	LAWN MASTERS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	LAWN MASTERS, INC	**c** EIN-PN	43-1279844-501
a Plan name	LAWRENCE & COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAWRENCE & COMPANY LLC	**c** EIN-PN	43-1349759-501
a Plan name	LAWS DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAWS DENTAL LLC	**c** EIN-PN	90-0532140-501

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

a Plan name	LAZENBY OPTOMETRY ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	LAZENBY OPTOMETRY ASSOCIATES	**c** EIN-PN	20-0914664-501
a Plan name	LAZY BUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LAZY BUS LLC	**c** EIN-PN	85-0879595-501
a Plan name	LCS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LCS LLC	**c** EIN-PN	84-4554895-501
a Plan name	LEADBELT AUTO SALES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LEADBELT AUTO SALES INC.	**c** EIN-PN	43-0644010-502
a Plan name	LEADBELT POWERSPORTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEADBELT POWERSPORTS LLC	**c** EIN-PN	47-2727070-501
a Plan name	LEADERSHIP INVESTMENT INTENSIVES MCF BENEFIT PLAN		
b Name of plan sponsor	LEADERSHIP INVESTMENT INTENSIVES	**c** EIN-PN	45-3327354-501
a Plan name	LEAHY, WRIGHT & ASSOC., LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEAHY, WRIGHT & ASSOC., LLC	**c** EIN-PN	45-2651277-501
a Plan name	LEARN TO LIVE RECOVERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEARN TO LIVE RECOVERY LLC	**c** EIN-PN	85-2081036-501
a Plan name	LEARNING LODGE WEST, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEARNING LODGE WEST, LLC	**c** EIN-PN	82-4576587-501
a Plan name	LEBEAU & SONS PAINTING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	LEBEAU & SONS PAINTING, INC	**c** EIN-PN	43-1547498-501
a Plan name	LEDFORD CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	LEDFORD CONSTRUCTION	**c** EIN-PN	46-0644478-501
a Plan name	LEGACY LAND SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEGACY LAND SERVICES, LLC	**c** EIN-PN	99-3155965-501

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

a Plan name	LEGACY LUMBER & FARM STORE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEGACY LUMBER & FARM STORE LLC	**c** EIN-PN	92-0591353-501
a Plan name	LEGACY PERFORMANCE ACADEMY MCF BENEFIT PLAN		
b Name of plan sponsor	LEGACY PERFORMANCE ACADEMY	**c** EIN-PN	85-2940824-501
a Plan name	LEGACY WEALTH ADVISORS MCF BENEFIT PLAN		
b Name of plan sponsor	LEGACY WEALTH ADVISORS	**c** EIN-PN	26-0477040-501
a Plan name	LEGAL BACK OFFICE MCF BENEFIT PLAN		
b Name of plan sponsor	LEGAL BACK OFFICE	**c** EIN-PN	83-0814413-501
a Plan name	LEGRAND BROTHERS TRANSMISSIONS MCF BENEFIT PLAN		
b Name of plan sponsor	LEGRAND BROTHERS TRANSMISSIONS	**c** EIN-PN	92-3178996-501
a Plan name	LEGRAND FEED PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	LEGRAND FEED PRODUCTS	**c** EIN-PN	45-4440131-501
a Plan name	LEHARS DIESEL AND TRACTOR WORKS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEHARS DIESEL AND TRACTOR WORKS, LLC	**c** EIN-PN	46-5308766-501
a Plan name	LEISURE LAKE MARINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEISURE LAKE MARINE, LLC	**c** EIN-PN	82-3350200-501
a Plan name	LELANDER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LELANDER, LLC	**c** EIN-PN	45-4359376-501
a Plan name	LEMAN PLUMBING MCF BENEFIT PLAN		
b Name of plan sponsor	LEMAN PLUMBING	**c** EIN-PN	47-0978527-501
a Plan name	LENDERS INSURANCE SOLUTIONS GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	LENDERS INSURANCE SOLUTIONS GROUP	**c** EIN-PN	20-5500712-501
a Plan name	LENDING PRECIOUS HANDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LENDING PRECIOUS HANDS LLC	**c** EIN-PN	83-4054723-501

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

a Plan name	LEO S. TOBBEN DEVELOPMENT CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	LEO S. TOBBEN DEVELOPMENT CORPORATION	**c** EIN-PN	43-1742949-501
a Plan name	LEOPARD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEOPARD LLC	**c** EIN-PN	46-0670370-501
a Plan name	LEROY A. STRUBBERG & ASSOCIATES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	LEROY A. STRUBBERG & ASSOCIATES, INC	**c** EIN-PN	43-0982980-501
a Plan name	LESTER'S LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LESTERS LLC	**c** EIN-PN	20-8143953-501
a Plan name	LETTERMAIL PRINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LETTERMAIL PRINTING LLC	**c** EIN-PN	87-2015520-501
a Plan name	LETTS & DEMERY PUMP MCF BENEFIT PLAN		
b Name of plan sponsor	LETTS & DEMERY PUMP	**c** EIN-PN	43-1853208-501
a Plan name	LEVEL 9 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEVEL 9 LLC	**c** EIN-PN	83-1958456-501
a Plan name	LEVEL ENGINEERING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEVEL ENGINEERING, LLC	**c** EIN-PN	88-0607761-501
a Plan name	LEVY CONSULTING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	LEVY CONSULTING SERVICES	**c** EIN-PN	88-1481939-501
a Plan name	LEWIS AND WALLACE CPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	LEWIS AND WALLACE CPA PC	**c** EIN-PN	43-1907338-501
a Plan name	LEWIS HOMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LEWIS HOMES LLC	**c** EIN-PN	05-0574389-501
a Plan name	LEWIS MACHINE & TOOL COMPANY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LEWIS MACHINE & TOOL COMPANY INC.	**c** EIN-PN	43-1656047-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 ARCHITECTURAL SHEET METAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIBERTY ARCHITECTURAL SHEET METAL LLC	**c** EIN-PN	46-5677327-501
a Plan name	LIBERTY METAL FABRICATORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIBERTY METAL FABRICATORS LLC	**c** EIN-PN	93-3464697-501
a Plan name	LIFETIME PSYCHIATRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIFETIME PSYCHIATRY LLC	**c** EIN-PN	85-4085064-501
a Plan name	LIFEWORK TALENT CONSULTING MCF BENEFIT PLAN		
b Name of plan sponsor	LIFEWORK TALENT CONSULTING	**c** EIN-PN	86-1664625-501
a Plan name	LILY INDUSTRIAL CHEMICALS MCF BENEFIT PLAN		
b Name of plan sponsor	LILY INDUSTRIAL CHEMICALS	**c** EIN-PN	43-1063389-501
a Plan name	LIMB BUSTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIMB BUSTER LLC	**c** EIN-PN	84-5090333-501
a Plan name	LIN GARY MOTORS MCF BENEFIT PLAN		
b Name of plan sponsor	LIN GARY MOTORS	**c** EIN-PN	20-0500025-501
a Plan name	LINDCREST PROPERTY MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	LINDCREST PROPERTY MANAGEMENT	**c** EIN-PN	83-3365501-501
a Plan name	LINDELL N. FRANKUM DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	LINDELL N. FRANKUM DDS PC	**c** EIN-PN	65-1228826-501
a Plan name	LINDENBUSCH ACCOUNTING AND TAX SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	LINDENBUSCH ACCOUNTING AND TAX SERVICES	**c** EIN-PN	74-3105647-501
a Plan name	LINEA DESIGN INC MCF BENEFIT PLAN		
b Name of plan sponsor	LINEA DESIGN INC	**c** EIN-PN	59-3772409-501
a Plan name	LINEAGE K LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LINEAGE K LLC	**c** EIN-PN	83-2094353-501

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

a Plan name	LINK DATA SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	LINK DATA SERVICES INC	**c** EIN-PN	82-4419054-501
a Plan name	LINMARK MACHINE PRODUCTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LINMARK MACHINE PRODUCTS INC	**c** EIN-PN	43-0910367-501
a Plan name	LINN CO E 911 MCF BENEFIT PLAN		
b Name of plan sponsor	LINN CO E 911	**c** EIN-PN	46-3361701-501
a Plan name	LINNEUS FARM EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	LINNEUS FARM EQUIPMENT	**c** EIN-PN	43-1647774-501
a Plan name	LIONHEART AUTOMATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIONHEART AUTOMATION LLC	**c** EIN-PN	93-2995994-501
a Plan name	LIPPINCOTT CHIROPRACTIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LIPPINCOTT CHIROPRACTIC LLC	**c** EIN-PN	20-2490579-501
a Plan name	LIQUIDATING ASSETS INC MCF BENEFIT PLAN		
b Name of plan sponsor	LIQUIDATING ASSETS INC	**c** EIN-PN	13-4332714-501
a Plan name	LISA M. BOSCH DMD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LISA M. BOSCH DMD LLC	**c** EIN-PN	84-3105311-501
a Plan name	LISTON CONSTRUCTION COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LISTON CONSTRUCTION COMPANY	**c** EIN-PN	43-1540232-501
a Plan name	LITTLE CHICKEN DESIGN & COMMUNICATION MCF BENEFIT PLAN		
b Name of plan sponsor	LITTLE CHICKEN DESIGN & COMMUNICATION	**c** EIN-PN	80-0834494-501
a Plan name	LITTLE MONSTERS CHILDCARE MCF BENEFIT PLAN		
b Name of plan sponsor	LITTLE MONSTERS CHILDCARE	**c** EIN-PN	99-1514195-501
a Plan name	LITTLE OVLIA'S LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LITTLE OVLIAS LLC	**c** EIN-PN	82-0685566-501

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

a Plan name	LITTON KEATTS REAL ESTATE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	LITTON KEATTS REAL ESTATE AGENCY	**c** EIN-PN	82-5457578-502
a Plan name	LIV RECOVERY SOBER LIVING MCF BENEFIT PLAN		
b Name of plan sponsor	LIV RECOVERY SOBER LIVING	**c** EIN-PN	83-3200945-502
a Plan name	LIVEWIRE EXPRESS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LIVEWIRE EXPRESS, INC.	**c** EIN-PN	26-0378707-501
a Plan name	LK2 STUDIO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LK2 STUDIO LLC	**c** EIN-PN	81-4031791-501
a Plan name	LM ACCOUNTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LM ACCOUNTING LLC	**c** EIN-PN	87-4123402-501
a Plan name	LO ENVIRONMENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LO ENVIRONMENTAL LLC	**c** EIN-PN	47-2637423-501
a Plan name	LOCKE AND STACHE MCF BENEFIT PLAN		
b Name of plan sponsor	LOCKE AND STACHE	**c** EIN-PN	81-3212245-501
a Plan name	LOCKS MILL PROPANE MCF BENEFIT PLAN		
b Name of plan sponsor	LOCKS MILL PROPANE	**c** EIN-PN	43-1894268-501
a Plan name	LOEHR CHIROPRACTIC AND ACUPUNCTURE MCF BENEFIT PLAN		
b Name of plan sponsor	LOEHR CHIROPRACTIC AND ACUPUNCTURE	**c** EIN-PN	46-4959111-501
a Plan name	LOEHR INVESTMENTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LOEHR INVESTMENTS, INC.	**c** EIN-PN	43-0650583-501
a Plan name	LOG GUYS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LOG GUYS, LLC	**c** EIN-PN	87-1699466-501
a Plan name	LOGANS HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	LOGANS HEATING & COOLING	**c** EIN-PN	82-0869226-501

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

a Plan name	LOGBOAT BREWING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LOGBOAT BREWING COMPANY	**c** EIN-PN	45-5563004-501
a Plan name	LOGO DADDY GRAPHICS MCF BENEFIT PLAN		
b Name of plan sponsor	LOGO DADDY GRAPHICS	**c** EIN-PN	26-0764000-501
a Plan name	LOIDA FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	LOIDA FAMILY DENTISTRY	**c** EIN-PN	27-2176091-501
a Plan name	LONAS LIL EATS MCF BENEFIT PLAN		
b Name of plan sponsor	LONAS LIL EATS	**c** EIN-PN	26-2684968-501
a Plan name	LONG RANGE NETWORK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LONG RANGE NETWORK LLC	**c** EIN-PN	86-2038017-501
a Plan name	LONGHORN ARCHITECTURAL PRODUCTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LONGHORN ARCHITECTURAL PRODUCTS LLC	**c** EIN-PN	84-4161686-501
a Plan name	LONGHORN PRODUCE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LONGHORN PRODUCE, INC.	**c** EIN-PN	27-0296382-501
a Plan name	LONOCODE INC MCF BENEFIT PLAN		
b Name of plan sponsor	LONOCODE INC	**c** EIN-PN	92-2179672-501
a Plan name	LORBERT IMPORTS MCF BENEFIT PLAN		
b Name of plan sponsor	LORBERT IMPORTS	**c** EIN-PN	46-2968785-501
a Plan name	LORENZ AND LORENZ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LORENZ AND LORENZ LLC	**c** EIN-PN	46-2028718-501
a Plan name	LORI LUCAS ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LORI LUCAS ENTERPRISES LLC	**c** EIN-PN	47-3242644-501
a Plan name	LORIJAY ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LORIJAY ENTERPRISES LLC	**c** EIN-PN	45-2659950-501

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

a Plan name	LORMAY REHABILITATION AND HEALTHCARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	LORMAY REHABILITATION AND HEALTHCARE INC	**c** EIN-PN	55-0796512-501
a Plan name	LOST MILL WOODWORKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LOST MILL WOODWORKING LLC	**c** EIN-PN	47-1325646-501
a Plan name	LOTSPEICH AUTOMOTIVE INC MCF BENEFIT PLAN		
b Name of plan sponsor	LOTSPEICH AUTOMOTIVE INC	**c** EIN-PN	20-8547829-501
a Plan name	LOU FUSZ SOCCER CLUB MCF BENEFIT PLAN		
b Name of plan sponsor	LOU FUSZ SOCCER CLUB	**c** EIN-PN	43-1647074-501
a Plan name	LOU REALTY GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	LOU REALTY GROUP	**c** EIN-PN	82-4066614-501
a Plan name	LOUIS H. BOPP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LOUIS H. BOPP, INC.	**c** EIN-PN	43-0189332-501
a Plan name	LOVE INC OF COLUMBIA MCF BENEFIT PLAN		
b Name of plan sponsor	LOVE INC OF COLUMBIA	**c** EIN-PN	20-8801850-501
a Plan name	LOW BALL ACQUISITIONS MCF BENEFIT PLAN		
b Name of plan sponsor	LOW BALL ACQUISITIONS	**c** EIN-PN	20-8922050-501
a Plan name	LOW VOLTAGE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LOW VOLTAGE GROUP LLC	**c** EIN-PN	81-1152983-501
a Plan name	LOWERY HOLDINGS II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LOWERY HOLDINGS II LLC	**c** EIN-PN	81-3939366-501
a Plan name	LOWES CONCRETE LL MCF BENEFIT PLAN		
b Name of plan sponsor	LOWES CONCRETE LL	**c** EIN-PN	82-2663083-501
a Plan name	LOZ DOCKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LOZ DOCKS LLC	**c** EIN-PN	38-4106229-501

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

a Plan name	LRC PERIODONTICS & IMPLANTS MCF BENEFIT PLAN		
b Name of plan sponsor	LRC PERIODONTICS & IMPLANTS	**c** EIN-PN	46-1216341-501
a Plan name	LRG CONSULTING & DEVELOPMENT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LRG CONSULTING & DEVELOPMENT, INC.	**c** EIN-PN	52-2445773-501
a Plan name	LS CONSTRUCTION AND DEVELOPING INC MCF BENEFIT PLAN		
b Name of plan sponsor	LS CONSTRUCTION AND DEVELOPING INC	**c** EIN-PN	76-0728554-501
a Plan name	LS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LS CONSTRUCTION LLC	**c** EIN-PN	33-1854976-501
a Plan name	LSC ACQUISITION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LSC ACQUISITION LLC	**c** EIN-PN	84-5039496-501
a Plan name	LTS AUTO SERVICE CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LTS AUTO SERVICE CENTER LLC	**c** EIN-PN	81-1199028-501
a Plan name	LU S POOL AND SPA MCF BENEFIT PLAN		
b Name of plan sponsor	LU S POOL AND SPA	**c** EIN-PN	20-4416235-501
a Plan name	LUCAS VETERINARY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LUCAS VETERINARY LLC	**c** EIN-PN	82-4259851-501
a Plan name	LUCKY LEONG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LUCKY LEONG LLC	**c** EIN-PN	43-1374049-501
a Plan name	LUEBBERING INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LUEBBERING INSURANCE AGENCY LLC	**c** EIN-PN	43-1849676-501
a Plan name	LUECKES HAULING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	LUECKES HAULING, INC.	**c** EIN-PN	43-1433603-501
a Plan name	LUKE REHBEIN FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	LUKE REHBEIN FARMS	**c** EIN-PN	30-0550827-501

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

a Plan name	LUNDBERG FARM SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	LUNDBERG FARM SERVICE INC	**c** EIN-PN	47-5601968-501
a Plan name	LUTESVILLE MOTOR COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	LUTESVILLE MOTOR COMPANY	**c** EIN-PN	43-0763256-501
a Plan name	LUTZS FAMOUS BBQ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LUTZS FAMOUS BBQ LLC	**c** EIN-PN	90-0542395-501
a Plan name	LYNCH EQUIPMENT CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	LYNCH EQUIPMENT CO LLC	**c** EIN-PN	26-1396839-501
a Plan name	M & A PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	M & A PRODUCTS	**c** EIN-PN	30-0914347-501
a Plan name	M AND O CONCRETE INC MCF BENEFIT PLAN		
b Name of plan sponsor	M AND O CONCRETE INC	**c** EIN-PN	43-1671423-501
a Plan name	M D HICKMAN AUTO AND TIRE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	M D HICKMAN AUTO AND TIRE LLC	**c** EIN-PN	80-0506933-501
a Plan name	M D PLASTICS INC MCF BENEFIT PLAN		
b Name of plan sponsor	M D PLASTICS INC	**c** EIN-PN	36-4357195-501
a Plan name	M EHRLICH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	M EHRLICH LLC	**c** EIN-PN	46-5403890-501
a Plan name	M L WORKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	M L WORKS LLC	**c** EIN-PN	88-1628452-501
a Plan name	M S TRANSPORT MCF BENEFIT PLAN		
b Name of plan sponsor	M S TRANSPORT	**c** EIN-PN	81-4692864-501
a Plan name	M TURPIN SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	M TURPIN SERVICES LLC	**c** EIN-PN	81-1579536-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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&K RAIL CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	M&K RAIL CONSTRUCTION	**c** EIN-PN	88-3318549-501
a Plan name	M&R GOLDINGER FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	M&R GOLDINGER FARMS LLC	**c** EIN-PN	88-4096699-501
a Plan name	M. HAKIMI JEWELRY MCF BENEFIT PLAN		
b Name of plan sponsor	M. HAKIMI JEWELRY	**c** EIN-PN	43-1806979-501
a Plan name	M.J. PRODUCTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	M.J. PRODUCTS, INC	**c** EIN-PN	43-1661872-501
a Plan name	M1 BANCSHARES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	M1 BANCSHARES INC.	**c** EIN-PN	82-1788822-501
a Plan name	MACCO BUILDERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MACCO BUILDERS LLC	**c** EIN-PN	86-1495135-501
a Plan name	MACH 1 AUDIO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MACH 1 AUDIO LLC	**c** EIN-PN	46-0561756-501
a Plan name	MACHINE TECHNOLOGIES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MACHINE TECHNOLOGIES INC.	**c** EIN-PN	43-1605794-501
a Plan name	MACS COVE DOCKS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MACS COVE DOCKS, LLC	**c** EIN-PN	46-3115449-501
a Plan name	MAD AUTO WRECKING MCF BENEFIT PLAN		
b Name of plan sponsor	MAD AUTO WRECKING	**c** EIN-PN	43-1190355-501
a Plan name	MADIGAN WEALTH MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	MADIGAN WEALTH MANAGEMENT	**c** EIN-PN	88-3442315-501
a Plan name	MAGGIES LUNCHBOX INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAGGIES LUNCHBOX INC	**c** EIN-PN	26-3488287-501

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

a Plan name	MAGNATE TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAGNATE TRUCKING LLC	**c** EIN-PN	47-3547428-501
a Plan name	MAGOULAS ENTERPRISES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAGOULAS ENTERPRISES, INC	**c** EIN-PN	20-3942776-501
a Plan name	MAGRUDER CONSTRUCTION COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAGRUDER CONSTRUCTION COMPANY INC	**c** EIN-PN	43-0951185-502
a Plan name	MAGRUDER CONSTRUCTION COMPANY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAGRUDER CONSTRUCTION COMPANY, INC	**c** EIN-PN	43-0951185-501
a Plan name	MAHER AND COMPANY PC MCF BENEFIT PLAN		
b Name of plan sponsor	MAHER AND COMPANY PC	**c** EIN-PN	43-1857127-501
a Plan name	MAID2CLEAN SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAID2CLEAN SERVICES LLC	**c** EIN-PN	81-2073293-501
a Plan name	MAIN STREET LANES MCF BENEFIT PLAN		
b Name of plan sponsor	MAIN STREET LANES	**c** EIN-PN	83-4168305-501
a Plan name	MAIRS LIVESTOCK CO LP MCF BENEFIT PLAN		
b Name of plan sponsor	MAIRS LIVESTOCK CO LP	**c** EIN-PN	84-2890860-501
a Plan name	MAJESTIC DENTAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAJESTIC DENTAL, LLC	**c** EIN-PN	93-4482157-501
a Plan name	MAJESTIC MAIDS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAJESTIC MAIDS INC	**c** EIN-PN	43-1644337-501
a Plan name	MAMA TS MCF BENEFIT PLAN		
b Name of plan sponsor	MAMA TS	**c** EIN-PN	26-2104040-501
a Plan name	MANDA VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MANDA VENTURES LLC	**c** EIN-PN	26-0669773-501

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

a Plan name	MANEKA CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	MANEKA CORPORATION	**c** EIN-PN	43-1593627-501
a Plan name	MANGROVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MANGROVE LLC	**c** EIN-PN	43-1882922-501
a Plan name	MANN MEATS MCF BENEFIT PLAN		
b Name of plan sponsor	MANN MEATS	**c** EIN-PN	82-3750246-501
a Plan name	MANN WALTERS BISHOP AND SHERMAN PC MCF BENEFIT PLAN		
b Name of plan sponsor	MANN WALTERS BISHOP AND SHERMAN PC	**c** EIN-PN	43-1835899-501
a Plan name	MANNCO INC MCF BENEFIT PLAN		
b Name of plan sponsor	MANNCO INC	**c** EIN-PN	22-3860750-501
a Plan name	MANOR METAL ROOFS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MANOR METAL ROOFS LLC	**c** EIN-PN	20-5392869-501
a Plan name	MANUEL J MENENDEZ DDS MCF BENEFIT PLAN		
b Name of plan sponsor	MANUEL J MENENDEZ DDS	**c** EIN-PN	43-1727749-501
a Plan name	MAPLE VALLEY OFFICE BUILDING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAPLE VALLEY OFFICE BUILDING, LLC	**c** EIN-PN	90-0039742-501
a Plan name	MAPLEWOOD ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAPLEWOOD ENTERPRISES LLC	**c** EIN-PN	27-3470428-501
a Plan name	MARC D BRAUN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARC D BRAUN LLC	**c** EIN-PN	87-1730841-501
a Plan name	MARC ZUPAN AGENCY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARC ZUPAN AGENCY, LLC	**c** EIN-PN	92-1064618-501
a Plan name	MARCO CONSTRUCTION PRODUCTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARCO CONSTRUCTION PRODUCTS LLC	**c** EIN-PN	27-1285464-501

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

a Plan name	MARCUS PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	MARCUS PRODUCTS	**c** EIN-PN	76-0576801-502
a Plan name	MARELLY LEASING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARELLY LEASING LLC	**c** EIN-PN	81-0589077-501
a Plan name	MARETH ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARETH ENTERPRISES LLC	**c** EIN-PN	43-2054472-501
a Plan name	MARICK CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARICK CONTRACTING LLC	**c** EIN-PN	83-1940583-501
a Plan name	MARIE SHERMAN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARIE SHERMAN LLC	**c** EIN-PN	81-2486941-501
a Plan name	MARITZ INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARITZ INVESTMENTS LLC	**c** EIN-PN	26-2402603-501
a Plan name	MARK S. PETERSON MCF BENEFIT PLAN		
b Name of plan sponsor	MARK S. PETERSON	**c** EIN-PN	43-1565903-501
a Plan name	MARKETDESK RESEARCH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARKETDESK RESEARCH LLC	**c** EIN-PN	84-2707704-501
a Plan name	MARKETPLACE INNOVATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARKETPLACE INNOVATIONS LLC	**c** EIN-PN	71-0925618-501
a Plan name	MARLERS TOWING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARLERS TOWING LLC	**c** EIN-PN	92-3348165-501
a Plan name	MARLIN INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	MARLIN INVESTMENTS	**c** EIN-PN	02-0565104-501
a Plan name	MARQUARDT TRUCKING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MARQUARDT TRUCKING, INC	**c** EIN-PN	27-4269175-501

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

a Plan name	MARSHFIELD FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	MARSHFIELD FIRE PROTECTION DISTRICT	**c** EIN-PN	27-3617571-501
a Plan name	MARSHFIELD MOTORS MCF BENEFIT PLAN		
b Name of plan sponsor	MARSHFIELD MOTORS	**c** EIN-PN	43-0913647-501
a Plan name	MARTELLARO MARBLE & GRANITE MCF BENEFIT PLAN		
b Name of plan sponsor	MARTELLARO MARBLE & GRANITE	**c** EIN-PN	41-2073332-501
a Plan name	MARTI ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARTI ENTERPRISES LLC	**c** EIN-PN	46-4573124-501
a Plan name	MARTIN PHARMACY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARTIN PHARMACY SERVICES LLC	**c** EIN-PN	86-2043249-501
a Plan name	MARTIN TAX & FINANCIAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	MARTIN TAX & FINANCIAL SERVICES	**c** EIN-PN	43-1561623-501
a Plan name	MARTIN VETERINARY SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARTIN VETERINARY SERVICES, LLC	**c** EIN-PN	47-4077807-501
a Plan name	MARY ENGELBREIT RETAIL INC MCF BENEFIT PLAN		
b Name of plan sponsor	MARY ENGELBREIT RETAIL INC	**c** EIN-PN	43-1419424-501
a Plan name	MARY K DAVIS DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MARY K DAVIS DDS LLC	**c** EIN-PN	88-1887151-501
a Plan name	MARY R WOLFF REAL ESTATE MANAGEMENT CO MCF BENEFIT PLAN		
b Name of plan sponsor	MARY R WOLFF REAL ESTATE MANAGEMENT CO	**c** EIN-PN	43-0635739-501
a Plan name	MARY R. SCOTT CPA MCF BENEFIT PLAN		
b Name of plan sponsor	MARY R. SCOTT CPA	**c** EIN-PN	26-2104147-501
a Plan name	MARY SIEBERT INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	MARY SIEBERT INSURANCE AGENCY	**c** EIN-PN	46-3148266-501

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

a Plan name	MARYELLENS GARDEN GATE FLOWERS MCF BENEFIT PLAN		
b Name of plan sponsor	MARYELLENS GARDEN GATE FLOWERS	**c** EIN-PN	85-3480788-501
a Plan name	MARYVILLE VET CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	MARYVILLE VET CLINIC	**c** EIN-PN	46-1654007-501
a Plan name	MARZUCO ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	MARZUCO ELECTRIC INC	**c** EIN-PN	43-1395628-501
a Plan name	MASCOT JUNCTION, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MASCOT JUNCTION, INC.	**c** EIN-PN	43-1910089-501
a Plan name	MASONMADE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MASONMADE, LLC	**c** EIN-PN	32-0503080-501
a Plan name	MASS DEPOT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MASS DEPOT LLC	**c** EIN-PN	81-1900674-501
a Plan name	MASSEY TUCKPOINTING & MASONRY MCF BENEFIT PLAN		
b Name of plan sponsor	MASSEY TUCKPOINTING & MASONRY	**c** EIN-PN	20-4161710-501
a Plan name	MASSIE & JOHNSTON GENERAL SERVICES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MASSIE & JOHNSTON GENERAL SERVICES INC.	**c** EIN-PN	83-0535414-501
a Plan name	MAST AUTOMOTIVE, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAST AUTOMOTIVE, INC	**c** EIN-PN	82-2784800-501
a Plan name	MASTER TECH AUTO GLASS MCF BENEFIT PLAN		
b Name of plan sponsor	MASTER TECH AUTO GLASS	**c** EIN-PN	88-2232275-501
a Plan name	MASTERCUT TOOL & DIE INC MCF BENEFIT PLAN		
b Name of plan sponsor	MASTERCUT TOOL & DIE INC	**c** EIN-PN	43-1568743-503
a Plan name	MASTERPIECE HANDYMAN SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	MASTERPIECE HANDYMAN SOLUTIONS	**c** EIN-PN	87-3557914-501

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

a Plan name	MASTERTECH MCF BENEFIT PLAN		
b Name of plan sponsor	MASTERTECH	**c** EIN-PN	43-1870150-501
a Plan name	MATCHBOX DESIGN GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MATCHBOX DESIGN GROUP LLC	**c** EIN-PN	20-5593994-501
a Plan name	MATHIS FUNERAL HOME INC MCF BENEFIT PLAN		
b Name of plan sponsor	MATHIS FUNERAL HOME INC	**c** EIN-PN	43-1698968-501
a Plan name	MATKEL MCF BENEFIT PLAN		
b Name of plan sponsor	MATKEL	**c** EIN-PN	27-3827172-501
a Plan name	MATT HOCKER AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	MATT HOCKER AGENCY INC	**c** EIN-PN	26-3185913-501
a Plan name	MATT RADEMAN COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MATT RADEMAN COMPANY LLC	**c** EIN-PN	06-1703248-501
a Plan name	MATT STROUD EXCAVATING & HAULING MCF BENEFIT PLAN		
b Name of plan sponsor	MATT STROUD EXCAVATING & HAULING	**c** EIN-PN	27-1770006-501
a Plan name	MATTRESS DOGZZZ MCF BENEFIT PLAN		
b Name of plan sponsor	MATTRESS DOGZZZ	**c** EIN-PN	93-4673447-501
a Plan name	MAULSBY ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	MAULSBY ENTERPRISES INC	**c** EIN-PN	84-3979861-501
a Plan name	MAXIMUM CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAXIMUM CONTRACTING LLC	**c** EIN-PN	99-1029954-501
a Plan name	MAYFAIR HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MAYFAIR HOLDINGS LLC	**c** EIN-PN	85-3995994-501
a Plan name	MB HEALTH INSURANCE CONSULTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MB HEALTH INSURANCE CONSULTING, LLC	**c** EIN-PN	46-1585123-501

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

a Plan name	MB STEEL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MB STEEL COMPANY	**c** EIN-PN	43-1890232-501
a Plan name	MBF PRINTGROUP MCF BENEFIT PLAN		
b Name of plan sponsor	MBF PRINTGROUP	**c** EIN-PN	81-4925042-501
a Plan name	MBF PRINTGROUP CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	MBF PRINTGROUP CONSULTANTS	**c** EIN-PN	83-2504787-501
a Plan name	MBFI LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MBFI LLC	**c** EIN-PN	32-0568529-501
a Plan name	MCADOO ART SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	MCADOO ART SERVICES	**c** EIN-PN	99-5021950-501
a Plan name	MCAVOY REALTY MCF BENEFIT PLAN		
b Name of plan sponsor	MCAVOY REALTY	**c** EIN-PN	43-1399526-501
a Plan name	MCBRIDE LOCK & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCBRIDE LOCK & ASSOCIATES LLC	**c** EIN-PN	43-1403519-501
a Plan name	MCCALL FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	MCCALL FAMILY DENTISTRY	**c** EIN-PN	26-4586336-501
a Plan name	MCCARTHY WELL DRILLING MCF BENEFIT PLAN		
b Name of plan sponsor	MCCARTHY WELL DRILLING	**c** EIN-PN	30-0051607-501
a Plan name	MCCARTNEY PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCCARTNEY PLUMBING LLC	**c** EIN-PN	26-1716391-501
a Plan name	MCCARTNEY WEALTH MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCCARTNEY WEALTH MANAGEMENT LLC	**c** EIN-PN	27-3167381-501
a Plan name	MCCLAIN & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	MCCLAIN & ASSOCIATES	**c** EIN-PN	43-1701832-501

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

a Plan name	MCCORD DESIGN GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	MCCORD DESIGN GROUP	**c** EIN-PN	43-1710650-501
a Plan name	MCCOYS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MCCOYS, INC.	**c** EIN-PN	43-1807235-501
a Plan name	MCCRACKEN FINANCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCCRACKEN FINANCIAL LLC	**c** EIN-PN	27-1402641-501
a Plan name	MCCULLOUGH & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCCULLOUGH & ASSOCIATES, LLC	**c** EIN-PN	20-8626018-501
a Plan name	MCDC DEVELOPERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCDC DEVELOPERS LLC	**c** EIN-PN	93-4949278-501
a Plan name	MCDOWELL ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	MCDOWELL ELECTRIC INC	**c** EIN-PN	20-0240146-501
a Plan name	MCGREGOR MANUFACTURING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCGREGOR MANUFACTURING LLC	**c** EIN-PN	65-1254736-501
a Plan name	MCINTOSH TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCINTOSH TRUCKING LLC	**c** EIN-PN	47-2616582-501
a Plan name	MCKELVEY PROPERTIES MCF BENEFIT PLAN		
b Name of plan sponsor	MCKELVEY PROPERTIES	**c** EIN-PN	43-1760021-501
a Plan name	MCKEOWN FARM & LAWN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCKEOWN FARM & LAWN LLC	**c** EIN-PN	85-2513198-501
a Plan name	MCLAUGHLIN HOLDINGS LP MCF BENEFIT PLAN		
b Name of plan sponsor	MCLAUGHLIN HOLDINGS LP	**c** EIN-PN	87-3373956-501
a Plan name	MCMIKLE FUNERAL HOME INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MCMIKLE FUNERAL HOME INC.	**c** EIN-PN	43-0816641-501

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

a Plan name	MCQUADE ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MCQUADE ENTERPRISES LLC	**c** EIN-PN	45-2424202-501
a Plan name	MCS WEALTH MANAGEMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	MCS WEALTH MANAGEMENT INC	**c** EIN-PN	20-8220757-501
a Plan name	MD CLEMENT CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MD CLEMENT CONSTRUCTION, LLC	**c** EIN-PN	84-5028821-501
a Plan name	MD TRANS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MD TRANS, LLC	**c** EIN-PN	61-1939651-501
a Plan name	MD1991 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MD1991 LLC	**c** EIN-PN	93-2379078-501
a Plan name	MEALMAN'S PRECISION AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	MEALMANS PRECISION AUTOMOTIVE	**c** EIN-PN	86-3552648-501
a Plan name	MEDICAL EYECARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEDICAL EYECARE, LLC	**c** EIN-PN	83-1566626-501
a Plan name	MEDICAL WEST PODIATRY LTD MCF BENEFIT PLAN		
b Name of plan sponsor	MEDICAL WEST PODIATRY LTD	**c** EIN-PN	43-1172790-501
a Plan name	MEDIQUIP PARTS PLUS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MEDIQUIP PARTS PLUS, INC	**c** EIN-PN	43-1863247-501
a Plan name	MEDS & FOOD FOR KIDS MCF BENEFIT PLAN		
b Name of plan sponsor	MEDS & FOOD FOR KIDS	**c** EIN-PN	20-1257910-501
a Plan name	MEDSOURCE STL MCF BENEFIT PLAN		
b Name of plan sponsor	MEDSOURCE STL	**c** EIN-PN	43-1710381-501
a Plan name	MED-STAFF HOME HEALTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MED-STAFF HOME HEALTH LLC	**c** EIN-PN	84-1617544-501

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

a Plan name	MEDWIN PRIMARY CARE MCF BENEFIT PLAN		
b Name of plan sponsor	MEDWIN PRIMARY CARE	**c** EIN-PN	20-0830071-501
a Plan name	MEGA MOTORSPORTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEGA MOTORSPORTS LLC	**c** EIN-PN	27-1118063-501
a Plan name	MEGAPRO CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	MEGAPRO CORPORATION	**c** EIN-PN	83-1488215-501
a Plan name	MEINECKE BENEFITS GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEINECKE BENEFITS GROUP, LLC	**c** EIN-PN	81-0923535-501
a Plan name	MELIES HVAC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MELIES HVAC LLC	**c** EIN-PN	81-2771163-501
a Plan name	MELTONS AUTO BODY MCF BENEFIT PLAN		
b Name of plan sponsor	MELTONS AUTO BODY	**c** EIN-PN	43-1893277-501
a Plan name	MELVIN BREWING EUREKA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MELVIN BREWING EUREKA, LLC	**c** EIN-PN	82-5246987-501
a Plan name	MEMBERS 1ST CREDIT UNION MCF BENEFIT PLAN		
b Name of plan sponsor	MEMBERS 1ST CREDIT UNION	**c** EIN-PN	43-6032141-501
a Plan name	MENNE HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	MENNE HEATING AND COOLING	**c** EIN-PN	43-1432345-501
a Plan name	MENNE TOOL AND DIE LC MCF BENEFIT PLAN		
b Name of plan sponsor	MENNE TOOL AND DIE LC	**c** EIN-PN	16-1645277-501
a Plan name	MENYA RUI MCF BENEFIT PLAN		
b Name of plan sponsor	MENYA RUI	**c** EIN-PN	83-3945346-501
a Plan name	MERA EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MERA EXCAVATING LLC	**c** EIN-PN	26-4283730-502

