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 01/01/2025 and ending 12/31/2025

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

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

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

D Check box if filing under:
- [X] 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
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 04/01/1997

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)
VENSURE EMPLOYER SERVICES, INC.

1475 S. PRICE ROAD
CHANDLER, AZ 85286

2b Employer Identification Number (EIN) 37-1508469

2c Plan Sponsor's telephone number 480-993-2650

2d Business code (see instructions) 561300

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/13/2026	JJ HUTZENBILER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [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**	42571
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)**	30380
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	28304
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	12834
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	41138
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	41138
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)**	26087
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)**	26632
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.	**6h**	76
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:

2A 2E 2F 2G 2J 2T 3D 2V

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)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(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)** [X] **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)** [X] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] **A** (Insurance Information) – Number Attached _____
- **(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.) ..... ☐ 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 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.**	**2025** **This Form is Open to Public Inspection.**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VENSURE EMPLOYER SERVICES, INC.

D Employer Identification Number (EIN)
37-1508469

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)

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(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?
15 37 38 50	TPA	4283057	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SLAVIC MUTUAL FUND MANAGEMENT CORP.

59-2749576

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	PORTOFOLIO MGMT FEE	857615	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

VENSURE EMPLOYER SERVICES, INC.

37-1508469

(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?
13	PLAN ADMINISTATOR	120456	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)

METZ & ASSOCIATES, PLLC

46-4558541

(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	AUDITOR	45950	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			Yes ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

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

(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?
			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

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
VENSURE EMPLOYER SERVICES, INC.

D Employer Identification Number (EIN)
37-1508469

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: FEDERATED HERMES CAPITAL PRESERVATI

b Name of sponsor of entity listed in (a): FEDERATED HERMES, INC.

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)
22-2712853-001	C	38588

a Name of MTIA, CCT, PSA, or 103-12 IE: MANAGED INCOME PORTFOLIO COMMINGLED

b Name of sponsor of entity listed in (a): FIDELITY 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)
04-3022712-024	C	1

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

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of plan sponsor | **c** EIN-PN

a Plan name

b Name of 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

2025

This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VENSURE EMPLOYER SERVICES, INC.

D Employer Identification Number (EIN)
37-1508469

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)	4306226	
(2) Participant contributions	1b(2)	3563014	
(3) Other	1b(3)	129730	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		903
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	12926623	13267055
(9) Value of interest in common/collective trusts	1c(9)	1241495	38588
(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)	960326289	998673333
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		2623593

		(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	982493377	1014603472
Liabilities			
1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
1l Net assets (subtract line 1k from line 1f)	1l	982493377	1014603472

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)	39547946	
(B) Participants	2a(1)(B)	108176232	
(C) Others (including rollovers)	2a(1)(C)	15171510	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		162895688
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	970679	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		970679
(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)	24175123	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		24175123
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(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)		117708720
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		305750210
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	145260660	
(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)		145260660
f Corrective distributions (see instructions)	2f		1150724
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)	4403513	
(4) IQPA audit fees	2i(4)	45950	
(5) Investment advisory and investment management fees	2i(5)	857615	
(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)		5307078
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		151718462
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		154031748
l Transfers of assets:			
(1) To this plan	2l(1)		50321589
(2) From this plan	2l(2)		172243242

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) [X] 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: METZ CPA, PLLC **(2)** EIN: 46-4558541

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**	X		180496
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**	X		1000000
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**		X	
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**		X	
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**		X	
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**		X	
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**		X	
l Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**	X		
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**	X		

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year? [ ] Yes [X] 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)
3 SEASON'S LAWN & LANDSCAPE INC 401(K) PLAN	59-3105505	001
4M ANALYTICS 401(K) PLAN	87-2152784	001
ABSOLUTE DATA DESTRUCTION, INC 401(K) PROFIT SHARING PLAN & TRUST	02-0492472	001
ADP RETIREMENT SERVICES	58-2095637	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
ADP TOTALSOURCE RETIREMENT SAVINGS PLAN	59-2452823	001
ALCO IRON & METAL COMPANY RETIREMENT SAVINGS PLAN	94-2240622	001
ALMEIDA LAW GROUP 401(K) PLAN	92-0421463	001
AMERICAN STEEL, INC. 401(K) PLAN	81-0519973	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
AMPLIFY HR MANAGEMENT RETIREMENT SAVINGS PLAN	82-1671832	001
APOGEE ADVISORS 401(K) PLAN	46-3623619	001
AQUILA TRANSPORTATION, LLC 401(K) PLAN	85-2842003	001
ASCENDHR RETIREMENT SAVINGS PLAN	87-2071253	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
ATLANTIC PAYROLL 401(K) PLAN	45-3090410	001
BARRETT BUSINESS SERVICES, INC. RETIREMENT SAVINGS PLAN	52-0812977	001
BASE TECH INC 401(K) PLAN	87-2219226	001
BELLING DENTAL 401K PLAN	87-2457028	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
CAPITAL AREA BINS, LLC 401(K) PLAN	83-1880484	001
CHEN MOORE & ASSOCIATES, INC, AE OF SECURE YOUR RETIREMENT 401(K) POOL	25-1838406	877
CIKLUM INC. 401(K) PLAN	30-0803711	001
COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	27-3007025	333

