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

2025

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2025 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025

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

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
FIAM GROUP TRUST FOR EMPLOYEE BENEFIT PLANS FREEDOM BLEND 2065 COMMINGLED POOL

1b Three-digit plan number (PN) ▶ 168

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)
FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

900 SALEM ST
SMITHFIELD, RI 02917-1243

2b Employer Identification Number (EIN)
20-4659714

2c Plan Sponsor's telephone number
800-343-8736

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.	07/02/2026	STEVEN BELLEMARE
	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 Characteristic Codes in the instructions:

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic 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

- [X] **(1)** **H** (Financial Information)
- [ ] **(2)** **I** (Financial Information – Small Plan)
- [ ] **(3)** **A** (Insurance Information) – Number Attached 0
- [ ] **(4)** **C** (Service Provider Information)
- [X] **(5)** **D** (DFE/Participating Plan Information)
- [ ] **(6)** **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2025 Form M-1 annual report. If the plan was not required to file the 2025 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE D (Form 5500)

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

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025

A Name of plan
FIAM GROUP TRUST FOR EMPLOYEE BENEFIT PLANS FREEDOM BLEND 2065 COMMINGLED POOL

B Three-digit plan number (PN) ▶ 168

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

D Employer Identification Number (EIN)
20-4659714

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: FIAM EMERGING MARKETS DEBT COMM PL

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-022	C	6558683

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM EMERGING MRKTS DEBT LOC CURR

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-189	C	1606762

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM EMERGING MRKT OPPORT COMM PL A

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-164	C	123113050

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM FLOATING RATE HIGH INCOME COMM

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-058	C	1100129

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INTL DEVMK BD A

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-193	C	10036726

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INTL EQUITY GROWTH COMM POOL A

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-161	C	80497900

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INTL EQUITY VALUE COMM POOL A

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

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)
20-4659714-162	C	80382379

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM OVERSEAS COMMINGLED POOL CL A

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-170	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 79509289

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM SELECT EMERGING MARKETS EQUITY

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-100	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30614273

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM SELECT INTERNATIONAL SMALL CAP

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-036	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE SELECT INTL SM CAP

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-111	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15434958

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM SMALL CAP CORE POOL

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-008	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39829681

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE 5+ YEAR INFLATION

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-192	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 625796

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE BLUE CHIP GROWTH

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-126	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 154312322

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE CANADA COMMINGLED

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-188	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41288795

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE LARGE CAP STOCK CO

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-128	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 92439673

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE LONG TERM TREASURY

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-156	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41575560

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE TREASURY BILL INDE

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-160	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE VALUE DISCOVERY CO

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-127	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 66311846

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE SMALL CAP OPPORTUN

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-222	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 18780021

a Name of MTIA, CCT, PSA, or 103-12 IE: SPARTAN COMMODITY INDEX POOL -

b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST COMPANY

c EIN-PN 82-6293122-008	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2338513

a Name of MTIA, CCT, PSA, or 103-12 IE: SPARTAN INTERNATIONAL INDEX POOL A

b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST COMPANY

c EIN-PN 82-6293122-011	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 30282443

a Name of MTIA, CCT, PSA, or 103-12 IE: SPARTAN LARGE CAP GROWTH INDEX POOL

b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST COMPANY

c EIN-PN 82-6293122-003	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 99169031

a Name of MTIA, CCT, PSA, or 103-12 IE: SPARTAN LARGE CAP VALUE INDEX POOL

b Name of sponsor of entity listed in (a): GEODE CAPITAL MANAGEMENT TRUST COMPANY

c EIN-PN 82-6293122-004	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 186142601

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM INSTITUTIONAL CASH COMMINGLED

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-055	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE SHORT CREDIT COMMI

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-150	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM HIGH YIELD BOND COMMINGLED POO

b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

c EIN-PN 20-4659714-013	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6351464

a Name of MTIA, CCT, PSA, or 103-12 IE: FIAM TARGET DATE 0-5 YEAR INFLATION		
b Name of sponsor of entity listed in (a): FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY		
c EIN-PN 20-4659714-191	**d** Entity code C	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
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	ACEC RETIREMENT TRUST		
b Name of plan sponsor	ACEC RETIREMENT TRUST	**c** EIN-PN	26-4055924-001
a Plan name	ADVARRA 401(K) PLAN		
b Name of plan sponsor	ADVARRA, INC.	**c** EIN-PN	31-1358981-002
a Plan name	AEGIS AEROSPACE 401K PLAN		
b Name of plan sponsor	AEGIS AEROSPACE, INC.	**c** EIN-PN	76-0359573-001
a Plan name	ALLOGENE THERAPEUTICS, INC. 401(K) PLAN		
b Name of plan sponsor	ALLOGENE THERAPEUTICS, INC.	**c** EIN-PN	82-3562771-001
a Plan name	ALTIUM PACKAGING 401(K) PLAN		
b Name of plan sponsor	ALTIUM PACKAGING LP	**c** EIN-PN	06-1056158-001
a Plan name	ALTIUM PACKAGING LP RETIREMENT READINESS 401K PLAN		
b Name of plan sponsor	ALTIUM PACKAGING LP	**c** EIN-PN	06-1056158-018
a Plan name	AMENTUM 401(K) RETIREMENT PLAN		
b Name of plan sponsor	AMENTUM SERVICES, INC.	**c** EIN-PN	27-1628265-001
a Plan name	AMERICAN AXLE & MANUFACTURING, INC. PERSONAL SAVINGS PLAN FOR HOURLY-RATE ASSOCIATES		
b Name of plan sponsor	AMERICAN AXLE & MANUFACTURING, INC.	**c** EIN-PN	38-3138388-004
a Plan name	AMERICAN AXLE & MANUFACTURING, INC. SALARIED SAVINGS PLAN		
b Name of plan sponsor	AMERICAN AXLE & MANUFACTURING, INC.	**c** EIN-PN	38-3138388-005
a Plan name	AMERICAN BROADBAND 401(K) PLAN		
b Name of plan sponsor	AMERICAN BROADBAND HOLDING COMPANY	**c** EIN-PN	20-8862855-333
a Plan name	AMERICAN EAGLE OUTFITTERS, INC. PROFIT SHARING AND 401(K) PLAN		
b Name of plan sponsor	AMERICAN EAGLE OUTFITTERS, INC.	**c** EIN-PN	13-2721761-001
a Plan name	AMWAY HOTEL CORPORATION 401(K) RETIRMENT AND SAVINGS PLAN		
b Name of plan sponsor	AMWAY GRAND PLAZA HOTEL	**c** EIN-PN	38-2239010-003