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	MERESAK LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MERESAK LAW LLC	**c** EIN-PN	46-1913022-501
a Plan name	MERIT ELECTRICAL COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MERIT ELECTRICAL COMPANY	**c** EIN-PN	99-3000299-501
a Plan name	MERLE SCHNELLE FARM MCF BENEFIT PLAN		
b Name of plan sponsor	MERLE SCHNELLE FARM	**c** EIN-PN	14-1924001-501
a Plan name	MERRETT STAIRLIFTS MCF BENEFIT PLAN		
b Name of plan sponsor	MERRETT STAIRLIFTS	**c** EIN-PN	57-0578296-501
a Plan name	MERRICK UNDERGROUND CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MERRICK UNDERGROUND CONSTRUCTION LLC	**c** EIN-PN	47-4581689-502
a Plan name	MERTZ AUTO BODY INC MCF BENEFIT PLAN		
b Name of plan sponsor	MERTZ AUTO BODY INC	**c** EIN-PN	27-0427003-501
a Plan name	MESNER PUPPET THEATER MCF BENEFIT PLAN		
b Name of plan sponsor	MESNER PUPPET THEATER	**c** EIN-PN	43-1458119-501
a Plan name	MESSIAH LOCOMOTIVE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	MESSIAH LOCOMOTIVE SERVICE	**c** EIN-PN	47-1216988-501
a Plan name	METAL FLEX INC MCF BENEFIT PLAN		
b Name of plan sponsor	METAL FLEX INC	**c** EIN-PN	43-0787227-501
a Plan name	METRO HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	METRO HEATING & COOLING	**c** EIN-PN	43-1411489-501
a Plan name	METRO MEDSPA MCF BENEFIT PLAN		
b Name of plan sponsor	METRO MEDSPA	**c** EIN-PN	82-3095644-501
a Plan name	METRON SURVEYING & LAYOUT CO MCF BENEFIT PLAN		
b Name of plan sponsor	METRON SURVEYING & LAYOUT CO	**c** EIN-PN	46-1689023-501

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

a Plan name	METROPOLITAN AMATEUR GOLF ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	METROPOLITAN AMATEUR GOLF ASSOCIATION	**c** EIN-PN	43-1631448-501
a Plan name	METROSPECT MEDIA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	METROSPECT MEDIA LLC	**c** EIN-PN	82-2027424-501
a Plan name	METROVET ST. LOUIS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	METROVET ST. LOUIS LLC	**c** EIN-PN	38-4176679-501
a Plan name	MEYER & ORF LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEYER & ORF LLC	**c** EIN-PN	20-8745331-501
a Plan name	MEYER CONTRACTING AND HAULING MCF BENEFIT PLAN		
b Name of plan sponsor	MEYER CONTRACTING AND HAULING	**c** EIN-PN	84-4632035-501
a Plan name	MEYER LANDSCAPE & LAWN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEYER LANDSCAPE & LAWN LLC	**c** EIN-PN	82-3286696-501
a Plan name	MEYER TITLE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MEYER TITLE COMPANY	**c** EIN-PN	43-1018728-501
a Plan name	MEYERKORD LAW GROUP LC MCF BENEFIT PLAN		
b Name of plan sponsor	MEYERKORD LAW GROUP LC	**c** EIN-PN	83-4355000-501
a Plan name	MEYERS TRUCK SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MEYERS TRUCK SERVICE LLC	**c** EIN-PN	43-1937911-501
a Plan name	MFA COOPERATIVE ASSOCIATION NO. 2 MCF BENEFIT PLAN		
b Name of plan sponsor	MFA COOPERATIVE ASSOCIATION NO. 2	**c** EIN-PN	43-0220840-501
a Plan name	MFP EMPLOYEE BENEFITS & HR SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MFP EMPLOYEE BENEFITS & HR SERVICES LLC	**c** EIN-PN	43-1934473-501
a Plan name	MGM & COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MGM & COMPANY	**c** EIN-PN	80-0354870-501

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

a Plan name	MHB ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MHB ENTERPRISES, LLC	**c** EIN-PN	83-1502177-501
a Plan name	MHI-LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MHI-LLC	**c** EIN-PN	39-2029447-501
a Plan name	MICHAEL MURPHY MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL MURPHY	**c** EIN-PN	45-0483446-501
a Plan name	MICHAEL P. TRAVIS DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL P. TRAVIS DDS LLC	**c** EIN-PN	45-2638254-501
a Plan name	MICHAEL SCHOENWALDER DO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL SCHOENWALDER DO, LLC	**c** EIN-PN	46-1419275-501
a Plan name	MICHAEL T BASNETT DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAEL T BASNETT DDS PC	**c** EIN-PN	81-0823499-501
a Plan name	MICHAEL'S MESSENGERS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MICHAELS MESSENGERS INC.	**c** EIN-PN	27-4299600-501
a Plan name	MICHELLE ANGLIN HEISSERER INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	MICHELLE ANGLIN HEISSERER INSURANCE AGENCY INC	**c** EIN-PN	82-2768720-501
a Plan name	MID AMERICA ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	MID AMERICA ELECTRIC INC	**c** EIN-PN	43-1865881-501
a Plan name	MID AMERICA FIRE APPARATUS MCF BENEFIT PLAN		
b Name of plan sponsor	MID AMERICA FIRE APPARATUS	**c** EIN-PN	20-0337587-501
a Plan name	MID AMERICA ORTHOPEDIC AND SPINE MCF BENEFIT PLAN		
b Name of plan sponsor	MID AMERICA ORTHOPEDIC AND SPINE	**c** EIN-PN	43-1783794-501
a Plan name	MID AMERICA WHEEL MCF BENEFIT PLAN		
b Name of plan sponsor	MID AMERICA WHEEL	**c** EIN-PN	80-0078572-501

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

a Plan name	MID MISSOURI CONCRETE CONTRACTORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MID MISSOURI CONCRETE CONTRACTORS LLC	**c** EIN-PN	81-5317246-501
a Plan name	MID MISSOURI REGIONAL PLANNING COMMISSION MCF BENEFIT PLAN		
b Name of plan sponsor	MID MISSOURI REGIONAL PLANNING COMMISSION	**c** EIN-PN	43-1860695-501
a Plan name	MID MO TELECOM AND SECURITY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MID MO TELECOM AND SECURITY LLC	**c** EIN-PN	81-1071270-501
a Plan name	MID STATES WOOD PRODUCTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MID STATES WOOD PRODUCTS LLC	**c** EIN-PN	85-1050660-501
a Plan name	MID-AMERICA LABS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MID-AMERICA LABS INC	**c** EIN-PN	43-1941289-501
a Plan name	MID-AMERICA LAW PRACTICE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MID-AMERICA LAW PRACTICE, LLC	**c** EIN-PN	46-1174945-501
a Plan name	MID-AMERICA PSYCHIATRIC CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	MID-AMERICA PSYCHIATRIC CONSULTANTS	**c** EIN-PN	43-1905678-501
a Plan name	MID-AMERICA TESTING LABORATORY MCF BENEFIT PLAN		
b Name of plan sponsor	MID-AMERICA TESTING LABORATORY	**c** EIN-PN	43-1260778-501
a Plan name	MIDCO GLOBAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDCO GLOBAL INC	**c** EIN-PN	43-0731143-501
a Plan name	MIDLAND TECH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDLAND TECH, LLC	**c** EIN-PN	38-4024199-501
a Plan name	MID-MISSOURI ANESTHESIA CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	MID-MISSOURI ANESTHESIA CONSULTANTS	**c** EIN-PN	43-1383899-501
a Plan name	MID-MISSOURI NEUROSURGERY, LLP MCF BENEFIT PLAN		
b Name of plan sponsor	MID-MISSOURI NEUROSURGERY, LLP	**c** EIN-PN	46-0552280-501

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

a Plan name	MIDSOUTHS CLEANING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDSOUTHS CLEANING LLC	**c** EIN-PN	83-2451029-501
a Plan name	MIDSTATE COMMUNICATION CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	MIDSTATE COMMUNICATION CONTRACTORS	**c** EIN-PN	43-1819112-501
a Plan name	MIDTOWN NEIGHBORHOOD OPPORTUNITIES CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	MIDTOWN NEIGHBORHOOD OPPORTUNITIES CORPORATION	**c** EIN-PN	81-2818972-501
a Plan name	MIDWEST AGRICULTURE SUPPLY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST AGRICULTURE SUPPLY, LLC	**c** EIN-PN	82-5312016-501
a Plan name	MIDWEST BIN BUILDERS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST BIN BUILDERS, INC.	**c** EIN-PN	46-1766273-501
a Plan name	MIDWEST BOATING CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST BOATING CENTER	**c** EIN-PN	81-1425783-501
a Plan name	MIDWEST CABLE SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST CABLE SERVICES, LLC	**c** EIN-PN	83-2255417-501
a Plan name	MIDWEST CMM SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST CMM SERVICES	**c** EIN-PN	43-1627017-501
a Plan name	MIDWEST DRAINLAYERS MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST DRAINLAYERS	**c** EIN-PN	45-3036699-501
a Plan name	MIDWEST ENVIRONMENTAL CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST ENVIRONMENTAL CONSULTANTS	**c** EIN-PN	43-1879600-501
a Plan name	MIDWEST FINANCIAL NETWORKS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST FINANCIAL NETWORKS LLC	**c** EIN-PN	46-5245088-501
a Plan name	MIDWEST INFRASTRUCTURE SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST INFRASTRUCTURE SERVICES INC	**c** EIN-PN	45-0510840-501

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

a Plan name	MIDWEST MATERIAL RECOVERY MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST MATERIAL RECOVERY	**c** EIN-PN	27-4096909-501
a Plan name	MIDWEST NOBEL HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST NOBEL HOLDINGS LLC	**c** EIN-PN	93-2161218-501
a Plan name	MIDWEST PROPERTY RESOURCES MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST PROPERTY RESOURCES	**c** EIN-PN	45-5516549-501
a Plan name	MIDWEST SLEEP DIAGNOSTICS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST SLEEP DIAGNOSTICS INC	**c** EIN-PN	43-1684267-501
a Plan name	MIDWEST SPEED SHOP & FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST SPEED SHOP & FABRICATION	**c** EIN-PN	88-0912106-501
a Plan name	MIDWEST TRAFFIC SIGNAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST TRAFFIC SIGNAL SERVICES LLC	**c** EIN-PN	92-1314359-501
a Plan name	MIDWEST TURF CONTRACTORS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWEST TURF CONTRACTORS, INC.	**c** EIN-PN	43-1227281-501
a Plan name	MIDWESTERN ENERGY CONSULTANTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWESTERN ENERGY CONSULTANTS, INC	**c** EIN-PN	43-1674981-501
a Plan name	MIDWESTERN SAFETY EQUIPMENT CO MCF BENEFIT PLAN		
b Name of plan sponsor	MIDWESTERN SAFETY EQUIPMENT CO	**c** EIN-PN	43-1507338-501
a Plan name	MIGHTY KIND COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MIGHTY KIND COMPANY	**c** EIN-PN	92-2418484-501
a Plan name	MIKE & MEL ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIKE & MEL ENTERPRISES LLC	**c** EIN-PN	81-3426657-501
a Plan name	MIKE HAIGHT INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	MIKE HAIGHT INSURANCE AGENCY	**c** EIN-PN	20-4857441-501

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

a Plan name	MIKE TERRY ENTERPRISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIKE TERRY ENTERPRISE LLC	**c** EIN-PN	01-0606181-501
a Plan name	MIKES ELECTRICAL CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIKES ELECTRICAL CONTRACTING, LLC	**c** EIN-PN	45-2719618-501
a Plan name	MILA SAMSONOV CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MILA SAMSONOV CPA LLC	**c** EIN-PN	27-1653892-501
a Plan name	MILES CPA & ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MILES CPA & ASSOCIATES LLC	**c** EIN-PN	87-3173174-501
a Plan name	MILLENNIUM BROKERS MCF BENEFIT PLAN		
b Name of plan sponsor	MILLENNIUM BROKERS	**c** EIN-PN	87-1088410-501
a Plan name	MILLENNIUM SLEEP LAB LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MILLENNIUM SLEEP LAB LLC	**c** EIN-PN	26-0286269-501
a Plan name	MILLER ADKINS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MILLER ADKINS, LLC	**c** EIN-PN	47-1160158-501
a Plan name	MILLER AUTO REPAIR SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	MILLER AUTO REPAIR SERVICE INC	**c** EIN-PN	43-1244268-501
a Plan name	MILLER REXALL DRUG INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MILLER REXALL DRUG INC.	**c** EIN-PN	26-3572147-501
a Plan name	MILLER-BLEVINS EXCAVATING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MILLER-BLEVINS EXCAVATING, INC.	**c** EIN-PN	43-1469162-501
a Plan name	MILLWOOD CO ROOFING & CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MILLWOOD CO ROOFING & CONSTRUCTION LLC	**c** EIN-PN	93-3438576-501
a Plan name	MILLWORK SPECIALISTS MIDWEST INC MCF BENEFIT PLAN		
b Name of plan sponsor	MILLWORK SPECIALISTS MIDWEST INC	**c** EIN-PN	20-0773936-501

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

a Plan name	MILTON LAW GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	MILTON LAW GROUP	**c** EIN-PN	82-2696934-501
a Plan name	MINDPRIZM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MINDPRIZM LLC	**c** EIN-PN	82-2993129-501
a Plan name	MINERAL AREA EXCAVATING MCF BENEFIT PLAN		
b Name of plan sponsor	MINERAL AREA EXCAVATING	**c** EIN-PN	87-3755172-501
a Plan name	MING SENIOR SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MING SENIOR SERVICES LLC	**c** EIN-PN	26-2506342-501
a Plan name	MIO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MIO, LLC	**c** EIN-PN	27-1443007-501
a Plan name	MISSION TEN 10, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSION TEN 10, LLC	**c** EIN-PN	99-4364712-501
a Plan name	MISSOURI BOOTHEEL REGIONAL CONSORTIUM MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI BOOTHEEL REGIONAL CONSORTIUM	**c** EIN-PN	83-0361354-501
a Plan name	MISSOURI CATALYTIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI CATALYTIC LLC	**c** EIN-PN	86-3175504-501
a Plan name	MISSOURI COALITION FOR THE ENVIRONMENT MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI COALITION FOR THE ENVIRONMENT	**c** EIN-PN	23-7167066-501
a Plan name	MISSOURI CONNECTIONS FOR HEALTH MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI CONNECTIONS FOR HEALTH	**c** EIN-PN	43-1929874-501
a Plan name	MISSOURI CORN MERCHANDISING COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI CORN MERCHANDISING COUNCIL	**c** EIN-PN	43-1359257-501
a Plan name	MISSOURI CREDENTIALLING BOARD MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI CREDENTIALLING BOARD	**c** EIN-PN	43-1251428-501

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

a Plan name	MISSOURI DENTAL ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI DENTAL ASSOCIATION	**c** EIN-PN	44-0535233-501
a Plan name	MISSOURI DEVELOPMENT FINANCE BOARD MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI DEVELOPMENT FINANCE BOARD	**c** EIN-PN	43-1387649-501
a Plan name	MISSOURI GARAGE COMPANY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI GARAGE COMPANY, LLC	**c** EIN-PN	86-1719363-501
a Plan name	MISSOURI GOLF ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI GOLF ASSOCIATION	**c** EIN-PN	43-1506782-501
a Plan name	MISSOURI HEALTH CARE ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI HEALTH CARE ASSOCIATION	**c** EIN-PN	43-0837506-501
a Plan name	MISSOURI HOUSING SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI HOUSING SOLUTIONS LLC	**c** EIN-PN	46-0804957-501
a Plan name	MISSOURI INTERGOVERNMENTAL RISK MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI INTERGOVERNMENTAL RISK MANAGEMENT	**c** EIN-PN	43-1232810-501
a Plan name	MISSOURI KIDSFIRST MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI KIDSFIRST	**c** EIN-PN	27-0124899-501
a Plan name	MISSOURI PAIN MANAGEMENT SPECIALISTS MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI PAIN MANAGEMENT SPECIALISTS	**c** EIN-PN	84-3697658-501
a Plan name	MISSOURI PAIN TREATMENT CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI PAIN TREATMENT CENTER	**c** EIN-PN	45-3121420-501
a Plan name	MISSOURI PRESS SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI PRESS SERVICE INC	**c** EIN-PN	43-0722610-501
a Plan name	MISSOURI RIGHT TO LIFE MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI RIGHT TO LIFE	**c** EIN-PN	43-1016800-501

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

a Plan name	MISSOURI RUNNING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI RUNNING COMPANY	**c** EIN-PN	45-5243998-501
a Plan name	MISSOURI SOUTHERN SEED CORP MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI SOUTHERN SEED CORP	**c** EIN-PN	43-1270181-501
a Plan name	MISSOURI VALLEY CONF MCF BENEFIT PLAN		
b Name of plan sponsor	MISSOURI VALLEY CONF	**c** EIN-PN	44-0616265-501
a Plan name	MITCHEM TIRE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MITCHEM TIRE COMPANY	**c** EIN-PN	43-0991051-502
a Plan name	MITTS ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MITTS ELECTRIC LLC	**c** EIN-PN	45-3182129-501
a Plan name	MJTELE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MJTELE, LLC	**c** EIN-PN	26-2482510-501
a Plan name	MK PHILLIPS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MK PHILLIPS CONSTRUCTION LLC	**c** EIN-PN	82-0804132-501
a Plan name	MK URICH FARMS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MK URICH FARMS INC.	**c** EIN-PN	26-2123434-501
a Plan name	MKAY SUPPLY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MKAY SUPPLY LLC	**c** EIN-PN	46-5636983-501
a Plan name	MKC CONCRETE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MKC CONCRETE LLC	**c** EIN-PN	83-0824516-501
a Plan name	MKC HAULING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MKC HAULING LLC	**c** EIN-PN	84-4795374-501
a Plan name	ML SOCO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ML SOCO LLC	**c** EIN-PN	46-5602589-501

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

a Plan name	MLH RX LLC ELDON DRUG & GIFTS MCF BENEFIT PLAN		
b Name of plan sponsor	MLH RX LLC ELDON DRUG & GIFTS	**c** EIN-PN	46-3589067-501
a Plan name	MLPGA INC MCF BENEFIT PLAN		
b Name of plan sponsor	MLPGA INC	**c** EIN-PN	43-0990752-501
a Plan name	MMCT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MMCT, INC.	**c** EIN-PN	39-2072525-501
a Plan name	MMLH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MMLH, LLC	**c** EIN-PN	27-4813414-501
a Plan name	MMTC DEVELOPMENT GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MMTC DEVELOPMENT GROUP LLC	**c** EIN-PN	87-2187203-501
a Plan name	MNM THE NEXT GENERATION MCF BENEFIT PLAN		
b Name of plan sponsor	MNM THE NEXT GENERATION	**c** EIN-PN	43-1930303-501
a Plan name	MO ARK PLUMBING COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MO ARK PLUMBING COMPANY LLC	**c** EIN-PN	87-2068191-501
a Plan name	MO ASSOC OF OSTEOPATHIC MCF BENEFIT PLAN		
b Name of plan sponsor	MO ASSOC OF OSTEOPATHIC	**c** EIN-PN	44-0509350-501
a Plan name	MO TRAUMA CLEANING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MO TRAUMA CLEANING LLC	**c** EIN-PN	85-3225615-501
a Plan name	MOARK AGRICULTURAL RESEARCH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOARK AGRICULTURAL RESEARCH LLC	**c** EIN-PN	46-1572276-501
a Plan name	MO-ARK CONCRETE PUMPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MO-ARK CONCRETE PUMPING LLC	**c** EIN-PN	83-4486082-501
a Plan name	MOBILE OUTFITTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOBILE OUTFITTER LLC	**c** EIN-PN	43-1979659-501

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

a Plan name	MOCPA MCF BENEFIT PLAN		
b Name of plan sponsor	MOCPA	**c** EIN-PN	44-0561387-501
a Plan name	MODCOMM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MODCOMM LLC	**c** EIN-PN	92-1116481-501
a Plan name	MODERN AUTO PARTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MODERN AUTO PARTS, INC.	**c** EIN-PN	43-0620811-501
a Plan name	MODERN MASONRY AND RESTORATION, LC MCF BENEFIT PLAN		
b Name of plan sponsor	MODERN MASONRY AND RESTORATION, LC	**c** EIN-PN	26-1129041-501
a Plan name	MODERN SCREW PRODUCTS CO INC MCF BENEFIT PLAN		
b Name of plan sponsor	MODERN SCREW PRODUCTS CO INC	**c** EIN-PN	43-1053192-501
a Plan name	MODERN TURF LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MODERN TURF LLC	**c** EIN-PN	86-3934375-501
a Plan name	MOGENTECH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOGENTECH, LLC	**c** EIN-PN	81-2926286-501
a Plan name	MOHAWK ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOHAWK ELECTRIC LLC	**c** EIN-PN	45-4066214-501
a Plan name	MOHR ADVANTAGE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOHR ADVANTAGE, LLC	**c** EIN-PN	82-4712933-501
a Plan name	MOJO MEDICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOJO MEDICAL LLC	**c** EIN-PN	27-5274911-501
a Plan name	MO-KAN REGIONAL COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	MO-KAN REGIONAL COUNCIL	**c** EIN-PN	43-0908096-502
a Plan name	MOLL FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MOLL FARMS INC	**c** EIN-PN	43-1171919-501

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

a Plan name	MOMELLOW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOMELLOW LLC	**c** EIN-PN	46-5317932-501
a Plan name	MOMENTUM COACHING GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOMENTUM COACHING GROUP LLC	**c** EIN-PN	81-0687119-501
a Plan name	MONDAY TRAILER & EQUIPMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	MONDAY TRAILER & EQUIPMENT INC	**c** EIN-PN	43-1794830-501
a Plan name	MONETT VETERINARY HOSPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MONETT VETERINARY HOSPITAL LLC	**c** EIN-PN	83-1535351-501
a Plan name	MONITEAU COUNTY EMERGENCY DISPATCH MCF BENEFIT PLAN		
b Name of plan sponsor	MONITEAU COUNTY EMERGENCY DISPATCH	**c** EIN-PN	43-1693986-501
a Plan name	MONSON ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MONSON ENTERPRISES LLC	**c** EIN-PN	83-4128582-501
a Plan name	MONTEE CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MONTEE CONSTRUCTION, LLC	**c** EIN-PN	45-4586310-501
a Plan name	MONTGOMERY SALES INC MCF BENEFIT PLAN		
b Name of plan sponsor	MONTGOMERY SALES INC	**c** EIN-PN	43-1417930-501
a Plan name	MOONEY AUTO SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	MOONEY AUTO SUPPLY	**c** EIN-PN	43-1019881-501
a Plan name	MOORE FLOOR COVERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOORE FLOOR COVERING LLC	**c** EIN-PN	26-1602538-501
a Plan name	MOORE RACE CHASSIS MCF BENEFIT PLAN		
b Name of plan sponsor	MOORE RACE CHASSIS	**c** EIN-PN	83-0839255-501
a Plan name	MOORKAMP & ARTHUR FAMILY DENTISTRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOORKAMP & ARTHUR FAMILY DENTISTRY LLC	**c** EIN-PN	82-5297850-501

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

a Plan name	MORDT TRACTOR MCF BENEFIT PLAN		
b Name of plan sponsor	MORDT TRACTOR	**c** EIN-PN	43-0678021-501
a Plan name	MORE BETTER FASTER CONSTRUCTION CO MCF BENEFIT PLAN		
b Name of plan sponsor	MORE BETTER FASTER CONSTRUCTION CO	**c** EIN-PN	27-5138282-501
a Plan name	MORE FOR LESS REMODELING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MORE FOR LESS REMODELING LLC	**c** EIN-PN	46-1789926-501
a Plan name	MORETON PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	MORETON PARTNERSHIP	**c** EIN-PN	43-1502679-501
a Plan name	MORGAN INDUSTRIAL TECHNOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	MORGAN INDUSTRIAL TECHNOLOGY	**c** EIN-PN	20-3146026-501
a Plan name	MORGAN SCHOOL III, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MORGAN SCHOOL III, LLC	**c** EIN-PN	61-1681453-501
a Plan name	MORLEY BUILDING SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	MORLEY BUILDING SUPPLY	**c** EIN-PN	82-1433507-502
a Plan name	MORPH DEV LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MORPH DEV LLC	**c** EIN-PN	82-2117215-501
a Plan name	MORSE ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MORSE ELECTRIC LLC	**c** EIN-PN	35-2279870-501
a Plan name	MORTGAGE SOLUTIONS OF ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	MORTGAGE SOLUTIONS OF ST LOUIS	**c** EIN-PN	43-1825162-501
a Plan name	MOSAIC CULINARY ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOSAIC CULINARY ENTERPRISES LLC	**c** EIN-PN	84-4431934-501
a Plan name	MOSELEY OFFICE SYSTEMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOSELEY OFFICE SYSTEMS LLC	**c** EIN-PN	93-3864628-501

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

a Plan name	MOSENECAMANUFACTURER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOSENECAMANUFACTURER LLC	**c** EIN-PN	86-2648276-501
a Plan name	MOST & P II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOST & P II LLC	**c** EIN-PN	42-1562472-501
a Plan name	MOSTLY SERIOUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOSTLY SERIOUS LLC	**c** EIN-PN	45-2216766-501
a Plan name	MOTHER'S BREWING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MOTHERS BREWING COMPANY	**c** EIN-PN	26-2041055-501
a Plan name	MOTION MIX MEDIA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOTION MIX MEDIA LLC	**c** EIN-PN	93-4052795-501
a Plan name	MOTORCARS INTERNATIONAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOTORCARS INTERNATIONAL LLC	**c** EIN-PN	45-0649349-501
a Plan name	MOTT FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	MOTT FAMILY DENTAL	**c** EIN-PN	20-0085825-501
a Plan name	MOTUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOTUS LLC	**c** EIN-PN	82-2384082-501
a Plan name	MOUERY'S CARPET CENTER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOUERYS CARPET CENTER, LLC	**c** EIN-PN	87-0768985-501
a Plan name	MOUNTAIN TOP MOTORS MCF BENEFIT PLAN		
b Name of plan sponsor	MOUNTAIN TOP MOTORS	**c** EIN-PN	46-1750303-501
a Plan name	MOUNTAIN VIEW LUMBER CO. INC. MCF BENEFIT PLAN		
b Name of plan sponsor	MOUNTAIN VIEW LUMBER CO. INC.	**c** EIN-PN	43-1794796-501
a Plan name	MOWED OVER MOWING & LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MOWED OVER MOWING & LANDSCAPING LLC	**c** EIN-PN	85-0644024-501

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

a Plan name	MPJ HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MPJ HOLDINGS LLC	**c** EIN-PN	81-4386475-501
a Plan name	MR & ASSOCIATES INC MCF BENEFIT PLAN		
b Name of plan sponsor	MR & ASSOCIATES INC	**c** EIN-PN	43-1019144-501
a Plan name	MR DENT COLLISION REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	MR DENT COLLISION REPAIR	**c** EIN-PN	20-1222341-501
a Plan name	MR ELECTRIC OF SO MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	MR ELECTRIC OF SO MISSOURI	**c** EIN-PN	46-0813948-501
a Plan name	MR. PUMP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MR. PUMP LLC	**c** EIN-PN	81-1537292-501
a Plan name	MRM FARMS PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	MRM FARMS PARTNERSHIP	**c** EIN-PN	85-1010099-501
a Plan name	MS CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MS CONTRACTING LLC	**c** EIN-PN	47-4501230-501
a Plan name	M-S MUSIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	M-S MUSIC INC	**c** EIN-PN	43-1813424-501
a Plan name	MSC ENDEAVORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MSC ENDEAVORS LLC	**c** EIN-PN	46-4298859-501
a Plan name	MTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MTO LLC	**c** EIN-PN	47-4921375-501
a Plan name	MTX SERVICES,LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MTX SERVICES,LLC	**c** EIN-PN	83-0702565-501
a Plan name	MUD MOVERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	MUD MOVERS INC	**c** EIN-PN	20-5462180-501

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

a Plan name	MUNDWILLER ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MUNDWILLER ELECTRIC LLC	**c** EIN-PN	82-3595071-501
a Plan name	MURIEL NETWORK MCF BENEFIT PLAN		
b Name of plan sponsor	MURIEL NETWORK	**c** EIN-PN	93-4240843-501
a Plan name	MURPHY & COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	MURPHY & COMPANY	**c** EIN-PN	43-1753811-501
a Plan name	MURPHY CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MURPHY CONSTRUCTION LLC	**c** EIN-PN	82-4521708-501
a Plan name	MUTTON CREEK MARINA MCF BENEFIT PLAN		
b Name of plan sponsor	MUTTON CREEK MARINA	**c** EIN-PN	04-3613301-501
a Plan name	MW FENCE CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MW FENCE CO LLC	**c** EIN-PN	46-1726221-501
a Plan name	MWCK INVESTMENTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	MWCK INVESTMENTS, INC	**c** EIN-PN	45-4403632-501
a Plan name	MY BEST FRIEND ANIMAL HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	MY BEST FRIEND ANIMAL HOSPITAL	**c** EIN-PN	43-1894627-501
a Plan name	MY SLIM 180 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MY SLIM 180 LLC	**c** EIN-PN	92-0852464-501
a Plan name	MYCPAGUY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MYCPAGUY LLC	**c** EIN-PN	84-3490905-501
a Plan name	MYLENBUSCH AUTO SOURCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MYLENBUSCH AUTO SOURCE, LLC	**c** EIN-PN	39-2052256-501
a Plan name	MYSCHOLAR MCF BENEFIT PLAN		
b Name of plan sponsor	MYSCHOLAR	**c** EIN-PN	83-1416478-501

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

a Plan name	MYSTERIA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	MYSTERIA LLC	**c** EIN-PN	87-2645119-501
a Plan name	N N N PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	N N N PROPERTIES LLC	**c** EIN-PN	81-4936706-501
a Plan name	NAIL DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NAIL DENTAL LLC	**c** EIN-PN	30-0747616-501
a Plan name	NAMI SOUTHWEST MISSOURI MCF BENEFIT PLAN		
b Name of plan sponsor	NAMI SOUTHWEST MISSOURI	**c** EIN-PN	43-1244674-501
a Plan name	NAPREDAK BUILDERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NAPREDAK BUILDERS LLC	**c** EIN-PN	88-0759009-501
a Plan name	NARROW PATH TECHNOLOGY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NARROW PATH TECHNOLOGY, LLC	**c** EIN-PN	46-0542229-501
a Plan name	NASH PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NASH PROPERTIES, LLC	**c** EIN-PN	27-0123953-501
a Plan name	NASHVILLE ROADHOUSE LIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NASHVILLE ROADHOUSE LIVE LLC	**c** EIN-PN	85-3037382-501
a Plan name	NATHAN TAYLOR DESIGN GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	NATHAN TAYLOR DESIGN GROUP	**c** EIN-PN	33-1038707-501
a Plan name	NATHAN W. SUTER, DDS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NATHAN W. SUTER, DDS, LLC	**c** EIN-PN	82-2836060-501
a Plan name	NATIONAL AUTISM RESOURCES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL AUTISM RESOURCES INC.	**c** EIN-PN	86-3716627-501
a Plan name	NATIONAL HOME PRODUCTS OF SPRINGFIELD, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL HOME PRODUCTS OF SPRINGFIELD, INC.	**c** EIN-PN	43-1411392-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 PROJECT MANAGEMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL PROJECT MANAGEMENT INC	**c** EIN-PN	43-1860385-502
a Plan name	NATIONAL PSYCHOLOGY TRAINING CONSORTIUM MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL PSYCHOLOGY TRAINING CONSORTIUM	**c** EIN-PN	20-0377230-501
a Plan name	NATIONAL SAFETY COMPLIANCE MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL SAFETY COMPLIANCE	**c** EIN-PN	83-2547611-501
a Plan name	NATIONAL WOOD FLOORING ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONAL WOOD FLOORING ASSOCIATION	**c** EIN-PN	62-1289602-501
a Plan name	NATIONS BROS AUTO ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONS BROS AUTO ELECTRIC INC	**c** EIN-PN	43-0787512-501
a Plan name	NATIONWIDE DRYWALL & PAINTING MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONWIDE DRYWALL & PAINTING	**c** EIN-PN	20-0387376-501
a Plan name	NATIONWIDE TURF INSTALLATION MCF BENEFIT PLAN		
b Name of plan sponsor	NATIONWIDE TURF INSTALLATION	**c** EIN-PN	27-2950487-501
a Plan name	NATURAL BLONDES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NATURAL BLONDES LLC	**c** EIN-PN	82-2565623-501
a Plan name	NAVIGATE BUILDING SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	NAVIGATE BUILDING SOLUTIONS	**c** EIN-PN	81-3854234-501
a Plan name	NB WEALTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NB WEALTH LLC	**c** EIN-PN	87-4476580-501
a Plan name	NDI LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NDI LLC	**c** EIN-PN	27-3322594-501
a Plan name	NDONWI LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NDONWI LAW LLC	**c** EIN-PN	84-2373238-501

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

a Plan name	NEAL CONSTRUCTION GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEAL CONSTRUCTION GROUP, LLC	**c** EIN-PN	26-0843318-501
a Plan name	NEIGHBORHOOD RENEWAL PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	NEIGHBORHOOD RENEWAL PARTNERS	**c** EIN-PN	73-1677907-501
a Plan name	NEILL COMPUTER SOFTWARE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NEILL COMPUTER SOFTWARE, INC.	**c** EIN-PN	43-1406636-501
a Plan name	NEMO CPAS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEMO CPAS LLC	**c** EIN-PN	26-0013973-501
a Plan name	NEMO QUARRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEMO QUARRY LLC	**c** EIN-PN	87-1698749-501
a Plan name	NEMOW INSULATION MCF BENEFIT PLAN		
b Name of plan sponsor	NEMOW INSULATION	**c** EIN-PN	43-1484916-501
a Plan name	NEOSHO AREA BUSINESS AND INDUSTRIAL FOUNDATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	NEOSHO AREA BUSINESS AND INDUSTRIAL FOUNDATION INC	**c** EIN-PN	43-1485287-501
a Plan name	NEOSHO AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	NEOSHO AREA CHAMBER OF COMMERCE	**c** EIN-PN	44-0536290-501
a Plan name	NEOSHO HOUSING AUTHORITY MCF BENEFIT PLAN		
b Name of plan sponsor	NEOSHO HOUSING AUTHORITY	**c** EIN-PN	43-0916683-501
a Plan name	NEPHROLOGY AND HYPERTENSION ASSOCIATES LLP MCF BENEFIT PLAN		
b Name of plan sponsor	NEPHROLOGY AND HYPERTENSION ASSOCIATES LLP	**c** EIN-PN	43-1535214-501
a Plan name	NESBITT CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	NESBITT CONSTRUCTION INC	**c** EIN-PN	43-1751924-501
a Plan name	NET ENGINEERS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NET ENGINEERS INC.	**c** EIN-PN	43-1746220-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 STRATEGY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NET STRATEGY LLC	**c** EIN-PN	85-1258466-501
a Plan name	NETWORK REAL ESTATE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NETWORK REAL ESTATE, LLC	**c** EIN-PN	43-2058559-501
a Plan name	NEUAGE HEALTH & WELLNESS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEUAGE HEALTH & WELLNESS, LLC	**c** EIN-PN	92-1916316-501
a Plan name	NEVONT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEVONT LLC	**c** EIN-PN	83-1405225-502
a Plan name	NEW HOPE RESIDENTIAL CARE MCF BENEFIT PLAN		
b Name of plan sponsor	NEW HOPE RESIDENTIAL CARE	**c** EIN-PN	20-0621413-501
a Plan name	NEW MADRID PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	NEW MADRID PHARMACY	**c** EIN-PN	46-5636202-501
a Plan name	NEW YOU SURGICAL WEIGHT LOSS MCF BENEFIT PLAN		
b Name of plan sponsor	NEW YOU SURGICAL WEIGHT LOSS	**c** EIN-PN	92-1736210-501
a Plan name	NEWBRIDGE RETIREMENT COMMUNITY MCF BENEFIT PLAN		
b Name of plan sponsor	NEWBRIDGE RETIREMENT COMMUNITY	**c** EIN-PN	84-3928367-501
a Plan name	NEWLAND CONSTRUCTION GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEWLAND CONSTRUCTION GROUP LLC	**c** EIN-PN	26-0781868-501
a Plan name	NEWMAN AMUSEMENT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NEWMAN AMUSEMENT, INC.	**c** EIN-PN	43-1037368-501
a Plan name	NEWMAN BRONSON & WALLIS MCF BENEFIT PLAN		
b Name of plan sponsor	NEWMAN BRONSON & WALLIS	**c** EIN-PN	46-3166913-501
a Plan name	NEXGEN SILICA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEXGEN SILICA LLC	**c** EIN-PN	87-4532955-501