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
COASTAL LOGISTICS, INC. 401(K) PLAN	20-0662453	001
COLLABPEO POOLED EMPLOYER 401(K) PLAN	85-2368872	003
COMITT WELL SOLUTIONS	47-1750275	001
COMPASS HOMES, INC. 401(K) PLAN	31-1734264	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
COURSER 401K PLAN	20-5366141	001
CROWDSTRIKE, INC. RETIREMENT TRUST	45-3135639	001
CS COMPANY, LLC 401(K) PLAN	27-2843949	001
CYBERCATCH, INC. 401(K) PLAN	84-2431198	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
DEEL 401(K) PLAN	61-1852855	001
DONEEN ELECTRIC INC 401(K) PLAN	41-2030766	002
DUNHAM PRODUCTS, INC. 401(K) PLAN	34-0687958	003
EARNING FROM LEARNINGS, LLC SPIN OFF PLAN	21-3557921	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
ECLECTRIC ELECTRIC SERVICE, LLC 401(K) PLAN	27-3109205	001
EMPLOYER FLEXIBLE 401K PLAN	84-3917552	361
ENGAGE NOW AFRICA INC 401(K) PLAN	45-4100494	001
ENGAGE PEO RETIREMENT SAVINGS PLAN	45-2441552	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
ENTERONE CORPORATION RETIREMENT SAVINGS PLAN	64-0959993	001
EXPO CONVENTION CONTRACTORS INC	65-0568373	002
EXTENSIS GROUP RETIREMENT SAVINGS PLAN	86-1064991	333
FOOT INSTITUTE, PA	20-0239074	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
G & A PARTNERS MULTIPLE EMPLOYER 401(K) PLAN	76-0461926	001
GENERATION # ELECTRIC, INC. 401(K) PLAN	25-1863519	002
GROUP MANAGEMENT SERVICES INC 401(K) PROFIT SHARING PLAN & TRUST	34-1707723	001
HABITAT FOR HUMANITY OF MICHIGAN, INC. RETIREMENT SAVINGS PLAN	38-3142455	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
HANSAE MOBILITY USA MANUFACTURING, LLC	83-1000485	001
HRO RESOURCES MULTIPLE EMPLOYER 401(K) PLAN	46-1925229	001
INSPERITY 401(K) PLAN	76-0178498	001
JOEY L. ADKINS, DDS PLLC DBA ELK FAMILY DENTISTRY	20-3235763	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
JUSTWORKS RETIREMENT SAVINGS PLAN	46-2283648	333
KANAKA FAMILY OF COMPANIES 401(K) PLAN	46-3547077	001
KCMS FOUNDATION RETIREMENT	56-2552704	001
KEY HR RETIREMENT SAVINGS PLAN	46-0657987	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
KEYSTONE HR LLC RETIREMENT SAVINGS PLAN	46-3901815	001
MICHAEL TODD BEAUTY LP 401(K) PLAN	26-3986716	002
MILLENNIUM BUSINESS SERVICES OF LAKE GEM LLC 401(K) PLAN	93-2446827	001
NONAME GATE, INC. 401(K) SPINOFF PLAN	85-3256389	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
OASIS RETIREMENT SAVINGS PLAN	65-0731524	333
ONESOURCE BUSINESS SOLUTIONS, LLC RETIREMENT SAVINGS PLAN	52-2196251	001
OPTIMUM EMPLOYER SOLUTIONS RETIREMENT PLAN	76-0828248	001
OWL, INC. DBA OILFIELD WASTE LOGISTICS RETIREMENT SAVINGS PLAN	90-0932927	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
PANDO 401 (K) PLAN	88-3328544	001
PAYROLL PLUS GLOBAL 401(K) PLAN	92-2578501	001
PEA(K) UTAH'S POOLED EMPLOYER 401(K) PLAN	20-5321813	001
PERFORMANCE INDUSTRIES, INC. 401(K) PLAN	81-2004781	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
PFG AMERICA, LLC 401 PROFIT SHARING PLAN & TRUST	32-0530185	001
PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	87-1231461	333
PURE SOURCE LLC 401(K) PLAN	47-4033657	001
QWAK AI US INC. 401(K) PLAN	37-2047815	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
REMBRANDT FOODS AND FARM NUTRIENTS, AE OF THE STANDARD POOLED EMPLOYER	25-1838506	874
RJ TELECOMMUNICATIONS, INC. 401(K) PLAN	38-3345287	001
RUBINTON SIMMS PA 401(K) PROFIT SHARING PLAN & TRUST	45-5051199	001
SABCON UNDERGROUND, LLC RETIREMENT SAVINGS PLAN	81-1667614	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
SAMUEL HALE 401(K) & SAVINGS PLAN	32-0491109	015
SEQUOIA ONE 401(K) PLAN	46-4716239	001
SERVICE COUNTRY (AL)- CHILDERS	55-0723590	001
SIMPLY US INC. 401(K) PLAN	36-4915072	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
SLAVIC SECURE PEP	65-0608221	001
SQUAN CONSTRUCTION SERVICES-RETIREMENT SAVINGS PLAN	20-4224437	003
STRATUS SOLUTIONS RETIREMENT PLAN	83-4322565	025
SWBC PROFESSIONAL EMPLOYER SERVICES 401(K) PLAN	27-3708085	333

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
THE VINE WELLNESS GROUP 401(K) PLAN	45-3560081	001
TLC RETIREMENT SAVINGS PLAN	45-0391154	333
TOTAL EMPLOYEE LEASING 401(K) PLAN	59-3663120	001
TOTAL HOMECARE SOLUTIONS, LLC	20-8585162	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
TRINET 401(K) PLAN	48-1304650	334
TRINET 401K SAVINGS RETIREMENT PLAN	93-1846017	001
TRION SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	46-1334892	001
TRUE AVIATION CHARTER SERVICES, LLC 401K PROFIT SHARING PLAN & TRUST	26-2934850	001

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
UNIVERSAL E-BUSINESS LLC 401K PLAN	20-5092680	001
UNIVERSAL NETWORK SERVICES 401(K) PLAN	99-0476018	001
VENSURE RETIREMENT PLAN	39-2377547	016
VERITY COMMERCIAL LLC 401 (K) PROFIT SHARING PLAN & TRUST	61-1612507	002

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

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

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

5b(1) Name of plan(s)	**5b(2)** EIN(s)	**5b(3)** PN(s)
WICKERSHAM COMPANY 401(K) PLAN	95-1610680	002
ZIGABYTE CORPORATION 401K PROFIT SHARING PLAN & TRUST	46-3028474	001
ZIP BIO INC 401(K) PLAN	92-3023932	001

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

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

OMB No. 1210-0110

2025

This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
VENSURE EMPLOYER SERVICES, INC.

D Employer Identification Number (EIN)
37-1508469

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... | **1** |

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 65-0708495

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... | **3** |

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 **a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) ..... | **6a** |

b Enter the amount contributed by the employer to the plan for this plan year ..... | **6b** |

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... | **6c** |

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 **a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

a Name of contributing employer

b EIN **c** Dollar amount contributed by employer

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

e Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment)	**14a**	
b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14b**	
c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	**14c**	

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

a The corresponding number for the plan year immediately preceding the current plan year	**15a**	
b The corresponding number for the second preceding plan year	**15b**	

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

a Enter the number of employers who withdrew during the preceding plan year	**16a**	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers	**16b**	

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

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

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

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

a Enter the percentage of plan assets held as:
Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____%
High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____%

b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:
☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation._____

Part VII IRS Compliance Questions

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

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

☒ Design-based safe harbor method

☐ "Prior year" ADP test

☒ "Current year" ADP test

☐ N/A

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702352A .