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

a Plan name	AMWAY RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	ALTICOR INC.	**c** EIN-PN	38-1736584-002
a Plan name	ASSA ABLOY INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	ASSA ABLOY INC.	**c** EIN-PN	93-0925319-001
a Plan name	ASSOCIA, INC. 401(K) PLAN		
b Name of plan sponsor	ASSOCIATIONS, INC.	**c** EIN-PN	75-3014941-001
a Plan name	BEKAERT CORPORATION 401K PROFIT SHARING PLAN		
b Name of plan sponsor	BEKAERT CORPORATION	**c** EIN-PN	62-1340165-005
a Plan name	BETH ISRAEL DEACONESS MEDICAL CENTER 401-K SAVINGS AND INVESTMENT PLAN		
b Name of plan sponsor	BETH ISRAEL DEACONESS MEDICAL CENTER	**c** EIN-PN	04-2103881-004
a Plan name	BLUE CROSS AND BLUE SHIELD OF MASSACHUSETTS, INC. - EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	BLUECROSS BLUESHIELD OF MA	**c** EIN-PN	04-1045815-002
a Plan name	BLUESCOPE EMPLOYEE SAVINGS TRUST (BEST) PLAN		
b Name of plan sponsor	BLUESCOPE STEEL NORTH AMERICA	**c** EIN-PN	23-2081882-041
a Plan name	BOART LONGYEAR COMPANY 401(K) SAVINGS PLAN		
b Name of plan sponsor	BOART LONGYEAR COMPANY	**c** EIN-PN	87-0503343-005
a Plan name	BOEING DISTRIBUTION SERVICES INC. RETIREMENT PLAN		
b Name of plan sponsor	BOEING DISTRIBUTION SERVICES INC.	**c** EIN-PN	47-1639172-001
a Plan name	BOSTON PARTNERS RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	BOSTON PARTNERS GLOBAL INVESTORS, INC.	**c** EIN-PN	98-0202744-004
a Plan name	BRIDGESTONE AMERICA, INC. TAX-EFFICIENT SAVINGS PLAN		
b Name of plan sponsor	BRIDGESTONE AMERICAS, INC.	**c** EIN-PN	88-0335067-009
a Plan name	BRIDGESTONE AMERICAS, INC. EMPLOYEE SAVINGS PLAN FOR BARGAINING UNIT EMPLOYEES		
b Name of plan sponsor	BRIDGESTONE AMERICAS, INC.	**c** EIN-PN	88-0335067-012

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

a Plan name	BRIDGESTONE AMERICAS, INC. INCENTIVE SAVINGS PLAN		
b Name of plan sponsor	BRIDGESTONE AMERICAS, INC.	**c** EIN-PN	88-0335067-017
a Plan name	BRIDGESTONE AMERICAS, INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	BRIDGESTONE AMERICAS, INC.	**c** EIN-PN	88-0335067-015
a Plan name	BRIDON AMERICAN CORPORATION UNION 401K PLAN		
b Name of plan sponsor	BRIDON AMERICAN CORPORATION	**c** EIN-PN	22-1671279-101
a Plan name	CALGON CARBON CORPORATION THRIFT SAVINGS PLAN		
b Name of plan sponsor	CALGON CARBON CORPORATION	**c** EIN-PN	25-0530110-010
a Plan name	CAMDEN DEVELOPMENT INC. 401(K) PLAN		
b Name of plan sponsor	CAMDEN DEVELOPMENT INC.	**c** EIN-PN	76-0417730-001
a Plan name	CBOE GLOBAL MARKETS SMART PLAN		
b Name of plan sponsor	CBOE GLOBAL MARKETS, INC.	**c** EIN-PN	20-5446972-001
a Plan name	CITY OF ARVADA CITY ATTORNEY RETIREMENT PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-004
a Plan name	CITY OF ARVADA CITY MANAGER RETIREMENT PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-003
a Plan name	CITY OF ARVADA DEFERRED COMPENSATION PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-001
a Plan name	CITY OF ARVADA MUNICIPAL JUDGE RETIREMENT PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-005
a Plan name	CITY OF ARVADA POLICE RETIREMENT PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-002
a Plan name	CITY OF ARVADA RETIREMENT PLAN		
b Name of plan sponsor	CITY OF ARVADA	**c** EIN-PN	84-6000633-006

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

a Plan name	CLEARSTEAD ADVISORS 401(K) RETIREMENT PLAN		
b Name of plan sponsor	CLEARSTEAD ADVISORS, LLC	**c** EIN-PN	34-1597728-001
a Plan name	CM GROUP 401(K) PLAN		
b Name of plan sponsor	CM ACQUISITIONS HOLDINGS, INC.	**c** EIN-PN	82-2867962-001
a Plan name	CMG FINANCIAL 401(K) PLAN		
b Name of plan sponsor	CMG MORTGAGE, INC. DBA CMG FINANCIAL	**c** EIN-PN	68-0309242-001
a Plan name	COLEMAN CABLE UNION 401(K) PLAN		
b Name of plan sponsor	SOUTHWIRE COMPANY	**c** EIN-PN	36-4410887-001
a Plan name	COMMUNITY HOSPITAL CORPORATION EMPLOYEES' 401(K) PLAN		
b Name of plan sponsor	COMMUNITY HOSPITAL CORPORATION	**c** EIN-PN	75-2638469-001
a Plan name	CONSOL ENERGY, INC. INVESTMENT PLAN		
b Name of plan sponsor	CONSOL ENERGY, INC.	**c** EIN-PN	82-1954058-002
a Plan name	CONTRACT LUMBER RETIREMENT PLAN		
b Name of plan sponsor	CONTRACT LUMBER, INC.	**c** EIN-PN	31-1269968-001
a Plan name	CORA 401(K) AND PROFIT SHARING PLAN		
b Name of plan sponsor	CENTRAL OREGON RADIOLOGY ASSOC., P.C.	**c** EIN-PN	93-0688156-001
a Plan name	COTERRA ENERGY INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	COTERRA ENERGY INC.	**c** EIN-PN	04-3072771-001
a Plan name	CRH AMERICAS 401(K) PLAN		
b Name of plan sponsor	CRH AMERICAS, INC.	**c** EIN-PN	95-3298140-002
a Plan name	CRISIS 24 GLOBAL PROTECTIVE SOLUTIONS 401(K) PLAN		
b Name of plan sponsor	CRISIS24 PROTECTIVE SOLUTIONS, LP	**c** EIN-PN	86-1892979-001
a Plan name	CRISIS24, INC. 401(K) PROFIT SHARING PLAN		
b Name of plan sponsor	CRISIS24, INC.	**c** EIN-PN	52-2251242-001