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

a Plan name	NEXT DAY ACCESS MCF BENEFIT PLAN		
b Name of plan sponsor	NEXT DAY ACCESS	**c** EIN-PN	99-3173610-501
a Plan name	NEXT GENERATION PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NEXT GENERATION PLUMBING LLC	**c** EIN-PN	20-8066000-501
a Plan name	NHS SOUTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NHS SOUTH LLC	**c** EIN-PN	85-1094518-501
a Plan name	NICHIRYO AMERICA INC MCF BENEFIT PLAN		
b Name of plan sponsor	NICHIRYO AMERICA INC	**c** EIN-PN	94-3243522-501
a Plan name	NICHOLAS MOORE MCF BENEFIT PLAN		
b Name of plan sponsor	NICHOLAS MOORE	**c** EIN-PN	83-3933640-501
a Plan name	NICHOLS LANG & HAMLIN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NICHOLS LANG & HAMLIN LLC	**c** EIN-PN	82-4809332-501
a Plan name	NICHOLS MOHS AND SKIN SURGERY PC MCF BENEFIT PLAN		
b Name of plan sponsor	NICHOLS MOHS AND SKIN SURGERY PC	**c** EIN-PN	26-4163759-501
a Plan name	NICHOLSON MECHANICAL CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	NICHOLSON MECHANICAL CONTRACTORS	**c** EIN-PN	47-3356944-501
a Plan name	NICK BRUHY BODY & PAINT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NICK BRUHY BODY & PAINT LLC	**c** EIN-PN	46-3547426-501
a Plan name	NICK C RIDENHOUR DDS MCF BENEFIT PLAN		
b Name of plan sponsor	NICK C RIDENHOUR DDS	**c** EIN-PN	86-3973267-501
a Plan name	NICK DOLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NICK DOLINIC LLC	**c** EIN-PN	20-3380115-501
a Plan name	NICK MYERS CPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	NICK MYERS CPA PC	**c** EIN-PN	43-1627243-501

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

a Plan name	NICOLE PHELPS AGENCY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NICOLE PHELPS AGENCY, LLC	**c** EIN-PN	92-2995348-501
a Plan name	NIEBLING AUTO BODY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NIEBLING AUTO BODY, INC.	**c** EIN-PN	43-0907171-501
a Plan name	NIEMEYER GREBEL & KRUSE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NIEMEYER GREBEL & KRUSE LLC	**c** EIN-PN	46-4927279-501
a Plan name	NITOR BILLING SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NITOR BILLING SERVICES, LLC	**c** EIN-PN	47-3880281-501
a Plan name	NJL CUSTOM HOMES MCF BENEFIT PLAN		
b Name of plan sponsor	NJL CUSTOM HOMES	**c** EIN-PN	46-2821757-501
a Plan name	NOBLE CONCRETE & PRECAST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NOBLE CONCRETE & PRECAST LLC	**c** EIN-PN	93-1669189-501
a Plan name	NOLAN INSURANCE SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	NOLAN INSURANCE SERVICES INC	**c** EIN-PN	81-1479471-501
a Plan name	NOLD CATTLE CO., LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NOLD CATTLE CO., LLC	**c** EIN-PN	82-3830408-502
a Plan name	NORTH CENTRAL PRINTING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	NORTH CENTRAL PRINTING SERVICES	**c** EIN-PN	20-0844850-501
a Plan name	NORTH COUNTY CHRISTIAN SCHOOL MCF BENEFIT PLAN		
b Name of plan sponsor	NORTH COUNTY CHRISTIAN SCHOOL	**c** EIN-PN	27-4204840-501
a Plan name	NORTH JEFFERSON COUNTY AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	NORTH JEFFERSON COUNTY AMBULANCE DISTRICT	**c** EIN-PN	43-1108889-501
a Plan name	NORTH MAIN ANIMAL HOSPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NORTH MAIN ANIMAL HOSPITAL LLC	**c** EIN-PN	43-1835294-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 NEWSTEAD ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	NORTH NEWSTEAD ASSOCIATION	**c** EIN-PN	43-1625058-501
a Plan name	NORTHEAST AMBULANCE AND FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST AMBULANCE AND FIRE PROTECTION DISTRICT	**c** EIN-PN	43-6002546-501
a Plan name	NORTHEAST MISSOURI AREA HEALTH EDUCATION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST MISSOURI AREA HEALTH EDUCATION CENTER	**c** EIN-PN	43-1579873-501
a Plan name	NORTHEAST MISSOURI ECONOMIC DEVELOPMENT COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST MISSOURI ECONOMIC DEVELOPMENT COUNCIL	**c** EIN-PN	84-2099118-501
a Plan name	NORTHEAST MO NARCOTICS TASK FORCE MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHEAST MO NARCOTICS TASK FORCE	**c** EIN-PN	43-1663614-501
a Plan name	NORTHERN LAKES MORTGAGE MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHERN LAKES MORTGAGE	**c** EIN-PN	85-0989835-501
a Plan name	NORTHSTAR MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHSTAR MANAGEMENT	**c** EIN-PN	43-1832643-501
a Plan name	NORTHWEST INFECTIOUS DISEASE MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHWEST INFECTIOUS DISEASE	**c** EIN-PN	43-1700580-501
a Plan name	NORTHWEST MISSOURI ORAL & MAXILLFACIAL SURGERY MCF BENEFIT PLAN		
b Name of plan sponsor	NORTHWEST MISSOURI ORAL & MAXILLFACIAL SURGERY	**c** EIN-PN	43-1555433-501
a Plan name	NORTON POWER SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	NORTON POWER SYSTEMS	**c** EIN-PN	26-2433207-501
a Plan name	NOTO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NOTO LLC	**c** EIN-PN	82-1203144-501
a Plan name	NOVA GROUP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	NOVA GROUP, INC.	**c** EIN-PN	43-1378465-501

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

a Plan name	NROUTE ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NROUTE ENTERPRISES LLC	**c** EIN-PN	20-3302834-501
a Plan name	NUTRACEUTICS CORP MCF BENEFIT PLAN		
b Name of plan sponsor	NUTRACEUTICS CORP	**c** EIN-PN	20-3946130-501
a Plan name	NXV MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	NXV MANAGEMENT LLC	**c** EIN-PN	81-0916086-501
a Plan name	OAK FURNITURE INC MCF BENEFIT PLAN		
b Name of plan sponsor	OAK FURNITURE INC	**c** EIN-PN	43-1578519-501
a Plan name	OAK MEADOWS REALTY COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	OAK MEADOWS REALTY COMPANY	**c** EIN-PN	43-0732934-501
a Plan name	OAKHAVEN MS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OAKHAVEN MS LLC	**c** EIN-PN	84-2162488-501
a Plan name	OAKVIEW WEALTH SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	OAKVIEW WEALTH SOLUTIONS	**c** EIN-PN	82-5362110-501
a Plan name	OAKVILLE DENTAL CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OAKVILLE DENTAL CARE LLC	**c** EIN-PN	26-3900132-501
a Plan name	OASIS HOME PROTECTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OASIS HOME PROTECTION LLC	**c** EIN-PN	88-1573372-501
a Plan name	OBERG EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OBERG EXCAVATING LLC	**c** EIN-PN	85-0633209-501
a Plan name	OBVIOUS TECHNICAL SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OBVIOUS TECHNICAL SOLUTIONS LLC	**c** EIN-PN	82-1525807-501
a Plan name	OCCHIO SEARCH AND RECRUITMENT MCF BENEFIT PLAN		
b Name of plan sponsor	OCCHIO SEARCH AND RECRUITMENT	**c** EIN-PN	85-3986889-501

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

a Plan name	ODLE SALES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ODLE SALES, INC.	**c** EIN-PN	43-1865596-502
a Plan name	ODOM'S BUGS B GONE INC MCF BENEFIT PLAN		
b Name of plan sponsor	ODOMS BUGS B GONE INC	**c** EIN-PN	43-1711974-501
a Plan name	OE MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OE MANAGEMENT LLC	**c** EIN-PN	90-0980213-501
a Plan name	O'FALLON CHAMBER OF COMMERCE AND INDUSTRY MCF BENEFIT PLAN		
b Name of plan sponsor	OFALLON CHAMBER OF COMMERCE AND INDUSTRY	**c** EIN-PN	43-1508082-501
a Plan name	OFALLON SQUARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OFALLON SQUARE, LLC	**c** EIN-PN	84-3023003-501
a Plan name	OFF ROAD BODY ARMOR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OFF ROAD BODY ARMOR, LLC	**c** EIN-PN	81-1067272-501
a Plan name	OFF THE SHELF LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OFF THE SHELF LLC	**c** EIN-PN	84-1744196-501
a Plan name	OFFICE EMPORIUM MCF BENEFIT PLAN		
b Name of plan sponsor	OFFICE EMPORIUM	**c** EIN-PN	43-1889986-501
a Plan name	OG WHOLESALE FLORIST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OG WHOLESALE FLORIST LLC	**c** EIN-PN	84-3428294-501
a Plan name	OGUIN MECHANICAL SERVICES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	OGUIN MECHANICAL SERVICES INC.	**c** EIN-PN	46-0904219-501
a Plan name	OHT SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OHT SERVICES LLC	**c** EIN-PN	83-4112111-501
a Plan name	OIL AND OCTANE SHOP INC MCF BENEFIT PLAN		
b Name of plan sponsor	OIL AND OCTANE SHOP INC	**c** EIN-PN	46-4299863-502

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	OKE THOMAS & ASSOCIATES INC MCF BENEFIT PLAN		
b Name of plan sponsor	OKE THOMAS & ASSOCIATES INC	**c** EIN-PN	20-2114365-501
a Plan name	OLD HAWTHORNE GOLF CLUB MCF BENEFIT PLAN		
b Name of plan sponsor	OLD HAWTHORNE GOLF CLUB	**c** EIN-PN	20-3648098-501
a Plan name	OLD HIGHWAY 63 GARAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OLD HIGHWAY 63 GARAGE LLC	**c** EIN-PN	82-1935911-501
a Plan name	OLD TOWN AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	OLD TOWN AUTOMOTIVE	**c** EIN-PN	46-5041451-501
a Plan name	OLD TOWN CAPE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	OLD TOWN CAPE INC.	**c** EIN-PN	43-1857875-501
a Plan name	OLD WORLD ROOFING INC MCF BENEFIT PLAN		
b Name of plan sponsor	OLD WORLD ROOFING INC	**c** EIN-PN	26-1569644-502
a Plan name	OLDFIELD PACKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OLDFIELD PACKING LLC	**c** EIN-PN	61-1418088-501
a Plan name	OLIVER PROPERTIES MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OLIVER PROPERTIES MANAGEMENT LLC	**c** EIN-PN	45-5411184-501
a Plan name	OLIVIA'S HEARTLAND, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OLIVIAS HEARTLAND, LLC	**c** EIN-PN	46-0876877-501
a Plan name	OLIVINO AND TRIPLE 3 VINEYARD, WINERY, AND EVENT MCF BENEFIT PLAN		
b Name of plan sponsor	OLIVINO AND TRIPLE 3 VINEYARD, WINERY, AND EVENT	**c** EIN-PN	83-0666822-501
a Plan name	OLS MCF BENEFIT PLAN		
b Name of plan sponsor	OLS	**c** EIN-PN	45-0482063-501
a Plan name	OMAC BEVERAGE ADVISORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OMAC BEVERAGE ADVISORS LLC	**c** EIN-PN	45-3542442-502

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	OMG COMMERCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OMG COMMERCE LLC	**c** EIN-PN	27-3205495-501
a Plan name	OMS NORTH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OMS NORTH, LLC	**c** EIN-PN	82-3627486-501
a Plan name	ON THE GRIND COFFEE CO MCF BENEFIT PLAN		
b Name of plan sponsor	ON THE GRIND COFFEE CO	**c** EIN-PN	87-2240913-502
a Plan name	ONE BRIDGE WEALTH MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ONE BRIDGE WEALTH MANAGEMENT LLC	**c** EIN-PN	84-3832756-501
a Plan name	ONE STOP FLOOR SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	ONE STOP FLOOR SHOP	**c** EIN-PN	43-1799384-501
a Plan name	ONE STOP TIRE & AUTO SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	ONE STOP TIRE & AUTO SERVICE	**c** EIN-PN	82-2334182-501
a Plan name	ONE VISION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ONE VISION LLC	**c** EIN-PN	85-3323935-501
a Plan name	OPEN STUDIO NETWORK MCF BENEFIT PLAN		
b Name of plan sponsor	OPEN STUDIO NETWORK	**c** EIN-PN	47-4817158-501
a Plan name	OPIES LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OPIES LANDSCAPING LLC	**c** EIN-PN	27-2506617-501
a Plan name	OPO STARTUPS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OPO STARTUPS LLC	**c** EIN-PN	47-3642302-501
a Plan name	OPPORTUNITY SHELTERED INDUSTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	OPPORTUNITY SHELTERED INDUSTRIES INC	**c** EIN-PN	43-1456356-501
a Plan name	OPTIC ARMOR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIC ARMOR, LLC	**c** EIN-PN	75-3237066-501

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

a Plan name	OPTIMA GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIMA GROUP	**c** EIN-PN	47-2975139-501
a Plan name	OPTIMIZED CFO & CONTROLLER SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIMIZED CFO & CONTROLLER SERVICES	**c** EIN-PN	83-3362811-501
a Plan name	OPTIMIZED EYECARE MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIMIZED EYECARE	**c** EIN-PN	84-3717444-501
a Plan name	OPTIMIZED HEALTH, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIMIZED HEALTH, LLC	**c** EIN-PN	88-0667765-501
a Plan name	OPTIONS FOR JUSTICE MCF BENEFIT PLAN		
b Name of plan sponsor	OPTIONS FOR JUSTICE	**c** EIN-PN	43-1677739-501
a Plan name	ORAL & MAXILLOFACIAL SURGERY OF ST. JOSEPH MCF BENEFIT PLAN		
b Name of plan sponsor	ORAL & MAXILLOFACIAL SURGERY OF ST. JOSEPH	**c** EIN-PN	81-1628073-501
a Plan name	ORBIVISE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ORBIVISE GROUP LLC	**c** EIN-PN	87-1244926-501
a Plan name	ORCHARD HILLS VETERINARY CLINIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ORCHARD HILLS VETERINARY CLINIC LLC	**c** EIN-PN	92-1000561-501
a Plan name	ORCHESTRA LIFE SCIENCES CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ORCHESTRA LIFE SCIENCES CO LLC	**c** EIN-PN	87-2491477-501
a Plan name	ORME, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ORME, LLC	**c** EIN-PN	46-5312902-501
a Plan name	ORONOGO FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	ORONOGO FIRE PROTECTION DISTRICT	**c** EIN-PN	83-0421345-501
a Plan name	ORTMANN CONCRETE MCF BENEFIT PLAN		
b Name of plan sponsor	ORTMANN CONCRETE	**c** EIN-PN	76-0738434-502

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	ORTMANN FUNERAL HOME, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ORTMANN FUNERAL HOME, INC	**c** EIN-PN	43-1495314-501
a Plan name	OSAGE BEACH FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	OSAGE BEACH FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1296697-501
a Plan name	OSAGE HEALTH MCF BENEFIT PLAN		
b Name of plan sponsor	OSAGE HEALTH	**c** EIN-PN	47-2241611-501
a Plan name	OSAGE REGIONAL VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	OSAGE REGIONAL VETERINARY CLINIC	**c** EIN-PN	43-1839728-501
a Plan name	OSBORNE OFFICE EQUIPMENT MCF BENEFIT PLAN		
b Name of plan sponsor	OSBORNE OFFICE EQUIPMENT	**c** EIN-PN	43-1579072-501
a Plan name	OSTERMEIER CPA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OSTERMEIER CPA LLC	**c** EIN-PN	27-0890540-501
a Plan name	OTF CLAYTON, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OTF CLAYTON, LLC	**c** EIN-PN	46-3957117-501
a Plan name	OTOLARYNGOLOGY OF JOPLIN MCF BENEFIT PLAN		
b Name of plan sponsor	OTOLARYNGOLOGY OF JOPLIN	**c** EIN-PN	83-0347462-501
a Plan name	OUTBACK ROADHOUSE APARTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	OUTBACK ROADHOUSE APARTMENTS	**c** EIN-PN	46-3272477-501
a Plan name	OUTBACK WELDING & MACHINING MCF BENEFIT PLAN		
b Name of plan sponsor	OUTBACK WELDING & MACHINING	**c** EIN-PN	47-5595801-501
a Plan name	OUTREACH STUDIOS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OUTREACH STUDIOS LLC	**c** EIN-PN	85-3025049-501
a Plan name	OWENSVILLE PREMIER LOGISTICS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OWENSVILLE PREMIER LOGISTICS, LLC	**c** EIN-PN	86-3018157-501

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

a Plan name	OWL PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OWL PARTNERS LLC	**c** EIN-PN	84-3919126-501
a Plan name	OZARK BUILDING SUPPLY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK BUILDING SUPPLY INC.	**c** EIN-PN	84-1852187-501
a Plan name	OZARK CDL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK CDL LLC	**c** EIN-PN	46-4688304-501
a Plan name	OZARK DIRECTIONAL BORING MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK DIRECTIONAL BORING	**c** EIN-PN	84-2060944-501
a Plan name	OZARK EMPIRE GROCERS ASSN. MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK EMPIRE GROCERS ASSN.	**c** EIN-PN	44-0534480-501
a Plan name	OZARK FIBER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK FIBER LLC	**c** EIN-PN	87-3701416-501
a Plan name	OZARK FOOTHILLS REGIONAL PLANNING COMMISSION MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK FOOTHILLS REGIONAL PLANNING COMMISSION	**c** EIN-PN	43-0895607-501
a Plan name	OZARK KIDS DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK KIDS DENTISTRY	**c** EIN-PN	82-4814945-501
a Plan name	OZARK LAND TRUST MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK LAND TRUST	**c** EIN-PN	43-1304715-501
a Plan name	OZARK LEGACY INSURANCE PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK LEGACY INSURANCE PARTNERS	**c** EIN-PN	99-0767567-501
a Plan name	OZARK MACHINERY MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK MACHINERY	**c** EIN-PN	43-1022216-501
a Plan name	OZARK MANAGEMENT & CONSULTING GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK MANAGEMENT & CONSULTING GROUP INC	**c** EIN-PN	83-2625107-501

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

a Plan name	OZARK PACKAGING INC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK PACKAGING INC	**c** EIN-PN	43-1325720-501
a Plan name	OZARK ROOTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK ROOTS LLC	**c** EIN-PN	85-3149740-501
a Plan name	OZARK TRAILS YOUTH SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK TRAILS YOUTH SERVICES	**c** EIN-PN	82-4507514-501
a Plan name	OZARK UNDERGROUND LABORATORY MCF BENEFIT PLAN		
b Name of plan sponsor	OZARK UNDERGROUND LABORATORY	**c** EIN-PN	43-1601783-501
a Plan name	OZARKS BRANDS INC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS BRANDS INC	**c** EIN-PN	84-2411729-501
a Plan name	OZARKS ENVIRONMENTAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS ENVIRONMENTAL SERVICES	**c** EIN-PN	81-1616678-501
a Plan name	OZARKS FAMILY HEALTH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS FAMILY HEALTH LLC	**c** EIN-PN	45-2926643-501
a Plan name	OZARKS FAMILY VISION CENTRE MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS FAMILY VISION CENTRE	**c** EIN-PN	43-1325188-501
a Plan name	OZARKS HOUSE BUYERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	OZARKS HOUSE BUYERS LLC	**c** EIN-PN	83-1886316-501
a Plan name	P & E MANAGEMENT GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	P & E MANAGEMENT GROUP INC	**c** EIN-PN	43-1758900-501
a Plan name	PACE STAFFING ALTERNATIVE MCF BENEFIT PLAN		
b Name of plan sponsor	PACE STAFFING ALTERNATIVE	**c** EIN-PN	43-1708961-501
a Plan name	PACIFIC POOLS AT THE LAKE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PACIFIC POOLS AT THE LAKE LLC	**c** EIN-PN	20-4564019-501

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

a Plan name	PADEN JOHN FAMILY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PADEN JOHN FAMILY DENTAL LLC	**c** EIN-PN	99-0726880-501
a Plan name	PAPERDOLLS MCF BENEFIT PLAN		
b Name of plan sponsor	PAPERDOLLS	**c** EIN-PN	26-2665478-501
a Plan name	PARADIGM ARCHITECTS MCF BENEFIT PLAN		
b Name of plan sponsor	PARADIGM ARCHITECTS	**c** EIN-PN	43-1645395-501
a Plan name	PARAGON ARCHITECTURE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARAGON ARCHITECTURE LLC	**c** EIN-PN	47-5312890-501
a Plan name	PARAGON CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARAGON CONSTRUCTION LLC	**c** EIN-PN	85-4125635-501
a Plan name	PARAMOUNT JEWELERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	PARAMOUNT JEWELERS INC	**c** EIN-PN	43-0897430-501
a Plan name	PARISI CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARISI CONTRACTING LLC	**c** EIN-PN	26-1916738-501
a Plan name	PARK HILLS AUTOMOTIVE,LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARK HILLS AUTOMOTIVE,LLC	**c** EIN-PN	86-2958288-501
a Plan name	PARKER ADAMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARKER ADAMS, LLC	**c** EIN-PN	26-2756617-501
a Plan name	PARKER LOGGING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARKER LOGGING LLC	**c** EIN-PN	45-4122717-501
a Plan name	PARKER SWEARNGIN MCF BENEFIT PLAN		
b Name of plan sponsor	PARKER SWEARNGIN	**c** EIN-PN	20-0734516-501
a Plan name	PARKSIDE MACHINE & FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	PARKSIDE MACHINE & FABRICATION	**c** EIN-PN	27-3498010-501

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

a Plan name	PARKWAY DISTILLERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARKWAY DISTILLERY LLC	**c** EIN-PN	92-2463502-501
a Plan name	PARMENTIER HANDYMAN SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	PARMENTIER HANDYMAN SERVICES	**c** EIN-PN	88-3233300-501
a Plan name	PARMENTIER PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PARMENTIER PROPERTIES, LLC	**c** EIN-PN	20-2514281-501
a Plan name	PARTNERS IN-KIND MCF BENEFIT PLAN		
b Name of plan sponsor	PARTNERS IN-KIND	**c** EIN-PN	92-3149172-501
a Plan name	PASKE PEST CONTROL & WILDLIFE SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	PASKE PEST CONTROL & WILDLIFE SOLUTIONS	**c** EIN-PN	82-3216909-501
a Plan name	PAT KELLY EQUIPMENT COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	PAT KELLY EQUIPMENT COMPANY	**c** EIN-PN	43-0524090-501
a Plan name	PATEE HOUSE MUSEUMS MCF BENEFIT PLAN		
b Name of plan sponsor	PATEE HOUSE MUSEUMS	**c** EIN-PN	43-6071676-501
a Plan name	PATHWAYS TO INDEPENDENCE MCF BENEFIT PLAN		
b Name of plan sponsor	PATHWAYS TO INDEPENDENCE	**c** EIN-PN	43-1504762-501
a Plan name	PATKE RESTORATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PATKE RESTORATION LLC	**c** EIN-PN	83-3480089-501
a Plan name	PATRICK M. BAUER DDS MS PC MCF BENEFIT PLAN		
b Name of plan sponsor	PATRICK M. BAUER DDS MS PC	**c** EIN-PN	11-3709497-501
a Plan name	PATRIOT PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PATRIOT PLUMBING LLC	**c** EIN-PN	45-2971251-501
a Plan name	PATRIOT TOWING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PATRIOT TOWING, LLC	**c** EIN-PN	82-2462412-501

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

a Plan name	PATTY'S CHEESECAKES MCF BENEFIT PLAN		
b Name of plan sponsor	PATTYS CHEESECAKES	**c** EIN-PN	81-2007036-501
a Plan name	PAUL A GONZALES DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PAUL A GONZALES DDS LLC	**c** EIN-PN	20-4303164-501
a Plan name	PAUL ROTTLER MD PC MCF BENEFIT PLAN		
b Name of plan sponsor	PAUL ROTTLER MD PC	**c** EIN-PN	43-1551403-501
a Plan name	PAUTLER DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	PAUTLER DESIGN	**c** EIN-PN	45-3716299-501
a Plan name	PAWN CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PAWN CENTER LLC	**c** EIN-PN	47-4333323-501
a Plan name	PCNET LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PCNET LLC	**c** EIN-PN	81-5043923-501
a Plan name	PDQ NOTARY INC MCF BENEFIT PLAN		
b Name of plan sponsor	PDQ NOTARY INC	**c** EIN-PN	20-5111253-501
a Plan name	PEACEMAKER DEFENSE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PEACEMAKER DEFENSE GROUP LLC	**c** EIN-PN	82-4189404-501
a Plan name	PEAK ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PEAK ELECTRIC LLC	**c** EIN-PN	85-3650289-501
a Plan name	PEARCE GREEN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PEARCE GREEN LLC	**c** EIN-PN	82-5332969-501
a Plan name	PEARSON CREEK PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PEARSON CREEK PROPERTIES LLC	**c** EIN-PN	46-2701221-501
a Plan name	PECULIAR CONTROLS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PECULIAR CONTROLS, LLC	**c** EIN-PN	82-3904878-501

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

a Plan name	PEDIATRIC DENTISTRY OF THE OZARKS MCF BENEFIT PLAN		
b Name of plan sponsor	PEDIATRIC DENTISTRY OF THE OZARKS	**c** EIN-PN	81-3848447-501
a Plan name	PELICAN CAPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PELICAN CAPITAL LLC	**c** EIN-PN	47-1565367-501
a Plan name	PELIKAN & ORRIS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PELIKAN & ORRIS LLC	**c** EIN-PN	82-1544921-501
a Plan name	PENNINGTON HVAC MCF BENEFIT PLAN		
b Name of plan sponsor	PENNINGTON HVAC	**c** EIN-PN	88-1571781-501
a Plan name	PENNY WINDOW MCF BENEFIT PLAN		
b Name of plan sponsor	PENNY WINDOW	**c** EIN-PN	43-1096129-501
a Plan name	PENSION CONSULTANTS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PENSION CONSULTANTS INC.	**c** EIN-PN	43-1685158-501
a Plan name	PERENNIAL ENERGY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERENNIAL ENERGY LLC	**c** EIN-PN	45-3996931-501
a Plan name	PERENNIAL PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERENNIAL PARTNERS LLC	**c** EIN-PN	27-3606854-501
a Plan name	PERFECT AIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERFECT AIR, LLC	**c** EIN-PN	43-1271285-501
a Plan name	PERFECTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERFECTION LLC	**c** EIN-PN	26-0610246-501
a Plan name	PERFORMANCE PLUS REHABILITATION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	PERFORMANCE PLUS REHABILITATION CENTER	**c** EIN-PN	43-1893348-501
a Plan name	PERKS GARDEN CENTERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERKS GARDEN CENTERS LLC	**c** EIN-PN	82-4037886-501

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

a Plan name	PERMA JACK CO. MCF BENEFIT PLAN		
b Name of plan sponsor	PERMA JACK CO.	**c** EIN-PN	05-7407100-501
a Plan name	PERMIT CONSULTANTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	PERMIT CONSULTANTS INC	**c** EIN-PN	43-1843931-501
a Plan name	PERRY INSURE & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PERRY INSURE & ASSOCIATES, LLC	**c** EIN-PN	46-1218205-501
a Plan name	PERRYVILLE OUTDOOR PRODUCTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PERRYVILLE OUTDOOR PRODUCTS, INC.	**c** EIN-PN	43-1569757-501
a Plan name	PERRYVILLE TIRE CENTER INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PERRYVILLE TIRE CENTER INC.	**c** EIN-PN	43-1529960-501
a Plan name	PEST ZERO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PEST ZERO LLC	**c** EIN-PN	27-0603749-501
a Plan name	PET HEALTH CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	PET HEALTH CENTER	**c** EIN-PN	83-4286116-501
a Plan name	PET PALS ANIMAL HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	PET PALS ANIMAL HOSPITAL	**c** EIN-PN	74-7085000-501
a Plan name	PET STYLES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PET STYLES LLC	**c** EIN-PN	83-2894457-501
a Plan name	PETERSON FEED & FARM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PETERSON FEED & FARM LLC	**c** EIN-PN	82-1265895-501
a Plan name	PETTIT CANOE RENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	PETTIT CANOE RENTAL	**c** EIN-PN	20-4249985-501
a Plan name	PFITZINGER AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	PFITZINGER AUTOMOTIVE	**c** EIN-PN	43-1828063-501

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

a Plan name	PGF CONCEPTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PGF CONCEPTS LLC	**c** EIN-PN	20-3114717-501
a Plan name	PHARMA GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	PHARMA GROUP	**c** EIN-PN	86-2253061-501
a Plan name	PHARMALOOP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PHARMALOOP LLC	**c** EIN-PN	45-5251184-501
a Plan name	PHELAN DERMATOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	PHELAN DERMATOLOGY	**c** EIN-PN	86-2908914-501
a Plan name	PHELPS COUNTY INDUSTRIAL SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	PHELPS COUNTY INDUSTRIAL SOLUTIONS	**c** EIN-PN	43-0948793-501
a Plan name	PHILLIPS APPRAISALS MCF BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS APPRAISALS	**c** EIN-PN	82-3871777-501
a Plan name	PHILLIPS FAMILY ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS FAMILY ENTERPRISES LLC	**c** EIN-PN	83-2973888-501
a Plan name	PHILLIPS FARMS KAHOKA II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PHILLIPS FARMS KAHOKA II LLC	**c** EIN-PN	82-2872473-501
a Plan name	PHOENIX ANJON BUILDING MATERIALS INC MCF BENEFIT PLAN		
b Name of plan sponsor	PHOENIX ANJON BUILDING MATERIALS INC	**c** EIN-PN	43-1767249-501
a Plan name	PHP SPECIALIST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PHP SPECIALIST LLC	**c** EIN-PN	27-3793454-501
a Plan name	PHYSICAL THERAPY DIRECT MCF BENEFIT PLAN		
b Name of plan sponsor	PHYSICAL THERAPY DIRECT	**c** EIN-PN	85-3635375-501
a Plan name	PIANOS FOR PEOPLE MCF BENEFIT PLAN		
b Name of plan sponsor	PIANOS FOR PEOPLE	**c** EIN-PN	47-4084512-502

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	PICKETT GROUP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PICKETT GROUP, INC.	**c** EIN-PN	43-1787413-501
a Plan name	PIERCE WINDOW & DOOR INC MCF BENEFIT PLAN		
b Name of plan sponsor	PIERCE WINDOW & DOOR INC	**c** EIN-PN	43-1342935-501
a Plan name	PIGGING SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PIGGING SOLUTIONS LLC	**c** EIN-PN	27-0917448-501
a Plan name	PIKE COUNTY MUTUAL INSURANCE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	PIKE COUNTY MUTUAL INSURANCE COMPANY	**c** EIN-PN	43-0602843-501
a Plan name	PILOT POOL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PILOT POOL LLC	**c** EIN-PN	87-1984351-501
a Plan name	PINCKNEY BEND DISTILLERY MCF BENEFIT PLAN		
b Name of plan sponsor	PINCKNEY BEND DISTILLERY	**c** EIN-PN	27-3326066-501
a Plan name	PINEY RIVER FORD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PINEY RIVER FORD LLC	**c** EIN-PN	84-4615164-501
a Plan name	PINNACLE COMPUTING SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	PINNACLE COMPUTING SOLUTIONS	**c** EIN-PN	43-1896594-502
a Plan name	PINNACLE CONSULTING CPAS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PINNACLE CONSULTING CPAS, LLC	**c** EIN-PN	27-1162812-501
a Plan name	PINPOINT INTERNATIONAL MCF BENEFIT PLAN		
b Name of plan sponsor	PINPOINT INTERNATIONAL	**c** EIN-PN	93-3381149-501
a Plan name	PIONEER SEALING AND ASPHALT MCF BENEFIT PLAN		
b Name of plan sponsor	PIONEER SEALING AND ASPHALT	**c** EIN-PN	47-4181211-501
a Plan name	PIPPIN TOWING & RECOVERY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PIPPIN TOWING & RECOVERY LLC	**c** EIN-PN	46-5557051-501

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

a Plan name	PITMAN FUNERAL HOMES INC MCF BENEFIT PLAN		
b Name of plan sponsor	PITMAN FUNERAL HOMES INC	**c** EIN-PN	43-0818255-501
a Plan name	PITT TECHNOLOGY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PITT TECHNOLOGY GROUP LLC	**c** EIN-PN	82-2845439-501
a Plan name	PIZZA HAUS WARDSVILLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PIZZA HAUS WARDSVILLE LLC	**c** EIN-PN	82-2674314-501
a Plan name	PJ MYERS HAULING & EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PJ MYERS HAULING & EXCAVATING LLC	**c** EIN-PN	90-0811057-501
a Plan name	PLANET GYMNASTICS MCF BENEFIT PLAN		
b Name of plan sponsor	PLANET GYMNASTICS	**c** EIN-PN	43-1799631-501
a Plan name	PLATINUM REALTY GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PLATINUM REALTY GROUP, LLC	**c** EIN-PN	20-4004143-501
a Plan name	PLATINUM TOWING & TRANSPORT MCF BENEFIT PLAN		
b Name of plan sponsor	PLATINUM TOWING & TRANSPORT	**c** EIN-PN	81-4010156-501
a Plan name	PLATT LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PLATT LANDSCAPING LLC	**c** EIN-PN	20-0458825-501
a Plan name	PLATYPUS RIVER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PLATYPUS RIVER LLC	**c** EIN-PN	85-4383994-501
a Plan name	PLUMB-RITE PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PLUMB-RITE PLUMBING LLC	**c** EIN-PN	26-3689302-501
a Plan name	PLUME LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PLUME LLC	**c** EIN-PN	27-1155219-501
a Plan name	PNMG INC MCF BENEFIT PLAN		
b Name of plan sponsor	PNMG INC	**c** EIN-PN	40-0000418-501

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

a Plan name	POINTER LAW OFFICE,P.C MCF BENEFIT PLAN		
b Name of plan sponsor	POINTER LAW OFFICE,P.C	**c** EIN-PN	43-1926414-501
a Plan name	POLARIS LAW GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POLARIS LAW GROUP LLC	**c** EIN-PN	82-3028310-501
a Plan name	POLICE PRODUCTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POLICE PRODUCTIONS LLC	**c** EIN-PN	43-1814039-501
a Plan name	POLK COUNTY CROP SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	POLK COUNTY CROP SERVICE	**c** EIN-PN	45-3668680-501
a Plan name	POLLARD PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POLLARD PROPERTIES LLC	**c** EIN-PN	82-2129028-501
a Plan name	POLYFAB PLASTICS AND SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	POLYFAB PLASTICS AND SUPPLY	**c** EIN-PN	43-1042870-501
a Plan name	POMMIL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POMMIL LLC	**c** EIN-PN	82-3805382-501
a Plan name	PONTIAC BOAT DOCK INC MCF BENEFIT PLAN		
b Name of plan sponsor	PONTIAC BOAT DOCK INC	**c** EIN-PN	43-1052149-501
a Plan name	POPE CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	POPE CONSTRUCTION	**c** EIN-PN	27-1888236-501
a Plan name	POPLAR BLUFF HOUSING AUTHORITY MCF BENEFIT PLAN		
b Name of plan sponsor	POPLAR BLUFF HOUSING AUTHORITY	**c** EIN-PN	43-6017318-501
a Plan name	POPLAR BLUFF MONUMENT WORKS MCF BENEFIT PLAN		
b Name of plan sponsor	POPLAR BLUFF MONUMENT WORKS	**c** EIN-PN	80-0146013-502
a Plan name	POPLAR BLUFF OVERHEAD DOOR MCF BENEFIT PLAN		
b Name of plan sponsor	POPLAR BLUFF OVERHEAD DOOR	**c** EIN-PN	27-3043912-501

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

a Plan name	POPLAR BLUFF TOOL & DIE CO I MCF BENEFIT PLAN		
b Name of plan sponsor	POPLAR BLUFF TOOL & DIE CO I	**c** EIN-PN	43-1735056-501
a Plan name	POPPA TANGO ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POPPA TANGO ENTERPRISES, LLC	**c** EIN-PN	47-3844424-502
a Plan name	POPPY & PINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POPPY & PINE LLC	**c** EIN-PN	46-2218946-501
a Plan name	PORITE JEFFERSON CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	PORITE JEFFERSON CORPORATION	**c** EIN-PN	03-0456552-501
a Plan name	POS INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	POS INVESTMENTS	**c** EIN-PN	43-1801191-501
a Plan name	POSTCARDS FROM BKLYN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	POSTCARDS FROM BKLYN LLC	**c** EIN-PN	82-3506922-501
a Plan name	POTENTIAL THERAPY SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	POTENTIAL THERAPY SERVICES	**c** EIN-PN	47-3057210-501
a Plan name	POWELL CATTLE MCF BENEFIT PLAN		
b Name of plan sponsor	POWELL CATTLE	**c** EIN-PN	43-1177486-501
a Plan name	POWERS FAMILY PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	POWERS FAMILY PHARMACY	**c** EIN-PN	27-3228956-501
a Plan name	PPSTL MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PPSTL MANAGEMENT LLC	**c** EIN-PN	47-3022852-501
a Plan name	PRAIRIE INC MCF BENEFIT PLAN		
b Name of plan sponsor	PRAIRIE INC	**c** EIN-PN	03-0547785-501
a Plan name	PRECIOUS THOUGHTS CUSTOM MCF BENEFIT PLAN		
b Name of plan sponsor	PRECIOUS THOUGHTS CUSTOM	**c** EIN-PN	20-1889277-501