SCHEDULE MEP (Form 5500)	MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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.**	**2025** **This Form is Open to Public Inspection**

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025

A Name of plan VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN	**B** Three-digit Plan number (PN)..... ▶ 001
C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF VENSURE EMPLOYER SERVICES, INC.	**D** Administrator's EIN 37-1508469

Part I Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.

1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

- **a** ☐ association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)
- **b** ☒ professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)
- **c** ☐ pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)
- **d** ☐ other multiple-employer pension plan (Describe)_____ (Complete Part II)

Part II Participating Employer Information.

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

2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
2 DAYTRANSPORTATION INC	82-3617500	0.09	840458
2a Name of Participating Employer	**2b** EIN	**2c** Percentage of Total Contributions for the Plan Year	**2d** Aggregate Account Balances Attributable to Participating Employer
20FATHOMS	82-4116553	0.06	163997

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

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
24 7 SECURITY INVESTIGATIONS INC	30-1160064	0.01	17121
3D TECHNICAL SERVICES COMPANY DBA 3DMED	81-3924242	0.06	181450
3G CAPITAL INC PARTICIPATING EMPLOYERS	13-4123698	0.17	3837171
3S CONTRACTING LLC	84-4269575	0.06	481130
460 TECH LLC	85-1916868	0.18	712399
4D SIGHT INC	32-0632697	0.02	80233
7200 ROXBOROUGH LLC	87-1114819	0.03	74971
A AABLE RENTS CO DBA AABLE RENTS	34-1089816	0.07	1336617
A BETTER CHOICE SLS INC	26-1636543	0.01	133697

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
A FIN MANAGEMENT LLC DBA AFFINITY PARTNERS	86-1944960	0.30	2280912
A PLUS DRIVING SCHOOL LLC	20-5434949	0.01	11867
AABIHA EXPRESS COURIER TRUCKING CO DBA MR FREIGHT	46-0562166	0.02	139676
ABEYTA ASSOCIATES	91-1760786	0.01	11102
ACANNACOHEMP INC	99-3389106	0.01	10645
ACCESS AUDIO INC	27-2403692	0.07	208012
ACCESS ED HR BRANCH LINE SCHOOL	46-3079956	0.05	638610
ACCESS ED HR CALHOUN COMMUNITY HIGH SCHOOL	46-3079980	0.16	1353679
ACCESS ED HR CASMAN ACADEMY	46-3079951	0.01	119227

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ACCESS ED HR GRAND TRAVERSE ACADEMY	12-3456822	0.23	7585047
ACCESS ED HR ISLAND CITY ACADEMY	46-3079949	0.06	1326039
ACCESS ED HR JACKSON PREPARATORY EARLY COLLEGE	46-1904622	0.11	836663
ACCESS ED HR WALDEN GREEN MONTESSORI	46-3079959	0.06	707563
ACTIVEFENCE INC	84-4027341	0.27	1606107
ADAR MEDICAL UNIFORMS LLC	27-4379930	0.02	299282
ADDIONICS US INC	36-5050619	0.08	301386
ADDRESSABLE INC	92-2325335	0.01	10878
ADS AIR CONDITIONING INC	74-2994584	0.03	106444

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ADVANCED COSMETICS AND FAMILY DENTISTRY PC	82-1565014	0.01	530522
ADVANCED SOLUTIONS CONTROLS LLC	84-3498734	0.03	75549
ADVISOROP	81-4355097	0.01	39593
AGORA REAL ESTATE TECHNOLOGIES US	32-6669497	0.09	270468
AIOLA	85-0764527	0.06	337441
AIR FORCE HEATING AIR CONDITIONING INC	04-3612754	0.06	644234
AIRBORNE CAPITAL USA LLC	88-1104401	0.06	392941
AK INGENUITY LLC	84-2961968	0.08	189636
AKR22LIMITED LLC DBA HAND AND STONE SPA OF GILBERT	82-2149680	0.01	73196

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALAN BOYD CONSULTANTS INC	87-2259639	0.05	392708
ALEX AND RYAN DESIGN LLC	46-4650928	0.04	243117
ALIQUANTUM INTERNATIONAL INC	27-3006907	0.24	1556962
ALLELICA	86-1972864	0.01	41883
ALLIANCE CONTRACTING LLC	84-4115942	0.04	183558
ALLINOX USA LLC	27-2223308	0.01	35894
ALLSTAR STAFFING SERVICES LLC	47-1697577	0.01	78446
ALTERNATIVE MANAGEMENT GROUP INC	75-2637897	0.01	774077
ALUMESHET USA INC	83-1448078	0.01	115141

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

Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ALVAREZ DRYWALL ACOUSTICS INC	45-4523402	0.07	360799
AMARILLO TRISTATE EXPOSITION	75-0832456	0.03	303155
AMERICA CAN CARS FOR KIDS	46-2077931	0.07	529880
AMERICAN DRILLING SERVICES INC	65-0965301	0.02	226066
AMERICOR CAPITAL	22-3862783	0.02	260872
AMERIPRISE FINANCIAL SERVICES	20-8387564	0.03	330933
AMERISAN LLC	20-8164526	0.06	284545
AMOON VENTURES INC	86-2459440	0.03	142426
AMP COLLISION LLC	92-1047453	0.08	4262

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ANCHOR DOOR HARDWARE LLC	83-1688095	0.02	60848
ANCORA HOSPICE AND PALLIATIVE CARE SERVICES LLC	87-1543358	0.05	93462
ANDREWS ANESTHESIA LLC	27-3519445	0.01	401401
ANECDOTES INC	86-1865522	0.11	337171
ANEQUIM LLC	81-2093810	0.03	642471
ANEST IWATA USA INC	57-1165493	0.14	2236118
ANN ARBOR FABRICATION	38-2933165	0.02	1115279
ANTHONY D PARKMAN ENTERPRISES INC	92-0964442	0.01	16515
ANTIDOTE OPERATION MANAGEMENT INC	92-1187202	0.15	354098

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Part II Participating Employer Information (Continued).