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

a Plan name	CROWN EQUIPMENT CORPORATION 401(K) RETIREMENT SAVINGS PLAN AND TRUST		
b Name of plan sponsor	CROWN EQUIPMENT CORPORATION	**c** EIN-PN	34-4412691-004
a Plan name	DENMAR TECHNICAL SERVICES, INC. PROFIT SHARING PLAN		
b Name of plan sponsor	DENMAR TECHNICAL SERVICES, INC.	**c** EIN-PN	88-0410845-002
a Plan name	DENVER HEALTH AND HOSPITAL AUTHORITY 401A DEFINED CONTRIBUTION PLAN		
b Name of plan sponsor	DENVER HEALTH AND HOSPITAL AUTHORITY	**c** EIN-PN	84-1343242-001
a Plan name	DENVER HEALTH AND HOSPITAL AUTHORITY DEFERRED COMPENSATION PLAN		
b Name of plan sponsor	DENVER HEALTH AND HOSPITAL AUTHORITY	**c** EIN-PN	84-1343242-002
a Plan name	DIAMOND FOODS, LLC 401(K) PLAN		
b Name of plan sponsor	DIAMOND FOODS	**c** EIN-PN	81-4577932-010
a Plan name	DIAMOND MANUFACTURING 401(K) PLAN		
b Name of plan sponsor	DIAMOND FOODS	**c** EIN-PN	81-4577932-013
a Plan name	DOLESE BROS. CO. 401(K) EMPLOYEE SAVINGS INCENTIVE PLAN		
b Name of plan sponsor	DOLESE BROS., CO	**c** EIN-PN	73-1359190-006
a Plan name	ECOBAT 401(K) PLAN		
b Name of plan sponsor	ECOBAT, LLC	**c** EIN-PN	84-3365117-001
a Plan name	EMPLOYBRIDGE 401(K) PLAN		
b Name of plan sponsor	EMPLOYMENT SOLUTIONS MANAGEMENT, INC.	**c** EIN-PN	27-2269356-001
a Plan name	EMPLOYEE SAVINGS AND INVESTMENT PLAN OF COCHLEAR AMERICAS		
b Name of plan sponsor	COCHLEAR AMERICAS	**c** EIN-PN	84-0945658-001
a Plan name	EMPLOYEES' PROFIT SHARING 401(K) PLAN		
b Name of plan sponsor	THE NUNES COMPANY, INC.	**c** EIN-PN	94-2366816-001
a Plan name	EPIC GAMES, INC. 401(K) PLAN		
b Name of plan sponsor	EPIC GAMES INC	**c** EIN-PN	52-1853991-001

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

a Plan name	EQT CORPORATION EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	EQT CORPORATION	**c** EIN-PN	25-0464690-202
a Plan name	EQUIFAX, INC. 401(K) PLAN		
b Name of plan sponsor	EQUIFAX, INC.	**c** EIN-PN	58-0401100-003
a Plan name	EQUINIX 401(K) PLAN		
b Name of plan sponsor	EQUINIX	**c** EIN-PN	77-0487526-001
a Plan name	EVERSOURCE ENERGY SERVICE COMPANY 401(K) PLAN		
b Name of plan sponsor	NORTHEAST UTILITIES	**c** EIN-PN	06-0810627-005
a Plan name	EXLSERVICE 401(K) PLAN		
b Name of plan sponsor	EXLSERVICE HOLDINGS, INC.	**c** EIN-PN	94-3326476-001
a Plan name	FAEGRE DRINKER BIDDLE & REATH RETIREMENT SAVINGS PLAN 1		
b Name of plan sponsor	FAEGRE DRINKER BIDDLE & REATH	**c** EIN-PN	41-0244008-002
a Plan name	FAEGRE DRINKER BIDDLE & REATH RETIREMENT SAVINGS PLAN 2		
b Name of plan sponsor	FAEGRE DRINKER BIDDLE & REATH	**c** EIN-PN	41-0244008-033
a Plan name	FIRSTHEALTH 401(K) PLAN		
b Name of plan sponsor	FIRSTHEALTH OF THE CAROLINAS	**c** EIN-PN	56-1936354-007
a Plan name	FIRSTHEALTH RETIREMENT GROWTH PLAN		
b Name of plan sponsor	FIRSTHEALTH OF THE CAROLINAS	**c** EIN-PN	56-1936354-003
a Plan name	FLEETWOOD ALUMINUM PRODUCTS, LLC 401(K) PROFIT SHARING PLAN AND TRUST		
b Name of plan sponsor	FLEETWOOD ALUMINUM PRODUCTS, LLC	**c** EIN-PN	93-3790125-001
a Plan name	FLETCHER JONES AUTOMOTIVE GROUP EMPLOYEE 401(K) RETIREMENT PLAN		
b Name of plan sponsor	FLETCHER JONES MANAGEMENT	**c** EIN-PN	81-3843265-001
a Plan name	FORTUNE-JOHNSON LLC 401(K) SAVINGS PLAN		
b Name of plan sponsor	FORTUNE-JOHNSON LLC	**c** EIN-PN	86-2115392-001