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

a Plan name	PRECISE FREIGHT AUDIT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISE FREIGHT AUDIT LLC	**c** EIN-PN	20-0701314-501
a Plan name	PRECISION CHIROPRACTIC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION CHIROPRACTIC	**c** EIN-PN	47-1601479-502
a Plan name	PRECISION COMPONENTS & ASSEMBLIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION COMPONENTS & ASSEMBLIES INC	**c** EIN-PN	43-1538298-501
a Plan name	PRECISION GRAPHICS AND SIGNS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION GRAPHICS AND SIGNS LLC	**c** EIN-PN	20-3004445-501
a Plan name	PRECISION HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION HOLDINGS LLC	**c** EIN-PN	47-5561951-501
a Plan name	PRECISION INDUSTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION INDUSTRIES INC	**c** EIN-PN	46-1385367-501
a Plan name	PRECISION LAND SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION LAND SERVICES LLC	**c** EIN-PN	82-1659729-501
a Plan name	PRECISION MFG MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION MFG	**c** EIN-PN	93-1524032-501
a Plan name	PRECISION SMALL ENGINES INC MCF BENEFIT PLAN		
b Name of plan sponsor	PRECISION SMALL ENGINES INC	**c** EIN-PN	43-1342653-501
a Plan name	PREFERRED LAND TITLE MCF BENEFIT PLAN		
b Name of plan sponsor	PREFERRED LAND TITLE	**c** EIN-PN	27-1840273-501
a Plan name	PREFERRED LIVESTOCK PRODUCTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREFERRED LIVESTOCK PRODUCTS, LLC	**c** EIN-PN	82-4189943-501
a Plan name	PREFERRED PEST CONTROL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREFERRED PEST CONTROL LLC	**c** EIN-PN	47-4523925-501

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

a Plan name	PREFERRED STAINLESS HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREFERRED STAINLESS HOLDINGS, LLC	**c** EIN-PN	27-3870043-501
a Plan name	PREMIER ADVANTAGE MARINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER ADVANTAGE MARINE LLC	**c** EIN-PN	85-1193311-501
a Plan name	PREMIER AUTO REBUILDERS AND TRUCK SALVAGE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER AUTO REBUILDERS AND TRUCK SALVAGE LLC	**c** EIN-PN	81-1809305-501
a Plan name	PREMIER DESIGN & CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER DESIGN & CONSTRUCTION	**c** EIN-PN	43-1769261-501
a Plan name	PREMIER DREDGING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER DREDGING LLC	**c** EIN-PN	83-3889467-501
a Plan name	PREMIER FENCE KC, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER FENCE KC, LLC	**c** EIN-PN	45-2379402-501
a Plan name	PREMIER PAINTING AND DRYWALL MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER PAINTING AND DRYWALL	**c** EIN-PN	27-3516807-501
a Plan name	PREMIER PHYSICAL THERAPY REHAB MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER PHYSICAL THERAPY REHAB	**c** EIN-PN	20-4924338-501
a Plan name	PREMIER QUARTZ & STONE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER QUARTZ & STONE LLC	**c** EIN-PN	85-0857758-501
a Plan name	PREMIER REFRACTORY SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIER REFRACTORY SUPPLY	**c** EIN-PN	87-4469664-501
a Plan name	PREMIERE RESIDENTIAL MORTGAGE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PREMIERE RESIDENTIAL MORTGAGE INC.	**c** EIN-PN	42-1574244-501
a Plan name	PREVENTIVE PLUS INC MCF BENEFIT PLAN		
b Name of plan sponsor	PREVENTIVE PLUS INC	**c** EIN-PN	43-1703519-501

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

a Plan name	PRI INC MCF BENEFIT PLAN		
b Name of plan sponsor	PRI INC	**c** EIN-PN	43-1213661-501
a Plan name	PRIER TIRE MCF BENEFIT PLAN		
b Name of plan sponsor	PRIER TIRE	**c** EIN-PN	43-1771076-501
a Plan name	PRIGGEL FAMILY DENTISTRY DMD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRIGGEL FAMILY DENTISTRY DMD LLC	**c** EIN-PN	43-1914311-501
a Plan name	PRIME BUILDING AND CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRIME BUILDING AND CONSTRUCTION LLC	**c** EIN-PN	82-1007965-501
a Plan name	PRIME HOME CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRIME HOME CARE, LLC	**c** EIN-PN	87-3707272-501
a Plan name	PRIME RV SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	PRIME RV SERVICES	**c** EIN-PN	83-2329587-501
a Plan name	PRIMO BRANDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRIMO BRANDS LLC	**c** EIN-PN	87-3546481-501
a Plan name	PRO AUTO SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	PRO AUTO SERVICE	**c** EIN-PN	43-1459569-501
a Plan name	PRO DIGS DIRECTIONAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRO DIGS DIRECTIONAL LLC	**c** EIN-PN	88-0788792-501
a Plan name	PRO MED LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRO MED LLC	**c** EIN-PN	04-3684837-501
a Plan name	PRO PAIN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRO PAIN LLC	**c** EIN-PN	27-2719495-501
a Plan name	PRO PUMPING AND HYDROJETTING MCF BENEFIT PLAN		
b Name of plan sponsor	PRO PUMPING AND HYDROJETTING	**c** EIN-PN	81-5274588-501

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

a Plan name	PRO SHIP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRO SHIP LLC	**c** EIN-PN	81-2942632-501
a Plan name	PROAG VENTURES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROAG VENTURES LLC	**c** EIN-PN	47-2012621-501
a Plan name	PROFESSIONAL IMAGING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONAL IMAGING LLC	**c** EIN-PN	30-0192120-501
a Plan name	PROFESSIONAL INSURANCE & FINANCIAL SERVICES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONAL INSURANCE & FINANCIAL SERVICES INC.	**c** EIN-PN	45-2715741-501
a Plan name	PROFESSIONAL REHABILITATION SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONAL REHABILITATION SERVICES	**c** EIN-PN	82-2814020-501
a Plan name	PROFESSIONALLY DESIGNED SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROFESSIONALLY DESIGNED SERVICES LLC	**c** EIN-PN	90-1076290-501
a Plan name	PROFILE TECHNOLOGY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	PROFILE TECHNOLOGY, INC.	**c** EIN-PN	43-1241671-501
a Plan name	PROGRESS ENGINEERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROGRESS ENGINEERING LLC	**c** EIN-PN	43-1808660-501
a Plan name	PROGRESS PROPERTY GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	PROGRESS PROPERTY GROUP	**c** EIN-PN	20-1288123-501
a Plan name	PROGRESSIVE UTILITY RISK CONSULTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROGRESSIVE UTILITY RISK CONSULTING, LLC	**c** EIN-PN	46-3446644-501
a Plan name	PROJECT RESCUE FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	PROJECT RESCUE FOUNDATION	**c** EIN-PN	45-5374961-501
a Plan name	PROMO REALTY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROMO REALTY LLC	**c** EIN-PN	85-1812676-501

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

a Plan name	PRO-MOTION GRAPHICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRO-MOTION GRAPHICS LLC	**c** EIN-PN	43-1923780-501
a Plan name	PROPERTY PROJECTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROPERTY PROJECTS LLC	**c** EIN-PN	20-5737525-501
a Plan name	PROPERTY SERVICES INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	PROPERTY SERVICES INDUSTRIES	**c** EIN-PN	47-4531460-501
a Plan name	PROSERVICE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROSERVICE GROUP LLC	**c** EIN-PN	83-1235629-501
a Plan name	PROSPECT LOGISTICS SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROSPECT LOGISTICS SERVICES LLC	**c** EIN-PN	27-3802965-501
a Plan name	PROSPER COMPANIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROSPER COMPANIES LLC	**c** EIN-PN	88-3901547-501
a Plan name	PROVENANCE SOAPWORKS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PROVENANCE SOAPWORKS, LLC	**c** EIN-PN	90-0640801-501
a Plan name	PROVIDENCE CHRISTIAN ACADEMY JR SR HIGH MCF BENEFIT PLAN		
b Name of plan sponsor	PROVIDENCE CHRISTIAN ACADEMY JR SR HIGH	**c** EIN-PN	43-1690878-501
a Plan name	PRYOR FAMILY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PRYOR FAMILY DENTAL LLC	**c** EIN-PN	47-2194691-501
a Plan name	PSC ACCOUNTING & TAX SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	PSC ACCOUNTING & TAX SERVICES	**c** EIN-PN	20-3505093-501
a Plan name	PSYCHIATRIC CARE AND RESEARCH CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	PSYCHIATRIC CARE AND RESEARCH CENTER	**c** EIN-PN	45-3629551-501
a Plan name	PUBLIC SAFETY UPFITTERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PUBLIC SAFETY UPFITTERS LLC	**c** EIN-PN	90-0651270-501

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

a Plan name	PULASKI COUNTY HEALTH MCF BENEFIT PLAN		
b Name of plan sponsor	PULASKI COUNTY HEALTH	**c** EIN-PN	43-6004536-501
a Plan name	PULASKI COUNTY TOURISM BUREAU MCF BENEFIT PLAN		
b Name of plan sponsor	PULASKI COUNTY TOURISM BUREAU	**c** EIN-PN	43-1832544-501
a Plan name	PURPLE RAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PURPLE RAM LLC	**c** EIN-PN	27-2803405-501
a Plan name	PURSCHKE OIL COMPANY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	PURSCHKE OIL COMPANY, INC	**c** EIN-PN	43-0768139-501
a Plan name	PUTNAM AUTOMATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PUTNAM AUTOMATION LLC	**c** EIN-PN	46-1178363-502
a Plan name	PUTNAM COUNTY CARE CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	PUTNAM COUNTY CARE CENTER	**c** EIN-PN	43-0918209-501
a Plan name	PV VENTURES MCF BENEFIT PLAN		
b Name of plan sponsor	PV VENTURES	**c** EIN-PN	87-1654470-501
a Plan name	PYATT EYE CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PYATT EYE CARE, LLC	**c** EIN-PN	26-3220459-501
a Plan name	PYTHON PLUMBING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	PYTHON PLUMBING, LLC	**c** EIN-PN	46-3127569-501
a Plan name	Q AND A BUSINESS SOLUTIONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	Q AND A BUSINESS SOLUTIONS INC	**c** EIN-PN	43-1836607-501
a Plan name	QDC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QDC LLC	**c** EIN-PN	43-1217683-501
a Plan name	QFA PROS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QFA PROS LLC	**c** EIN-PN	82-4329754-501

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

a Plan name	QMI LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QMI LLC	**c** EIN-PN	47-1358334-501
a Plan name	QUACKING DONUTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUACKING DONUTS, INC	**c** EIN-PN	82-2283135-501
a Plan name	QUAIL VALLEY VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	QUAIL VALLEY VETERINARY CLINIC	**c** EIN-PN	43-1789660-501
a Plan name	QUALITY AUTO REPAIR AND TIRE MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY AUTO REPAIR AND TIRE	**c** EIN-PN	27-1656847-501
a Plan name	QUALITY BUILDERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY BUILDERS LLC	**c** EIN-PN	43-1813883-501
a Plan name	QUALITY CRAFT INDUSTRIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY CRAFT INDUSTRIES INC	**c** EIN-PN	20-8121842-501
a Plan name	QUALITY CUT LAWNCARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY CUT LAWNCARE LLC	**c** EIN-PN	27-4724173-501
a Plan name	QUALITY EXTERIORS MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY EXTERIORS	**c** EIN-PN	80-0210617-501
a Plan name	QUALITY FIRE EXTINGUISHERS COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY FIRE EXTINGUISHERS COMPANY LLC	**c** EIN-PN	01-0894006-501
a Plan name	QUALITY GLASS AND MIRROR MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY GLASS AND MIRROR	**c** EIN-PN	43-1667032-501
a Plan name	QUALITY LAWN AND GARDEN INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY LAWN AND GARDEN INC	**c** EIN-PN	43-1675805-501
a Plan name	QUALITY LAWN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY LAWN, LLC	**c** EIN-PN	61-1577800-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MACHINE AND FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY MACHINE AND FABRICATION	**c** EIN-PN	46-3745063-501
a Plan name	QUALITY SERVICE OF KC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY SERVICE OF KC LLC	**c** EIN-PN	43-1879980-501
a Plan name	QUALITY STAINLESS PRODUCTS MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY STAINLESS PRODUCTS	**c** EIN-PN	43-1900003-501
a Plan name	QUALITY TAPING AND PAINTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY TAPING AND PAINTING INC	**c** EIN-PN	43-1913569-501
a Plan name	QUALITY TOUCH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY TOUCH LLC	**c** EIN-PN	20-2353443-501
a Plan name	QUALITY TRANSMISSION SERVICE INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUALITY TRANSMISSION SERVICE INC	**c** EIN-PN	80-0432971-501
a Plan name	QUANTUM BRANSON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUANTUM BRANSON LLC	**c** EIN-PN	82-0649530-501
a Plan name	QUARLES ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUARLES ENTERPRISES LLC	**c** EIN-PN	84-2389263-501
a Plan name	QUEEN ANNES LACE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUEEN ANNES LACE LLC	**c** EIN-PN	46-0909796-501
a Plan name	QUEEN CITY DISPOSAL MCF BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY DISPOSAL	**c** EIN-PN	46-5050410-501
a Plan name	QUEEN CITY EXECUTIVE CLEANING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY EXECUTIVE CLEANING LLC	**c** EIN-PN	87-3043584-501
a Plan name	QUEEN CITY HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	QUEEN CITY HEATING AND COOLING	**c** EIN-PN	46-2435621-501

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

a Plan name	QUIN MCINTOSH CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	QUIN MCINTOSH CONSTRUCTION	**c** EIN-PN	87-2893481-501
a Plan name	QUINN DISTRIBUTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	QUINN DISTRIBUTORS INC	**c** EIN-PN	43-0975803-501
a Plan name	R & F TILE & MARBLE CO, INC MCF BENEFIT PLAN		
b Name of plan sponsor	R & F TILE & MARBLE CO, INC	**c** EIN-PN	43-1038142-501
a Plan name	R & K EXCAVATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	R & K EXCAVATION INC	**c** EIN-PN	43-1563294-501
a Plan name	R & L INVESTMENTS OF FREDERICKTOWN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	R & L INVESTMENTS OF FREDERICKTOWN LLC	**c** EIN-PN	46-2121633-501
a Plan name	R AND D WELL DRILLING MCF BENEFIT PLAN		
b Name of plan sponsor	R AND D WELL DRILLING	**c** EIN-PN	88-4116848-501
a Plan name	R C JONES & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	R C JONES & ASSOCIATES	**c** EIN-PN	20-1099618-501
a Plan name	R HOMES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	R HOMES, LLC	**c** EIN-PN	20-1056492-501
a Plan name	R&M LEGAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	R&M LEGAL GROUP LLC	**c** EIN-PN	86-1711681-501
a Plan name	R&R PROPERTY MCF BENEFIT PLAN		
b Name of plan sponsor	R&R PROPERTY	**c** EIN-PN	81-4685459-501
a Plan name	R&W OUTDOOR EQUIPMENT REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	R&W OUTDOOR EQUIPMENT REPAIR	**c** EIN-PN	84-3519594-501
a Plan name	RADIOLOGIC IMAGING CONSULTANTS LLP MCF BENEFIT PLAN		
b Name of plan sponsor	RADIOLOGIC IMAGING CONSULTANTS LLP	**c** EIN-PN	43-1833381-501

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

a Plan name	RADIOPHONE ENGINEERING INC MCF BENEFIT PLAN		
b Name of plan sponsor	RADIOPHONE ENGINEERING INC	**c** EIN-PN	41-0972492-501
a Plan name	RAGTAG FILM SOCIETY MCF BENEFIT PLAN		
b Name of plan sponsor	RAGTAG FILM SOCIETY	**c** EIN-PN	04-3770411-501
a Plan name	RAIN CROW RANCH MCF BENEFIT PLAN		
b Name of plan sponsor	RAIN CROW RANCH	**c** EIN-PN	20-0634448-501
a Plan name	RAINBOW TROUT & GAME RANCH INC MCF BENEFIT PLAN		
b Name of plan sponsor	RAINBOW TROUT & GAME RANCH INC	**c** EIN-PN	44-0649574-501
a Plan name	RAMBA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAMBA, LLC	**c** EIN-PN	85-2790419-501
a Plan name	RAMBLEWOOD PLUMBING COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAMBLEWOOD PLUMBING COMPANY LLC	**c** EIN-PN	93-2051841-501
a Plan name	RAMONA HEINEY INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	RAMONA HEINEY INSURANCE AGENCY INC	**c** EIN-PN	81-4490313-501
a Plan name	RANDI GREEN D M D LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RANDI GREEN D M D LLC	**c** EIN-PN	45-0819989-501
a Plan name	RANDY HOOVER & SONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RANDY HOOVER & SONS LLC	**c** EIN-PN	27-1000559-501
a Plan name	RANDYS JEWELRY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RANDYS JEWELRY, INC	**c** EIN-PN	43-1464994-501
a Plan name	RAPSODO, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RAPSODO, INC	**c** EIN-PN	38-3990308-501
a Plan name	RATERMANN AND ASSOCIATES INC MCF BENEFIT PLAN		
b Name of plan sponsor	RATERMANN AND ASSOCIATES INC	**c** EIN-PN	43-1818496-501

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

a Plan name	RAUL WALTERS PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAUL WALTERS PROPERTIES, LLC	**c** EIN-PN	43-1966962-501
a Plan name	RAVEN DEVELOPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAVEN DEVELOPMENT LLC	**c** EIN-PN	11-3665465-501
a Plan name	RAVEN RESOURCES CORP MCF BENEFIT PLAN		
b Name of plan sponsor	RAVEN RESOURCES CORP	**c** EIN-PN	86-2483015-501
a Plan name	RAWMEDICAL MCF BENEFIT PLAN		
b Name of plan sponsor	RAWMEDICAL	**c** EIN-PN	47-5546844-501
a Plan name	RAYCO AIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAYCO AIR LLC	**c** EIN-PN	88-1855631-501
a Plan name	RAYMER ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RAYMER ENTERPRISES LLC	**c** EIN-PN	80-0251756-501
a Plan name	R-BIOPHARM INC MCF BENEFIT PLAN		
b Name of plan sponsor	R-BIOPHARM INC	**c** EIN-PN	38-3426313-501
a Plan name	RCE VENTURES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RCE VENTURES, LLC	**c** EIN-PN	41-2077619-501
a Plan name	RCF MEDICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RCF MEDICAL LLC	**c** EIN-PN	83-3705485-501
a Plan name	RDT DRAFTING AND DESIGN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RDT DRAFTING AND DESIGN LLC	**c** EIN-PN	47-2018178-501
a Plan name	REAL ESTATE ANALYSTS LTD MCF BENEFIT PLAN		
b Name of plan sponsor	REAL ESTATE ANALYSTS LTD	**c** EIN-PN	43-1098218-501
a Plan name	REAL LIVING NOW REAL ESTATE MCF BENEFIT PLAN		
b Name of plan sponsor	REAL LIVING NOW REAL ESTATE	**c** EIN-PN	20-5399891-501

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

a Plan name	REASBECK INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	REASBECK INVESTMENTS	**c** EIN-PN	81-1640685-501
a Plan name	REAUPS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	REAUPS, INC.	**c** EIN-PN	20-0581352-501
a Plan name	REAVLEY DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REAVLEY DENTAL LLC	**c** EIN-PN	84-2184137-502
a Plan name	RED ONION MCF BENEFIT PLAN		
b Name of plan sponsor	RED ONION	**c** EIN-PN	43-1717353-501
a Plan name	REDD'S INC MCF BENEFIT PLAN		
b Name of plan sponsor	REDDS INC	**c** EIN-PN	43-1699042-501
a Plan name	REDEXIM NORTH AMERICA INC MCF BENEFIT PLAN		
b Name of plan sponsor	REDEXIM NORTH AMERICA INC	**c** EIN-PN	23-2950155-501
a Plan name	REDINGS MILL FIRE DEPARTMENT MCF BENEFIT PLAN		
b Name of plan sponsor	REDINGS MILL FIRE DEPARTMENT	**c** EIN-PN	43-1209839-501
a Plan name	REDMOND AND SONS EXCAVATING MCF BENEFIT PLAN		
b Name of plan sponsor	REDMOND AND SONS EXCAVATING	**c** EIN-PN	43-1620407-501
a Plan name	REED & SONS JEWELERS MCF BENEFIT PLAN		
b Name of plan sponsor	REED & SONS JEWELERS	**c** EIN-PN	43-1186284-501
a Plan name	REED PROPERTIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	REED PROPERTIES INC	**c** EIN-PN	43-1616324-501
a Plan name	REED RUBBER SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REED RUBBER SOLUTIONS LLC	**c** EIN-PN	45-3569635-501
a Plan name	REEDS CONCRETE CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	REEDS CONCRETE CONSTRUCTION	**c** EIN-PN	45-4805642-502

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	REEDS SPRING READY MIX MCF BENEFIT PLAN		
b Name of plan sponsor	REEDS SPRING READY MIX	**c** EIN-PN	88-2673558-501
a Plan name	REEL ICE CO MCF BENEFIT PLAN		
b Name of plan sponsor	REEL ICE CO	**c** EIN-PN	37-1458569-501
a Plan name	REFINEM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REFINEM LLC	**c** EIN-PN	45-4043033-501
a Plan name	REGAL DOG PRODUCTS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REGAL DOG PRODUCTS, LLC	**c** EIN-PN	82-2323491-501
a Plan name	REGIONAL DERMATOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	REGIONAL DERMATOLOGY	**c** EIN-PN	27-2614282-502
a Plan name	REGIONAL FAMILY CRISIS CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	REGIONAL FAMILY CRISIS CENTER	**c** EIN-PN	43-1738922-501
a Plan name	REHAB CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REHAB CONSTRUCTION LLC	**c** EIN-PN	46-3871854-501
a Plan name	REI GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	REI GROUP	**c** EIN-PN	26-4008065-501
a Plan name	REICHARDT NOCE AND YOUNG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REICHARDT NOCE AND YOUNG LLC	**c** EIN-PN	86-2391781-501
a Plan name	REICON CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REICON CONTRACTING, LLC	**c** EIN-PN	26-1694306-501
a Plan name	REIDS MECHANICAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REIDS MECHANICAL LLC	**c** EIN-PN	47-2684749-501
a Plan name	REINER ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REINER ELECTRIC LLC	**c** EIN-PN	45-4117297-501

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

a Plan name	REISCH DEVELOPMENT AND CONSTRUCTION SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REISCH DEVELOPMENT AND CONSTRUCTION SERVICES LLC	**c** EIN-PN	27-0952238-501
a Plan name	RELIABLE PROTECT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RELIABLE PROTECT LLC	**c** EIN-PN	92-0461017-501
a Plan name	RELIABLE TRUCKING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	RELIABLE TRUCKING SERVICES	**c** EIN-PN	93-4872745-501
a Plan name	REMAINS MCF BENEFIT PLAN		
b Name of plan sponsor	REMAINS	**c** EIN-PN	87-4143901-501
a Plan name	RENU PAK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RENU PAK LLC	**c** EIN-PN	81-4224806-501
a Plan name	REP CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REP CONTRACTING, LLC	**c** EIN-PN	20-5711674-501
a Plan name	REPROCAD ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	REPROCAD ASSOCIATES	**c** EIN-PN	06-1501527-501
a Plan name	REPUBLIC INCORPORATED MCF BENEFIT PLAN		
b Name of plan sponsor	REPUBLIC INCORPORATED	**c** EIN-PN	43-1662766-501
a Plan name	REPUBLIC REAL ESTATE SVCS MCF BENEFIT PLAN		
b Name of plan sponsor	REPUBLIC REAL ESTATE SVCS	**c** EIN-PN	81-5230949-501
a Plan name	REPUBLIC ROOFING COMPANY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	REPUBLIC ROOFING COMPANY, INC.	**c** EIN-PN	43-0889894-501
a Plan name	RESCUED FURNISHINGS & DESIGNS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RESCUED FURNISHINGS & DESIGNS LLC	**c** EIN-PN	46-2821326-501
a Plan name	RESEARCH & TECHNOLOGY CONSULTANTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RESEARCH & TECHNOLOGY CONSULTANTS, INC	**c** EIN-PN	45-0463398-501

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

a Plan name	RESERVE CONCEPTS MCF BENEFIT PLAN		
b Name of plan sponsor	RESERVE CONCEPTS	**c** EIN-PN	87-3790362-501
a Plan name	RESOLVE IT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RESOLVE IT LLC	**c** EIN-PN	46-5489198-501
a Plan name	RESOURCE ONE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RESOURCE ONE LLC	**c** EIN-PN	43-1921223-501
a Plan name	RESOURCES LTD MCF BENEFIT PLAN		
b Name of plan sponsor	RESOURCES LTD	**c** EIN-PN	43-1021855-501
a Plan name	RESURFACING PLUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RESURFACING PLUS LLC	**c** EIN-PN	90-0646022-501
a Plan name	RETINA ASSOCIATES OF MISSOURI.P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	RETINA ASSOCIATES OF MISSOURI.P.C.	**c** EIN-PN	43-1289321-501
a Plan name	REUTER MERKLE LAW FIRM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REUTER MERKLE LAW FIRM, LLC	**c** EIN-PN	27-2016107-501
a Plan name	REVITALIFE WELLNESS MCF BENEFIT PLAN		
b Name of plan sponsor	REVITALIFE WELLNESS	**c** EIN-PN	45-5181819-501
a Plan name	REVOLT LABS II LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REVOLT LABS II LLC	**c** EIN-PN	86-3997452-501
a Plan name	REVOLUTION PHYSICAL THERAPY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	REVOLUTION PHYSICAL THERAPY LLC	**c** EIN-PN	47-4645141-501
a Plan name	RFC INDUSTRIES II, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RFC INDUSTRIES II, LLC	**c** EIN-PN	47-4188498-501
a Plan name	RH BRUNS VAULT AND MONUMENT CO MCF BENEFIT PLAN		
b Name of plan sponsor	RH BRUNS VAULT AND MONUMENT CO	**c** EIN-PN	43-1047620-501

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

a Plan name	RH KWW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RH KWW LLC	**c** EIN-PN	46-3990548-501
a Plan name	RHINO DISTRIBUTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RHINO DISTRIBUTION LLC	**c** EIN-PN	83-1618244-501
a Plan name	RHINO REALTY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RHINO REALTY GROUP LLC	**c** EIN-PN	45-4146284-501
a Plan name	RHODES AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RHODES AUTOMOTIVE LLC	**c** EIN-PN	27-5360460-501
a Plan name	RICE PAINTING CO, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RICE PAINTING CO, INC	**c** EIN-PN	43-1173939-501
a Plan name	RICH KRAMER CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	RICH KRAMER CONSTRUCTION INC	**c** EIN-PN	43-1591481-501
a Plan name	RICHARD B ALVAREZ DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RICHARD B ALVAREZ DDS LLC	**c** EIN-PN	82-5297513-502
a Plan name	RICHARD T DEWILDE CPA PC MCF BENEFIT PLAN		
b Name of plan sponsor	RICHARD T DEWILDE CPA PC	**c** EIN-PN	43-1373956-502
a Plan name	RICHARDET PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RICHARDET PAINTING LLC	**c** EIN-PN	47-3960708-501
a Plan name	RICHTER EXCAVATING & PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RICHTER EXCAVATING & PLUMBING LLC	**c** EIN-PN	46-2060099-501
a Plan name	RICHTER GRAPHICS COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	RICHTER GRAPHICS COMPANY	**c** EIN-PN	43-1219656-501
a Plan name	RICK RECHT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RICK RECHT, LLC	**c** EIN-PN	43-1946446-501

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

a Plan name	RIDENHOUR DIRECTIONAL DRILLING MCF BENEFIT PLAN		
b Name of plan sponsor	RIDENHOUR DIRECTIONAL DRILLING	**c** EIN-PN	27-4328562-501
a Plan name	RIDENOUR PLASTIC SURGERY MCF BENEFIT PLAN		
b Name of plan sponsor	RIDENOUR PLASTIC SURGERY	**c** EIN-PN	20-0063471-501
a Plan name	RIDGE TOP ADVISORY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RIDGE TOP ADVISORY, LLC	**c** EIN-PN	83-2463294-501
a Plan name	RINGENBERG INC MCF BENEFIT PLAN		
b Name of plan sponsor	RINGENBERG INC	**c** EIN-PN	83-1444364-501
a Plan name	RINNE PHARMACY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RINNE PHARMACY LLC	**c** EIN-PN	47-1888974-501
a Plan name	RINO INC MCF BENEFIT PLAN		
b Name of plan sponsor	RINO INC	**c** EIN-PN	43-1936421-501
a Plan name	RIO CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RIO CONTRACTING LLC	**c** EIN-PN	20-1691059-501
a Plan name	RIPLEY COUNTY AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	RIPLEY COUNTY AMBULANCE DISTRICT	**c** EIN-PN	56-2651788-501
a Plan name	RITE WAY FOUNDATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RITE WAY FOUNDATION LLC	**c** EIN-PN	43-1896848-501
a Plan name	RITTER PAINTING SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	RITTER PAINTING SERVICES	**c** EIN-PN	83-3785291-501
a Plan name	RIVER CITY CRAFTSMEN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVER CITY CRAFTSMEN LLC	**c** EIN-PN	87-3748066-501
a Plan name	RIVER CITY ENDODONTICS LLS MCF BENEFIT PLAN		
b Name of plan sponsor	RIVER CITY ENDODONTICS LLS	**c** EIN-PN	85-3847656-501

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

a Plan name	RIVER RELIEF, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVER RELIEF, INC	**c** EIN-PN	03-0425187-501
a Plan name	RIVER VIEW FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVER VIEW FARMS INC	**c** EIN-PN	43-1060450-501
a Plan name	RIVERBEND DENTISTRY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERBEND DENTISTRY, LLC	**c** EIN-PN	46-4869811-501
a Plan name	RIVERBOAT EXCURSIONS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERBOAT EXCURSIONS INC.	**c** EIN-PN	43-1776134-501
a Plan name	RIVERHEART FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERHEART FAMILY DENTISTRY	**c** EIN-PN	81-0699649-501
a Plan name	RIVERS BEND PIZZERIA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERS BEND PIZZERIA LLC	**c** EIN-PN	82-5480802-501
a Plan name	RIVERSIDE FARMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERSIDE FARMS INC	**c** EIN-PN	43-1776845-501
a Plan name	RIVERSIDE LANDSCAPING INC MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERSIDE LANDSCAPING INC	**c** EIN-PN	56-2324639-501
a Plan name	RIVERTOWN WINDOWS MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERTOWN WINDOWS	**c** EIN-PN	93-4533801-502
a Plan name	RIVERWAYS FEDERAL CREDIT UNION MCF BENEFIT PLAN		
b Name of plan sponsor	RIVERWAYS FEDERAL CREDIT UNION	**c** EIN-PN	43-0769339-501
a Plan name	RJS ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	RJS ENTERPRISES	**c** EIN-PN	43-1904670-501
a Plan name	RLB CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	RLB CONSTRUCTION	**c** EIN-PN	20-1023713-501

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

a Plan name	ROARK WOOD PRODUCTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROARK WOOD PRODUCTS, INC.	**c** EIN-PN	20-0246285-501
a Plan name	ROBBINS CONSTRUCTION MANAGEMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBBINS CONSTRUCTION MANAGEMENT INC	**c** EIN-PN	20-3254447-501
a Plan name	ROBERSON TOOL & DIE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERSON TOOL & DIE LLC	**c** EIN-PN	06-1655966-501
a Plan name	ROBERT GUEHNE TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERT GUEHNE TRUCKING LLC	**c** EIN-PN	46-2376121-501
a Plan name	ROBERT M TOBBEN CPA MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERT M TOBBEN CPA	**c** EIN-PN	43-1726859-501
a Plan name	ROBERT SNELL ELECTRIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERT SNELL ELECTRIC INC	**c** EIN-PN	43-1698896-501
a Plan name	ROBERT W RENGER, DDS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERT W RENGER, DDS, LLC	**c** EIN-PN	46-0860664-501
a Plan name	ROBERTS AUTOMOTIVE SERVICE CENTER INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS AUTOMOTIVE SERVICE CENTER INC.	**c** EIN-PN	43-1685078-501
a Plan name	ROBERTS ELECTRICAL CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS ELECTRICAL CONTRACTING	**c** EIN-PN	30-0001961-501
a Plan name	ROBERTS PERRYMAN PC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS PERRYMAN PC	**c** EIN-PN	43-0995807-501
a Plan name	ROBERTS PEST CONTROL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS PEST CONTROL LLC	**c** EIN-PN	27-5099772-501
a Plan name	ROBERTS, MCKENZIE, MANGAN AND CUMMINGS MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTS, MCKENZIE, MANGAN AND CUMMINGS	**c** EIN-PN	43-1244312-501

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

a Plan name	ROBERTSON CUSTOM DOZING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBERTSON CUSTOM DOZING LLC	**c** EIN-PN	26-4228198-501
a Plan name	ROB'S AUTO REPAIR, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBS AUTO REPAIR, LLC	**c** EIN-PN	81-4714842-501
a Plan name	ROBUST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROBUST LLC	**c** EIN-PN	20-4989402-501
a Plan name	ROCK BRIDGE ANIMAL HOSPITAL PC MCF BENEFIT PLAN		
b Name of plan sponsor	ROCK BRIDGE ANIMAL HOSPITAL PC	**c** EIN-PN	20-2651933-501
a Plan name	ROCKET CONNECT, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROCKET CONNECT, LLC.	**c** EIN-PN	81-4188631-501
a Plan name	ROCKIN J VETERINARY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROCKIN J VETERINARY SERVICES LLC	**c** EIN-PN	86-3971776-501
a Plan name	ROCKING W FARM & HOME MCF BENEFIT PLAN		
b Name of plan sponsor	ROCKING W FARM & HOME	**c** EIN-PN	85-2901352-501
a Plan name	ROCKWELL BEER COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROCKWELL BEER COMPANY LLC	**c** EIN-PN	81-3492886-501
a Plan name	RODERICK ADVERTISING CO MCF BENEFIT PLAN		
b Name of plan sponsor	RODERICK ADVERTISING CO	**c** EIN-PN	43-0951417-501
a Plan name	ROGER KEPNER INC MCF BENEFIT PLAN		
b Name of plan sponsor	ROGER KEPNER INC	**c** EIN-PN	43-1567053-501
a Plan name	ROGERS EHRHARDT WEBER AND HOWARD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROGERS EHRHARDT WEBER AND HOWARD LLC	**c** EIN-PN	87-0698792-501
a Plan name	ROGERS ENTERPRISES OF MISSOURI, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROGERS ENTERPRISES OF MISSOURI, INC.	**c** EIN-PN	20-5091222-501

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

a Plan name	ROLAND LAWN SERVICE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROLAND LAWN SERVICE INC.	**c** EIN-PN	43-1851250-501
a Plan name	ROLLA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	ROLLA CHAMBER OF COMMERCE	**c** EIN-PN	43-0484518-501
a Plan name	ROLLIE JOHNSON MCF BENEFIT PLAN		
b Name of plan sponsor	ROLLIE JOHNSON	**c** EIN-PN	43-1036919-502
a Plan name	ROLWES ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	ROLWES ELECTRIC	**c** EIN-PN	46-2673120-501
a Plan name	ROMANN FARMS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	ROMANN FARMS, INC	**c** EIN-PN	43-1782806-501
a Plan name	ROMAN'S ROAD PIZZA INC MCF BENEFIT PLAN		
b Name of plan sponsor	ROMANS ROAD PIZZA INC	**c** EIN-PN	43-1650859-501
a Plan name	ROMBACH CONTRACTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROMBACH CONTRACTING, LLC	**c** EIN-PN	46-0911035-501
a Plan name	ROMELLA FOODS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROMELLA FOODS, LLC	**c** EIN-PN	81-3218550-501
a Plan name	RON DISHMAN TOWING INC MCF BENEFIT PLAN		
b Name of plan sponsor	RON DISHMAN TOWING INC	**c** EIN-PN	26-2973521-501
a Plan name	RONALD JAMES SHERSTOFF DM MCF BENEFIT PLAN		
b Name of plan sponsor	RONALD JAMES SHERSTOFF DM	**c** EIN-PN	20-2090462-501
a Plan name	ROOST BAR AND GRILL MCF BENEFIT PLAN		
b Name of plan sponsor	ROOST BAR AND GRILL	**c** EIN-PN	26-3708294-501
a Plan name	ROOT HOSPITALITY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROOT HOSPITALITY LLC	**c** EIN-PN	85-3470096-501