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ANVIL FENCE COMPANY	86-3084004	0.08	354773
ANZU ENTERPRISES LLC	87-2841823	0.35	1379704
ANZU INC	35-2716787	0.08	323370
APARTMENT CONSULTING AND TRAINIG PARTNERS DBA ACT PARTNERS	88-1399938	0.01	14532
APERA AI US INC	98-1597755	0.05	191383
APEX EXPRESS INC	31-1354174	0.09	582516
APIIRO INC	30-1213932	0.16	1217571
APPLE FARM COLLECTIONSSLO INC	77-0548131	0.01	29884
APPLIED WATER TECHNOLOGIES INC DBA TRISTATE WATER WORKS	45-4367435	0.01	119537

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AQUA BORE LLC	20-2598201	0.06	305332
AQUA PURE	76-0388209	0.02	465799
ARAGON ADVERTISING LLC	46-4873170	0.22	1705101
ARAM LOGISTICS INC	84-1831589	0.07	516807
ARBE ROBOTICS US INC	36-4882543	0.06	269602
ARC SPECIALTIESWELDING CONSULTANTS AND CEDAR HOLLOW RANCH	76-0547063	0.29	6935575
ARETE INDUSTRIES	38-3615878	0.02	105717
ARGUE CUSTOM HOMES INC PARTICIPATING EMPLOYERS	86-0887721	0.07	583275
ARINETA INC	86-1760037	0.14	764769

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ARIZONA ANIMAL WELFARE LEAGUE	23-7149453	0.06	508962
ARKANSAS REFRIGERATED SERVICES INC	71-0689396	0.01	174923
ARMO SECURITY INC	88-4398396	0.04	61022
ARTLIST INC	85-3790295	0.26	713943
ASC STAFFING GROUP LLC	81-2201304	0.04	330562
ASCEND CAPITAL MANAGEMENT LLC	88-3176288	0.04	158851
ASHLEY SERVICES INC DBA GLASS DOCTOR	59-3698382	0.08	1570011
ASPIRE HOME LOANS LLC	84-4666819	0.06	247002
ASPIRE MANAGEMENT LLC PARTICIPATING EMPLOYERS	84-2192078	0.02	463029

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ASSOCIATED SYSTEMS PROFESSIONALS LLC	20-1774564	0.02	261255
ASTORIAPACIFIC INC	93-1039498	0.16	1976192
ATLANTA AUDIO AUTOMATION INC	45-4045477	0.03	156041
ATLAS INVEST BIG DATA INC	92-1716666	0.03	80648
ATLAS PRIVATE EQUITY PARTNERS LLC	92-1862565	0.01	15550
ATLAS SPACE OPERATIONS INC	47-4364641	0.33	1560377
AUGUSTA SWEET WATER HOLDINGS LLC	83-1559107	0.08	262844
AURORA CONSULTING LLC	81-3588375	0.06	458126
AUTOFLEET INC	38-4208621	0.03	136528

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AUTOKITTEH INC	92-2524037	0.01	72949
AVERY LOPEZ ASSOCIATES DBA UNIVERSITY PARK FAMILY DENTAL	27-1673845	0.01	474542
AYDEN HEALTHCARE OF TOLEDO PARTICIPATING EMPLOYERS	87-2470537	0.02	104053
AZAMI INC	92-1479767	0.02	26957
B H MACHINE SALES	38-2025138	0.01	945665
B SCOTT EDER DDS PLLC	55-0765814	0.02	188364
B2B MEDIA GROUP USA CORPORATION	88-2884935	0.05	135030
BASECOM INC	75-2686521	0.02	293683
BATTAGLIA FOUNDATIONS INC	45-2875362	0.05	455990

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BAYSHORE PROPERTIES LTD	38-2585102	0.05	213801
BCH CONSULTING GROUP DBA CORK N KEG GRILL	46-2797739	0.04	9679
BEACH CITIES COMMERCIAL BANK	88-2475163	0.14	393347
BEAM BIKE DELIVERY LLC	92-1632081	0.04	54856
BEAR OIL COMPANY INC	74-1381663	0.10	1962867
BEAUTIFUL JOURNEY LLC	90-0993725	0.01	589162
BEHAVR LLC DBA REALIZEDCAR	81-3766033	0.01	263284
BELDEN BLAINE RAYTIS LLP	30-0748102	0.04	607628
BELLA PAYROLL ADMINISTRATION LLC	82-3538673	0.01	54375

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BENZARA INC	27-1609552	0.01	52553
BEYOND BASICS INC	33-0758654	0.03	66766
BEYOND THE BRAND MEDIA LLC	47-4498936	0.03	97585
BIG A DEMO EXCAVATING	87-2385635	0.04	212234
BIG BROTHERS BIG SISTERS OF CENTRAL TEXAS	74-1678586	0.01	911199
BIGABID MEDIA INC	37-1951091	0.04	322126
BILD DEVELOPMENT LLC DBA PINNACLE POOLS AND SPAS	92-1350857	0.02	30417
BILLS TRUCK TRAILER REPAIR	68-0516577	0.01	59546
BIOPROTECT MEDICAL INC	84-4832303	0.55	1888221

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BLACKFORD ANALYSIS INC	36-4838079	0.15	445952
BLANKET PARTNERS INC	88-2716714	0.03	69888
BLINK OPS INC	32-0654811	0.29	815507
BLISS AESTHETICS	92-0898624	0.09	382321
BLISTERPAK INC	33-0882748	0.02	391042
BLOCKAID INC	92-1938584	0.15	299388
BLUE OCEAN PARTNERS LLC	82-2098778	0.02	69199
BLUESTONE PROPERTY MANAGEMENT LLC	36-5140140	0.03	720997
BMT TRANSPORT	68-0120837	0.06	7789738

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BODY VISION MEDICAL INC	61-1808954	0.09	368289
BOLOTIN FINANCIAL GROUP INC PARTICIPATING EMPLOYERS	88-2287038	0.07	246964
BOMAC INTERNATIONAL SPC	91-1137661	0.04	1681179
BOOKKEEPER BUSINESS LAUNCH LLC	47-4087949	0.02	78404
BOOTH ENVIRONMENTAL	73-1882040	0.02	118075
BOYS GIRLS CLUB OF GREATER CINCINNATI	31-0536965	0.11	1535609
BRAE BURN COUNTRY CLUB	13-2505943	0.05	992646
BRAINQ TECHNOLOGIES US INC	35-2640270	0.05	277637
BREWINGTONS TOWING RECOVERY LLC	26-3936933	0.09	196569