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

a Plan name	FRESH LEAF FARMS, LLC PROFIT SHARING 401(K) PLAN		
b Name of plan sponsor	FRESH LEAF FARMS, LLC	**c** EIN-PN	33-1586503-001
a Plan name	FRIEDKIN SAVINGS AND INVESTMENT PLAN		
b Name of plan sponsor	THE FRIEDKIN GROUP, INC.	**c** EIN-PN	27-5549425-333
a Plan name	GARDAWORLD SECURITY SERVICES U.S. 401(K) PLAN		
b Name of plan sponsor	GARDAWORLD SECURITY SERVICES MANAGEMENT COMPANY, INC.	**c** EIN-PN	45-3709475-001
a Plan name	GASSEARCH DRILLING SERVICES		
b Name of plan sponsor	COTERRA ENERGY INC.	**c** EIN-PN	20-8066203-001
a Plan name	GGLO, LLC 401(K) PROFIT SHARING PLANS		
b Name of plan sponsor	GGLO, LLC	**c** EIN-PN	91-1319710-002
a Plan name	GILEAD SCIENCES 401(K) PLAN		
b Name of plan sponsor	GILEAD SCIENCES, INC.	**c** EIN-PN	94-3047598-001
a Plan name	GKN GROUP RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	GKN AEROSPACE INC.	**c** EIN-PN	54-1566763-002
a Plan name	GKN U.S. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	GKN DRIVELINE NORTH AMERICA, INC.	**c** EIN-PN	13-2886932-001
a Plan name	GOODWIN PROCTER LLP PARTNERSHIP PROFIT SHARING PLAN		
b Name of plan sponsor	GOODWIN PROCTER LLP	**c** EIN-PN	04-1378465-001
a Plan name	GOODWIN PROCTER LLP PARTNERSHIP PROFIT SHARING PLAN II		
b Name of plan sponsor	GOODWIN PROCTER LLP	**c** EIN-PN	04-1378465-007
a Plan name	HARMAN INTERNATIONAL INDUSTRIES INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	HARMAN INTERNATIONAL	**c** EIN-PN	11-2534306-001
a Plan name	HARVEST MANAGEMENT 401(K) PROFIT SHARING PLAN		
b Name of plan sponsor	HARVEST MANAGEMENT, LLC	**c** EIN-PN	86-0996954-001

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

a Plan name	HEIDELBERG MATERIALS US SUPPLEMENTAL RETIREMENT PLAN		
b Name of plan sponsor	HEIDELBERG MATERIALS US SERVICES, LLC	**c** EIN-PN	81-4086708-178
a Plan name	HORIZON LINES CAPITAL SAVINGS PLAN		
b Name of plan sponsor	HORIZON LINES, LLC	**c** EIN-PN	56-2098440-002
a Plan name	HORIZON TELCOM 401(K) PLAN		
b Name of plan sponsor	HORIZON TELCOM	**c** EIN-PN	31-1449037-005
a Plan name	HOUGHTON MIFFLIN 401K SAVINGS PLAN		
b Name of plan sponsor	HOUGHTON MIFFLIN HARCOURT PUBLISHING COMPANY	**c** EIN-PN	04-1456030-003
a Plan name	ICW GROUP HOLDINGS, INC. SALARY SAVINGS PLAN		
b Name of plan sponsor	ICW GROUP HOLDINGS, INC.	**c** EIN-PN	95-2890041-001
a Plan name	ID CASTINGS, LLC 401(K) PLAN		
b Name of plan sponsor	ID CASTINGS, LLC	**c** EIN-PN	61-1720109-001
a Plan name	IKEA RETIREMENT AND SAVINGS PLAN		
b Name of plan sponsor	IKEA NORTH AMERICA SERVICES, LLC	**c** EIN-PN	23-3005722-001
a Plan name	ILWU-PMA SAVINGS (401(K)) PLAN		
b Name of plan sponsor	PACIFIC MARITIME ASSOCIATION	**c** EIN-PN	94-1126322-002
a Plan name	INDIANA PICKLING & PROCESSING COMPANY 401(K) SAVINGS PLAN		
b Name of plan sponsor	FERALLOY CORPORATION-INDIANA PICKLING	**c** EIN-PN	36-3714106-001
a Plan name	INTERMED, PA 401(K) PROFIT SHARING PLAN		
b Name of plan sponsor	INTERMED, PA	**c** EIN-PN	01-0484903-001
a Plan name	INVESTMENT PARTICIPATION PLAN FOR STAFF OF THE CHURCH PENSION FUND AND AFFILIATES		
b Name of plan sponsor	THE CHURCH PENSION FUND	**c** EIN-PN	13-5562193-001
a Plan name	IRVINE COMPANY UNIFIED SAVINGS PLAN		
b Name of plan sponsor	IRVINE MANAGEMENT COMPANY	**c** EIN-PN	82-1749352-002

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

a Plan name	JH KELLY HOLDINGS LLC NON-UNION 401K PLAN AND PROFIT SHARING PLAN		
b Name of plan sponsor	JH KELLY HOLDINGS LLC	**c** EIN-PN	91-1704136-003
a Plan name	JH KELLY HOLDINGS LLC UNION 401K PLAN		
b Name of plan sponsor	JH KELLY HOLDINGS LLC	**c** EIN-PN	91-1704136-002
a Plan name	KILROY REALTY CORPORATION 401(K) PLAN		
b Name of plan sponsor	KILROY REALTY CORPORATION	**c** EIN-PN	95-4598246-001
a Plan name	KONTOOR BRANDS 401(K) SAVINGS PLAN		
b Name of plan sponsor	KONTOOR BRANDS, INC.	**c** EIN-PN	83-2680248-501
a Plan name	LEHIGH HANSON RSIPCB PLAN		
b Name of plan sponsor	HANSON BUILDING MATERIALS AMERICA, LLC	**c** EIN-PN	54-2133605-005
a Plan name	LENNOX INTERNATIONAL INC 401K PLAN FOR HOURLY EMPLOYEES		
b Name of plan sponsor	LENNOX INTERNATIONAL INC.	**c** EIN-PN	42-0991521-045
a Plan name	LENNOX INTERNATIONAL INC. MERGED PROFIT SHARING AND 401(K) RETIREMENT PLAN FOR SALARIED EMPLOYEES		
b Name of plan sponsor	LENNOX INTERNATIONAL INC.	**c** EIN-PN	42-0991521-042
a Plan name	LEXMARK SAVINGS PLAN		
b Name of plan sponsor	LEXMARK INTERNATIONAL, INC.	**c** EIN-PN	06-1308215-002
a Plan name	LIBERTY MEDIA 401(K) SAVINGS PLAN		
b Name of plan sponsor	LIBERTY MEDIA CORP.	**c** EIN-PN	37-1699499-001
a Plan name	LOOP LLC PLAN		
b Name of plan sponsor	LOOP, LLC	**c** EIN-PN	72-1335490-002
a Plan name	MARATHON OIL COMPANY THRIFT PLAN		
b Name of plan sponsor	MARATHON OIL COMPANY	**c** EIN-PN	25-1410539-003
a Plan name	MARATHON PETROLEUM THRIFT PLAN		
b Name of plan sponsor	MARATHON PETROLEUM COMPANY LP	**c** EIN-PN	31-1537655-010