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

a Plan name	ROOTED CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROOTED CONTRACTING LLC	**c** EIN-PN	92-2060999-501
a Plan name	ROSCOE MAYER CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	ROSCOE MAYER CONTRACTING	**c** EIN-PN	43-1392375-501
a Plan name	ROSEBUD TRACTOR ANDEQUIPMENT CO., LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROSEBUD TRACTOR ANDEQUIPMENT CO., LLC	**c** EIN-PN	43-0896733-501
a Plan name	ROST SUPERIOR SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROST SUPERIOR SERVICES, LLC	**c** EIN-PN	20-4272104-501
a Plan name	ROUNDTABLE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROUNDTABLE SOLUTIONS LLC	**c** EIN-PN	84-2866083-501
a Plan name	ROUSE SHEET METAL MCF BENEFIT PLAN		
b Name of plan sponsor	ROUSE SHEET METAL	**c** EIN-PN	43-1014077-501
a Plan name	ROUTE 63 DISTRIBUTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROUTE 63 DISTRIBUTING LLC	**c** EIN-PN	87-2313855-501
a Plan name	ROY COPE FARM MCF BENEFIT PLAN		
b Name of plan sponsor	ROY COPE FARM	**c** EIN-PN	31-1494545-501
a Plan name	ROYALE ORLEANS MCF BENEFIT PLAN		
b Name of plan sponsor	ROYALE ORLEANS	**c** EIN-PN	43-1165146-501
a Plan name	ROYS TIRE AND AUTO, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	ROYS TIRE AND AUTO, INC.	**c** EIN-PN	20-1975645-501
a Plan name	ROZA CAPITAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ROZA CAPITAL GROUP LLC	**c** EIN-PN	45-2473750-501
a Plan name	RPM LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RPM LOGISTICS LLC	**c** EIN-PN	87-1582859-501

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

a Plan name	RPMC LASERS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	RPMC LASERS INC.	**c** EIN-PN	43-1732174-501
a Plan name	RS CHRISTIAN CONTRACTING, INC MCF BENEFIT PLAN		
b Name of plan sponsor	RS CHRISTIAN CONTRACTING, INC	**c** EIN-PN	43-1907946-501
a Plan name	RST PROFESSIONAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	RST PROFESSIONAL SERVICES	**c** EIN-PN	26-3007618-501
a Plan name	RTM CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	RTM CONTRACTING	**c** EIN-PN	46-0994411-501
a Plan name	RTMC HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RTMC HOLDINGS LLC	**c** EIN-PN	84-3161555-501
a Plan name	RUBY KOKO DESIGNS MCF BENEFIT PLAN		
b Name of plan sponsor	RUBY KOKO DESIGNS	**c** EIN-PN	83-1455011-501
a Plan name	RURAL MISSOURI INSURANCE SERVICES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	RURAL MISSOURI INSURANCE SERVICES, INC.	**c** EIN-PN	43-1630912-501
a Plan name	RUSCHMEIER-SMITH FUNERAL HOMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RUSCHMEIER-SMITH FUNERAL HOMES LLC	**c** EIN-PN	88-3420351-501
a Plan name	RUSHING MARINE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RUSHING MARINE SERVICE LLC	**c** EIN-PN	43-1703432-501
a Plan name	RUSSELL HOUSE RESPONSE TO DOMESTIC & SEXUAL VIOLE MCF BENEFIT PLAN		
b Name of plan sponsor	RUSSELL HOUSE RESPONSE TO DOMESTIC & SEXUAL VIOLE	**c** EIN-PN	43-1641112-501
a Plan name	RUSSELL PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RUSSELL PLUMBING LLC	**c** EIN-PN	47-3791453-501
a Plan name	RX SOURCING STRATEGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RX SOURCING STRATEGIES LLC	**c** EIN-PN	37-1755097-502

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	RYAN O ROLWING FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RYAN O ROLWING FARMS LLC	**c** EIN-PN	87-4110125-501
a Plan name	RYAN PRENGER CONSTRUCTION COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	RYAN PRENGER CONSTRUCTION COMPANY LLC	**c** EIN-PN	90-1508769-501
a Plan name	S & K AVIATION MCF BENEFIT PLAN		
b Name of plan sponsor	S & K AVIATION	**c** EIN-PN	87-2636397-502
a Plan name	S & K CONTRACTORS INC MCF BENEFIT PLAN		
b Name of plan sponsor	S & K CONTRACTORS INC	**c** EIN-PN	83-0361891-501
a Plan name	S & S RECYCLING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	S & S RECYCLING LLC	**c** EIN-PN	20-1952093-501
a Plan name	S AND S PRINTING AND MCF BENEFIT PLAN		
b Name of plan sponsor	S AND S PRINTING AND	**c** EIN-PN	43-1371868-501
a Plan name	S K & M WATER AND SEWER CO. MCF BENEFIT PLAN		
b Name of plan sponsor	S K & M WATER AND SEWER CO.	**c** EIN-PN	43-1016170-501
a Plan name	S THOMAS SEHY DMP MCF BENEFIT PLAN		
b Name of plan sponsor	S THOMAS SEHY DMP	**c** EIN-PN	14-1898578-501
a Plan name	S W MCMILLAN INC MCF BENEFIT PLAN		
b Name of plan sponsor	S W MCMILLAN INC	**c** EIN-PN	43-1438256-501
a Plan name	S&D FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	S&D FARMS LLC	**c** EIN-PN	34-2040844-501
a Plan name	S.L.F.I INC. MCF BENEFIT PLAN		
b Name of plan sponsor	S.L.F.I INC.	**c** EIN-PN	33-2477751-501
a Plan name	S3E HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	S3E HOLDINGS LLC	**c** EIN-PN	88-3971663-501

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

a Plan name	SAETTELE JEWELERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SAETTELE JEWELERS INC	**c** EIN-PN	43-1152328-501
a Plan name	SAFE AND SOUND SCHOOLS MCF BENEFIT PLAN		
b Name of plan sponsor	SAFE AND SOUND SCHOOLS	**c** EIN-PN	46-2723169-501
a Plan name	SAFE HOUSE FOR WOMEN INC MCF BENEFIT PLAN		
b Name of plan sponsor	SAFE HOUSE FOR WOMEN INC	**c** EIN-PN	43-1557403-501
a Plan name	SAFI INC MCF BENEFIT PLAN		
b Name of plan sponsor	SAFI INC	**c** EIN-PN	43-1797817-501
a Plan name	SAGE ELECTRICAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAGE ELECTRICAL SERVICES LLC	**c** EIN-PN	27-3286910-501
a Plan name	SAINT LOUIS BANDITS BASEBALL MCF BENEFIT PLAN		
b Name of plan sponsor	SAINT LOUIS BANDITS BASEBALL	**c** EIN-PN	47-1657643-501
a Plan name	SAINT LOUIS DENT COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAINT LOUIS DENT COMPANY LLC	**c** EIN-PN	45-5191894-501
a Plan name	SAINT LOUIS RENOVATORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAINT LOUIS RENOVATORS LLC	**c** EIN-PN	45-3951466-501
a Plan name	SAINY ALI ADEL DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAINY ALI ADEL DDS LLC	**c** EIN-PN	88-1859217-501
a Plan name	SALLY C POWELL DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SALLY C POWELL DDS LLC	**c** EIN-PN	20-3878619-501
a Plan name	SALMON LAND & CATTLE CO. MCF BENEFIT PLAN		
b Name of plan sponsor	SALMON LAND & CATTLE CO.	**c** EIN-PN	43-0986101-501
a Plan name	SALON 3 16 MCF BENEFIT PLAN		
b Name of plan sponsor	SALON 3 16	**c** EIN-PN	46-2787632-501

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

a Plan name	SALT RIVER AMBULANCE DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	SALT RIVER AMBULANCE DISTRICT	**c** EIN-PN	43-1037393-501
a Plan name	SALT RIVER AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SALT RIVER AUTOMOTIVE LLC	**c** EIN-PN	85-1443043-501
a Plan name	SAMS CELLAR OF NEOSHO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAMS CELLAR OF NEOSHO LLC	**c** EIN-PN	87-3744140-501
a Plan name	SANDERS BROTHERS METAL FABRIC MCF BENEFIT PLAN		
b Name of plan sponsor	SANDERS BROTHERS METAL FABRIC	**c** EIN-PN	88-1884747-501
a Plan name	SANDERS, MYERS & BLACKWELL CPAS, LLP MCF BENEFIT PLAN		
b Name of plan sponsor	SANDERS, MYERS & BLACKWELL CPAS, LLP	**c** EIN-PN	84-1901001-501
a Plan name	SANDSTONE CAPITAL MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SANDSTONE CAPITAL MANAGEMENT LLC	**c** EIN-PN	82-1314862-501
a Plan name	SANDY VEST INSURANCE AND FINANCIAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	SANDY VEST INSURANCE AND FINANCIAL SERVICES	**c** EIN-PN	82-4063309-501
a Plan name	SANT AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SANT AUTOMOTIVE LLC	**c** EIN-PN	43-1911042-501
a Plan name	SAPPS HOMEPRO INC MCF BENEFIT PLAN		
b Name of plan sponsor	SAPPS HOMEPRO INC	**c** EIN-PN	43-1704014-501
a Plan name	SARAH LUCE REEDER & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SARAH LUCE REEDER & ASSOCIATES, LLC	**c** EIN-PN	42-1704600-501
a Plan name	SATELLITE SPORTS CONNECTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	SATELLITE SPORTS CONNECTION INC	**c** EIN-PN	25-1820453-501
a Plan name	SAVCO MANUFACTURING CO. INC MCF BENEFIT PLAN		
b Name of plan sponsor	SAVCO MANUFACTURING CO. INC	**c** EIN-PN	85-4394196-501

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

a Plan name	SAVOY PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAVOY PROPERTIES LLC	**c** EIN-PN	43-1869030-501
a Plan name	SAXON GROUP CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SAXON GROUP CO LLC	**c** EIN-PN	65-1261806-501
a Plan name	SAXQUEST INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SAXQUEST INC.	**c** EIN-PN	43-1896130-501
a Plan name	SAYLORS SYSTEMS HEATING AND AIR MCF BENEFIT PLAN		
b Name of plan sponsor	SAYLORS SYSTEMS HEATING AND AIR	**c** EIN-PN	87-2043538-501
a Plan name	SBK ADVERTISING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SBK ADVERTISING LLC	**c** EIN-PN	82-1230726-501
a Plan name	SBN UNLIMITED INC MCF BENEFIT PLAN		
b Name of plan sponsor	SBN UNLIMITED INC	**c** EIN-PN	43-1628174-501
a Plan name	SCAPERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCAPERS LLC	**c** EIN-PN	26-4102646-501
a Plan name	SCFS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCFS LLC	**c** EIN-PN	20-1091189-501
a Plan name	SCHERBEL CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHERBEL CLINIC	**c** EIN-PN	93-1985462-501
a Plan name	SCHILLI PLASTERING CO MCF BENEFIT PLAN		
b Name of plan sponsor	SCHILLI PLASTERING CO	**c** EIN-PN	43-1093438-501
a Plan name	SCHINDLER HOMES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHINDLER HOMES LLC	**c** EIN-PN	83-0901473-501
a Plan name	SCHLOTTOG DIESEL & EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHLOTTOG DIESEL & EXCAVATING LLC	**c** EIN-PN	47-4677186-501

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

a Plan name	SCHMELZ CONTRACTING SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHMELZ CONTRACTING SERVICES LLC	**c** EIN-PN	27-4530663-501
a Plan name	SCHNARRS HARDWARE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNARRS HARDWARE COMPANY	**c** EIN-PN	43-1696773-501
a Plan name	SCHNEITTER FIREWORKS & IMPORTING CO MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNEITTER FIREWORKS & IMPORTING CO	**c** EIN-PN	43-0899204-501
a Plan name	SCHNELL EXPRESS MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNELL EXPRESS	**c** EIN-PN	27-3944200-501
a Plan name	SCHNELLE LAND & CATTLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNELLE LAND & CATTLE LLC	**c** EIN-PN	83-1187891-501
a Plan name	SCHNELLE SM, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNELLE SM, INC.	**c** EIN-PN	39-2060794-501
a Plan name	SCHNIEDERS BROTHERS EXCAVATING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHNIEDERS BROTHERS EXCAVATING, LLC	**c** EIN-PN	43-1926727-501
a Plan name	SCHOEN & SCHMITZ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHOEN & SCHMITZ LLC	**c** EIN-PN	81-1218471-501
a Plan name	SCHOO CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHOO CONTRACTING LLC	**c** EIN-PN	46-2614452-501
a Plan name	SCHROEDER HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	SCHROEDER HEATING AND COOLING	**c** EIN-PN	75-3158201-501
a Plan name	SCHULTZ & MYERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHULTZ & MYERS LLC	**c** EIN-PN	27-2023626-501
a Plan name	SCHULTZ TRACTOR & MACHINE SERVICE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SCHULTZ TRACTOR & MACHINE SERVICE INC.	**c** EIN-PN	20-5065883-501

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

a Plan name	SCHULTZ WOOD & RAPP PC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHULTZ WOOD & RAPP PC	**c** EIN-PN	43-1273431-501
a Plan name	SCHUMER BROS HEATING COOLING & PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHUMER BROS HEATING COOLING & PLUMBING LLC	**c** EIN-PN	82-1535208-502
a Plan name	SCHURE BUILT SUSPENSIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHURE BUILT SUSPENSIONS, LLC	**c** EIN-PN	84-4317482-501
a Plan name	SCHWARTZ BROTHERS LANDSCAPE SOLUTIONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHWARTZ BROTHERS LANDSCAPE SOLUTIONS INC	**c** EIN-PN	26-4087193-501
a Plan name	SCHWARTZ ROOFING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCHWARTZ ROOFING LLC	**c** EIN-PN	85-4089725-501
a Plan name	SCISM MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	SCISM MANAGEMENT	**c** EIN-PN	72-1553456-501
a Plan name	SCJ HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCJ HOLDINGS, LLC	**c** EIN-PN	92-1267023-501
a Plan name	SCJM PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCJM PARTNERS LLC	**c** EIN-PN	33-2483626-501
a Plan name	SCOREBOARD AUTOMOTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	SCOREBOARD AUTOMOTIVE	**c** EIN-PN	81-3885340-501
a Plan name	SCOT JONES HOME CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOT JONES HOME CONSTRUCTION LLC	**c** EIN-PN	92-2033637-501
a Plan name	SCOTLAND COUNTY PHARMACY MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTLAND COUNTY PHARMACY	**c** EIN-PN	26-0438673-502
a Plan name	SCOT-MED LLC BOC ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	SCOT-MED LLC BOC ENTERPRISES	**c** EIN-PN	36-4882889-501

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

a Plan name	SCOTT LEE HEATING COMPANY, INC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTT LEE HEATING COMPANY, INC	**c** EIN-PN	43-1129701-502
a Plan name	SCOTT LOGISTICS MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTT LOGISTICS	**c** EIN-PN	26-2706557-501
a Plan name	SCOTT R. SCHLUETER, DMD MS PC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTT R. SCHLUETER, DMD MS PC	**c** EIN-PN	20-1732402-501
a Plan name	SCOTT S HOME SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTT S HOME SOLUTIONS LLC	**c** EIN-PN	45-2758951-501
a Plan name	SCOTTS HAULING INC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTTS HAULING INC	**c** EIN-PN	43-1683032-501
a Plan name	SCOTTS MINOR COLLISION REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	SCOTTS MINOR COLLISION REPAIR	**c** EIN-PN	91-2146909-501
a Plan name	SCOUT REALTY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCOUT REALTY GROUP LLC	**c** EIN-PN	83-2887019-501
a Plan name	SCS TELECOM SUPPLY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SCS TELECOM SUPPLY, LLC	**c** EIN-PN	46-5392727-501
a Plan name	SD & KP ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SD & KP ENTERPRISES INC	**c** EIN-PN	27-0049831-501
a Plan name	SDI, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SDI, LLC	**c** EIN-PN	83-3010029-501
a Plan name	SEALGUARD OF ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	SEALGUARD OF ST LOUIS	**c** EIN-PN	26-3109298-501
a Plan name	SEAN P. COONEY DMD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SEAN P. COONEY DMD LLC	**c** EIN-PN	45-4010340-501

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

a Plan name	SECOND MILE GROUP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SECOND MILE GROUP, INC.	**c** EIN-PN	82-3158050-501
a Plan name	SECTOR 7 MCF BENEFIT PLAN		
b Name of plan sponsor	SECTOR 7	**c** EIN-PN	87-1019388-501
a Plan name	SECURITY 101 ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	SECURITY 101 ST LOUIS	**c** EIN-PN	83-1719029-501
a Plan name	SEED TECH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SEED TECH LLC	**c** EIN-PN	36-4864565-502
a Plan name	SEEGER TOYOTA MCF BENEFIT PLAN		
b Name of plan sponsor	SEEGER TOYOTA	**c** EIN-PN	43-1259145-501
a Plan name	SELECT POWDER COATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SELECT POWDER COATING LLC	**c** EIN-PN	20-3940772-501
a Plan name	SELF INTERACTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	SELF INTERACTIVE	**c** EIN-PN	46-1834195-501
a Plan name	SEMEQ SYSTEMS CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	SEMEQ SYSTEMS CORPORATION	**c** EIN-PN	84-4429525-501
a Plan name	SEMI-BULK SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	SEMI-BULK SYSTEMS	**c** EIN-PN	43-1051970-501
a Plan name	SEMO CPA COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SEMO CPA COMPANY LLC	**c** EIN-PN	84-2321025-501
a Plan name	SEMO TURF INSTALLERS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SEMO TURF INSTALLERS, LLC	**c** EIN-PN	81-3983954-501
a Plan name	SENECA CRE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SENECA CRE LLC	**c** EIN-PN	84-1831079-501

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

a Plan name	SENECA DAIRY SUPPLY INC MCF BENEFIT PLAN		
b Name of plan sponsor	SENECA DAIRY SUPPLY INC	**c** EIN-PN	43-1232699-501
a Plan name	SENIOR HEALTH SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SENIOR HEALTH SOLUTIONS LLC	**c** EIN-PN	27-5025168-501
a Plan name	SENIOR MARKETING INS GROUP INC MCF BENEFIT PLAN		
b Name of plan sponsor	SENIOR MARKETING INS GROUP INC	**c** EIN-PN	46-1064342-501
a Plan name	SENIORS AND COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	SENIORS AND COMPANY	**c** EIN-PN	43-1788358-501
a Plan name	SENTINEL ARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SENTINEL ARMS LLC	**c** EIN-PN	46-3164302-501
a Plan name	SENTIO BIOSCIENCES MCF BENEFIT PLAN		
b Name of plan sponsor	SENTIO BIOSCIENCES	**c** EIN-PN	26-3943801-501
a Plan name	SEPTEMBER FIRM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SEPTEMBER FIRM, LLC	**c** EIN-PN	82-2933987-501
a Plan name	SEPTIC SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SEPTIC SERVICES INC	**c** EIN-PN	43-1529009-501
a Plan name	SERENITY HOSPICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SERENITY HOSPICE LLC	**c** EIN-PN	87-4672881-501
a Plan name	SERVICE EVOLUTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SERVICE EVOLUTION LLC	**c** EIN-PN	27-1042399-501
a Plan name	SERVICE TIRE AUTO CARE MCF BENEFIT PLAN		
b Name of plan sponsor	SERVICE TIRE AUTO CARE	**c** EIN-PN	93-2336414-501
a Plan name	SERVICE VENDING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	SERVICE VENDING COMPANY	**c** EIN-PN	47-0497789-501

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

a Plan name	SETH NEWTON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SETH NEWTON LLC	**c** EIN-PN	27-5469611-501
a Plan name	SEVEN HILLS VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	SEVEN HILLS VETERINARY CLINIC	**c** EIN-PN	46-2064554-501
a Plan name	SGF CONTRACTING SERVICES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SGF CONTRACTING SERVICES, INC.	**c** EIN-PN	46-4260997-502
a Plan name	SH SMITH & CO., INC MCF BENEFIT PLAN		
b Name of plan sponsor	SH SMITH & CO., INC	**c** EIN-PN	43-1214721-502
a Plan name	SHADEL'S COLONIAL CHAPEL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHADELS COLONIAL CHAPEL LLC	**c** EIN-PN	20-4994733-501
a Plan name	SHAFFER AND HINES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SHAFFER AND HINES INC	**c** EIN-PN	43-1799432-501
a Plan name	SHANNON ANKENBRANDT DDS MCF BENEFIT PLAN		
b Name of plan sponsor	SHANNON ANKENBRANDT DDS	**c** EIN-PN	06-1659898-501
a Plan name	SHANNON HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	SHANNON HEATING AND COOLING	**c** EIN-PN	43-1733819-501
a Plan name	SHANNON HOWARD PC MCF BENEFIT PLAN		
b Name of plan sponsor	SHANNON HOWARD PC	**c** EIN-PN	82-2360957-501
a Plan name	SHARI D. COHEN, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SHARI D. COHEN, INC.	**c** EIN-PN	45-4707392-501
a Plan name	SHARLIN HEALTH AND NEUROLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	SHARLIN HEALTH AND NEUROLOGY	**c** EIN-PN	47-4721714-501
a Plan name	SHAWNEETOWN FEED & SEED CO MCF BENEFIT PLAN		
b Name of plan sponsor	SHAWNEETOWN FEED & SEED CO	**c** EIN-PN	43-0728879-501

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

a Plan name	SHAW'S CUSTOM CABINETS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHAWS CUSTOM CABINETS LLC	**c** EIN-PN	43-1740385-501
a Plan name	SHEAPAK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHEAPAK LLC	**c** EIN-PN	85-2427507-501
a Plan name	SHELDON DENTAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	SHELDON DENTAL GROUP	**c** EIN-PN	59-2199614-501
a Plan name	SHELTON SIDING COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	SHELTON SIDING COMPANY INC	**c** EIN-PN	43-1769439-501
a Plan name	SHEPHERD OF THE HILLS DEVELOPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHEPHERD OF THE HILLS DEVELOPMENT LLC	**c** EIN-PN	82-1798618-501
a Plan name	SHERYL OTOOLE & ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	SHERYL OTOOLE & ASSOCIATES	**c** EIN-PN	43-1871599-501
a Plan name	SHIELDS MANAGEMENT INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SHIELDS MANAGEMENT INC.	**c** EIN-PN	43-1861960-502
a Plan name	SHINEY HINEY TRUCK WASH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHINEY HINEY TRUCK WASH LLC	**c** EIN-PN	92-3866073-501
a Plan name	SHIRT KONG MCF BENEFIT PLAN		
b Name of plan sponsor	SHIRT KONG	**c** EIN-PN	30-0561071-501
a Plan name	SHOAL CREEK FOOT & ANKLE CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	SHOAL CREEK FOOT & ANKLE CENTER	**c** EIN-PN	82-5381557-501
a Plan name	SHO-ME FABRICATION MCF BENEFIT PLAN		
b Name of plan sponsor	SHO-ME FABRICATION	**c** EIN-PN	81-3326239-501
a Plan name	SHO-ME FURNITURE MCF BENEFIT PLAN		
b Name of plan sponsor	SHO-ME FURNITURE	**c** EIN-PN	92-3304793-501

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

a Plan name	SHORWOOD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHORWOOD LLC	**c** EIN-PN	88-3339277-501
a Plan name	SHOW ME CAR CARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	SHOW ME CAR CARE INC	**c** EIN-PN	43-1699235-501
a Plan name	SHOW ME DOUGH FUNDRAISING MCF BENEFIT PLAN		
b Name of plan sponsor	SHOW ME DOUGH FUNDRAISING	**c** EIN-PN	43-1879566-501
a Plan name	SHOW ME GLOBAL LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SHOW ME GLOBAL LOGISTICS LLC	**c** EIN-PN	47-2236123-501
a Plan name	SHOW ME PETROLEUM EQUIPTMENT CO MCF BENEFIT PLAN		
b Name of plan sponsor	SHOW ME PETROLEUM EQUIPTMENT CO	**c** EIN-PN	47-5592082-501
a Plan name	SHOW ME SOILS MCF BENEFIT PLAN		
b Name of plan sponsor	SHOW ME SOILS	**c** EIN-PN	47-5510877-501
a Plan name	SID MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SID MANAGEMENT LLC	**c** EIN-PN	88-3709952-501
a Plan name	SIDNEY INSULATION, INC MCF BENEFIT PLAN		
b Name of plan sponsor	SIDNEY INSULATION, INC	**c** EIN-PN	20-1808888-501
a Plan name	SIGMUND BROWNING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SIGMUND BROWNING, LLC	**c** EIN-PN	43-1742607-501
a Plan name	SIGNATURE ADJUSTMENT GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE ADJUSTMENT GROUP	**c** EIN-PN	84-4247613-501
a Plan name	SIGNATURE COMMERCIAL REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE COMMERCIAL REAL ESTATE LLC	**c** EIN-PN	45-5634142-501
a Plan name	SIGNATURE EXTERIOR, INC MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE EXTERIOR, INC	**c** EIN-PN	47-3215534-501

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

a Plan name	SIGNATURE FILLING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE FILLING COMPANY	**c** EIN-PN	46-4904868-501
a Plan name	SIGNATURE HOME COMFORT HEATING & AIR CONDITIONING MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE HOME COMFORT HEATING & AIR CONDITIONING	**c** EIN-PN	27-1364108-501
a Plan name	SIGNATURE HOMES OF JEFFERSON CITY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNATURE HOMES OF JEFFERSON CITY, INC.	**c** EIN-PN	43-1905211-501
a Plan name	SIGNMASTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SIGNMASTER LLC	**c** EIN-PN	45-2614845-501
a Plan name	SIKESTON REGIONAL CHAMBER MCF BENEFIT PLAN		
b Name of plan sponsor	SIKESTON REGIONAL CHAMBER	**c** EIN-PN	81-3022848-501
a Plan name	SILO RIDGE COUNTRY CLUB MCF BENEFIT PLAN		
b Name of plan sponsor	SILO RIDGE COUNTRY CLUB	**c** EIN-PN	43-1757449-501
a Plan name	SILVER SPRINGS STORAGE MCF BENEFIT PLAN		
b Name of plan sponsor	SILVER SPRINGS STORAGE	**c** EIN-PN	81-3232855-501
a Plan name	SILVERBERG PLUMBING INC MCF BENEFIT PLAN		
b Name of plan sponsor	SILVERBERG PLUMBING INC	**c** EIN-PN	76-0745122-501
a Plan name	SILVERCREEK EXTERIORS MCF BENEFIT PLAN		
b Name of plan sponsor	SILVERCREEK EXTERIORS	**c** EIN-PN	92-3724490-501
a Plan name	SIMON ASHLEY CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	SIMON ASHLEY CONTRACTING	**c** EIN-PN	27-2408253-501
a Plan name	SIMON ENTERPRISES COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	SIMON ENTERPRISES COMPANY	**c** EIN-PN	43-1849801-501
a Plan name	SIMPLIFIED E SOLUTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SIMPLIFIED E SOLUTIONS, LLC	**c** EIN-PN	81-4872846-501

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

a Plan name	SIMPLY STRATEGY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SIMPLY STRATEGY LLC	**c** EIN-PN	26-2845601-501
a Plan name	SIMPLY WURTH IT MEDICAL WEIGHT LOSS MCF BENEFIT PLAN		
b Name of plan sponsor	SIMPLY WURTH IT MEDICAL WEIGHT LOSS	**c** EIN-PN	88-3138958-501
a Plan name	SIMS AND CLARK OPERATIONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SIMS AND CLARK OPERATIONS INC	**c** EIN-PN	92-1359812-501
a Plan name	SINGLEWAVE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SINGLEWAVE, LLC	**c** EIN-PN	88-3147288-501
a Plan name	SINHA DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SINHA DENTAL LLC	**c** EIN-PN	46-5314751-501
a Plan name	SIRCAL CONTRACTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	SIRCAL CONTRACTING INC	**c** EIN-PN	43-1622762-501
a Plan name	SJ AESTHETICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SJ AESTHETICS LLC	**c** EIN-PN	99-3650927-501
a Plan name	SJB INDUSTRIAL SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	SJB INDUSTRIAL SUPPLY	**c** EIN-PN	83-4237409-501
a Plan name	SJ'S CONSTRUCTION POWER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SJS CONSTRUCTION POWER LLC	**c** EIN-PN	82-4892103-501
a Plan name	SK CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SK CONTRACTING LLC	**c** EIN-PN	20-2213240-501
a Plan name	SKIDMORE LUMBER CO MCF BENEFIT PLAN		
b Name of plan sponsor	SKIDMORE LUMBER CO	**c** EIN-PN	43-1732414-501
a Plan name	SKROBONJA CONSULTING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SKROBONJA CONSULTING, LLC	**c** EIN-PN	81-4425730-501

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

a Plan name	SKYMONT CONTRACTORS MCF BENEFIT PLAN		
b Name of plan sponsor	SKYMONT CONTRACTORS	**c** EIN-PN	93-1749595-501
a Plan name	SKYSCRAPER MARINE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SKYSCRAPER MARINE LLC	**c** EIN-PN	47-5318225-501
a Plan name	SKYVIEW ANIMAL HOSPITAL MCF BENEFIT PLAN		
b Name of plan sponsor	SKYVIEW ANIMAL HOSPITAL	**c** EIN-PN	27-1455093-501
a Plan name	SLATER CABINETS AND MORE MCF BENEFIT PLAN		
b Name of plan sponsor	SLATER CABINETS AND MORE	**c** EIN-PN	85-3465464-501
a Plan name	SLAYTON USED CARS MCF BENEFIT PLAN		
b Name of plan sponsor	SLAYTON USED CARS	**c** EIN-PN	02-0659127-501
a Plan name	SLCC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SLCC LLC	**c** EIN-PN	83-3932922-501
a Plan name	SLED AND BREAKFAST DOGGY DAYCARE AND PET HOTEL MCF BENEFIT PLAN		
b Name of plan sponsor	SLED AND BREAKFAST DOGGY DAYCARE AND PET HOTEL	**c** EIN-PN	87-3957004-501
a Plan name	SLEEP DISORDER DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	SLEEP DISORDER DENTISTRY	**c** EIN-PN	26-1959996-501
a Plan name	SLEEP EZZZ MCF BENEFIT PLAN		
b Name of plan sponsor	SLEEP EZZZ	**c** EIN-PN	43-1886376-501
a Plan name	SLETTO DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SLETTO DENTAL LLC	**c** EIN-PN	83-2426039-501
a Plan name	SLEVIN INVESTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SLEVIN INVESTMENTS LLC	**c** EIN-PN	81-4551698-501
a Plan name	SLUSHER FARM AND HOME INC MCF BENEFIT PLAN		
b Name of plan sponsor	SLUSHER FARM AND HOME INC	**c** EIN-PN	20-3905185-501

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

a Plan name	SMALL BATCH BURRITOS MCF BENEFIT PLAN		
b Name of plan sponsor	SMALL BATCH BURRITOS	**c** EIN-PN	82-2613609-501
a Plan name	SMART EXTERIORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMART EXTERIORS LLC	**c** EIN-PN	81-2779951-501
a Plan name	SMART LOGISTICS MCF BENEFIT PLAN		
b Name of plan sponsor	SMART LOGISTICS	**c** EIN-PN	27-3099662-501
a Plan name	SMART RENTALS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMART RENTALS LLC	**c** EIN-PN	47-4440330-501
a Plan name	SMILE UP DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	SMILE UP DENTAL	**c** EIN-PN	83-1093474-501
a Plan name	SMITH CHIROPRACTIC AND ACUPUNCTURE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH CHIROPRACTIC AND ACUPUNCTURE LLC	**c** EIN-PN	20-3839176-502
a Plan name	SMITH EQUINE & VETERINARY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH EQUINE & VETERINARY SERVICES LLC	**c** EIN-PN	83-3589954-501
a Plan name	SMITH MOTOR COMPANY OF MARCELINE INC MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH MOTOR COMPANY OF MARCELINE INC	**c** EIN-PN	43-0787609-501
a Plan name	SMITH NMTC ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH NMTC ASSOCIATES LLC	**c** EIN-PN	26-2947617-501
a Plan name	SMITH PATRICK PC MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH PATRICK PC	**c** EIN-PN	84-2821221-501
a Plan name	SMITH-LEWIS LLP MCF BENEFIT PLAN		
b Name of plan sponsor	SMITH-LEWIS LLP	**c** EIN-PN	43-0747526-501
a Plan name	SMOKIN BROTHERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SMOKIN BROTHERS INC	**c** EIN-PN	43-1900648-501

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

a Plan name	SMOLJAN ENDODONTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMOLJAN ENDODONTICS LLC	**c** EIN-PN	86-3287764-501
a Plan name	SMOOTHIE KING MCF BENEFIT PLAN		
b Name of plan sponsor	SMOOTHIE KING	**c** EIN-PN	93-4442926-501
a Plan name	SMOUSE BROTHERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SMOUSE BROTHERS LLC	**c** EIN-PN	61-1917566-501
a Plan name	SNIDER ALIGNMENT SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	SNIDER ALIGNMENT SERVICE	**c** EIN-PN	43-0986025-501
a Plan name	SNL PAINTING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SNL PAINTING, INC.	**c** EIN-PN	20-4469052-501
a Plan name	SNODGRASS COLLISION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	SNODGRASS COLLISION CENTER	**c** EIN-PN	43-1155640-501
a Plan name	SNODGRASS CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SNODGRASS CONTRACTING LLC	**c** EIN-PN	46-4193373-501
a Plan name	SNP VENTURES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SNP VENTURES INC	**c** EIN-PN	93-1798843-501
a Plan name	SOARING EAGLE FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOARING EAGLE FARMS LLC	**c** EIN-PN	47-3440939-501
a Plan name	SOCIAL HOUSE OF SOULARD, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOCIAL HOUSE OF SOULARD, LLC	**c** EIN-PN	82-1308388-501
a Plan name	SOFTWARE DESIGN PARTNERS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOFTWARE DESIGN PARTNERS, LLC	**c** EIN-PN	16-1713855-501
a Plan name	SOLAR ENERGY SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOLAR ENERGY SERVICES LLC	**c** EIN-PN	47-1269071-501

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

a Plan name	SOLIDARITY STL INC MCF BENEFIT PLAN		
b Name of plan sponsor	SOLIDARITY STL INC	**c** EIN-PN	84-4284382-501
a Plan name	SOLSOURCE GREENBUILD MCF BENEFIT PLAN		
b Name of plan sponsor	SOLSOURCE GREENBUILD	**c** EIN-PN	27-1069819-501
a Plan name	SOONER CAPITAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOONER CAPITAL, LLC	**c** EIN-PN	26-2058058-501
a Plan name	SOONER INTERNAL MEDICINE MCF BENEFIT PLAN		
b Name of plan sponsor	SOONER INTERNAL MEDICINE	**c** EIN-PN	20-5085771-501
a Plan name	SORENSON KENNELS MCF BENEFIT PLAN		
b Name of plan sponsor	SORENSON KENNELS	**c** EIN-PN	43-0838908-501
a Plan name	SOS BARGE & DOCK MCF BENEFIT PLAN		
b Name of plan sponsor	SOS BARGE & DOCK	**c** EIN-PN	84-4101676-501
a Plan name	SOULGARDEN MCF BENEFIT PLAN		
b Name of plan sponsor	SOULGARDEN	**c** EIN-PN	20-3335622-501
a Plan name	SOUND TRACK MUSIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUND TRACK MUSIC LLC	**c** EIN-PN	93-3509205-501
a Plan name	SOUTH CENTRAL LAND TITLE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTH CENTRAL LAND TITLE, INC.	**c** EIN-PN	20-4633136-501
a Plan name	SOUTH PAW PETS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTH PAW PETS, LLC	**c** EIN-PN	84-2974848-501
a Plan name	SOUTH SIDE FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTH SIDE FARMS	**c** EIN-PN	88-0976730-501
a Plan name	SOUTHEAST MISSOURI COMMUNITY CREDIT UNION MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHEAST MISSOURI COMMUNITY CREDIT UNION	**c** EIN-PN	43-0689754-501

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

a Plan name	SOUTHERN CONSTRUCTION CO MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN CONSTRUCTION CO	**c** EIN-PN	43-1237037-501
a Plan name	SOUTHERN CROSS MEDICAL SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN CROSS MEDICAL SERVICES INC	**c** EIN-PN	43-1642039-501
a Plan name	SOUTHERN SOLID WASTE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHERN SOLID WASTE LLC	**c** EIN-PN	87-2464972-501
a Plan name	SOUTHWEST AG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHWEST AG LLC	**c** EIN-PN	85-4251918-501
a Plan name	SOUTHWEST AUDIO VISUAL MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHWEST AUDIO VISUAL	**c** EIN-PN	43-1772557-501
a Plan name	SOUTHWEST MACHINE AND SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHWEST MACHINE AND SUPPLY	**c** EIN-PN	43-1201913-501
a Plan name	SOUTHWEST MISSOURI PARTNERS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHWEST MISSOURI PARTNERS, INC.	**c** EIN-PN	04-3835177-501
a Plan name	SOUTHWESTERN ELECTRIC COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	SOUTHWESTERN ELECTRIC COMPANY INC	**c** EIN-PN	43-0903222-501
a Plan name	SPANISH LAKE BODY SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	SPANISH LAKE BODY SHOP	**c** EIN-PN	43-0824961-501
a Plan name	SPANKY'S CARD SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	SPANKYS CARD SHOP	**c** EIN-PN	45-4157261-501
a Plan name	SPARK DADDY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPARK DADDY LLC	**c** EIN-PN	84-1846907-501
a Plan name	SPARTAN SECURITY SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPARTAN SECURITY SOLUTIONS LLC	**c** EIN-PN	82-5365554-501