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BRIA ARTIFICIAL INTELLIGENCE INC	61-2155683	0.14	218846
BRIYA HEALTH INC	88-0655426	0.03	38192
BRONCO DRILLING INC	59-2949489	0.02	81156
BSC OWNER LLC	82-2576815	0.22	6331472
BSI CONSTRUCTION SERVICES LLC PARTICIPATING EMPLOYERS	26-2065538	0.01	25104
BUDS TRAILER REPAIR INC	37-1260130	0.03	238779
BUILDOTS US INC	36-5003739	0.22	717451
C MADDOX COMPANY	45-2788711	0.03	281118
C TWO AUTOMATE INC	36-4979699	0.02	151266

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CAINS TRUCK TRAILER REPAIR LLC	88-0771463	0.06	167982
CALABRETTO BUILDING GROUP INC	20-5029827	0.01	86535
CANS TO GO LLC	71-0937718	0.02	136861
CAPITAL AFFLIATED LLC	45-2078774	0.01	101567
CARDINALOPS INC	86-1426653	0.03	190983
CARIBBEAN OCEAN CORP JA	65-0926594	0.03	253312
CARL HANKINS INC	59-1400178	0.02	965180
CARPENTER ELECTRIC INC	59-2653694	0.08	722491
CASHSHIELD TECHNOLOGIES LLC DBA SHIELD	36-4871629	0.04	60107

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CAVE CREEK MONTESSORI	86-0929374	0.05	146733
CC WHOLESALE DISTRIBUTORS	75-1604641	0.54	6764184
CDRX PHARMACY	84-5065054	0.07	1293254
CDS MANAGEMENT LLC	47-5628431	0.01	8120
CEASER CHIMNEY SERVICE LLC	47-2057401	0.01	43317
CELL SITE CORPORATION DBA WIRELESS ZONE	02-0470979	0.06	979819
CENTRAL AIR SYSTEMS INC	04-2832238	0.01	784642
CENTRAL KENTUCKY SURGERY CENTER LLC	37-1509373	0.14	3181490
CENTURY HEALTH STAFFING SERVICES INC	20-5776836	0.06	533897

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CERES GREENHOUSE SOLUTIONS LLC	45-3542124	0.11	780752
CERTIFIED MEDICAL GROUP INC	77-0390396	0.01	146471
CGC GROUP INC	45-4666257	0.09	180970
CHEMCORE INC	31-1699573	0.05	2336427
CHEMOMAB THERAPEUTICS INC	81-3676773	0.10	552729
CHI AMERICA PARTNERS LLC	98-0547045	0.41	3657675
CHILDRENS HOSPITAL OF MICHIGAN FOUNDATION	32-0087353	0.17	2301817
CHUNK FOODS INC	85-3177907	0.04	89343
CIRCLE S TRANSPORT INC	31-1383345	0.01	116552

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CLASSIQ TECHNOLOGIES INC	86-3961560	0.02	117312
CLEARPOINT HOLDINGS INC	93-2428054	0.66	1722356
CLIFFORD GLUCK MD PLLC	82-2219674	0.03	451380
CLIO AWARDS LLC	82-3070062	0.20	2478300
CLOUD9 DISCOVERY LLC	82-4580048	0.30	5708124
CLOUDSTAFF USA LLC	38-4193618	0.06	298257
CLOZEX MEDICAL INC	83-1458855	0.04	370391
CODIUMAI INC	93-3007927	0.19	358336
CODYS AMERICAN RESTAURANTS LLC PARTICIPATING EMPLOYERS	45-1478878	0.05	128494

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COHERENTRX INC	46-2847556	0.17	667290
COLDWATER VISION CENTER	20-0529057	0.07	1527529
COLLABPEO LLC	92-1652159	0.07	282075
COLLECTIONS USA INC	86-0651889	0.02	1014744
COMFORT CONTROL CORP	95-2842249	0.02	314945
COMMERCIAL FINANCIAL MANAGEMENT INC	38-2034895	0.06	1000512
COMMIT USA INC	85-3513892	0.09	510670
COMMUNITECH OUTPOST USA LLC	36-4954401	0.32	1778069
COMPRAY INC	86-0398166	0.08	755758

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CONAWAY PRESERVATION GROUP	20-1975325	0.08	777872
CONNECTEAM INC	38-4003569	0.15	304411
CONNELL ROOFING INC	84-3056528	0.03	60132
CONSTRUCTION METAL PRODUCTS INC	74-2372290	0.02	77361
COOHOM INC	84-2036846	0.01	82793
COOL WAY LOGISTICS LLC	82-3065106	0.02	307579
COOLAUTOMATION INC	35-2684324	0.05	272995
COOPER STREET COOKIES LLC	27-2827218	0.18	443418
CORETIGO INC	38-4206846	0.02	25169

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CORNERSTONE CONCRETE INC	81-0530320	0.02	545848
CORNERSTONE WEALTH MGMT	27-0552744	0.10	2482614
CORTWO CORP	87-4358628	0.27	744355
COSSBA	88-2226986	0.03	100663
COUNTRY GLASS MIRROR INC	75-2345812	0.07	468633
CREATIVE ENTERPRISES INC	58-1366728	0.17	415672
CREATIVE OPERATING AGENCY II LLC	85-2322891	0.44	6934291
CROSSROADS INC	86-0182987	0.55	4318097
CRP III INC DBA PREFERRED ENGINEERING	38-2783587	0.02	792521

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
CTW COLD LOGISTICS	88-1610724	0.01	14756
CUDDY FEDER LLP	13-2683966	0.45	9165194
CURAM CONSTRUCTION CONCEPTS LLC	83-2431828	0.02	361152
CURB BOX SPECIALISTS INC	81-0517596	0.01	304285
CUTTING EDGE TRENCHING LLC	20-4447844	0.02	124335
CYABRA STRATEGY INC	37-1971840	0.06	185339
CYBELLUM TECHNOLOGIES USA INC	36-4987124	0.02	124195
CYBER CIVIL RIGHTS	46-3513193	0.02	50179
CYE USA INC	84-2120153	0.09	147321