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

a Plan name	MASCO CORPORATION 401K PLAN		
b Name of plan sponsor	MASCO CORPORATION	**c** EIN-PN	38-1794485-033
a Plan name	MASONITE 401(K) PLAN		
b Name of plan sponsor	MASONITE CORPORATION	**c** EIN-PN	64-0198020-101
a Plan name	MASONITE SAVINGS PLAN FOR COLLECTIVELY BARGAINED EMPLOYEES		
b Name of plan sponsor	MASONITE CORPORATION	**c** EIN-PN	64-0198020-102
a Plan name	MATERION CORPORATION RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	MATERION CORPORATION	**c** EIN-PN	34-1919973-003
a Plan name	MATSON & SUBSIDIARIES 401(K) RETIREMENT SAVINGS PLAN FOR BUES		
b Name of plan sponsor	MATSON, INC.	**c** EIN-PN	99-0032630-022
a Plan name	MATSON IDC & PROFIT SHARING PLAN FOR BUES		
b Name of plan sponsor	MATSON, INC.	**c** EIN-PN	99-0032630-015
a Plan name	MATSON, INC. 401(K) & PROFIT SHARING PLAN FOR NBES		
b Name of plan sponsor	MATSON, INC.	**c** EIN-PN	99-0032630-016
a Plan name	MAVENIR SYSTEMS INC. 401(K) PLAN		
b Name of plan sponsor	MAVENIR SYSTEMS INC.	**c** EIN-PN	61-1489105-002
a Plan name	MCCARTER AND ENGLISH RETIREMENT AND SAVINGS PLAN		
b Name of plan sponsor	MCCARTER AND ENGLISH, LLP	**c** EIN-PN	22-1534652-004
a Plan name	MERZ NORTH AMERICA 401(K) PLAN		
b Name of plan sponsor	MERZ, INCORPORATED	**c** EIN-PN	56-1540459-003
a Plan name	MILLENNIUM SPACE SYSTEMS, INC 401(K) PLAN		
b Name of plan sponsor	MILLENNIUM SPACE SYSTEMS INC	**c** EIN-PN	91-2166281-001
a Plan name	MITUTOYO RESEARCH & DEVELOPMENT AMERICA, INC. EMPLOYEES' 401(K) RETIREMENT PLAN AND TRUST		
b Name of plan sponsor	MITUTOYO RESEARCH & DEVELOPMENT AMERICA, INC.	**c** EIN-PN	91-1340657-001

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

a Plan name	NAVY FEDERAL 401(K) SAVINGS PLAN		
b Name of plan sponsor	NAVY FEDERAL CREDIT UNION	**c** EIN-PN	53-0116705-002
a Plan name	NEW YORK CITY FOOTBALL CLUB 401(K) PLAN		
b Name of plan sponsor	NEW YORK CITY FOOTBALL CLUB, LLC	**c** EIN-PN	46-2677915-001
a Plan name	NEWELL BRANDS EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	NEWELL BRANDS INC.	**c** EIN-PN	36-1953130-012
a Plan name	NEXSTAR MEDIA GROUP INC. 401(K) PLAN		
b Name of plan sponsor	NEXSTAR MEDIA GROUP INC.	**c** EIN-PN	23-3083125-001
a Plan name	NISOURCE INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	NISOURCE INC.	**c** EIN-PN	35-2108964-005
a Plan name	NTT DATA 401(K) PLAN		
b Name of plan sponsor	NTT DATA, INC.	**c** EIN-PN	04-2437166-001
a Plan name	NTT DATA EAS PR EMPLOYEE RETIREMENT PLAN		
b Name of plan sponsor	NTT DATA EAS, INC.	**c** EIN-PN	38-3329879-002
a Plan name	NUTTER, MCCLENNEN & FISH, LLP 401(K) SAVINGS AND PROFIT SHARING PLAN		
b Name of plan sponsor	NUTTER, MCCLENNEN & FISH, LLP	**c** EIN-PN	04-2106505-024
a Plan name	NUTTER, MCCLENNEN & FISH, LLP LAWYERS RETIREMENT PLAN		
b Name of plan sponsor	NUTTER, MCCLENNEN & FISH, LLP	**c** EIN-PN	04-2106505-001
a Plan name	OLDCASTLE BUILDINGENVELOPE INC., 401 (K) PLAN		
b Name of plan sponsor	OLDCASTLE BUILDINGENVELOPE, INC.	**c** EIN-PN	75-2196684-001
a Plan name	OLGOONIK DEVELOPMENT SCA 401(K) PLAN		
b Name of plan sponsor	OLGOONIK DEVELOPMENT, LLC	**c** EIN-PN	92-0176618-002
a Plan name	OLGOONIK DEVELOPMENT, LLC 401(K) PLAN		
b Name of plan sponsor	OLGOONIK DEVELOPMENT, LLC	**c** EIN-PN	92-0176618-001