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

a Plan name	SPEAR EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEAR EXCAVATING LLC	**c** EIN-PN	20-1553122-501
a Plan name	SPEC TECH INDUSTRIAL ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEC TECH INDUSTRIAL ELECTRIC	**c** EIN-PN	43-1202298-501
a Plan name	SPECIALTY RISK MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPECIALTY RISK MANAGEMENT LLC	**c** EIN-PN	45-5631122-501
a Plan name	SPECTATORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPECTATORS, LLC	**c** EIN-PN	43-1927596-501
a Plan name	SPECTRUM LAWN & TREE CARE MCF BENEFIT PLAN		
b Name of plan sponsor	SPECTRUM LAWN & TREE CARE	**c** EIN-PN	43-1757707-501
a Plan name	SPEED CUSTOM & PERFORMANCE INC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEED CUSTOM & PERFORMANCE INC	**c** EIN-PN	43-1599438-501
a Plan name	SPEEDWAY STEEL FAB INC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEEDWAY STEEL FAB INC	**c** EIN-PN	43-1867760-501
a Plan name	SPEELER AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEELER AUTOMOTIVE LLC	**c** EIN-PN	82-0806067-501
a Plan name	SPEIRO PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPEIRO PROPERTIES LLC	**c** EIN-PN	35-2331820-501
a Plan name	SPELLMAN PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPELLMAN PROPERTIES LLC	**c** EIN-PN	42-1652703-501
a Plan name	SPENCER'S AUTO MCF BENEFIT PLAN		
b Name of plan sponsor	SPENCERS AUTO	**c** EIN-PN	43-1906232-501
a Plan name	SPERRY PLUMBING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SPERRY PLUMBING INC.	**c** EIN-PN	27-0116126-501

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

a Plan name	SPILKER MCKEONE & NELSON PC MCF BENEFIT PLAN		
b Name of plan sponsor	SPILKER MCKEONE & NELSON PC	**c** EIN-PN	43-1908765-501
a Plan name	SPINESOURCE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SPINESOURCE, INC.	**c** EIN-PN	20-0857713-501
a Plan name	SPIRIT PHYSICAL THERAPY MCF BENEFIT PLAN		
b Name of plan sponsor	SPIRIT PHYSICAL THERAPY	**c** EIN-PN	47-1768297-501
a Plan name	SPITZBERG-LASSEN HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPITZBERG-LASSEN HOLDINGS, LLC	**c** EIN-PN	45-5130901-501
a Plan name	SPORTS MEDICINE AND TRAINING CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPORTS MEDICINE AND TRAINING CENTER LLC	**c** EIN-PN	74-3037575-501
a Plan name	SPREHE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPREHE LLC	**c** EIN-PN	85-3864648-501
a Plan name	SPRINGBOARD TO LEARNING MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGBOARD TO LEARNING	**c** EIN-PN	43-1202003-501
a Plan name	SPRINGER TRANSPORTS MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGER TRANSPORTS	**c** EIN-PN	43-1882256-501
a Plan name	SPRINGFIELD COMMUNITY GARDENS MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD COMMUNITY GARDENS	**c** EIN-PN	27-1883334-501
a Plan name	SPRINGFIELD GLASS COMPANY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD GLASS COMPANY, LLC	**c** EIN-PN	47-5369931-501
a Plan name	SPRINGFIELD LITTLE THEATRE MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD LITTLE THEATRE	**c** EIN-PN	43-0893064-501
a Plan name	SPRINGFIELD LOFT APARTMENTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD LOFT APARTMENTS LLC	**c** EIN-PN	20-5498480-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MOBILE HOME SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD MOBILE HOME SERVICE	**c** EIN-PN	37-1561550-501
a Plan name	SPRINGFIELD PETROLEUM SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD PETROLEUM SERVICE	**c** EIN-PN	46-1013244-501
a Plan name	SPRINGFIELD READY MIX CO. MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD READY MIX CO.	**c** EIN-PN	43-1114249-501
a Plan name	SPRINGFIELD STRIPING AND SEALING MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD STRIPING AND SEALING	**c** EIN-PN	43-1325545-501
a Plan name	SPRINGFIELD SYMPHONY ASSN INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD SYMPHONY ASSN INC.	**c** EIN-PN	43-0797224-501
a Plan name	SPRINGFIELD VAPORS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SPRINGFIELD VAPORS LLC	**c** EIN-PN	46-4012302-501
a Plan name	SQUARE1 DISTRIBUTION & LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SQUARE1 DISTRIBUTION & LOGISTICS LLC	**c** EIN-PN	83-2330498-501
a Plan name	SR EXCAVATING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SR EXCAVATING LLC	**c** EIN-PN	54-2160206-501
a Plan name	SR1 METAL SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SR1 METAL SOLUTIONS LLC	**c** EIN-PN	61-1915202-501
a Plan name	SRLEE INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SRLEE INC.	**c** EIN-PN	73-1680318-501
a Plan name	SS ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	SS ELECTRIC	**c** EIN-PN	37-1521259-501
a Plan name	ST CHARLES HARDWOODS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ST CHARLES HARDWOODS INC	**c** EIN-PN	43-1498905-501

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

a Plan name	ST JAMES DENTAL CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	ST JAMES DENTAL CENTER	**c** EIN-PN	43-1184184-501
a Plan name	ST JAMES OIL CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST JAMES OIL CO LLC	**c** EIN-PN	45-4787281-501
a Plan name	ST LOUIS AUTO AND TRUCK REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS AUTO AND TRUCK REPAIR	**c** EIN-PN	43-1410975-501
a Plan name	ST LOUIS CABINET WRIGHT MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS CABINET WRIGHT	**c** EIN-PN	82-2546777-501
a Plan name	ST LOUIS COUNTY PROSTHODONTISTS MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS COUNTY PROSTHODONTISTS	**c** EIN-PN	43-1739354-501
a Plan name	ST LOUIS DANCE THEATRE MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS DANCE THEATRE	**c** EIN-PN	27-2706005-501
a Plan name	ST LOUIS ELITE MEDICAL SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS ELITE MEDICAL SYSTEMS	**c** EIN-PN	99-4975293-501
a Plan name	ST LOUIS FLATWORKS MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS FLATWORKS	**c** EIN-PN	92-0409439-501
a Plan name	ST LOUIS FOUNDATIONS AND FLATWORK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS FOUNDATIONS AND FLATWORK LLC	**c** EIN-PN	36-4869407-501
a Plan name	ST LOUIS HEATING AND AIR CONDITIONING MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS HEATING AND AIR CONDITIONING	**c** EIN-PN	90-1900322-501
a Plan name	ST LOUIS LIFE MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS LIFE	**c** EIN-PN	20-2372696-501
a Plan name	ST LOUIS NEUROPSYCH SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS NEUROPSYCH SERVICES	**c** EIN-PN	82-2604998-501

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

a Plan name	ST LOUIS PRINT COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS PRINT COMPANY LLC	**c** EIN-PN	20-4896771-501
a Plan name	ST LOUIS REAL ESTATE PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS REAL ESTATE PROPERTIES LLC	**c** EIN-PN	46-1663878-501
a Plan name	ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOC. MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS REGIONAL CHAMBER AND GROWTH ASSOC.	**c** EIN-PN	43-0975222-501
a Plan name	ST LOUIS SPORTS MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS SPORTS	**c** EIN-PN	43-1646221-501
a Plan name	ST LOUIS URGENT DENTAL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS URGENT DENTAL GROUP LLC	**c** EIN-PN	81-3411508-501
a Plan name	ST LOUIS VASCULAR SURGICAL SPECIALISTS PC MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS VASCULAR SURGICAL SPECIALISTS PC	**c** EIN-PN	61-2089414-501
a Plan name	ST LOUIS YOUTH SOCCER ASSOCIATION MCF BENEFIT PLAN		
b Name of plan sponsor	ST LOUIS YOUTH SOCCER ASSOCIATION	**c** EIN-PN	51-0204671-501
a Plan name	ST. LOUIS CONTRACT EMBROIDERY MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS CONTRACT EMBROIDERY	**c** EIN-PN	37-1653104-501
a Plan name	ST. LOUIS COUNTY DENTAL PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS COUNTY DENTAL PARTNERSHIP	**c** EIN-PN	32-0500935-501
a Plan name	ST. LOUIS DERMATOLOGY MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS DERMATOLOGY	**c** EIN-PN	35-2614207-501
a Plan name	ST. LOUIS DIGITAL MEDIA MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS DIGITAL MEDIA	**c** EIN-PN	80-0874344-501
a Plan name	ST. LOUIS DISTRICT DAIRY COUNCIL MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS DISTRICT DAIRY COUNCIL	**c** EIN-PN	43-0725862-501

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

a Plan name	ST. LOUIS FINANCIAL PLANNERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS FINANCIAL PLANNERS INC	**c** EIN-PN	43-1099181-501
a Plan name	ST. LOUIS INTER-FAITH COMMITTEE ON LATIN AMERICA MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS INTER-FAITH COMMITTEE ON LATIN AMERICA	**c** EIN-PN	43-1284733-501
a Plan name	ST. LOUIS LAWN CARE MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS LAWN CARE	**c** EIN-PN	80-0332863-501
a Plan name	ST. LOUIS PAIN AND WELLNESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS PAIN AND WELLNESS LLC	**c** EIN-PN	35-2698241-501
a Plan name	ST. LOUIS PAVING, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS PAVING, LLC.	**c** EIN-PN	82-2505052-501
a Plan name	ST. LOUIS PSYCHOANALYTIC INSTITUTE MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS PSYCHOANALYTIC INSTITUTE	**c** EIN-PN	43-0727700-501
a Plan name	ST. LOUIS TEACHER RESIDENCY MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS TEACHER RESIDENCY	**c** EIN-PN	30-1000654-501
a Plan name	ST. LOUIS WEIGHT LOSS SECRET LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ST. LOUIS WEIGHT LOSS SECRET LLC	**c** EIN-PN	38-4199317-501
a Plan name	STAENBERG GROUP INC. MCF BENEFIT PLAN		
b Name of plan sponsor	STAENBERG GROUP INC.	**c** EIN-PN	45-3649892-501
a Plan name	STALLO ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STALLO ENTERPRISES LLC	**c** EIN-PN	47-2684736-501
a Plan name	STANLEY, DIRNBERGER, HOPPER, AND ASSOCIATES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STANLEY, DIRNBERGER, HOPPER, AND ASSOCIATES LLC	**c** EIN-PN	43-1500106-501
a Plan name	STARDUST PRODUCTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	STARDUST PRODUCTIONS	**c** EIN-PN	88-1492754-501

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

a Plan name	STARKS AUTOMOTIVE REPAIR MCF BENEFIT PLAN		
b Name of plan sponsor	STARKS AUTOMOTIVE REPAIR	**c** EIN-PN	83-2710728-501
a Plan name	STARS AND STRIPES LAWN AND LANDSCAPING MCF BENEFIT PLAN		
b Name of plan sponsor	STARS AND STRIPES LAWN AND LANDSCAPING	**c** EIN-PN	84-3480770-501
a Plan name	STAUDER CONSULTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	STAUDER CONSULTING INC	**c** EIN-PN	43-1792716-501
a Plan name	STAY COOL CLIMATE CONTROL MCF BENEFIT PLAN		
b Name of plan sponsor	STAY COOL CLIMATE CONTROL	**c** EIN-PN	38-4082909-501
a Plan name	STAY WILD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STAY WILD LLC	**c** EIN-PN	81-1557898-501
a Plan name	STE GENEVIEVE INDUSTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	STE GENEVIEVE INDUSTRIES	**c** EIN-PN	51-0200666-501
a Plan name	STEADFAST SUPPORT SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEADFAST SUPPORT SERVICES LLC	**c** EIN-PN	82-4444895-501
a Plan name	STEADYRAIN, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	STEADYRAIN, INC.	**c** EIN-PN	43-1867675-501
a Plan name	STEELE EXCAVATION AND SEPTIC SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEELE EXCAVATION AND SEPTIC SERVICE LLC	**c** EIN-PN	20-3582436-501
a Plan name	STEFAN FARMS MCF BENEFIT PLAN		
b Name of plan sponsor	STEFAN FARMS	**c** EIN-PN	43-1435909-501
a Plan name	STEFANIE B DOUGHERTY DMD MSD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEFANIE B DOUGHERTY DMD MSD LLC	**c** EIN-PN	46-0737592-501
a Plan name	STEIMLE CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEIMLE CONSTRUCTION LLC	**c** EIN-PN	86-1314750-501

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

a Plan name	STENGER MANAGEMENT, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	STENGER MANAGEMENT, LLC.	**c** EIN-PN	43-1713115-501
a Plan name	STEPHEN M. MATTHEWS DDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHEN M. MATTHEWS DDS LLC	**c** EIN-PN	27-3471700-501
a Plan name	STEPHEN SHINN FITNESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHEN SHINN FITNESS LLC	**c** EIN-PN	46-2129855-501
a Plan name	STEPHEN WILLETT AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHEN WILLETT AGENCY LLC	**c** EIN-PN	47-5365306-501
a Plan name	STEPHENSON ENTERPRISE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEPHENSON ENTERPRISE LLC	**c** EIN-PN	92-1068379-501
a Plan name	STEVE CRAWFORD TRUCKING INC MCF BENEFIT PLAN		
b Name of plan sponsor	STEVE CRAWFORD TRUCKING INC	**c** EIN-PN	43-1881451-501
a Plan name	STEVE MISURACA MCF BENEFIT PLAN		
b Name of plan sponsor	STEVE MISURACA	**c** EIN-PN	51-0601354-501
a Plan name	STEVENS FARMS GP MCF BENEFIT PLAN		
b Name of plan sponsor	STEVENS FARMS GP	**c** EIN-PN	87-3606584-501
a Plan name	STEVEN'S FEED COMPANY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	STEVENS FEED COMPANY INC.	**c** EIN-PN	43-1706072-501
a Plan name	STEVES FAMILY STYLE RESTAURANT MCF BENEFIT PLAN		
b Name of plan sponsor	STEVES FAMILY STYLE RESTAURANT	**c** EIN-PN	04-3646710-502
a Plan name	STEVES HOTDOGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STEVES HOTDOGS LLC	**c** EIN-PN	45-2735408-501
a Plan name	STILLEY LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STILLEY LAW, LLC	**c** EIN-PN	81-2486460-501

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

a Plan name	STIMBLE ENTERPRISES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	STIMBLE ENTERPRISES INC.	**c** EIN-PN	43-1714404-501
a Plan name	STITH FUNERAL HOMES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STITH FUNERAL HOMES, LLC	**c** EIN-PN	83-2023930-501
a Plan name	STL ATHLETIC CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL ATHLETIC CENTER LLC	**c** EIN-PN	83-3291927-501
a Plan name	STL GCAPP I, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL GCAPP I, LLC	**c** EIN-PN	83-0805894-501
a Plan name	STL HAIR RESTORATION MCF BENEFIT PLAN		
b Name of plan sponsor	STL HAIR RESTORATION	**c** EIN-PN	84-4281746-501
a Plan name	STL HARDSCAPE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL HARDSCAPE SOLUTIONS LLC	**c** EIN-PN	86-1342252-501
a Plan name	STL LAW GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	STL LAW GROUP	**c** EIN-PN	47-1505492-501
a Plan name	STL LED LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL LED LLC	**c** EIN-PN	81-4715451-501
a Plan name	STL PIPEWORKS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL PIPEWORKS, LLC	**c** EIN-PN	81-4958093-501
a Plan name	STL SEDUCTION MEDIA, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STL SEDUCTION MEDIA, LLC	**c** EIN-PN	46-4091425-501
a Plan name	STL WINDOWS & DOORS MCF BENEFIT PLAN		
b Name of plan sponsor	STL WINDOWS & DOORS	**c** EIN-PN	46-4132857-501
a Plan name	STL YOUTH JOBS MCF BENEFIT PLAN		
b Name of plan sponsor	STL YOUTH JOBS	**c** EIN-PN	83-2759267-501

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

a Plan name	STOKES COMFORT SYSTEMS HEATING AND COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	STOKES COMFORT SYSTEMS HEATING AND COOLING	**c** EIN-PN	82-4360257-501
a Plan name	STONE ACRES TREE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STONE ACRES TREE SERVICE LLC	**c** EIN-PN	82-4036703-501
a Plan name	STONE AUTOMOTIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STONE AUTOMOTIVE LLC	**c** EIN-PN	27-3130691-501
a Plan name	STONE COUNTY DEVELOPMENTAL DISABILITY BOARD MCF BENEFIT PLAN		
b Name of plan sponsor	STONE COUNTY DEVELOPMENTAL DISABILITY BOARD	**c** EIN-PN	82-2369583-501
a Plan name	STONE ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STONE ELECTRIC LLC	**c** EIN-PN	47-1962385-501
a Plan name	STONE FINANCIAL MANAGEMENT GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	STONE FINANCIAL MANAGEMENT GROUP	**c** EIN-PN	87-4102076-501
a Plan name	STONE SOUP HOLDINGS MCF BENEFIT PLAN		
b Name of plan sponsor	STONE SOUP HOLDINGS	**c** EIN-PN	26-4632935-501
a Plan name	STONEBRIDGE FINANCIAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	STONEBRIDGE FINANCIAL GROUP	**c** EIN-PN	36-4541349-501
a Plan name	STONEBRIDGE VILLAGE POA MCF BENEFIT PLAN		
b Name of plan sponsor	STONEBRIDGE VILLAGE POA	**c** EIN-PN	43-1669518-501
a Plan name	STONEGATE COMPANIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STONEGATE COMPANIES LLC	**c** EIN-PN	84-4392147-501
a Plan name	STOPP AND VANHOY CPAS MCF BENEFIT PLAN		
b Name of plan sponsor	STOPP AND VANHOY CPAS	**c** EIN-PN	27-3375359-501
a Plan name	STORAGE Q1 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STORAGE Q1 LLC	**c** EIN-PN	81-4952056-501

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

a Plan name	STORYUP, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	STORYUP, INC.	**c** EIN-PN	81-4321884-501
a Plan name	STR TECHNOLOGIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STR TECHNOLOGIES LLC	**c** EIN-PN	20-5531524-501
a Plan name	STRASSNER FURNITURE AND UPHOLSTERY MCF BENEFIT PLAN		
b Name of plan sponsor	STRASSNER FURNITURE AND UPHOLSTERY	**c** EIN-PN	43-1867299-501
a Plan name	STRATEGIC CAPITOL CONSULTING MCF BENEFIT PLAN		
b Name of plan sponsor	STRATEGIC CAPITOL CONSULTING	**c** EIN-PN	45-5399092-501
a Plan name	STRATUM STRUCTURAL SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	STRATUM STRUCTURAL SYSTEMS	**c** EIN-PN	81-5093914-501
a Plan name	STREAMLINE ORTHOTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STREAMLINE ORTHOTICS LLC	**c** EIN-PN	26-1403576-501
a Plan name	STREETSHINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STREETSHINE, LLC	**c** EIN-PN	30-0525059-501
a Plan name	STRETCH SPRINGFIELD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STRETCH SPRINGFIELD LLC	**c** EIN-PN	92-2945152-501
a Plan name	STRICKLAND ENGINEERING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STRICKLAND ENGINEERING LLC	**c** EIN-PN	43-1895349-501
a Plan name	STRIDES CASE MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	STRIDES CASE MANAGEMENT	**c** EIN-PN	81-4051668-501
a Plan name	STRIKERS GRILL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STRIKERS GRILL, LLC	**c** EIN-PN	88-0599771-501
a Plan name	STRIKING FLINT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STRIKING FLINT LLC	**c** EIN-PN	82-5043068-501

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

a Plan name	STUBBLEFIELD LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STUBBLEFIELD LAW, LLC	**c** EIN-PN	85-1510569-501
a Plan name	STUDIO 2108 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STUDIO 2108 LLC	**c** EIN-PN	26-0143983-501
a Plan name	STUDIO D MARKETING COMMUNICATIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STUDIO D MARKETING COMMUNICATIONS LLC	**c** EIN-PN	46-2293571-501
a Plan name	STUDIO V DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	STUDIO V DESIGN	**c** EIN-PN	26-2420098-501
a Plan name	STUDIOMARQ LLC MCF BENEFIT PLAN		
b Name of plan sponsor	STUDIOMARQ LLC	**c** EIN-PN	99-3185969-501
a Plan name	SUBS AND SWEETS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SUBS AND SWEETS INC	**c** EIN-PN	81-2265784-501
a Plan name	SUBURBAN ACCOUNTING & TAX SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUBURBAN ACCOUNTING & TAX SERVICE LLC	**c** EIN-PN	46-5569250-501
a Plan name	SUBWAY MCF BENEFIT PLAN		
b Name of plan sponsor	SUBWAY	**c** EIN-PN	87-1768899-501
a Plan name	SUEN BROS CORP MCF BENEFIT PLAN		
b Name of plan sponsor	SUEN BROS CORP	**c** EIN-PN	43-1634009-501
a Plan name	SULLIVAN ART DIRECTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SULLIVAN ART DIRECTION LLC	**c** EIN-PN	81-2920495-501
a Plan name	SULLIVAN COUNTY FARM SUPPLY INC MCF BENEFIT PLAN		
b Name of plan sponsor	SULLIVAN COUNTY FARM SUPPLY INC	**c** EIN-PN	81-4230932-501
a Plan name	SULLIVAN FIRE PROTECTION DISTRICT MCF BENEFIT PLAN		
b Name of plan sponsor	SULLIVAN FIRE PROTECTION DISTRICT	**c** EIN-PN	43-1550312-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 AUTO SERVICE & TIRE MCF BENEFIT PLAN		
b Name of plan sponsor	SUMMIT AUTO SERVICE & TIRE	**c** EIN-PN	81-4700814-501
a Plan name	SUMMIT COUNSELING SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUMMIT COUNSELING SERVICES, LLC	**c** EIN-PN	46-4305088-501
a Plan name	SUMMIT PRODUCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUMMIT PRODUCE LLC	**c** EIN-PN	26-4472047-501
a Plan name	SUMMIT SAFETY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUMMIT SAFETY GROUP LLC	**c** EIN-PN	46-4404382-501
a Plan name	SUMMIT X LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUMMIT X LLC	**c** EIN-PN	81-0874769-501
a Plan name	SUN TIDE COMPANIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUN TIDE COMPANIES, LLC	**c** EIN-PN	99-2667939-501
a Plan name	SUNDOWN LANDSCAPE CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	SUNDOWN LANDSCAPE CONTRACTING	**c** EIN-PN	43-1259712-501
a Plan name	SUNRISE BEACH FPD MCF BENEFIT PLAN		
b Name of plan sponsor	SUNRISE BEACH FPD	**c** EIN-PN	43-1503217-501
a Plan name	SUPERIOR HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR HEATING & COOLING	**c** EIN-PN	43-1030527-501
a Plan name	SUPERIOR INDUSTRIAL COATINGS MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR INDUSTRIAL COATINGS	**c** EIN-PN	47-1427870-501
a Plan name	SUPERIOR PEST 1 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR PEST 1 LLC	**c** EIN-PN	88-3235242-501
a Plan name	SUPERIOR PROCESS SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR PROCESS SOLUTIONS	**c** EIN-PN	76-0828095-501

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

a Plan name	SUPERIOR ROOFING & CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR ROOFING & CONSTRUCTION LLC	**c** EIN-PN	86-3910355-501
a Plan name	SUPERIOR TRANSPORT SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	SUPERIOR TRANSPORT SERVICES INC	**c** EIN-PN	30-0561788-501
a Plan name	SUPPER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUPPER LLC	**c** EIN-PN	84-4199970-501
a Plan name	SUPPLY CONCEPTS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	SUPPLY CONCEPTS, INC.	**c** EIN-PN	20-1810785-501
a Plan name	SUPPLY PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUPPLY PARTNERS LLC	**c** EIN-PN	87-3410367-501
a Plan name	SURGERY SPECIALIST OF ST. LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	SURGERY SPECIALIST OF ST. LOUIS	**c** EIN-PN	20-8360135-501
a Plan name	SURVANT HVAC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SURVANT HVAC LLC	**c** EIN-PN	86-2081160-501
a Plan name	SUTTON ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SUTTON ENTERPRISES, LLC	**c** EIN-PN	92-1566827-501
a Plan name	SUTTON IN HOME SENIOR CARE MCF BENEFIT PLAN		
b Name of plan sponsor	SUTTON IN HOME SENIOR CARE	**c** EIN-PN	47-2513191-501
a Plan name	SWIFT SAFETY INSTITUTE MCF BENEFIT PLAN		
b Name of plan sponsor	SWIFT SAFETY INSTITUTE	**c** EIN-PN	82-2133021-501
a Plan name	SWING A ROUND MCF BENEFIT PLAN		
b Name of plan sponsor	SWING A ROUND	**c** EIN-PN	46-4503802-501
a Plan name	SWISHASH INC MCF BENEFIT PLAN		
b Name of plan sponsor	SWISHASH INC	**c** EIN-PN	43-1032306-501

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

a Plan name	SWISS AIR HEATING & COOLING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SWISS AIR HEATING & COOLING LLC	**c** EIN-PN	43-1697172-501
a Plan name	SWMO BASEBALL PROPERTIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SWMO BASEBALL PROPERTIES LLC	**c** EIN-PN	92-1206966-501
a Plan name	SYNC NATIONAL LOGISTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SYNC NATIONAL LOGISTICS LLC	**c** EIN-PN	46-1612884-501
a Plan name	SYNC PAYMENTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	SYNC PAYMENTS INC	**c** EIN-PN	27-3052628-501
a Plan name	SYNERGISTIC WEALTH SOLUTIONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SYNERGISTIC WEALTH SOLUTIONS, LLC	**c** EIN-PN	41-3476991-501
a Plan name	SYNERGY INSURANCE ADVISORS MCF BENEFIT PLAN		
b Name of plan sponsor	SYNERGY INSURANCE ADVISORS	**c** EIN-PN	87-1358690-501
a Plan name	SYSTEMATIC CONSULTING GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	SYSTEMATIC CONSULTING GROUP	**c** EIN-PN	20-4080584-501
a Plan name	SYSTEMATIC SAVINGS BANK MCF BENEFIT PLAN		
b Name of plan sponsor	SYSTEMATIC SAVINGS BANK	**c** EIN-PN	44-0456185-501
a Plan name	SYSTEMS GRAPHICS MCF BENEFIT PLAN		
b Name of plan sponsor	SYSTEMS GRAPHICS	**c** EIN-PN	43-1411848-501
a Plan name	SZKLARSKI FARMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	SZKLARSKI FARMS, LLC	**c** EIN-PN	88-4411918-501
a Plan name	T & B WELDING AND TRAILERS MCF BENEFIT PLAN		
b Name of plan sponsor	T & B WELDING AND TRAILERS	**c** EIN-PN	20-2376542-501
a Plan name	T & T ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	T & T ENTERPRISES	**c** EIN-PN	43-1473870-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 AND B REPAIR SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	T AND B REPAIR SERVICES LLC	**c** EIN-PN	81-4092300-501
a Plan name	T. LAUBER, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	T. LAUBER, INC.	**c** EIN-PN	34-2054132-501
a Plan name	T. SCOTT HAMILTON D.O., P.C. MCF BENEFIT PLAN		
b Name of plan sponsor	T. SCOTT HAMILTON D.O., P.C.	**c** EIN-PN	47-1878099-501
a Plan name	T.R. SMITH CONSTRUCTION INC. MCF BENEFIT PLAN		
b Name of plan sponsor	T.R. SMITH CONSTRUCTION INC.	**c** EIN-PN	87-0714251-501
a Plan name	T3 BUSINESS SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	T3 BUSINESS SOLUTIONS LLC	**c** EIN-PN	92-1305393-501
a Plan name	T3 RECRUITERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	T3 RECRUITERS LLC	**c** EIN-PN	82-2103940-501
a Plan name	TA CONTRACTING INC. MCF BENEFIT PLAN		
b Name of plan sponsor	TA CONTRACTING INC.	**c** EIN-PN	43-1333728-501
a Plan name	TABLE ROCK BAIT CO MCF BENEFIT PLAN		
b Name of plan sponsor	TABLE ROCK BAIT CO	**c** EIN-PN	42-1414523-501
a Plan name	TACO BUDDHA MCF BENEFIT PLAN		
b Name of plan sponsor	TACO BUDDHA	**c** EIN-PN	46-5693877-501
a Plan name	TAILORED GENTS AT SAVILE ROW MCF BENEFIT PLAN		
b Name of plan sponsor	TAILORED GENTS AT SAVILE ROW	**c** EIN-PN	82-4319021-501
a Plan name	TAL DEVELOPMENT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAL DEVELOPMENT, LLC	**c** EIN-PN	20-3786500-501
a Plan name	TALENT PLUS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	TALENT PLUS, INC	**c** EIN-PN	43-1131426-501

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

a Plan name	TALIAFERRO IMPORTS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TALIAFERRO IMPORTS INC	**c** EIN-PN	43-1870389-501
a Plan name	TAMI KRAMER REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAMI KRAMER REAL ESTATE LLC	**c** EIN-PN	84-4537568-501
a Plan name	TAMMY LUECHTEFELD INSURANCE AGENCY, LP MCF BENEFIT PLAN		
b Name of plan sponsor	TAMMY LUECHTEFELD INSURANCE AGENCY, LP	**c** EIN-PN	61-1442690-502
a Plan name	TASCIO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TASCIO LLC	**c** EIN-PN	86-2448223-502
a Plan name	TATEHO OZARK TECHNICAL MCF BENEFIT PLAN		
b Name of plan sponsor	TATEHO OZARK TECHNICAL	**c** EIN-PN	47-4503154-501
a Plan name	TAVCO HOLDINGS I LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAVCO HOLDINGS I LLC	**c** EIN-PN	83-2806975-501
a Plan name	TAVERN ON THE BEND, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAVERN ON THE BEND, LLC	**c** EIN-PN	87-4258763-501
a Plan name	TAVOLO VIGNETO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAVOLO VIGNETO LLC	**c** EIN-PN	46-2382222-501
a Plan name	TAX PROS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TAX PROS INC	**c** EIN-PN	43-1943027-501
a Plan name	TAYLOR AUTOMOTIVE GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR AUTOMOTIVE GROUP LLC	**c** EIN-PN	82-4230323-501
a Plan name	TAYLOR CHAPMAN LAWN & LANDSCAPING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR CHAPMAN LAWN & LANDSCAPING, LLC	**c** EIN-PN	83-0601913-501
a Plan name	TAYLOR ENGINEERING MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR ENGINEERING	**c** EIN-PN	43-1772659-502

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	TAYLOR GRUBAUGH CHEVROLET BUICK GMC MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR GRUBAUGH CHEVROLET BUICK GMC	**c** EIN-PN	84-3391701-501
a Plan name	TAYLOR KIM ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLOR KIM ENTERPRISES LLC	**c** EIN-PN	83-3285269-501
a Plan name	TAYLOR'S SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TAYLORS SERVICES, LLC	**c** EIN-PN	92-3859845-501
a Plan name	TBAF GUYS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TBAF GUYS, LLC	**c** EIN-PN	87-3213857-501
a Plan name	TCARE INC MCF BENEFIT PLAN		
b Name of plan sponsor	TCARE INC	**c** EIN-PN	40-0010589-501
a Plan name	TCB AUDIT SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TCB AUDIT SERVICES, LLC	**c** EIN-PN	85-1140958-501
a Plan name	TD ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TD ELECTRIC LLC	**c** EIN-PN	47-5012011-501
a Plan name	TDR ELECTRICAL SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TDR ELECTRICAL SERVICES LLC	**c** EIN-PN	84-4220531-501
a Plan name	TEAGUE ROOFING PLUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEAGUE ROOFING PLUS LLC	**c** EIN-PN	83-4381029-501
a Plan name	TEAM TOOLS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEAM TOOLS LLC	**c** EIN-PN	75-3226484-501
a Plan name	TEAMS INVESTMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEAMS INVESTMENT LLC	**c** EIN-PN	87-3784568-501
a Plan name	TECHNOBAKE SYSTEMS MCF BENEFIT PLAN		
b Name of plan sponsor	TECHNOBAKE SYSTEMS	**c** EIN-PN	27-3269525-501

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

a Plan name	TECHNOLOGY ENTREPRENEUR CENTER INC. MCF BENEFIT PLAN		
b Name of plan sponsor	TECHNOLOGY ENTREPRENEUR CENTER INC.	**c** EIN-PN	14-1870269-501
a Plan name	TECHNOSMARTS, INC MCF BENEFIT PLAN		
b Name of plan sponsor	TECHNOSMARTS, INC	**c** EIN-PN	43-1797810-501
a Plan name	TECHTREE PARTNERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TECHTREE PARTNERS LLC	**c** EIN-PN	81-3171337-501
a Plan name	TECTRONIQ, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TECTRONIQ, LLC	**c** EIN-PN	85-3206151-501
a Plan name	TEETIME LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEETIME LLC	**c** EIN-PN	88-0979864-501
a Plan name	TEMPLE CONSULTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEMPLE CONSULTING LLC	**c** EIN-PN	87-1920418-501
a Plan name	TENDER HEART ANIMAL CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	TENDER HEART ANIMAL CLINIC	**c** EIN-PN	20-3907945-501
a Plan name	TENTH LIFE CAT RESCUE MCF BENEFIT PLAN		
b Name of plan sponsor	TENTH LIFE CAT RESCUE	**c** EIN-PN	26-4014748-501
a Plan name	TEQUILA'S LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TEQUILAS LLC	**c** EIN-PN	20-4365677-501
a Plan name	TERRA FACILITIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TERRA FACILITIES LLC	**c** EIN-PN	93-3865051-501
a Plan name	TERRA NOVA BUILDS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TERRA NOVA BUILDS LLC	**c** EIN-PN	92-0572594-501
a Plan name	TERRAFLORA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TERRAFLORA LLC	**c** EIN-PN	46-5677889-501

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

a Plan name	TERRILL FRANCHISING SPECIALISTS MCF BENEFIT PLAN		
b Name of plan sponsor	TERRILL FRANCHISING SPECIALISTS	**c** EIN-PN	82-5073987-501
a Plan name	TERRY POPULIS CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TERRY POPULIS CONSTRUCTION LLC	**c** EIN-PN	83-3600571-501
a Plan name	TERRY'S MACHINE SHOP MCF BENEFIT PLAN		
b Name of plan sponsor	TERRYS MACHINE SHOP	**c** EIN-PN	43-1857071-501
a Plan name	TESTING AND BALANCING COMPANY OF THE OZARKS MCF BENEFIT PLAN		
b Name of plan sponsor	TESTING AND BALANCING COMPANY OF THE OZARKS	**c** EIN-PN	20-4893864-501
a Plan name	TETER AUCTION COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TETER AUCTION COMPANY LLC	**c** EIN-PN	83-2939545-501
a Plan name	TEXAS COUNTY EMERGENCY SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	TEXAS COUNTY EMERGENCY SERVICES	**c** EIN-PN	47-1335278-501
a Plan name	TEXTBOOK BROKERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TEXTBOOK BROKERS INC	**c** EIN-PN	35-2224206-501
a Plan name	TF ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TF ELECTRIC LLC	**c** EIN-PN	84-2894144-501
a Plan name	TGB INC MCF BENEFIT PLAN		
b Name of plan sponsor	TGB INC	**c** EIN-PN	43-1281041-501
a Plan name	TGTHR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TGTHR LLC	**c** EIN-PN	82-0963190-501
a Plan name	THAT SOLAR COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THAT SOLAR COMPANY LLC	**c** EIN-PN	84-2038600-501
a Plan name	THAYER PLANT FOOD MCF BENEFIT PLAN		
b Name of plan sponsor	THAYER PLANT FOOD	**c** EIN-PN	43-0977142-501