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CYFAIR SURGERY CENTER LLC	76-0386871	0.08	1803243
CYNAMICS INC	84-2819383	0.02	93753
CYOLO SECURITY INC	86-2673530	0.19	995620
CYPAGO SECURITY INC	30-1337849	0.02	81656
D GREEN ENTERPRISES INC	90-0449259	0.01	122419
DANSIN INC	26-0553408	0.04	1848611
DARREN HARDY LLC	47-5203039	0.02	125500
DATA MANAGEMENT INC	61-1314174	0.07	1065321
DATORIOS INC	85-4017768	0.01	38187

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DATUMATE INC	38-4193616	0.03	147095
DAUGHTRY FOUNDATION INC	58-0673985	0.08	3000735
DAVENPORT BOWLERS INC DBA BOWLMOR LANES	42-0207920	0.01	297081
DAVES AUTOMOTIVE ENTERPRISE LLC	99-3553771	0.01	201759
DAVIE SHORING INC	72-1256108	0.11	1017836
DAWSONS ELECTRIC INC	41-2246271	0.02	69250
DAYLOR INC DBA CAPE CLEANERS	32-0396741	0.06	144624
DAYTON BBB	31-0257150	0.07	1717111
DEANS LANDSCAPING	54-2092999	0.02	274553

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DEBENHAM LLC	87-1799263	0.02	302630
DEEPDUB INC	88-3240346	0.02	154213
DEEPL US INC	99-0675137	0.60	1538583
DELAIRE COUNTRY CLUB INC	59-1856834	0.29	1490111
DETROIT YOUTH GOLF	88-3369258	0.01	40127
DEVOTED RESTORATION LLC	82-3930696	0.02	235511
DIAMOND GLASS LLCDIAMOND GLASS GREAT FALLS LLC	61-1582278	0.03	138491
DIGICODE INC	30-1252677	0.01	201296
DIGITOPIA CO	99-1928720	0.01	16857

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DILLON HOLDINGS LLC DBA VISITING ANGELS	56-2603523	0.01	490166
DIMENSIONAL MEASUREMENT INC	20-4410708	0.03	763021
DOMINION REALTY SERVICES LLC	83-0684666	0.28	6251004
DONOHUE PAINTING LLC	86-1461230	0.01	12315
DOUGHERTY PAINTING INC DBA UNLIMITED OUTDOOR KITCHEN	77-0417514	0.01	66051
DR SATINDER AGGARWAL MD PC	38-2407026	0.03	672594
DRS CENTRAL BILLING LLC	20-2970158	0.07	1927094
DUVALTEX US	81-0797883	0.12	11713432
DW CAMPBELL INC PARTICIPATING EMPLOYERS	58-1636903	0.01	35892

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E DAKE PLUMBING HEATING LTD	34-1853768	0.04	626585
EAGLE POINT HOLDINGS LP PARTICIPATING EMPLOYERS	30-1075107	2.90	26136435
EAGLE POINT PROPERTIES LLC	88-0873089	0.02	66573
EARTH TECH DRILLING INC	04-3643895	0.07	1428332
EASYSEND INC	61-1937406	0.03	187265
EDUCATIONAL ENHANCEMENTS INC DBA EDEN INC	38-3101398	0.02	696021
ELECTREON WIRELESS INC	87-1211259	0.06	699334
ELEMENTOR INC	82-5357743	0.02	77547
ELEVATE RENEWABLES F7 EMPLOYEES LLC	93-1385872	0.23	515196

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ELEVEN THERAPEUTICS US INC	87-2617151	0.05	324689
ELITE SERVICES CONCIERGE INC	82-3630883	0.01	13729
ELITE SPORTS BUILDERS LLC	47-2349632	0.03	910981
ELLER INC	55-0630493	0.01	846872
EMERGENT COLD LATAM MANAGEMENT LLC	86-3507398	0.11	352656
EMPERION INC	99-1226614	1.46	9763486
EMU HEALTH SERVICES LLC	81-1789833	0.08	498457
ENERGY CONTROL SYSTEMS 401K	58-1253037	0.02	723277
ENTERPRISE VENDING INC	31-1056408	0.05	3248420

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ENVIRONMENTAL PROGRESS INC	57-0956961	0.01	14876
ENVIVO BIO INC	82-2498824	0.03	129723
EON IO INC	99-0556693	0.25	446557
EPIC4 SPECIALTY PARTNERS LLC PARTICIPATING EMPLOYERS	88-2959515	1.07	18995294
EPIPHANY INC	82-0545192	0.02	380036
EPOCH	47-2193971	0.04	114678
ERIC R NIELSON DMD PLC	20-1535944	0.04	461573
ESBIOLAB LLC	84-3487431	0.07	586516
ESP COMPUTER SERVICES INC	95-2697335	0.06	181023

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ESP FUELING LLC DBA ESP TRANSPORT	81-3731019	0.04	339238
EVERTZ USA INC	98-0226117	0.33	4524510
EVOKE CREATIVE INC	85-2461270	0.01	45614
EVRHIRE LLC	93-2679460	0.01	237186
EXCEL CONTRACTOR SOLUTIONS LLC	83-3634628	0.01	65264
EXCELSIOR CAPITAL MANAGEMENT	85-3644642	0.01	40469
EXCO TECHNOLOGIES INC	47-2818390	0.27	3692751
FAIRBANKS AREA SURFACE TRANSPORTATION PLANNING	83-1279836	0.03	235449
FAIRVIEW CAPITAL GROUP INC	88-1090669	0.04	262648

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FARIAS INC	74-2798803	0.02	251854
FARMINGTON VISION	38-2293087	0.01	313938
FAST ELECTRIC LLC	46-2591478	0.05	642377
FHR CAPITAL LLC	84-2588547	0.06	565154
FINAL BELL HOLDINGS INC DBA FINAL BELL CORP	87-1374616	0.25	1960257
FINBOURNE TECHNOLOGY INCORPORATED	87-2797304	0.15	739058
FINELINE PAVING GRADING LLC	45-4528924	0.05	639752
FINOUT INC	92-0947413	0.19	368834
FINSTRO US INC	86-1461546	0.01	175634