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

a Plan name	OMNICELL, INC. 401(K) PLAN		
b Name of plan sponsor	OMNICELL, INC.	**c** EIN-PN	94-3166458-001
a Plan name	OMNICOM GROUP RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	OMNICOM GROUP INC.	**c** EIN-PN	13-1514814-004
a Plan name	OREGON FERALLOY PARTNERS 401(K) SAVINGS PLAN		
b Name of plan sponsor	OREGON FERALLOY PARTNERS	**c** EIN-PN	36-4311385-001
a Plan name	ORIX CORPORATION USA SAVINGS AND INVESTMENT PLAN		
b Name of plan sponsor	ORIX USA CORPORATION	**c** EIN-PN	13-3095268-001
a Plan name	OSF INTERNATIONAL 401K PLAN		
b Name of plan sponsor	OSF INTERNATIONAL, INC.	**c** EIN-PN	91-0889806-002
a Plan name	OVERLAND SOLUTIONS, INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	OVERLAND SOLUTIONS, INC.	**c** EIN-PN	45-0497543-001
a Plan name	OWENS CORNING SAVINGS AND SECURITY PLAN		
b Name of plan sponsor	OWENS CORNING	**c** EIN-PN	43-2109021-014
a Plan name	OWENS CORNING SAVINGS PLAN		
b Name of plan sponsor	OWENS CORNING	**c** EIN-PN	43-2109021-004
a Plan name	PACIFIC MARITIME ASSOCIATION QUALIFIED DEFERRED COMPENSATION PLAN		
b Name of plan sponsor	PACIFIC MARITIME ASSOCIATION	**c** EIN-PN	94-2914940-333
a Plan name	PERKINELMER U.S. LLC SAVINGS PLAN		
b Name of plan sponsor	PERKINELMER U.S. LLC	**c** EIN-PN	88-4129178-001
a Plan name	PHINIA INC. RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	PHINIA INC.	**c** EIN-PN	92-2483604-001
a Plan name	PHYSICIANS EAST PA PROFIT SHARING PLAN & TRUST		
b Name of plan sponsor	PHYSICIANS EAST, PA	**c** EIN-PN	56-1968491-001

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

a Plan name	PRECISION STRIP RETIREMENT AND SAVINGS PLAN		
b Name of plan sponsor	RELIANCE INC.	**c** EIN-PN	34-1207681-001
a Plan name	PREMIER FINANCIAL CORP 401(K) EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	PREMIER FINANCIAL CORP	**c** EIN-PN	34-1746771-002
a Plan name	PRIME HEALTHCARE SERVICES, INC. 401(K) PLAN		
b Name of plan sponsor	PRIME HEALTHCARE SERVICES, INC.	**c** EIN-PN	33-0943449-001
a Plan name	PRIVILEGE UNDERWRITERS, INC. 401(K) PLAN		
b Name of plan sponsor	PRIVILEGE UNDERWRITERS, INC.	**c** EIN-PN	84-1699173-001
a Plan name	QUADIENT INC. 401(K) PLAN		
b Name of plan sponsor	QUADIENT, INC.	**c** EIN-PN	94-2388882-001
a Plan name	QUANTA SERVICES, INC. 401(K) SAVINGS PLAN		
b Name of plan sponsor	QUANTA SERVICES INC.	**c** EIN-PN	74-2851603-001
a Plan name	QUORUM HEALTH 401(K) PLAN		
b Name of plan sponsor	QHCCS, LLC	**c** EIN-PN	38-3980467-007
a Plan name	QUORUM HEALTH BARSTOW COMMUNITY HOSPITAL STANDARD 401(K) PLAN		
b Name of plan sponsor	QHCCS, LLC	**c** EIN-PN	38-3980467-004
a Plan name	QUORUM HEALTH RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	QHCCS, LLC	**c** EIN-PN	38-3980467-001
a Plan name	RADIO SYSTEMS CORPORATION RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	RADIO SYSTEMS CORPORATION	**c** EIN-PN	20-5548897-001
a Plan name	RAINIER INDUSTRIES LTD. 401(K) AND PROFIT SHARING PLAN		
b Name of plan sponsor	RAINIER INDUSTRIES, LTD	**c** EIN-PN	91-1057082-001
a Plan name	RAYMOND JAMES FINANCIAL, INC. 401K PLAN		
b Name of plan sponsor	RAYMOND JAMES FINANCIAL INC	**c** EIN-PN	59-1517485-010

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

a Plan name	RECKITT BENCKISER SAVINGS INVESTMENT PLAN		
b Name of plan sponsor	RECKITT BENCKISER, NORTH AMERICA	**c** EIN-PN	16-1095651-006
a Plan name	RELIANCE INC. MASTER 401(K) PLAN		
b Name of plan sponsor	RELIANCE INC.	**c** EIN-PN	95-1142616-003
a Plan name	RENEWABLE ENERGY SYSTEMS AMERICAS INC. 401(K) PLAN		
b Name of plan sponsor	RENEWABLE ENERGY SYSTEMS AMERICAS INC.	**c** EIN-PN	95-4683730-001
a Plan name	RESIN SOLUTIONS LLC PLAN		
b Name of plan sponsor	RESIN SOLUTIONS LLC	**c** EIN-PN	92-2506695-001
a Plan name	REVVITY SAVINGS PLAN		
b Name of plan sponsor	REVVITY, INC.	**c** EIN-PN	04-2052042-001
a Plan name	SAGP 401-K RETIREMENT PLAN		
b Name of plan sponsor	SEACOAST AFFILIATED GROUP PRACTICE, INC	**c** EIN-PN	04-3485648-001
a Plan name	SCHAEFFLER GROUP USA SAVINGS RETIREMENT PLAN		
b Name of plan sponsor	SCHAEFFLER GROUP USA	**c** EIN-PN	57-0517596-003
a Plan name	SCIO HEALTH ANALYTICS 401(K) SAVINGS PLAN		
b Name of plan sponsor	SCIOINSPIRE, CORP. DBA SCIO HEALTH ANALYTICS	**c** EIN-PN	26-0185383-001
a Plan name	SERVICENOW, INC. 401(K) PLAN		
b Name of plan sponsor	SERVICENOW, INC.	**c** EIN-PN	20-2056195-001
a Plan name	SHEET METAL WORKERS IA LOCAL UNION NO 73 ANNUITY PLAN		
b Name of plan sponsor	SHEET METAL WORKERS, LOCAL #73	**c** EIN-PN	20-5002115-003
a Plan name	SIMPSON EMPLOYEES SAVINGS PLAN		
b Name of plan sponsor	SIMPSON DOOR COMPANY	**c** EIN-PN	91-1940130-002
a Plan name	SIRVA EMPLOYEE SAVINGS PLAN AND TRUST 401(K) PLAN		
b Name of plan sponsor	NORTH AMERICAN VAN LINES, INC.	**c** EIN-PN	52-1840893-001