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

a Plan name	THD DESIGN GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	THD DESIGN GROUP	**c** EIN-PN	27-2084419-502
a Plan name	THE AMERICA GROUP FINANCIAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	THE AMERICA GROUP FINANCIAL SERVICES	**c** EIN-PN	85-4395374-501
a Plan name	THE ART OF ENTERTAINING, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	THE ART OF ENTERTAINING, INC.	**c** EIN-PN	43-1683904-501
a Plan name	THE AXE HOUSE MCF BENEFIT PLAN		
b Name of plan sponsor	THE AXE HOUSE	**c** EIN-PN	82-1657658-501
a Plan name	THE BANDED ROOSTER LLC AND ALLEN ST SOCIAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE BANDED ROOSTER LLC AND ALLEN ST SOCIAL LLC	**c** EIN-PN	87-2734121-501
a Plan name	THE BARKLAGE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	THE BARKLAGE COMPANY	**c** EIN-PN	27-0718603-501
a Plan name	THE BEST STEAK HOUSE MCF BENEFIT PLAN		
b Name of plan sponsor	THE BEST STEAK HOUSE	**c** EIN-PN	43-0831992-501
a Plan name	THE BIRDSONG COMPANY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE BIRDSONG COMPANY, LLC	**c** EIN-PN	85-2967331-501
a Plan name	THE BLUE DIAMOND LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE BLUE DIAMOND LLC	**c** EIN-PN	43-1884635-501
a Plan name	THE BOUNCE HOUSE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	THE BOUNCE HOUSE COMPANY	**c** EIN-PN	90-1939698-501
a Plan name	THE BRACE PLACE MCF BENEFIT PLAN		
b Name of plan sponsor	THE BRACE PLACE	**c** EIN-PN	43-1456945-501
a Plan name	THE BRANDING IRON LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE BRANDING IRON LLC	**c** EIN-PN	92-1632668-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 BREMER GROUP, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE BREMER GROUP, LLC	**c** EIN-PN	45-5567730-501
a Plan name	THE C P A GROUP P C MCF BENEFIT PLAN		
b Name of plan sponsor	THE C P A GROUP P C	**c** EIN-PN	43-1797482-501
a Plan name	THE CARVER PROJECT MCF BENEFIT PLAN		
b Name of plan sponsor	THE CARVER PROJECT	**c** EIN-PN	82-2022974-501
a Plan name	THE CHAD CARDEN GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CHAD CARDEN GROUP LLC	**c** EIN-PN	77-0708941-501
a Plan name	THE CHASE LAW FIRM, PC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CHASE LAW FIRM, PC	**c** EIN-PN	20-2781517-501
a Plan name	THE CHILD ADVOCACY CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	THE CHILD ADVOCACY CENTER	**c** EIN-PN	43-1729078-501
a Plan name	THE CLARK-FOX FAMILY FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	THE CLARK-FOX FAMILY FOUNDATION	**c** EIN-PN	81-1608523-501
a Plan name	THE CLAYTON ENGINEERING COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CLAYTON ENGINEERING COMPANY INC	**c** EIN-PN	43-0753034-501
a Plan name	THE CLEAN UP TEAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CLEAN UP TEAM LLC	**c** EIN-PN	83-2895829-501
a Plan name	THE CLUBB LAW FIRM, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CLUBB LAW FIRM, LLC	**c** EIN-PN	26-2023850-501
a Plan name	THE COLLECTOR STORE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE COLLECTOR STORE, LLC	**c** EIN-PN	43-1922736-501
a Plan name	THE CONSUMER LAW CENTER OF ST. LOUIS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE CONSUMER LAW CENTER OF ST. LOUIS, LLC	**c** EIN-PN	47-2416540-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 DECK COMPANY OF AMERICA MCF BENEFIT PLAN		
b Name of plan sponsor	THE DECK COMPANY OF AMERICA	**c** EIN-PN	46-4917294-501
a Plan name	THE DEPOT MCF BENEFIT PLAN		
b Name of plan sponsor	THE DEPOT	**c** EIN-PN	20-8391988-501
a Plan name	THE DESIGNERY HUB LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE DESIGNERY HUB LLC	**c** EIN-PN	88-0707668-501
a Plan name	THE DOCKET LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE DOCKET LLC	**c** EIN-PN	81-3294636-501
a Plan name	THE ERNST RADIOLOGY CLINIC INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE ERNST RADIOLOGY CLINIC INC	**c** EIN-PN	43-0948536-501
a Plan name	THE FOUNTAIN ON LOCUST MCF BENEFIT PLAN		
b Name of plan sponsor	THE FOUNTAIN ON LOCUST	**c** EIN-PN	20-1571146-501
a Plan name	THE FUGITIVE RUN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE FUGITIVE RUN LLC	**c** EIN-PN	46-1794498-501
a Plan name	THE FULTON SCHOOL MCF BENEFIT PLAN		
b Name of plan sponsor	THE FULTON SCHOOL	**c** EIN-PN	43-1666028-501
a Plan name	THE GARAGE OF JOSEPHVILLE MCF BENEFIT PLAN		
b Name of plan sponsor	THE GARAGE OF JOSEPHVILLE	**c** EIN-PN	87-2656753-501
a Plan name	THE GIG BUREAU MCF BENEFIT PLAN		
b Name of plan sponsor	THE GIG BUREAU	**c** EIN-PN	33-1165404-501
a Plan name	THE GOLDEN HOOSIER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE GOLDEN HOOSIER, LLC	**c** EIN-PN	84-4517463-501
a Plan name	THE GOOD DAD PROJECT MCF BENEFIT PLAN		
b Name of plan sponsor	THE GOOD DAD PROJECT	**c** EIN-PN	47-2538537-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 GREENWOOD GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE GREENWOOD GROUP LLC	**c** EIN-PN	45-0492178-501
a Plan name	THE GROWTH COACH OF NWA MCF BENEFIT PLAN		
b Name of plan sponsor	THE GROWTH COACH OF NWA	**c** EIN-PN	92-1250446-501
a Plan name	THE HOPE COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	THE HOPE COMPANY	**c** EIN-PN	43-1008583-501
a Plan name	THE HOUSING PARTNERSHIP INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE HOUSING PARTNERSHIP INC	**c** EIN-PN	43-1827775-501
a Plan name	THE INK SPOT, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	THE INK SPOT, INC.	**c** EIN-PN	43-1732077-501
a Plan name	THE INSURANCE STORE OF NEOSHO MCF BENEFIT PLAN		
b Name of plan sponsor	THE INSURANCE STORE OF NEOSHO	**c** EIN-PN	43-1787403-501
a Plan name	THE J HARRIS COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	THE J HARRIS COMPANY	**c** EIN-PN	20-5023302-501
a Plan name	THE JEWELRY CONNECTION MCF BENEFIT PLAN		
b Name of plan sponsor	THE JEWELRY CONNECTION	**c** EIN-PN	43-1764924-501
a Plan name	THE JOSHUA COMPANY OF ST LOUIS INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE JOSHUA COMPANY OF ST LOUIS INC	**c** EIN-PN	01-0641653-501
a Plan name	THE KAISER LAW FIRM MCF BENEFIT PLAN		
b Name of plan sponsor	THE KAISER LAW FIRM	**c** EIN-PN	43-1550371-501
a Plan name	THE KELLEY GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	THE KELLEY GROUP	**c** EIN-PN	20-1654554-501
a Plan name	THE KOHN PARTNERSHIP, LLP MCF BENEFIT PLAN		
b Name of plan sponsor	THE KOHN PARTNERSHIP, LLP	**c** EIN-PN	33-2304834-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 LAKE DOCKTORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE LAKE DOCKTORS, LLC	**c** EIN-PN	27-2062807-501
a Plan name	THE LAW OFFICE OF JONATHAN A BAY PC MCF BENEFIT PLAN		
b Name of plan sponsor	THE LAW OFFICE OF JONATHAN A BAY PC	**c** EIN-PN	20-2605005-501
a Plan name	THE LAW OFFICE OF KRISTIN L ARNOLD MCF BENEFIT PLAN		
b Name of plan sponsor	THE LAW OFFICE OF KRISTIN L ARNOLD	**c** EIN-PN	92-2768761-501
a Plan name	THE LAW OFFICE OF MATTHEW RUSSELL DEMPSEY MCF BENEFIT PLAN		
b Name of plan sponsor	THE LAW OFFICE OF MATTHEW RUSSELL DEMPSEY	**c** EIN-PN	46-5040586-501
a Plan name	THE LAW OFFICES OF KEVIN J. ROACH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE LAW OFFICES OF KEVIN J. ROACH LLC	**c** EIN-PN	56-2413757-501
a Plan name	THE LIGHT FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	THE LIGHT FOUNDATION	**c** EIN-PN	81-3061830-501
a Plan name	THE MANAGEMENT COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE MANAGEMENT COMPANY INC	**c** EIN-PN	20-1902111-501
a Plan name	THE MENSE CPA FIRM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE MENSE CPA FIRM LLC	**c** EIN-PN	81-3871431-502
a Plan name	THE MIRRORCOMPANY.COM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE MIRRORCOMPANY.COM LLC	**c** EIN-PN	47-3923910-501
a Plan name	THE MISSOURI SYMPHONY MCF BENEFIT PLAN		
b Name of plan sponsor	THE MISSOURI SYMPHONY	**c** EIN-PN	23-7116524-501
a Plan name	THE MODERN DAY AGENT TEAM MCF BENEFIT PLAN		
b Name of plan sponsor	THE MODERN DAY AGENT TEAM	**c** EIN-PN	92-3275390-501
a Plan name	THE MORTGAGE PLACE MCF BENEFIT PLAN		
b Name of plan sponsor	THE MORTGAGE PLACE	**c** EIN-PN	83-2080652-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 MOWER SHOP AG REPAIR & DIESEL PERFORMANCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE MOWER SHOP AG REPAIR & DIESEL PERFORMANCE, LLC	**c** EIN-PN	82-2994406-501
a Plan name	THE OPEN SPACE COUNCIL FOR THE ST LOUIS REGION MCF BENEFIT PLAN		
b Name of plan sponsor	THE OPEN SPACE COUNCIL FOR THE ST LOUIS REGION	**c** EIN-PN	43-6065329-502
a Plan name	THE PASTA FACTORY MCF BENEFIT PLAN		
b Name of plan sponsor	THE PASTA FACTORY	**c** EIN-PN	43-1072190-501
a Plan name	THE POST SPORTS BAR AND GRILL MCF BENEFIT PLAN		
b Name of plan sponsor	THE POST SPORTS BAR AND GRILL	**c** EIN-PN	26-3190482-501
a Plan name	THE POTTER AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE POTTER AGENCY LLC	**c** EIN-PN	87-1552659-501
a Plan name	THE RAMON GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	THE RAMON GROUP	**c** EIN-PN	81-0816376-501
a Plan name	THE ROMAN GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	THE ROMAN GROUP	**c** EIN-PN	46-2783730-501
a Plan name	THE ROWE BOUTIQUE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE ROWE BOUTIQUE LLC	**c** EIN-PN	85-3336291-501
a Plan name	THE SAGE BEE PREP ACADEMY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE SAGE BEE PREP ACADEMY LLC	**c** EIN-PN	92-3791781-501
a Plan name	THE SCHELLMAN GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE SCHELLMAN GROUP LLC	**c** EIN-PN	46-4339336-501
a Plan name	THE SHERRING BREWING CO LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE SHERRING BREWING CO LLC	**c** EIN-PN	47-1968392-501
a Plan name	THE SMILE COMPANY DENTAL CARE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE SMILE COMPANY DENTAL CARE LLC	**c** EIN-PN	47-3457510-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 SOULFISHER MINISTRIES MCF BENEFIT PLAN		
b Name of plan sponsor	THE SOULFISHER MINISTRIES	**c** EIN-PN	45-5624292-501
a Plan name	THE ST. JOSEPH REAL ESTATE GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	THE ST. JOSEPH REAL ESTATE GROUP	**c** EIN-PN	85-3138161-501
a Plan name	THE ST. LOUIS CHILDRENS CHOIRS MCF BENEFIT PLAN		
b Name of plan sponsor	THE ST. LOUIS CHILDRENS CHOIRS	**c** EIN-PN	43-1145808-501
a Plan name	THE SUMMIT PREPARATORY SCHOOL OF SOUTHWEST MCF BENEFIT PLAN		
b Name of plan sponsor	THE SUMMIT PREPARATORY SCHOOL OF SOUTHWEST	**c** EIN-PN	75-3166533-501
a Plan name	THE TASTY BALANCE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE TASTY BALANCE LLC	**c** EIN-PN	83-3013294-501
a Plan name	THE TOOTH TRUCK, INC MCF BENEFIT PLAN		
b Name of plan sponsor	THE TOOTH TRUCK, INC	**c** EIN-PN	41-2028871-501
a Plan name	THE TOUCH UP SHOP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE TOUCH UP SHOP LLC	**c** EIN-PN	26-4149800-501
a Plan name	THE VILLAGE BRH LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THE VILLAGE BRH LLC	**c** EIN-PN	32-0478572-501
a Plan name	THE WEGMANN LAW FIRM MCF BENEFIT PLAN		
b Name of plan sponsor	THE WEGMANN LAW FIRM	**c** EIN-PN	43-1085217-501
a Plan name	THERAPEUTIC SPECIALTIES INC MCF BENEFIT PLAN		
b Name of plan sponsor	THERAPEUTIC SPECIALTIES INC	**c** EIN-PN	43-1854082-502
a Plan name	THERMAL FLOW TECHNOLOGIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THERMAL FLOW TECHNOLOGIES, LLC	**c** EIN-PN	47-3035546-501
a Plan name	THERMASI LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THERMASI LLC	**c** EIN-PN	47-2647178-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 AUTO PARTS MCF BENEFIT PLAN		
b Name of plan sponsor	THOMAS AUTO PARTS	**c** EIN-PN	43-1387618-501
a Plan name	THOMAS BIRDSONG MILLS MCBRIDE & OSBORNE PC MCF BENEFIT PLAN		
b Name of plan sponsor	THOMAS BIRDSONG MILLS MCBRIDE & OSBORNE PC	**c** EIN-PN	43-1199137-501
a Plan name	THOMAS FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	THOMAS FAMILY DENTAL	**c** EIN-PN	47-1463371-502
a Plan name	THOMAS FAMILY FUNERAL HOMES INC MCF BENEFIT PLAN		
b Name of plan sponsor	THOMAS FAMILY FUNERAL HOMES INC	**c** EIN-PN	61-1547152-501
a Plan name	THOMPSON LAW STL MCF BENEFIT PLAN		
b Name of plan sponsor	THOMPSON LAW STL	**c** EIN-PN	88-1854064-501
a Plan name	THOMPSON SCHOCH FINANCIAL ADVISORS MCF BENEFIT PLAN		
b Name of plan sponsor	THOMPSON SCHOCH FINANCIAL ADVISORS	**c** EIN-PN	46-2969652-501
a Plan name	THOUGHTPROCESS INTERACTIVE MCF BENEFIT PLAN		
b Name of plan sponsor	THOUGHTPROCESS INTERACTIVE	**c** EIN-PN	43-1867965-501
a Plan name	THOUSAND CPA SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THOUSAND CPA SERVICES LLC	**c** EIN-PN	27-3241122-501
a Plan name	THREE OAKS TIMBER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THREE OAKS TIMBER LLC	**c** EIN-PN	47-1024900-501
a Plan name	THRIVE PERSONAL TRAINING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THRIVE PERSONAL TRAINING LLC	**c** EIN-PN	88-2515294-501
a Plan name	THUMBRAISE INC MCF BENEFIT PLAN		
b Name of plan sponsor	THUMBRAISE INC	**c** EIN-PN	83-1454155-501
a Plan name	THUNDER GRAFIX, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	THUNDER GRAFIX, INC.	**c** EIN-PN	43-1873216-501

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

a Plan name	THURBY LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THURBY LANDSCAPING LLC	**c** EIN-PN	47-3825713-501
a Plan name	THURMAN SHINN & SCHWEISS CPAS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	THURMAN SHINN & SCHWEISS CPAS LLC	**c** EIN-PN	93-4194251-501
a Plan name	TIERONE SOLUTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	TIERONE SOLUTIONS	**c** EIN-PN	84-2592929-501
a Plan name	TIGER FIBER MCF BENEFIT PLAN		
b Name of plan sponsor	TIGER FIBER	**c** EIN-PN	83-3231929-501
a Plan name	TIM GRISSUM ACCOUNTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TIM GRISSUM ACCOUNTING LLC	**c** EIN-PN	47-5636271-501
a Plan name	TIM HOLLERBACH DESIGNS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TIM HOLLERBACH DESIGNS, LLC	**c** EIN-PN	45-4158083-501
a Plan name	TIM MITCHELL MEDICAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	TIM MITCHELL MEDICAL INC	**c** EIN-PN	05-0554155-501
a Plan name	TIMBERLINE LANDSCAPE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TIMBERLINE LANDSCAPE LLC	**c** EIN-PN	68-0599137-501
a Plan name	TIMMY G LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TIMMY G LLC	**c** EIN-PN	45-4157358-501
a Plan name	TIMOTHY P PHILIPP PC MCF BENEFIT PLAN		
b Name of plan sponsor	TIMOTHY P PHILIPP PC	**c** EIN-PN	43-1890176-501
a Plan name	TIPTON LATHAM BANK NA MCF BENEFIT PLAN		
b Name of plan sponsor	TIPTON LATHAM BANK NA	**c** EIN-PN	43-1294800-501
a Plan name	TISCHLER BUILDING COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TISCHLER BUILDING COMPANY LLC	**c** EIN-PN	87-4251821-501

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

a Plan name	TITAN INSURANCE AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	TITAN INSURANCE AGENCY	**c** EIN-PN	43-1393816-501
a Plan name	TITAN NUTRITION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TITAN NUTRITION LLC	**c** EIN-PN	11-3762949-501
a Plan name	TITLE RESOURCES INC MCF BENEFIT PLAN		
b Name of plan sponsor	TITLE RESOURCES INC	**c** EIN-PN	20-3303455-501
a Plan name	TJ BROWN LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TJ BROWN LLC	**c** EIN-PN	26-0750174-502
a Plan name	TJP ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TJP ENTERPRISES, LLC	**c** EIN-PN	20-4732603-501
a Plan name	TKD FOUNDATION MCF BENEFIT PLAN		
b Name of plan sponsor	TKD FOUNDATION	**c** EIN-PN	82-3906537-501
a Plan name	TL WHITE ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TL WHITE ENTERPRISES LLC	**c** EIN-PN	43-1917311-501
a Plan name	TLD CONCEPTS MCF BENEFIT PLAN		
b Name of plan sponsor	TLD CONCEPTS	**c** EIN-PN	43-1738436-501
a Plan name	TLH TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TLH TRUCKING LLC	**c** EIN-PN	90-1186668-501
a Plan name	TMB REED PARTS & FARM SUPPLY MCF BENEFIT PLAN		
b Name of plan sponsor	TMB REED PARTS & FARM SUPPLY	**c** EIN-PN	43-1884820-501
a Plan name	TMSC HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TMSC HOLDINGS LLC	**c** EIN-PN	84-3397316-501
a Plan name	TMSKIRK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TMSKIRK LLC	**c** EIN-PN	86-3223456-501

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

a Plan name	TMT MID MO MCF BENEFIT PLAN		
b Name of plan sponsor	TMT MID MO	**c** EIN-PN	46-0754353-501
a Plan name	TODAYS COMPUTER BUSINESS CENTER OF SE MO INC. MCF BENEFIT PLAN		
b Name of plan sponsor	TODAYS COMPUTER BUSINESS CENTER OF SE MO INC.	**c** EIN-PN	43-1581730-501
a Plan name	TODD ANDERSON DDS ENT. MCF BENEFIT PLAN		
b Name of plan sponsor	TODD ANDERSON DDS ENT.	**c** EIN-PN	83-2789228-501
a Plan name	TODT ROOFING & CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	TODT ROOFING & CONSTRUCTION INC	**c** EIN-PN	81-5425649-501
a Plan name	TOM MADDEN & SONS CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	TOM MADDEN & SONS CONSTRUCTION	**c** EIN-PN	20-3737480-501
a Plan name	TOMS AIR CONDITIONING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOMS AIR CONDITIONING LLC	**c** EIN-PN	46-2054450-501
a Plan name	TOMS SLAUGHTERHOUSE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOMS SLAUGHTERHOUSE LLC	**c** EIN-PN	45-3089046-501
a Plan name	TONY & SONS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TONY & SONS, LLC	**c** EIN-PN	90-0966693-501
a Plan name	TONYS TIRE SERVICE MCF BENEFIT PLAN		
b Name of plan sponsor	TONYS TIRE SERVICE	**c** EIN-PN	45-4124733-501
a Plan name	TOP DOG LAUNDROMAT MCF BENEFIT PLAN		
b Name of plan sponsor	TOP DOG LAUNDROMAT	**c** EIN-PN	03-0506491-501
a Plan name	TOP SHELF BOAT & LIFT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOP SHELF BOAT & LIFT LLC	**c** EIN-PN	81-3481948-501
a Plan name	TORGERSON DESIGN PARTNERS MCF BENEFIT PLAN		
b Name of plan sponsor	TORGERSON DESIGN PARTNERS	**c** EIN-PN	27-1749594-501

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

a Plan name	TORREZ SANITATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TORREZ SANITATION LLC	**c** EIN-PN	56-2460823-501
a Plan name	TOSCANO & WILSON LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOSCANO & WILSON LAW LLC	**c** EIN-PN	83-1511975-501
a Plan name	TOSIE DENTAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOSIE DENTAL LLC	**c** EIN-PN	88-3971673-501
a Plan name	TOTAL COMM SERVICES INC MCF BENEFIT PLAN		
b Name of plan sponsor	TOTAL COMM SERVICES INC	**c** EIN-PN	27-2781405-501
a Plan name	TOTAL ELECTRONICS CONTRACTING MCF BENEFIT PLAN		
b Name of plan sponsor	TOTAL ELECTRONICS CONTRACTING	**c** EIN-PN	43-1398809-501
a Plan name	TOTAL LOCK AND SECURITY/THE INSTALLERS CO MCF BENEFIT PLAN		
b Name of plan sponsor	TOTAL LOCK AND SECURITY/THE INSTALLERS CO	**c** EIN-PN	43-1858314-501
a Plan name	TOWN & STYLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TOWN & STYLE LLC	**c** EIN-PN	27-4342371-501
a Plan name	TOWN AND COUNTRY CROSSING ORTHOPEDICS MCF BENEFIT PLAN		
b Name of plan sponsor	TOWN AND COUNTRY CROSSING ORTHOPEDICS	**c** EIN-PN	46-4660425-501
a Plan name	TOWN AND COUNTY MCF BENEFIT PLAN		
b Name of plan sponsor	TOWN AND COUNTY	**c** EIN-PN	44-0617271-501
a Plan name	TOWNSEND HANDYMAN SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	TOWNSEND HANDYMAN SERVICES	**c** EIN-PN	87-4144891-501
a Plan name	TR5 REAL ESTATE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TR5 REAL ESTATE LLC	**c** EIN-PN	84-3804076-501
a Plan name	TRADER BOBS TATTOO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRADER BOBS TATTOO, LLC	**c** EIN-PN	26-1727407-501

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

a Plan name	TRANSPORT ONE INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRANSPORT ONE INC	**c** EIN-PN	43-1378718-501
a Plan name	TRAVEL ANSWERS MCF BENEFIT PLAN		
b Name of plan sponsor	TRAVEL ANSWERS	**c** EIN-PN	43-1924397-501
a Plan name	TRAVIS HODGE HAULING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRAVIS HODGE HAULING, LLC	**c** EIN-PN	27-0942273-501
a Plan name	TREE BROTHERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TREE BROTHERS LLC	**c** EIN-PN	81-1617428-501
a Plan name	TREE HOUSE STL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TREE HOUSE STL, LLC	**c** EIN-PN	46-1441621-501
a Plan name	TREND ELECTRIC COMPANY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TREND ELECTRIC COMPANY LLC	**c** EIN-PN	85-2476027-501
a Plan name	TRENDS IN TILE MCF BENEFIT PLAN		
b Name of plan sponsor	TRENDS IN TILE	**c** EIN-PN	43-1707297-501
a Plan name	TRH UNITED PASSBOOK LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRH UNITED PASSBOOK LLC	**c** EIN-PN	81-3114090-501
a Plan name	TRI COUNTY PLUMBING MCF BENEFIT PLAN		
b Name of plan sponsor	TRI COUNTY PLUMBING	**c** EIN-PN	43-1921051-501
a Plan name	TRI LAKES DENTAL CENTER LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRI LAKES DENTAL CENTER LLC	**c** EIN-PN	43-1836891-501
a Plan name	TRIDENT MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRIDENT MANAGEMENT LLC	**c** EIN-PN	83-1358247-501
a Plan name	TRIFECTA PROPERTY RESTORATION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRIFECTA PROPERTY RESTORATION LLC	**c** EIN-PN	47-4188328-501

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

a Plan name	TRINITY LANDSCAPING GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRINITY LANDSCAPING GROUP LLC	**c** EIN-PN	47-3854094-501
a Plan name	TRINITY STAINLESS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRINITY STAINLESS INC	**c** EIN-PN	34-1983011-501
a Plan name	TRIPLE 12 LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRIPLE 12 LLC	**c** EIN-PN	82-1387580-501
a Plan name	TRIPLE J AG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRIPLE J AG, LLC	**c** EIN-PN	20-8742705-501
a Plan name	TRI-RIVERS BROADCASTING CO MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-RIVERS BROADCASTING CO	**c** EIN-PN	43-1528186-501
a Plan name	TRI-STAR BENEFIT SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-STAR BENEFIT SYSTEMS INC	**c** EIN-PN	43-1458791-501
a Plan name	TRISTAR ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	TRISTAR ELECTRIC	**c** EIN-PN	47-3167082-501
a Plan name	TRI-STATE CARTAGE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-STATE CARTAGE, LLC	**c** EIN-PN	87-3086369-501
a Plan name	TRI-STATE CORRAL MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-STATE CORRAL	**c** EIN-PN	36-4659236-501
a Plan name	TRI-STATE FAMILY YMCA MCF BENEFIT PLAN		
b Name of plan sponsor	TRI-STATE FAMILY YMCA	**c** EIN-PN	43-1729473-501
a Plan name	TRIUMPH MEDICAL SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	TRIUMPH MEDICAL SERVICES	**c** EIN-PN	38-3883458-501
a Plan name	TRIUMPH SYSTEMS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TRIUMPH SYSTEMS INC	**c** EIN-PN	82-5500593-501

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

a Plan name	TROESSER LAWN CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TROESSER LAWN CARE, LLC	**c** EIN-PN	20-4523134-501
a Plan name	TROY FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	TROY FAMILY DENTAL	**c** EIN-PN	99-1525328-501
a Plan name	TRR MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRR MANAGEMENT LLC	**c** EIN-PN	46-3401434-501
a Plan name	TRUE ENGINEERING GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	TRUE ENGINEERING GROUP	**c** EIN-PN	81-0893284-501
a Plan name	TRUE UTILITY CONTRACTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRUE UTILITY CONTRACTING LLC	**c** EIN-PN	86-1752441-501
a Plan name	TRUE VINE TREE SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRUE VINE TREE SERVICE LLC	**c** EIN-PN	46-5542056-501
a Plan name	TRUENORTH CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRUENORTH CONSTRUCTION LLC	**c** EIN-PN	37-1804837-501
a Plan name	TRUENORTH WEALTH & IMPACT, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRUENORTH WEALTH & IMPACT, LLC	**c** EIN-PN	88-1871413-501
a Plan name	TRUESCAPE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRUESCAPE LLC	**c** EIN-PN	56-2497645-501
a Plan name	TRUESON EXTERIORS MCF BENEFIT PLAN		
b Name of plan sponsor	TRUESON EXTERIORS	**c** EIN-PN	27-2526461-501
a Plan name	TRUMP BK ANGUS MCF BENEFIT PLAN		
b Name of plan sponsor	TRUMP BK ANGUS	**c** EIN-PN	88-1025720-501
a Plan name	TRXC TIMING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TRXC TIMING LLC	**c** EIN-PN	13-4359048-501

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

a Plan name	TURF MARK SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TURF MARK SERVICES, LLC	**c** EIN-PN	45-3799170-501
a Plan name	TURKEY CREEK FARMS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TURKEY CREEK FARMS, LLC	**c** EIN-PN	47-2531971-501
a Plan name	TURKS AUTO BODY MCF BENEFIT PLAN		
b Name of plan sponsor	TURKS AUTO BODY	**c** EIN-PN	81-3982880-501
a Plan name	TURN N BURN TRUCKING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TURN N BURN TRUCKING LLC	**c** EIN-PN	85-3979698-501
a Plan name	TURNAROUND EXPRESS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TURNAROUND EXPRESS LLC	**c** EIN-PN	43-1947640-501
a Plan name	TURNER REID DUNCAN LOOMER AND PATTON PC MCF BENEFIT PLAN		
b Name of plan sponsor	TURNER REID DUNCAN LOOMER AND PATTON PC	**c** EIN-PN	43-1221575-501
a Plan name	TURNINGS PLUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TURNINGS PLUS LLC	**c** EIN-PN	83-4350460-501
a Plan name	TUXEN & ASSOCIATES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	TUXEN & ASSOCIATES INC.	**c** EIN-PN	56-2300822-501
a Plan name	TWIN EDGE LAWN CARE AND LANDSCAPING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TWIN EDGE LAWN CARE AND LANDSCAPING, LLC	**c** EIN-PN	26-1820024-501
a Plan name	TWIN TWELVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TWIN TWELVE LLC	**c** EIN-PN	82-3658988-501
a Plan name	TXR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TXR LLC	**c** EIN-PN	27-3425998-501
a Plan name	TYBEE STUDIOS INC MCF BENEFIT PLAN		
b Name of plan sponsor	TYBEE STUDIOS INC	**c** EIN-PN	16-1745439-501

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

a Plan name	TYLER DOW CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	TYLER DOW CONSTRUCTION LLC	**c** EIN-PN	20-2543119-501
a Plan name	UBQ INDUSTRIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UBQ INDUSTRIES LLC	**c** EIN-PN	47-1194537-501
a Plan name	UKRAFT INC MCF BENEFIT PLAN		
b Name of plan sponsor	UKRAFT INC	**c** EIN-PN	83-1637703-501
a Plan name	ULTIMATE DEALS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ULTIMATE DEALS, LLC	**c** EIN-PN	82-3879899-501
a Plan name	ULTRA CLEAN MIDWEST ELECTRO POLISH MCF BENEFIT PLAN		
b Name of plan sponsor	ULTRA CLEAN MIDWEST ELECTRO POLISH	**c** EIN-PN	45-4011927-501
a Plan name	UNCLE LEOS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UNCLE LEOS LLC	**c** EIN-PN	47-1985703-501
a Plan name	UNDER GRACE HOME HEALTH AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	UNDER GRACE HOME HEALTH AGENCY	**c** EIN-PN	82-1426002-501
a Plan name	UNDIVIDED WEALTH MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	UNDIVIDED WEALTH MANAGEMENT	**c** EIN-PN	82-5525404-501
a Plan name	UNEARTH POTENTIAL MCF BENEFIT PLAN		
b Name of plan sponsor	UNEARTH POTENTIAL	**c** EIN-PN	85-3394770-501
a Plan name	UNERSTALL FOUNDATIONS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	UNERSTALL FOUNDATIONS INC.	**c** EIN-PN	43-1760178-501
a Plan name	UNION LOAFERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	UNION LOAFERS INC	**c** EIN-PN	47-4172746-501
a Plan name	UNIQUE INTERIORS GRP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UNIQUE INTERIORS GRP LLC	**c** EIN-PN	57-3756124-501

Part II **Information on Participating Plans (to be completed by DFEs, other than 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 CREDIT & COLLECTIONS INC MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED CREDIT & COLLECTIONS INC	**c** EIN-PN	43-1042341-501
a Plan name	UNITED LAND TITLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED LAND TITLE LLC	**c** EIN-PN	26-1329664-501
a Plan name	UNITED SERVICES FOR CHILDREN MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED SERVICES FOR CHILDREN	**c** EIN-PN	43-1136074-501
a Plan name	UNITED SPECIALTY ALLOYS MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED SPECIALTY ALLOYS	**c** EIN-PN	43-1544129-501
a Plan name	UNITED STATES ANIMAL HEALTH ASSOC. MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED STATES ANIMAL HEALTH ASSOC.	**c** EIN-PN	21-6008168-501
a Plan name	UNITED WAY OF SOUTHWEST MO AND SOUTHEAST KS MCF BENEFIT PLAN		
b Name of plan sponsor	UNITED WAY OF SOUTHWEST MO AND SOUTHEAST KS	**c** EIN-PN	44-0556865-501
a Plan name	UNIVERCELL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UNIVERCELL LLC	**c** EIN-PN	83-2981683-501
a Plan name	UNIVERSAL FINANCIAL GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL FINANCIAL GROUP	**c** EIN-PN	43-1664931-501
a Plan name	UNIVERSAL GEOTECH GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	UNIVERSAL GEOTECH GROUP	**c** EIN-PN	83-3124677-501
a Plan name	UNIVERSITY DENTAL CARE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UNIVERSITY DENTAL CARE, LLC	**c** EIN-PN	27-3121586-501
a Plan name	UPLAND SERVICING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UPLAND SERVICING LLC	**c** EIN-PN	85-0522702-501
a Plan name	UPLIFT MARKETING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UPLIFT MARKETING LLC	**c** EIN-PN	47-4058702-501

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

a Plan name	UPPER WHITE RIVER BASIN FOUNDATION INC MCF BENEFIT PLAN		
b Name of plan sponsor	UPPER WHITE RIVER BASIN FOUNDATION INC	**c** EIN-PN	43-1942991-501
a Plan name	URBAN SPROUTS CHILD DEVELOPMENT CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	URBAN SPROUTS CHILD DEVELOPMENT CENTER	**c** EIN-PN	61-1753198-501
a Plan name	US CANNA CAPITAL & MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	US CANNA CAPITAL & MANAGEMENT LLC	**c** EIN-PN	84-4959573-501
a Plan name	US EXTERIOR MAINTENANCE & REPAIR LLC MCF BENEFIT PLAN		
b Name of plan sponsor	US EXTERIOR MAINTENANCE & REPAIR LLC	**c** EIN-PN	36-4333691-501
a Plan name	US FLOORING COMPANY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	US FLOORING COMPANY INC.	**c** EIN-PN	20-3153004-501
a Plan name	US INTEGRITY MACHINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	US INTEGRITY MACHINE, LLC	**c** EIN-PN	45-5340353-501
a Plan name	US MED REHAB MCF BENEFIT PLAN		
b Name of plan sponsor	US MED REHAB	**c** EIN-PN	82-1620876-501
a Plan name	UTILIWORX LLC MCF BENEFIT PLAN		
b Name of plan sponsor	UTILIWORX LLC	**c** EIN-PN	93-4183022-501
a Plan name	VACATION WORLD, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	VACATION WORLD, INC.	**c** EIN-PN	43-1510345-501
a Plan name	VADIM BARAM MCF BENEFIT PLAN		
b Name of plan sponsor	VADIM BARAM	**c** EIN-PN	20-2952062-501
a Plan name	VALUE HOMES INC MCF BENEFIT PLAN		
b Name of plan sponsor	VALUE HOMES INC	**c** EIN-PN	43-1911577-501
a Plan name	VAN CLEAVE CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VAN CLEAVE CONSTRUCTION LLC	**c** EIN-PN	46-2610407-501

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

a Plan name	VANCE EWING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VANCE EWING LLC	**c** EIN-PN	45-4782427-501
a Plan name	VANDESMITH SPECIALTY COFFEE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VANDESMITH SPECIALTY COFFEE LLC	**c** EIN-PN	84-3966095-501
a Plan name	VANGUARD PIANO SERVICE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VANGUARD PIANO SERVICE, LLC	**c** EIN-PN	84-2576841-501
a Plan name	VANLOO SERVICE CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	VANLOO SERVICE CENTER	**c** EIN-PN	26-4074116-501
a Plan name	VAZZO CREATIVE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VAZZO CREATIVE LLC	**c** EIN-PN	46-3488093-501
a Plan name	VBM LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VBM LAW LLC	**c** EIN-PN	45-3211794-501
a Plan name	VEGGIE COUPLE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VEGGIE COUPLE LLC	**c** EIN-PN	45-4816459-501
a Plan name	VELTA TECHNOLOGY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VELTA TECHNOLOGY LLC	**c** EIN-PN	83-3866268-501
a Plan name	VERITAS FORENSIC PSYCHIATRY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VERITAS FORENSIC PSYCHIATRY, LLC	**c** EIN-PN	84-5168689-501
a Plan name	VERSEMAN DESIGN MCF BENEFIT PLAN		
b Name of plan sponsor	VERSEMAN DESIGN	**c** EIN-PN	46-0844093-501
a Plan name	VERSEMANN REPAIR & MACHINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VERSEMANN REPAIR & MACHINE, LLC	**c** EIN-PN	81-3716888-501
a Plan name	VERUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VERUS LLC	**c** EIN-PN	87-3808267-501

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

a Plan name	VETBIZ MCF BENEFIT PLAN		
b Name of plan sponsor	VETBIZ	**c** EIN-PN	43-1751593-501
a Plan name	VETS FIRE AND LIFE SAFETY MCF BENEFIT PLAN		
b Name of plan sponsor	VETS FIRE AND LIFE SAFETY	**c** EIN-PN	81-4097347-501
a Plan name	VIE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VIE LLC	**c** EIN-PN	81-4179247-501
a Plan name	VIENNA VETERINARY CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	VIENNA VETERINARY CLINIC	**c** EIN-PN	43-1214959-501
a Plan name	VINOTECA INC MCF BENEFIT PLAN		
b Name of plan sponsor	VINOTECA INC	**c** EIN-PN	90-0704666-501
a Plan name	VISAGE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	VISAGE, INC.	**c** EIN-PN	48-1223905-501
a Plan name	VISION 29 11, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	VISION 29 11, INC.	**c** EIN-PN	27-4398967-501
a Plan name	VISTA FINANCE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VISTA FINANCE, LLC	**c** EIN-PN	85-4247779-501
a Plan name	VISUAL HYMN, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VISUAL HYMN, LLC	**c** EIN-PN	88-2452994-501
a Plan name	VITEK SOLUTIONS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	VITEK SOLUTIONS, INC.	**c** EIN-PN	26-2987630-501
a Plan name	VIVIAN COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	VIVIAN COMPANY	**c** EIN-PN	43-0671125-501
a Plan name	VODALAND USA LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VODALAND USA LLC	**c** EIN-PN	27-3973044-501