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FIREBOLT ANALYTICS INC	83-2864877	0.41	2222947
FIRECRACKER WORKS	83-2268629	0.05	149585
FIXIT CONSTRUCTION SERVICES LLC PARTICIPATING EMPLOYERS	30-0505532	0.06	177273
FLYMOTION LLC	46-5362918	0.01	39218
FLYRIGHT HOLDINGS INC DBA FLYRIGHT INC	20-0038244	0.32	3631608
FLYTREX INC	47-4431294	0.05	263854
FOREST MANUFACTURING CORP DBA TRICKETT WOODWORKS	02-0504708	0.03	451340
FORMOSAN ASSOCIATION FOR PUBLIC AFFAIRS	11-2615291	0.03	125496
FOSTER CM GROUP INC	74-2784213	0.33	4820416

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FREEMAN FINANCIAL SERVICES LLC	26-4064973	0.05	261131
FREMONT THERAPY WELLNESS PC	82-1081572	0.02	328287
FT WORTH HOLDINGS INCLONG COVE DEVELOPMENT	75-2206108	0.11	792644
FUTURE MEAT TECHNOLOGIES INC	37-1848248	0.39	870332
FYLD USA INC	92-3194452	0.06	198934
GALILEO WHEEL INC	30-1208584	0.02	58553
GARNICA US LLC	88-4042356	0.05	151724
GENDA INC	32-0674411	0.01	41952
GENERAL HEATING AIR	58-2277191	0.01	575916

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GENERATION SPACE LLC	87-3850667	0.01	42816
GENETIKAPLUS US INC	87-4041258	0.03	17800
GETPORT INC	30-1364996	0.38	1185872
GK CAPITAL GROUP LLC AND COADOPTING COMPANIES	81-1003755	0.02	156335
GLOBAL COATINGS INC	20-2925942	0.03	110389
GLOBAL TECHNOLOGY SOLUTIONS INC	43-1877220	0.05	322976
GLOMEX INC	22-2608902	0.08	1966971
GO FIREFLY INC	88-2739335	0.08	211132
GO2GUYS LLC	26-1102648	0.03	342019

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Part II Participating Employer Information (Continued).

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GOLAN CONSULTING INC	31-1818171	0.07	508543
GORDONS SPECIALTIES INC DBA GSI	75-1460820	0.08	1617160
GPE COMPANY LIMITED	61-1723609	0.02	68383
GRANT SHEPHERD ASSOCIATES INC	58-2209110	0.02	316679
GRATUS SERVICES GROUP	47-1016493	0.05	276784
GRAYMONT EQUIPMENT DISTRIBUTION LLC	37-1689099	0.39	3716295
GREAT LAKES BOAT BUILDING SCHOOL	13-4311296	0.04	118568
GREENLEAF MANAGEMENT LLC	80-0437388	0.20	2055617
GREENSMITH LLC DBA GREENSMITH LANDSCAPES	47-2568383	0.02	61906

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Part II Participating Employer Information (Continued).

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
GROUNDCOVER INC	87-1767534	0.17	296160
GT CARRIERS INC	46-4104214	0.01	41032
GT INVESTMENT PARTNERS LP	87-1000712	0.07	696496
GUARDIAN STORM PROTECTION	20-0471625	0.06	1080696
GUARDZ INC	92-1667815	0.12	276849
GULFSIDE BANK	83-1551861	0.33	2998224
GYTPOL INC	32-0758573	0.04	115081
HABITAT FOR HUMANITY OF MONTGOMERY AND DELAWARE COUNTIES	23-2544395	0.05	137081
HARBER AC REFRIGERATION	73-1355249	0.01	81577

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HARBOR BUILDING MAINTENANCE INC	46-0637291	0.11	866118
HARBOR FARMZ NORTH LLC	82-3691196	0.07	633207
HARDLINE HEAT TREATING INC	56-2381576	0.11	445327
HB VENTURES RX LLC DBA PORTICO PHARMACY	27-1943866	0.09	1132751
HCSG GROUP 1	23-2018365	0.98	13743865
HCSG GROUP 25	52-5424244	0.01	59053
HCSG GROUP 26	47-3306480	0.02	130330
HCSG GROUP 3	47-3306475	0.01	129278
HCSG GROUP 30	47-3336655	0.02	35195

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Part II Participating Employer Information (Continued).

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HCSG GROUP 31	95-6321454	0.01	20119
HCSG GROUP 32	95-6321453	0.01	11506
HCSG GROUP 33	95-6321452	0.01	6542
HCSG GROUP 35	95-6321450	0.01	9775
HCSG GROUP 5	47-2751466	0.02	94592
HCSG GROUP 7	47-3306479	0.02	336865
HEALTHCARE STARZ INC	27-0831433	0.01	14812
HELIO PROPERTY MANAGEMENT LLC	20-5715127	0.03	270182
HEMCO OPERATING INC	75-2734683	0.02	409785

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Part II Participating Employer Information (Continued).

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HENCKEL HOMES INC	92-1116993	0.10	335599
HERITAGE HOME DIALYSIS	85-2368872	0.18	1115
HI PLAINS FEED LLC	20-8307172	0.17	3106953
HICKEY ASSOCIATES LLC	35-2265945	0.08	736105
HIGH ROAD HOLDINGS LLC DBA EBTH	84-2767756	0.43	4191782
HIGH ROLLER PRIVATE LABEL LLC	83-2325110	0.05	107386
HILTON KENNEDY COMPANY CINCINNATI LLC	26-2628230	0.08	1652514
HIS CABINETRY INC	59-3350364	0.15	751190
HIS WAY INVESTMENTS LLC	81-3171471	0.03	244049

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HMS EDUCATIONAL SERVICES INC DBA GEORGIA CAREER INSTITUTE	58-1838344	0.04	168156
HOMAHA SENIOR CARE LLC	82-4724868	0.01	279790
HOME FRONT BUILD	45-2025063	0.01	101225
HONEYCOMB INSURANCE	83-3077900	0.31	960111
HOOPER PLUMBING INC	75-1368778	0.01	64078
HOOPO INC	37-2070024	0.02	83524
HOPE FAMILY CARE CENTER LLC	45-5285530	0.01	140016
HOSPITAL DISCOUNT DRUGS INC	27-3921028	0.08	1690239
HOUSTON DIGITAL CORP	82-0468223	0.03	858932