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

a Plan name	SMART MODULAR TECHNOLOGIES 401(K) RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	SMART MODULAR TECHNOLOGIES, INC.	**c** EIN-PN	77-0200166-001
a Plan name	SOUTHWIRE COMPANY HOURLY 401(K) PLAN		
b Name of plan sponsor	SOUTHWIRE COMPANY	**c** EIN-PN	58-2020515-001
a Plan name	SOUTHWIRE COMPANY SALARIED 401(K) PLAN		
b Name of plan sponsor	SOUTHWIRE COMPANY	**c** EIN-PN	58-2020515-011
a Plan name	SPARK THERAPEUTICS, INC. 401(K) PLAN		
b Name of plan sponsor	SPARK THERAPEUTICS, INC.	**c** EIN-PN	46-2654405-001
a Plan name	SPEEDWAY RETIREMENT SAVING SUB PLAN OF MARATHON PETROLEUM THRIFT PLAN		
b Name of plan sponsor	MARATHON PETROLEUM CORPORATION LP	**c** EIN-PN	31-1537655-007
a Plan name	SPX FLOW RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	SPX FLOW, INC.	**c** EIN-PN	47-3110748-001
a Plan name	SUTTER MEDICAL GROUP 401(K) PROFIT SHARING PLAN		
b Name of plan sponsor	SUTTER MEDICAL GROUP, INC.	**c** EIN-PN	68-0002401-004
a Plan name	TARGA RESOURCES 401(K) AND PROFIT SHARING PLAN		
b Name of plan sponsor	TARGA RESOURCES LLC	**c** EIN-PN	14-1904332-001
a Plan name	TELEDYNE TECHNOLOGIES INCORPORATED 401(K) PLAN		
b Name of plan sponsor	TELEDYNE TECHNOLOGIES INCORPORATED	**c** EIN-PN	25-1843385-002
a Plan name	THALES USA, INC. 401(K) SAVINGS PLAN		
b Name of plan sponsor	THALES USA, INC.	**c** EIN-PN	06-0938363-003
a Plan name	THE 401(K) RETIREMENT PLAN OF HEIDELBERG MATERIALS US		
b Name of plan sponsor	HM US SERVICES, LLC	**c** EIN-PN	81-4086708-016
a Plan name	THE ACCIDENT FUND HOLDINGS, INC. EMPLOYEES' SAVINGS PLAN AND THE ACCIDENT FUND HOLDINGS, INC. REPRESENTED EMPLOYEES' SAVINGS PLAN		
b Name of plan sponsor	BLUE CROSS BLUE SHIELD OF MICHIGAN	**c** EIN-PN	04-6766664-001

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

a Plan name	THE EPISCOPAL CHURCH LAY EMPLOYEES' DEFINED CONTRIBUTION RETIREMENT PLAN 401(A)		
b Name of plan sponsor	THE CHURCH PENSION FUND	**c** EIN-PN	13-5562193-001
a Plan name	THE EPISCOPAL CHURCH LAY EMPLOYEES' DEFINED CONTRIBUTION RETIREMENT PLAN 403(B)		
b Name of plan sponsor	THE CHURCH PENSION FUND	**c** EIN-PN	13-5562193-002
a Plan name	THE EPISCOPAL CHURCH RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	THE CHURCH PENSION FUND	**c** EIN-PN	13-5562193-003
a Plan name	THE FIRESTONE POLYMERS SAVINGS PLAN		
b Name of plan sponsor	BRIDGESTONE AMERICAS, INC.	**c** EIN-PN	88-0335067-016
a Plan name	THE MANITOWOC COMPANY, INC. 401(K) RETIREMENT PLAN		
b Name of plan sponsor	THE MANITOWOC COMPANY, INC.	**c** EIN-PN	39-0448110-001
a Plan name	THE PEW CHARITABLE TRUSTS SAVINGS PLAN		
b Name of plan sponsor	THE PEW CHARITABLE TRUSTS	**c** EIN-PN	23-1512117-001
a Plan name	THE PRINCE 401(K) PLAN		
b Name of plan sponsor	PRINCE RESORTS HAWAII, INC.	**c** EIN-PN	99-0346178-002
a Plan name	THE QUEST DIAGNOSTICS PROFIT SHARING PLAN		
b Name of plan sponsor	QUEST DIAGNOSTICS CLINICAL LABORATORIES, INC.	**c** EIN-PN	38-2084239-333
a Plan name	THE WEGMANS RETIREMENT PLANS		
b Name of plan sponsor	WEGMANS FOOD MARKETS, INC.	**c** EIN-PN	16-1309424-001
a Plan name	THE WEITZ RETIREMENT AND 401K PLAN		
b Name of plan sponsor	THE WEITZ COMPANY	**c** EIN-PN	42-1512625-001
a Plan name	THOR INDUSTRIES, INC. 401(K)		
b Name of plan sponsor	THOR INDUSTRIES, INC.	**c** EIN-PN	93-0768752-001
a Plan name	THRYV SAVINGS PLAN		
b Name of plan sponsor	THRYV HOLDINGS, INC.	**c** EIN-PN	13-2740040-009

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

a Plan name	TOTAL FINANCE USA, INC. EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	TOTAL FINANCE USA, INC.	**c** EIN-PN	23-3060301-003
a Plan name	TRANSDEV NORTH AMERICA, INC. 401(K) PLAN FOR COLLECTIVELY BARGAINED EMPLOYEES		
b Name of plan sponsor	TRANSDEV NORTH AMERICA, INC.	**c** EIN-PN	51-0387033-003
a Plan name	TRANSDEV NORTH AMERICA, INC. 401(K) PLAN FOR NON-COLLECTIVELY BARGAINED EMPLOYEES		
b Name of plan sponsor	TRANSDEV NORTH AMERICA, INC.	**c** EIN-PN	51-0387033-001
a Plan name	TRANSWESTERN 401(K) PLAN		
b Name of plan sponsor	TRANSWESTERN COMMERCIAL SERVICES LLC	**c** EIN-PN	36-4232023-001
a Plan name	TRAVEL & LEISURE CO. EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	TRAVEL & LEISURE CO.	**c** EIN-PN	20-0052541-001
a Plan name	TRAVELPORT EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	TRAVELPORT INC.	**c** EIN-PN	20-8352702-001
a Plan name	TRIMBLE INC. SAVINGS AND RETIREMENT PLAN		
b Name of plan sponsor	TRIMBLE INC.	**c** EIN-PN	94-2802192-001
a Plan name	TTT WEST COAST, INC. 401(K) RETIREMENT SAVINGS PLAN		
b Name of plan sponsor	TTT WEST COAST, INC.	**c** EIN-PN	88-1660993-001
a Plan name	UNISYS CORPORATION SAVINGS PLAN		
b Name of plan sponsor	UNISYS CORPORATION	**c** EIN-PN	38-0387840-004
a Plan name	UNISYS EXECUTIVE LIFE PLAN (USP/RIP)		
b Name of plan sponsor	UNISYS CORPORATION	**c** EIN-PN	38-0387840-001
a Plan name	UNISYS SAVINGS PLAN FOR PUERTO RICO EMPLOYEES		
b Name of plan sponsor	UNISYS CORPORATION	**c** EIN-PN	38-0387840-017
a Plan name	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY FIXED CONTRIBUTION INVESTMENT PLAN		
b Name of plan sponsor	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY	**c** EIN-PN	84-1179794-001