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

a Plan name	VOGELGESANG TOWING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VOGELGESANG TOWING LLC	**c** EIN-PN	43-1868894-501
a Plan name	VOGELSANG PEST MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VOGELSANG PEST MANAGEMENT LLC	**c** EIN-PN	46-1925002-501
a Plan name	VOLUNTARY ACTION CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	VOLUNTARY ACTION CENTER	**c** EIN-PN	23-7120750-501
a Plan name	VOLZ INCORPORATED MCF BENEFIT PLAN		
b Name of plan sponsor	VOLZ INCORPORATED	**c** EIN-PN	43-0923797-501
a Plan name	VOSS HANDYMAN & REMODELING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VOSS HANDYMAN & REMODELING LLC	**c** EIN-PN	20-5283259-501
a Plan name	VOYTAS LAW LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VOYTAS LAW LLC	**c** EIN-PN	86-2651225-501
a Plan name	VREELAND CAPITAL LLC MCF BENEFIT PLAN		
b Name of plan sponsor	VREELAND CAPITAL LLC	**c** EIN-PN	83-2725032-501
a Plan name	VSP CONSTRUCTION SERVICES, INC MCF BENEFIT PLAN		
b Name of plan sponsor	VSP CONSTRUCTION SERVICES, INC	**c** EIN-PN	43-1430873-501
a Plan name	W & S DOOR CO. MCF BENEFIT PLAN		
b Name of plan sponsor	W & S DOOR CO.	**c** EIN-PN	43-1651558-501
a Plan name	WADES AUTO SERVICE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WADES AUTO SERVICE LLC	**c** EIN-PN	47-4552161-501
a Plan name	WAK PROPERTIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WAK PROPERTIES, LLC	**c** EIN-PN	47-2470460-501
a Plan name	WAKEFIELD DESIGNS MCF BENEFIT PLAN		
b Name of plan sponsor	WAKEFIELD DESIGNS	**c** EIN-PN	87-0980562-501

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

a Plan name	WALBRANDT ELECTRIC AND TECHNOLOGIES MCF BENEFIT PLAN		
b Name of plan sponsor	WALBRANDT ELECTRIC AND TECHNOLOGIES	**c** EIN-PN	87-4287080-501
a Plan name	WALCO VINYL ENGINEERING CO MCF BENEFIT PLAN		
b Name of plan sponsor	WALCO VINYL ENGINEERING CO	**c** EIN-PN	43-1133374-501
a Plan name	WALDE FIRTH ORTHODONTIC SPECIALISTS LLP MCF BENEFIT PLAN		
b Name of plan sponsor	WALDE FIRTH ORTHODONTIC SPECIALISTS LLP	**c** EIN-PN	47-5100393-502
a Plan name	WALDEN MANAGEMENT MCF BENEFIT PLAN		
b Name of plan sponsor	WALDEN MANAGEMENT	**c** EIN-PN	45-2485618-501
a Plan name	WALKER TEAM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WALKER TEAM LLC	**c** EIN-PN	45-5376490-501
a Plan name	WALLS HVAC SERVICES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WALLS HVAC SERVICES LLC	**c** EIN-PN	47-4801147-501
a Plan name	WALMAR INVESTMENT COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	WALMAR INVESTMENT COMPANY	**c** EIN-PN	43-0669896-501
a Plan name	WALSH CUSTOM PAINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WALSH CUSTOM PAINTING LLC	**c** EIN-PN	26-2886069-501
a Plan name	WALTERS WALK INC MCF BENEFIT PLAN		
b Name of plan sponsor	WALTERS WALK INC	**c** EIN-PN	27-2595936-501
a Plan name	WARD DIRT RELOCATORS MCF BENEFIT PLAN		
b Name of plan sponsor	WARD DIRT RELOCATORS	**c** EIN-PN	90-0936427-501
a Plan name	WARNER ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	WARNER ENTERPRISES	**c** EIN-PN	20-5211533-502
a Plan name	WARREN A LAWSON DDS PC MCF BENEFIT PLAN		
b Name of plan sponsor	WARREN A LAWSON DDS PC	**c** EIN-PN	43-1891230-501

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

a Plan name	WARRENSBURG ASTETICS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WARRENSBURG ASTETICS, LLC	**c** EIN-PN	99-4904666-501
a Plan name	WARRENSBURG OPTICAL INC MCF BENEFIT PLAN		
b Name of plan sponsor	WARRENSBURG OPTICAL INC	**c** EIN-PN	43-1186827-501
a Plan name	WARRENTON FAMILY DENTIST LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WARRENTON FAMILY DENTIST LLC	**c** EIN-PN	92-0601178-501
a Plan name	WARRENTON STEEL FABRICATION & SUPPLY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WARRENTON STEEL FABRICATION & SUPPLY LLC	**c** EIN-PN	83-3971171-501
a Plan name	WARSAW VET MCF BENEFIT PLAN		
b Name of plan sponsor	WARSAW VET	**c** EIN-PN	88-1615967-501
a Plan name	WARSON WOODS FAMILY DENTISTRY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WARSON WOODS FAMILY DENTISTRY, LLC	**c** EIN-PN	83-2452173-501
a Plan name	WASH PRO E.C.S. LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WASH PRO E.C.S. LLC	**c** EIN-PN	86-2045087-501
a Plan name	WASHINGTON AREA CHAMBER OF COMMERCE MCF BENEFIT PLAN		
b Name of plan sponsor	WASHINGTON AREA CHAMBER OF COMMERCE	**c** EIN-PN	43-0647107-501
a Plan name	WASHINGTON CAPITAL MANAGEMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	WASHINGTON CAPITAL MANAGEMENT INC	**c** EIN-PN	43-1905737-501
a Plan name	WASHINGTON COUNTY BOARD FOR THE HANDICAPPED MCF BENEFIT PLAN		
b Name of plan sponsor	WASHINGTON COUNTY BOARD FOR THE HANDICAPPED	**c** EIN-PN	43-1665129-501
a Plan name	WASHPC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WASHPC LLC	**c** EIN-PN	27-0591604-501
a Plan name	WATER MATTERS INC MCF BENEFIT PLAN		
b Name of plan sponsor	WATER MATTERS INC	**c** EIN-PN	43-1609551-501

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

a Plan name	WATERING WELLNESS MCF BENEFIT PLAN		
b Name of plan sponsor	WATERING WELLNESS	**c** EIN-PN	84-2038425-501
a Plan name	WATSON & SONS CONSTRUCTION MCF BENEFIT PLAN		
b Name of plan sponsor	WATSON & SONS CONSTRUCTION	**c** EIN-PN	45-4377213-501
a Plan name	WAYDES EQUIPMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WAYDES EQUIPMENT LLC	**c** EIN-PN	43-1818200-501
a Plan name	WAYDE'S EQUIPMENT OF UNION, MO, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WAYDES EQUIPMENT OF UNION, MO, LLC	**c** EIN-PN	82-3612957-501
a Plan name	WAYSIDE FURNITURE INC MCF BENEFIT PLAN		
b Name of plan sponsor	WAYSIDE FURNITURE INC	**c** EIN-PN	43-1027520-501
a Plan name	WE MANAGE TECH MCF BENEFIT PLAN		
b Name of plan sponsor	WE MANAGE TECH	**c** EIN-PN	83-3690267-501
a Plan name	WEALTH PLAN ADVISORS GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEALTH PLAN ADVISORS GROUP LLC	**c** EIN-PN	45-4303371-501
a Plan name	WEATHERS EXTERIORS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEATHERS EXTERIORS, LLC	**c** EIN-PN	26-2761475-501
a Plan name	WEBER SEEDS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WEBER SEEDS, INC.	**c** EIN-PN	43-1577782-501
a Plan name	WEEDS AND SARDINES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEEDS AND SARDINES, LLC	**c** EIN-PN	86-3670253-501
a Plan name	WEHR FORD OF MOUNTAIN GROVE MCF BENEFIT PLAN		
b Name of plan sponsor	WEHR FORD OF MOUNTAIN GROVE	**c** EIN-PN	43-1829908-501
a Plan name	WEIDERMAN ENTERPRISES MCF BENEFIT PLAN		
b Name of plan sponsor	WEIDERMAN ENTERPRISES	**c** EIN-PN	71-0906396-501

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

a Plan name	WEIS DENTISTRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEIS DENTISTRY LLC	**c** EIN-PN	86-2327075-501
a Plan name	WEISS HOLDINGS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEISS HOLDINGS LLC	**c** EIN-PN	81-3381394-501
a Plan name	WELBORN ENTERPRISES INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WELBORN ENTERPRISES INC.	**c** EIN-PN	43-1834095-501
a Plan name	WELCH & ASSOCIATES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WELCH & ASSOCIATES, LLC	**c** EIN-PN	43-1794646-501
a Plan name	WELCH FARMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WELCH FARMS LLC	**c** EIN-PN	88-0949937-501
a Plan name	WELCHCRAFT REMODELING AND CONSTRUCTION LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WELCHCRAFT REMODELING AND CONSTRUCTION LLC	**c** EIN-PN	88-4398646-501
a Plan name	WELKER AUTO & TRUCK SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	WELKER AUTO & TRUCK SERVICES	**c** EIN-PN	81-3870656-501
a Plan name	WELKER FAMILY DENTISTRY, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WELKER FAMILY DENTISTRY, LLC	**c** EIN-PN	46-2854386-501
a Plan name	WELLINGTON ENVIRONMENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	WELLINGTON ENVIRONMENTAL	**c** EIN-PN	43-1488609-501
a Plan name	WELLNESS CHIROPRACTIC CENTER PC MCF BENEFIT PLAN		
b Name of plan sponsor	WELLNESS CHIROPRACTIC CENTER PC	**c** EIN-PN	43-1808330-501
a Plan name	WELLS LANDSCAPING & LAWN CARE, INC MCF BENEFIT PLAN		
b Name of plan sponsor	WELLS LANDSCAPING & LAWN CARE, INC	**c** EIN-PN	20-0978988-501
a Plan name	WEPOWER MCF BENEFIT PLAN		
b Name of plan sponsor	WEPOWER	**c** EIN-PN	82-3591958-501

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

a Plan name	WESCO HAULING AND CONTRACTING INC MCF BENEFIT PLAN		
b Name of plan sponsor	WESCO HAULING AND CONTRACTING INC	**c** EIN-PN	43-1877781-501
a Plan name	WESLEY RANEW AGENCY MCF BENEFIT PLAN		
b Name of plan sponsor	WESLEY RANEW AGENCY	**c** EIN-PN	47-2025206-501
a Plan name	WEST CENTRAL AG, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WEST CENTRAL AG, LLC	**c** EIN-PN	81-5138602-501
a Plan name	WEST CENTRAL MOTOR FREIGHT INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WEST CENTRAL MOTOR FREIGHT INC.	**c** EIN-PN	43-1083044-501
a Plan name	WEST COUNTY FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	WEST COUNTY FAMILY DENTAL	**c** EIN-PN	43-1804291-501
a Plan name	WEST PLAINS MARINE MCF BENEFIT PLAN		
b Name of plan sponsor	WEST PLAINS MARINE	**c** EIN-PN	43-1909926-501
a Plan name	WESTBROOK ENTERPRISES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTBROOK ENTERPRISES LLC	**c** EIN-PN	92-1268062-501
a Plan name	WESTGATE REALTY INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WESTGATE REALTY INC.	**c** EIN-PN	43-1699123-501
a Plan name	WESTGATE TRAILERS MCF BENEFIT PLAN		
b Name of plan sponsor	WESTGATE TRAILERS	**c** EIN-PN	43-1865289-501
a Plan name	WESTMORE GROUP, INC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTMORE GROUP, INC	**c** EIN-PN	43-1397486-501
a Plan name	WESTPLEX MEDIA GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTPLEX MEDIA GROUP LLC	**c** EIN-PN	83-0819429-501
a Plan name	WESTSIDE SOLUTIONS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTSIDE SOLUTIONS LLC	**c** EIN-PN	45-2760653-501

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

a Plan name	WESTSIDE VET CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTSIDE VET CLINIC	**c** EIN-PN	43-1910520-501
a Plan name	WESTWARD ALLIANCE MCF BENEFIT PLAN		
b Name of plan sponsor	WESTWARD ALLIANCE	**c** EIN-PN	47-4512442-501
a Plan name	WESTWIND SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WESTWIND SERVICES, LLC	**c** EIN-PN	84-2494831-501
a Plan name	WESTWOOD GROCERY, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WESTWOOD GROCERY, INC.	**c** EIN-PN	43-0888528-501
a Plan name	WHEEL CITY WHOLESALERS MCF BENEFIT PLAN		
b Name of plan sponsor	WHEEL CITY WHOLESALERS	**c** EIN-PN	20-3438972-501
a Plan name	WHEELHOUSE ADVISORY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WHEELHOUSE ADVISORY GROUP LLC	**c** EIN-PN	85-3465446-501
a Plan name	WHISLER CONSTRUCTION INC MCF BENEFIT PLAN		
b Name of plan sponsor	WHISLER CONSTRUCTION INC	**c** EIN-PN	43-1839502-501
a Plan name	WHITAKER PUBLISHING MCF BENEFIT PLAN		
b Name of plan sponsor	WHITAKER PUBLISHING	**c** EIN-PN	43-1929402-501
a Plan name	WHITE PEAKS INVESTMENTS MCF BENEFIT PLAN		
b Name of plan sponsor	WHITE PEAKS INVESTMENTS	**c** EIN-PN	45-2819109-501
a Plan name	WHITE PLUMBING COMPANY MCF BENEFIT PLAN		
b Name of plan sponsor	WHITE PLUMBING COMPANY	**c** EIN-PN	82-5119394-501
a Plan name	WHITLOCK HOLDINGS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WHITLOCK HOLDINGS, LLC	**c** EIN-PN	43-1723821-501
a Plan name	WHITS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WHITS LLC	**c** EIN-PN	46-2893210-501

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

a Plan name	WHOBREY FARM & LAWN MCF BENEFIT PLAN		
b Name of plan sponsor	WHOBREY FARM & LAWN	**c** EIN-PN	20-0995218-501
a Plan name	WHOLESALE AUTO PAINTS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WHOLESALE AUTO PAINTS LLC	**c** EIN-PN	47-2211598-501
a Plan name	WIBBENMEYER CONCRETERS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WIBBENMEYER CONCRETERS LLC	**c** EIN-PN	20-2211184-501
a Plan name	WICKED CHICKEN CAFE MCF BENEFIT PLAN		
b Name of plan sponsor	WICKED CHICKEN CAFE	**c** EIN-PN	87-1985060-501
a Plan name	WICKLOW LAND LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WICKLOW LAND LLC	**c** EIN-PN	92-2914971-501
a Plan name	WIL-BUILD LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WIL-BUILD LLC	**c** EIN-PN	93-2981678-501
a Plan name	WILD BOAR CREEK FARM LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILD BOAR CREEK FARM LLC	**c** EIN-PN	36-5013706-501
a Plan name	WILDMAN PLUMBING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILDMAN PLUMBING LLC	**c** EIN-PN	20-8973365-502
a Plan name	WILDWOOD ROOFING & CONSTRUCTION, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILDWOOD ROOFING & CONSTRUCTION, LLC	**c** EIN-PN	46-4779588-501
a Plan name	WILEY INSURANCE AGENCY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILEY INSURANCE AGENCY LLC	**c** EIN-PN	46-5280993-501
a Plan name	WILKEN SEAMLESS GUTTERING INC MCF BENEFIT PLAN		
b Name of plan sponsor	WILKEN SEAMLESS GUTTERING INC	**c** EIN-PN	43-1908160-501
a Plan name	WILKERSON ADVISORY GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILKERSON ADVISORY GROUP LLC	**c** EIN-PN	33-2664017-501

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

a Plan name	WILLARD FIRE PROTECTION MCF BENEFIT PLAN		
b Name of plan sponsor	WILLARD FIRE PROTECTION	**c** EIN-PN	43-1505006-501
a Plan name	WILLETT DENTAL ASSOCIATES MCF BENEFIT PLAN		
b Name of plan sponsor	WILLETT DENTAL ASSOCIATES	**c** EIN-PN	85-4095750-501
a Plan name	WILLIAM M. COHEN DMD, MS MCF BENEFIT PLAN		
b Name of plan sponsor	WILLIAM M. COHEN DMD, MS	**c** EIN-PN	43-1767259-501
a Plan name	WILLIAM M. DUENSING, DDS, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILLIAM M. DUENSING, DDS, LLC	**c** EIN-PN	47-2602632-501
a Plan name	WILLIAMS ELECTRIC AND HOME & BUSINESS MAINTENANCE MCF BENEFIT PLAN		
b Name of plan sponsor	WILLIAMS ELECTRIC AND HOME & BUSINESS MAINTENANCE	**c** EIN-PN	71-0866751-501
a Plan name	WILLIAMS HEATING & COOLING MCF BENEFIT PLAN		
b Name of plan sponsor	WILLIAMS HEATING & COOLING	**c** EIN-PN	88-0567683-501
a Plan name	WILLOW LANDSCAPING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILLOW LANDSCAPING LLC	**c** EIN-PN	27-4454396-501
a Plan name	WIL-MIX CONCRETE LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WIL-MIX CONCRETE LLC	**c** EIN-PN	87-2645973-501
a Plan name	WILSON GRANITE LTD MCF BENEFIT PLAN		
b Name of plan sponsor	WILSON GRANITE LTD	**c** EIN-PN	43-1411964-501
a Plan name	WILSON INDUSTRIES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILSON INDUSTRIES LLC	**c** EIN-PN	82-5318044-501
a Plan name	WILSON ORTHODONTICS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WILSON ORTHODONTICS LLC	**c** EIN-PN	45-2543205-501
a Plan name	WINCHESTER CHIROPRACTIC MCF BENEFIT PLAN		
b Name of plan sponsor	WINCHESTER CHIROPRACTIC	**c** EIN-PN	04-3788241-501

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

a Plan name	WINDER AND COMPANY INC MCF BENEFIT PLAN		
b Name of plan sponsor	WINDER AND COMPANY INC	**c** EIN-PN	02-0701978-501
a Plan name	WINDOW DEPOT OF ST LOUIS MCF BENEFIT PLAN		
b Name of plan sponsor	WINDOW DEPOT OF ST LOUIS	**c** EIN-PN	26-1467671-501
a Plan name	WINDSOR GYMNASTICS INSTITUTE INC MCF BENEFIT PLAN		
b Name of plan sponsor	WINDSOR GYMNASTICS INSTITUTE INC	**c** EIN-PN	43-1688965-501
a Plan name	WINE FOR A WEDDING MCF BENEFIT PLAN		
b Name of plan sponsor	WINE FOR A WEDDING	**c** EIN-PN	27-3989370-501
a Plan name	WINGE MASONRY MCF BENEFIT PLAN		
b Name of plan sponsor	WINGE MASONRY	**c** EIN-PN	43-1749978-501
a Plan name	WINGXPAND INC MCF BENEFIT PLAN		
b Name of plan sponsor	WINGXPAND INC	**c** EIN-PN	88-1842037-501
a Plan name	WINNETT INSURANCE AGENCY INC MCF BENEFIT PLAN		
b Name of plan sponsor	WINNETT INSURANCE AGENCY INC	**c** EIN-PN	43-1622274-501
a Plan name	WINNING TECHNOLOGIES, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WINNING TECHNOLOGIES, INC.	**c** EIN-PN	80-0050207-501
a Plan name	WINSCHEL GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WINSCHEL GROUP LLC	**c** EIN-PN	99-3343840-501
a Plan name	WINTER BROTHERS MATERIAL MCF BENEFIT PLAN		
b Name of plan sponsor	WINTER BROTHERS MATERIAL	**c** EIN-PN	43-0645094-501
a Plan name	WIRED ELECTRIC LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WIRED ELECTRIC LLC	**c** EIN-PN	45-3986545-501
a Plan name	WISDOM DRUG LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WISDOM DRUG LLC	**c** EIN-PN	82-4180923-501

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

a Plan name	WISE INVESTMENT MANAGEMENT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WISE INVESTMENT MANAGEMENT LLC	**c** EIN-PN	83-2207120-501
a Plan name	WISEMAN SHOTCRETE SERVICES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WISEMAN SHOTCRETE SERVICES, LLC	**c** EIN-PN	82-3112107-501
a Plan name	WITHROW ELECTRIC MCF BENEFIT PLAN		
b Name of plan sponsor	WITHROW ELECTRIC	**c** EIN-PN	43-1750507-501
a Plan name	WITTMER REJUVENATION CLINIC MCF BENEFIT PLAN		
b Name of plan sponsor	WITTMER REJUVENATION CLINIC	**c** EIN-PN	87-3811196-501
a Plan name	WJR JR LLC / SAINT LOUIS GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	WJR JR LLC / SAINT LOUIS GROUP	**c** EIN-PN	83-4199317-501
a Plan name	WMV ENTERPRISES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WMV ENTERPRISES, LLC	**c** EIN-PN	27-0541510-501
a Plan name	WOLF BUILDING & DEVELOPMENT INC MCF BENEFIT PLAN		
b Name of plan sponsor	WOLF BUILDING & DEVELOPMENT INC	**c** EIN-PN	43-1680897-501
a Plan name	WOLF HOLLOW GOLF CLUB LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOLF HOLLOW GOLF CLUB LLC	**c** EIN-PN	43-1807771-501
a Plan name	WOLFF & TAYLOR PC MCF BENEFIT PLAN		
b Name of plan sponsor	WOLFF & TAYLOR PC	**c** EIN-PN	43-1305868-501
a Plan name	WOMEN'S CARE CONSULTANTS MCF BENEFIT PLAN		
b Name of plan sponsor	WOMENS CARE CONSULTANTS	**c** EIN-PN	43-1800826-501
a Plan name	WOMENS WELLNESS CENTER MCF BENEFIT PLAN		
b Name of plan sponsor	WOMENS WELLNESS CENTER	**c** EIN-PN	20-8857532-501
a Plan name	WOOD CHIP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOOD CHIP LLC	**c** EIN-PN	86-1584512-501

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

a Plan name	WOODHOUSE CABINETRY LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOODHOUSE CABINETRY LLC	**c** EIN-PN	47-2422903-502
a Plan name	WOODLAND ANIMAL HOSPITAL, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOODLAND ANIMAL HOSPITAL, LLC	**c** EIN-PN	87-3981667-501
a Plan name	WOODLAND LANES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOODLAND LANES LLC	**c** EIN-PN	45-5295471-501
a Plan name	WOODS MILL PEDIATRICS & ADOLESCENT MEDICINE, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOODS MILL PEDIATRICS & ADOLESCENT MEDICINE, LLC	**c** EIN-PN	43-1909460-501
a Plan name	WOODS SMOKED MEATS INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WOODS SMOKED MEATS INC.	**c** EIN-PN	43-0865434-501
a Plan name	WOODSMILL VILLAGE PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	WOODSMILL VILLAGE PARTNERSHIP	**c** EIN-PN	43-1317282-501
a Plan name	WOOL CUSTOM HOMES MCF BENEFIT PLAN		
b Name of plan sponsor	WOOL CUSTOM HOMES	**c** EIN-PN	85-2842295-501
a Plan name	WORDENN MANAGEMENT SERVICES MCF BENEFIT PLAN		
b Name of plan sponsor	WORDENN MANAGEMENT SERVICES	**c** EIN-PN	88-3795702-501
a Plan name	WORDENS MEAT LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WORDENS MEAT LLC	**c** EIN-PN	77-0693368-501
a Plan name	WORKFORCE CONNECTIONS MCF BENEFIT PLAN		
b Name of plan sponsor	WORKFORCE CONNECTIONS	**c** EIN-PN	87-2800093-501
a Plan name	WORLD WIDE CAR SERVICE, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	WORLD WIDE CAR SERVICE, INC.	**c** EIN-PN	43-1009508-501
a Plan name	WORTHINGTON ANGUS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WORTHINGTON ANGUS LLC	**c** EIN-PN	46-1436067-501

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

a Plan name	WOW PRINTING LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WOW PRINTING LLC	**c** EIN-PN	83-2924725-501
a Plan name	WP ENTERPRISES INC MCF BENEFIT PLAN		
b Name of plan sponsor	WP ENTERPRISES INC	**c** EIN-PN	43-1615154-501
a Plan name	WREN TRUCKING, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WREN TRUCKING, LLC	**c** EIN-PN	26-3371462-501
a Plan name	WRIGHT BUILDING SYSTEMS LLC MCF BENEFIT PLAN		
b Name of plan sponsor	WRIGHT BUILDING SYSTEMS LLC	**c** EIN-PN	83-1289281-501
a Plan name	WRIGHT CITY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	WRIGHT CITY DENTAL	**c** EIN-PN	99-4828529-501
a Plan name	WRIGHT PRINTING & PROMOTIONAL ADVERTISING MCF BENEFIT PLAN		
b Name of plan sponsor	WRIGHT PRINTING & PROMOTIONAL ADVERTISING	**c** EIN-PN	46-4524153-501
a Plan name	WTR LIMITED PARTNERSHIP MCF BENEFIT PLAN		
b Name of plan sponsor	WTR LIMITED PARTNERSHIP	**c** EIN-PN	43-1755066-501
a Plan name	WUNDERLICH SURVEYING & ENGINEERING MCF BENEFIT PLAN		
b Name of plan sponsor	WUNDERLICH SURVEYING & ENGINEERING	**c** EIN-PN	43-1520012-501
a Plan name	XCEPTIONAL HARDSCAPES LLC MCF BENEFIT PLAN		
b Name of plan sponsor	XCEPTIONAL HARDSCAPES LLC	**c** EIN-PN	83-3036583-501
a Plan name	XTREME EXHIBITS, INC. MCF BENEFIT PLAN		
b Name of plan sponsor	XTREME EXHIBITS, INC.	**c** EIN-PN	43-1922939-501
a Plan name	XTREME TRUCK ACCESSORIES, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	XTREME TRUCK ACCESSORIES, LLC	**c** EIN-PN	27-0839674-501
a Plan name	YARBER MORTUARY INC MCF BENEFIT PLAN		
b Name of plan sponsor	YARBER MORTUARY INC	**c** EIN-PN	43-1736527-501

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

a Plan name	YELSRUP INC. MCF BENEFIT PLAN		
b Name of plan sponsor	YELSRUP INC.	**c** EIN-PN	43-1604411-501
a Plan name	YENDES, MCGRAW, WILLIAMS, PETERSON & MORRISON, DDS MCF BENEFIT PLAN		
b Name of plan sponsor	YENDES, MCGRAW, WILLIAMS, PETERSON & MORRISON, DDS	**c** EIN-PN	43-0797549-501
a Plan name	YENZER FAMILY DENTAL MCF BENEFIT PLAN		
b Name of plan sponsor	YENZER FAMILY DENTAL	**c** EIN-PN	47-1018118-501
a Plan name	YMCA OF CALLAWAY COUNTY MCF BENEFIT PLAN		
b Name of plan sponsor	YMCA OF CALLAWAY COUNTY	**c** EIN-PN	43-1552855-501
a Plan name	YMGI GROUP MCF BENEFIT PLAN		
b Name of plan sponsor	YMGI GROUP	**c** EIN-PN	16-1714277-501
a Plan name	YODER CROP INSURANCE MCF BENEFIT PLAN		
b Name of plan sponsor	YODER CROP INSURANCE	**c** EIN-PN	86-3332189-501
a Plan name	YOUNG FAMILY & COSMETIC DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	YOUNG FAMILY & COSMETIC DENTISTRY	**c** EIN-PN	43-1920917-501
a Plan name	YOUNGS GLASS CO MCF BENEFIT PLAN		
b Name of plan sponsor	YOUNGS GLASS CO	**c** EIN-PN	43-1895365-501
a Plan name	YUMMY STUFF, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	YUMMY STUFF, LLC	**c** EIN-PN	88-0988652-501
a Plan name	ZAHN FAMILY FEEDS, LLC. MCF BENEFIT PLAN		
b Name of plan sponsor	ZAHN FAMILY FEEDS, LLC.	**c** EIN-PN	46-1891256-501
a Plan name	ZAK'S EXPRESS CAR WASH MCF BENEFIT PLAN		
b Name of plan sponsor	ZAKS EXPRESS CAR WASH	**c** EIN-PN	87-3734051-501
a Plan name	ZALEX INC MCF BENEFIT PLAN		
b Name of plan sponsor	ZALEX INC	**c** EIN-PN	43-1788709-501

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

a Plan name	ZECOAT CORPORATION MCF BENEFIT PLAN		
b Name of plan sponsor	ZECOAT CORPORATION	**c** EIN-PN	45-3038100-501
a Plan name	ZEIN GROUP INTERNATIONAL MCF BENEFIT PLAN		
b Name of plan sponsor	ZEIN GROUP INTERNATIONAL	**c** EIN-PN	43-1802483-501
a Plan name	ZENITH CLIMBING AND FITNESS CENTER, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ZENITH CLIMBING AND FITNESS CENTER, LLC	**c** EIN-PN	47-3979041-501
a Plan name	ZICK, VOSS, POLITTE & RICHARDSON PC MCF BENEFIT PLAN		
b Name of plan sponsor	ZICK, VOSS, POLITTE & RICHARDSON PC	**c** EIN-PN	43-1678563-501
a Plan name	ZIEBA FAMILY DENTISTRY MCF BENEFIT PLAN		
b Name of plan sponsor	ZIEBA FAMILY DENTISTRY	**c** EIN-PN	20-0385749-501
a Plan name	ZIMMERMAN LAW, LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ZIMMERMAN LAW, LLC	**c** EIN-PN	47-3193680-501
a Plan name	ZISSER TIRE AND AUTO MCF BENEFIT PLAN		
b Name of plan sponsor	ZISSER TIRE AND AUTO	**c** EIN-PN	43-1848629-501
a Plan name	ZOOCEANARIUM GROUP LLC MCF BENEFIT PLAN		
b Name of plan sponsor	ZOOCEANARIUM GROUP LLC	**c** EIN-PN	82-2992025-501
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 06/01/2024 and ending 05/31/2025

A Name of plan
MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

B Three-digit plan number (PN) ▶ 501

C Plan sponsor's name as shown on line 2a of Form 5500
MISSOURI CHAMBER FEDERATION BENEFIT PLAN

D Employer Identification Number (EIN)
82-0907005

Part I Asset and Liability Statement

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	544818	589427
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	21722715	21537294
(2) U.S. Government securities	1c(2)	7395764	7381020
(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)	0	128630

		(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	29663297	29636371
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	1908958	2053469
i Acquisition indebtedness	1i		
j Other liabilities	1j	19870432	19205593
k Total liabilities (add all amounts in lines 1g through1j)	1k	21779390	21259062
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	7883907	8377309

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)	853099	
(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)		853099
(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)	86323	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		86323

		(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		939422
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)	11534287	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)	66463	
(5) Investment advisory and investment management fees	2i(5)	26058	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)	4586	
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	6050242	
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		17681636
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		17681636
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-16742214
l Transfers of assets:			
(1) To this plan	2l(1)		233159505
(2) From this plan	2l(2)		215923889

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 _____.

MISSOURI CHAMBER FEDERATION
BENEFIT PLAN TRUST

FINANCIAL REPORT

MAY 31, 2025 and 2024



MALONEY + NOVOTNY LLC

MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

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Independent Auditors' Report

To the Board of Trustees of
Missouri Chamber Federation Benefit Plan Trust
Jefferson City, Missouri

Opinion

We have audited the financial statements of the Missouri Chamber Federation Benefit Plan Trust (the "Trust"), which comprise the statements of net assets as of May 31, 2025 and 2024, and the related statement of changes in net assets for the year ended May 31, 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 May 31, 2025 and 2024, and the changes in its net assets for the year ended May 31, 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 net assets available for benefits and benefit obligations or the changes in net assets available for benefits or changes in benefit obligations of the participating plans and do not contain certain information 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 May 31, 2025, and the supplemental schedule of assets (held at end of year) as of May 31, 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 May 31, 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 schedules, including their form and content, are 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 are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Maloney + Novotny LLC

Cleveland, Ohio
March 13, 2026

MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

STATEMENTS OF NET ASSETS

May 31, 2025 and 2024

	2025	2024
ASSETS		
Investments, at fair value:		
Interest-bearing cash	$21,537,294	$21,722,715
U.S. Government securities	7,381,020	7,395,764
Total investments, at fair value	28,918,314	29,118,479
Receivables:		
Investment income receivable	11,722	11,374
Contributions from participating plans	486,276	467,458
Other receivables	91,429	65,986
Total receivables	589,427	544,818
Prepaid expenses	128,630	-
Total assets	29,636,371	29,663,297
LIABILITIES		
Accounts payable	2,032,502	1,893,104
Net reinsurance payable	19,205,593	19,870,432
Income tax payable	20,967	15,854
Total liabilities	21,259,062	21,779,390
NET ASSETS	$ 8,377,309	$ 7,883,907

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

MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

STATEMENT OF CHANGES IN NET ASSETS

Year Ended May 31, 2025

ADDITIONS	
Investment income:	
Interest income	$ 853,099
Net appreciation in fair value of investments	86,323
Total investment income	939,422
Contributions from participating plans	233,159,505
Total additions	234,098,927
DEDUCTIONS	
Distributions to participating plans for benefit claims paid, net of reinsurance recoveries	20,446,028
Distributions to participating plans for premiums paid for the provision of benefits, net of ceding allowances	195,477,861
Total distributions to participating plans	215,923,889
Operating expenses	17,681,636
Total deductions	233,605,525
INCREASE IN NET ASSETS	493,402
NET ASSETS	
BEGINNING OF YEAR	7,883,907
END OF YEAR	$ 8,377,309

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

Note 1. Description of the Trust

The following description of the Missouri Chamber Federation 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 ("IRC"). The purpose of the Trust is to hold plan assets of a non-plan multiple employer welfare arrangement ("MEWA") as described in Chapter 376 of the Revised Statutes of Missouri and to pay benefits and expenses on behalf of the plans participating in the MEWA (the "Plans"). The Plans represent employers in good standing with the Missouri Chamber of Commerce and Industry or by extension of the Missouri Chamber Federation or Small Business Alliance.

Contributions:

The Trust receives contributions for health and welfare coverage from the Plans. Such funds are utilized for the payment of premiums to Healthy Alliance Life Insurance Company, Inc. d.b.a. Anthem Blue Cross and Blue Shield ("Anthem") or THP Insurance Company ("THP") for the provision of benefits on behalf of the Plans.

Distributions:

In addition to distributions for the premium payments to Anthem and THP, 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 and THP. RightCHOICE Managed Care, Inc. d.b.a. Anthem Blue Cross and Blue Shield and THP (collectively, the "Administrators") administer 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 May 31, 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 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 plan 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 the Administrators.

Risks and Uncertainties:

The Trust holds various investment options in combinations of investment securities. Investment securities are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets.

Subsequent Events:

The Trust has evaluated subsequent events through March 13, 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 a national financial institution 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:

- 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.
- 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 May 31, 2025 and 2024 at fair value and indicates the level of valuation techniques utilized by the Trust:

		May 31,	
	Level	2025	2024
Interest-bearing cash	1	$21,537,294	$21,722,715
U.S. Government securities	2	7,381,020	7,395,764

Note 5. Reinsurance

During the year ended May 31, 2025, the Plans were subject to a quota share reinsurance agreement with Anthem to cede 90% of the Plans' health business.

During the year ended May 31, 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 $600,000. The total amount of reinsurance recovered due to stop loss was $4,946,276 for the year ended May 31, 2025.

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

The Trust has entered into administrative services contracts with the Administrators, whereby the Administrators collect premiums and administer payments of hospital charges, medical/surgical claims and prescription coverage on behalf of the Plans. The Trust also has an agreement that compensates the Administrators for quoting, servicing and renewing employers of the Plans. These transactions qualify as party-in-interest. Total fees paid from the Trust to the Administrators for these services amounted to $8,480,524 for the year ended May 31, 2025.

The Trust has appointed Consoliplex-Missouri Benefits, LLC to act as plan manager of the Plans and Trust. Fees paid to Consoliplex-Missouri Benefits, LLC for the year ended May 31, 2025 were $2,225,203.

Note 7. Tax Status

The Trust established to hold the Plans' net assets is qualified pursuant to Section 501(c)(9) of the IRC. Net investment income earned by a VEBA is taxable as unrelated business income under IRC Section 512(a)(3)(E)(i). For the year ended May 31, 2025, the Trust incurred $307,612 in federal income tax expense, attributable to unrelated business income, which 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 May 31, 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 and 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. Plan and Trust Termination

Although it has not expressed any intention to do so, the Trust may only be terminated by the Missouri Chamber of Commerce and Industry 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.

Sponsors of the Plans 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

MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

SCHEDULE OF OPERATING EXPENSES

Year Ended May 31, 2025

Outsourced services	$11,336,213
Regulatory fees	4,977,147
Professional services	654,205
Federal income tax	307,612
Commission agent	198,072
Insurance expense	122,044
Marketing fees	60,000
Investment fees	26,058
Miscellaneous expense	285
Total operating expenses	$17,681,636

MISSOURI CHAMBER FEDERATION BENEFIT PLAN TRUST

EMPLOYER NO. 82-0907005
PLAN NO. 501

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

May 31, 2025

(a)	(b) Identity of Party	(c) Description of Investments	(d) Cost	Current (e) Value
		Interest-bearing cash		
	Central Bank	Cash	$21,537,294	$21,537,294
		U.S. Government securities		
	U.S. Treasury	U.S. Treasury Notes 4.500% due 11/15/2025	2,504,668	2,501,600
	U.S. Treasury	U.S. Treasury Notes 4.625% due 11/15/2026	1,003,555	1,007,850
	U.S. Treasury	U.S. Treasury Notes 2.000% due 11/15/2026	1,405,371	1,456,470
	U.S. Treasury	U.S. Treasury Notes 2.250% due 11/15/2027	1,415,156	1,441,230
	U.S. Treasury	U.S. Treasury Notes 3.125% due 11/15/2028	956,992	973,870
			7,285,742	7,381,020
			$28,823,036	$28,918,314