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

a Plan name	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY SAVINGS PLAN		
b Name of plan sponsor	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY	**c** EIN-PN	84-1179794-002
a Plan name	UNIVERSITY OF COLORADO HOSPITAL DEFERRED COMPENSATION PLAN		
b Name of plan sponsor	UNIVERSITY OF COLORADO HOSPITAL AUTHORITY	**c** EIN-PN	84-1179794-003
a Plan name	UNIVERSITY OF UTAH HOSPITALS AND CLINICS DEFINED CONTRIBUTION RETIREMENT PLAN		
b Name of plan sponsor	UNIVERSITY OF UTAH	**c** EIN-PN	87-6000525-001
a Plan name	UNVERFERTH MANUFACTURING PROFIT SHARING PLAN		
b Name of plan sponsor	UNVERFERTH MANUFACTURING CO, INC.	**c** EIN-PN	34-0936989-001
a Plan name	UPS/IBT LOCAL 2727 401(K) PLAN		
b Name of plan sponsor	UNITED PARCEL SERVICE CO.	**c** EIN-PN	13-1686691-004
a Plan name	UPS/IBT LOCAL 2727 DEFINED CONTRIBUTION MONEY PURCHASE PENSION PLAN		
b Name of plan sponsor	UNITED PARCEL SERVICE CO.	**c** EIN-PN	13-1686691-001
a Plan name	VITESCO TECHNOLOGIES USA, LLC 401(K) PLAN		
b Name of plan sponsor	VITESCO TECHNOLOGIES USA, LLC	**c** EIN-PN	83-1870421-202
a Plan name	W.R. BERKLEY PROFIT SHARING PLAN		
b Name of plan sponsor	W.R. BERKLEY CORPORATION	**c** EIN-PN	22-1867895-001
a Plan name	WACHTELL, LIPTON, ROSEN & KATZ SAVINGS PLAN		
b Name of plan sponsor	WACHTELL, LIPTON, ROSEN & KATZ	**c** EIN-PN	13-1935773-003
a Plan name	WARNERMEDIA 401(K) SAVINGS PLAN		
b Name of plan sponsor	WARNERMEDIA LLC	**c** EIN-PN	88-1660993-002
a Plan name	WATERS EMPLOYEE INVESTMENT PLAN		
b Name of plan sponsor	WATERS TECHNOLOGIES CORPORATION	**c** EIN-PN	04-3234558-002
a Plan name	WATERS EMPLOYEE INVESTMENT PLAN FOR PUERTO RICO		
b Name of plan sponsor	WATERS TECHNOLOGIES CORPORATION	**c** EIN-PN	04-3234558-003

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

a Plan name	WAYFAIR LLC 401(K) PLAN & TRUST		
b Name of plan sponsor	WAYFAIR LLC	**c** EIN-PN	26-2188108-001
a Plan name	WHATABURGER 401(K) SAVINGS PLAN		
b Name of plan sponsor	WHATABURGER RESTAURANTS LLC	**c** EIN-PN	30-1199687-001
a Plan name	WINCHESTER PHYSICIAN ASSOCIATES, INC. PROFIT SHARING PLAN		
b Name of plan sponsor	WINCHESTER HOSPITAL	**c** EIN-PN	04-3262963-001
a Plan name	WURTH 401K PLAN		
b Name of plan sponsor	WURTH GROUP OF NORTH AMERICA, INC.	**c** EIN-PN	22-2945308-001
a Plan name	WYNDHAM HOTEL GROUP EMPLOYEE SAVINGS PLAN		
b Name of plan sponsor	WYNDHAM HOTELS & RESORTS	**c** EIN-PN	82-3356232-001
a Plan name	YANFENG AUTOMOTIVE INTERIORS SYSTEMS SAVINGS AND INVESTMENT 401(K) PLAN		
b Name of plan sponsor	YANFENG US AUTOMOTIVE INTERIOR SYSTEMS I LLC	**c** EIN-PN	32-0447985-001
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	
a Plan name			
b Name of plan sponsor		**c** EIN-PN	

SCHEDULE H
(Form 5500)

Department of the Treasury
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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 10/01/2024 and ending 09/30/2025

A Name of plan
FIAM GROUP TRUST FOR EMPLOYEE BENEFIT PLANS FREEDOM BLEND 2065 COMMINGLED POOL

B Three-digit plan number (PN) ▶ 168

C Plan sponsor's name as shown on line 2a of Form 5500
FIDELITY INSTITUTIONAL ASSET MANAGEMENT TRUST COMPANY

D Employer Identification Number (EIN)
20-4659714

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	0	12
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)	5587225	10118583
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	986689	0
(2) U.S. Government securities	1c(2)	1428376	3087794
(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)	255744082	1208301895
(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)	0	1882734
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	518016306	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	781762678	1223391018
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h	137347	219238
1i Acquisition indebtedness	1i		
1j Other liabilities	1j	5824075	10205706
1k Total liabilities (add all amounts in lines 1g through1j)	1k	5961422	10424944
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	775801256	1212966074

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)		
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)	326	
(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)		326
(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)	62904	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		62904
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	236171232	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	238532186	
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		-2360954
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	393637	
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		393637

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		162901377
(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)		-76
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		160997214
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	2093919	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines **2i(1)** through **(11)**	2i(12)		2093919
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		2093919
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		158903295
l Transfers of assets:			
(1) To this plan	2l(1)		594020356
(2) From this plan	2l(2)		315758833

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **(2)** EIN:

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

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

Part IV Compliance Questions

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

During the plan year:		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	**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**			
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**			
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**			
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**			
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 _____.