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HOUSTON WILDCATTERS YOUTH SPORTS	87-3628430	0.02	56623
HUMANZ USA INC	87-1634029	0.02	54108
HYAS US INC	38-4120015	0.03	161298
HYBRID RECOVERY SERVICES LLC	92-1711030	0.03	372262
IBEX MEDICAL ANALYTICS INC	86-1667120	0.13	926730
IEC NORTH AMERICA	04-3561636	0.01	62334
IESO DIGITAL HEALTH INC	36-4812936	0.09	270369
ILLICIT GARDENS NJ LLC	99-3139657	0.09	191726
IMMERSE XTENDED REALITY	84-2429087	0.01	51630

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IMPACT FORUM FOUNDATION	92-0273160	0.01	22323
INDECCA LLC	58-2676310	0.09	283012
INDEPENDENCE CONTRACTING SERVICES	01-0874826	0.01	29929
INDIANA RECOVERY RESTORATION LLC	85-2712684	0.03	227159
INDUSTRIAL MEDICAL SUPPORT INC DBA AMPHIBIOUS MEDICS	47-2155601	0.07	541564
INGREDIA INC	45-0451012	0.02	687562
INNOVATIVE COLLECTION CONCEPTS INC	31-1644306	0.01	436969
INPROCESS CONSULTING LLC DBA IPC GLOBAL SERVICES	31-1833568	0.36	6230792
INS GLOBAL	86-3632165	0.22	1305929

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INSPECTABILITIES INSPECTION SERVICES INC DBA HOUSE MASTERS	02-0494296	0.02	648852
INTECH PARTNERS LLC	81-4584370	0.03	145868
INTEGRIS GROUP LLC	83-4091630	0.59	2678427
INTELLIGO GROUP USA CORP	81-3219480	0.12	623755
INTERNATIONAL ASSOCIATION OF HOSPITALITY ACCOUNTANTS	74-2761039	0.29	4304662
INTERNATIONAL DIAMOND SERVICES INC	76-0215797	0.12	1093970
INTERNATIONAL INTELLECTUAL PROPERTY LAW GROUP PLLC	45-4104480	0.02	766897
INTERNET GLOBAL DATA SOLUTIONS CORPORATION	38-3481945	0.03	152616
INTESOURCE PARTNERS LLC	88-1971050	0.05	1370920

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INVISISHIELD LLC	30-0574981	0.01	320883
IONIX INC	85-2352584	0.09	253162
ISLAND FOOD PRODUCTS CORP	04-3060874	0.06	1991149
ISSG INC	31-1276778	0.25	2933876
J BRADTKE ANTIQUE MOVERS INC	36-3333000	0.01	8511
JALISCO MEAT COMPANY INC	82-2891785	0.02	40787
JBW GROUP LLC	46-3547077	0.38	481
JEFF LONGSTAFF CORPORATION DBA MEDICAP PHARMACY	42-1192751	0.05	490238
JG DESSERTS LLC	92-1425294	0.03	451042

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JOBER VENTURES INC	88-0604671	0.09	222029
JOES KARTING LLC	27-0284650	0.02	1679590
JOHN D JONES AC HEATING	59-3527500	0.01	72084
JOINT ENTERPRISE TECHNOLOGIES LLC	26-2489696	0.02	237057
JS MAIDS INC	82-3466484	0.01	94310
JUBILEE PROMOTIONAL CO INC	43-1556156	0.03	334300
JUST AFTER MIDNIGHT INC	36-4990538	0.10	338060
JUSTT FINTECH INC	86-2215921	0.11	282327
KAIEA LLC	99-2388818	0.02	29446

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KAREN L OPFERMAN DDS PC DBA WEST VALLEY DENTAL	36-4270734	0.02	763670
KENAI PENINSULA ATHLETIC CLUB INC	74-3166405	0.01	85546
KENNEDY LEGAL FIRM PLLC	26-3328396	0.02	86273
KETCHUM ENTERPRISES LLC DBA MR APPLIANCE OF FRONT RANGE	46-3999177	0.02	145759
KINNEY SOLUTIONS HOUSTON LLC	81-1451258	0.03	138126
KODEM SECURITY INC	32-0719449	0.06	115364
KP ENTERPRISES INC	59-3702311	0.01	26802
KR OFFICE INTERIORS INC	81-0381860	0.05	2144634
KYOTOCOOLING NORTH AMERICA LLC	27-5036653	0.12	1881810

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LA AURORA USA LLC	92-0536504	0.12	765809
LAKEVIEW GLASS LLC	87-2065200	0.01	32129
LAMIFIL INC	84-4381692	0.02	241695
LAND STAR INC DBA FLOYDS UCART REDIMIX	38-3238549	0.02	328941
LANDMARK MANAGEMENT OPERATING LLC	99-1441136	0.05	165768
LAPE IR SUO INC DBA THE FOX AND HOUNDS	20-5340324	0.01	49272
LARAMIE ENERGY LLC	90-0841728	1.09	14264747
LATIGO PETROLEUM LLC	36-4767494	0.04	305286
LAW ENFORCEMENT ACTION PARTNERSHIP	16-1645758	0.06	249068

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LEAN ON ME IT LLC	87-3447856	0.01	38030
LEDGE INC	37-2057889	0.03	74004
LEEDS SPA CORP	47-4105777	0.04	198540
LEGENDARY TRANSPORTATION SERVICES LLC	85-1218197	0.11	203618
LEGIT SECURITY INC	86-3779887	0.15	588345
LEIBMAN FINANCIAL SERVICES INC	47-0826544	0.02	275833
LETTUCE BOX INC	82-1520556	0.05	638330
LIGHTLYTICS INC	87-2476959	0.02	23358
LIGHTRUN INC	85-3879003	0.13	424514

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LIGHTSOURCE GLOBAL I	85-1724915	3.94	17122237
LINKWELL HEALTH INC	33-1195644	0.30	2740581
LION COMMUNICATIONS INC	90-0255786	0.02	396882
LIQUID 02 TRANSFILLS INC	65-1081529	0.03	169635
LIVING OPTICS CORPORATION	86-2520751	0.02	35874
LOGISTIC PAYROLL HOLDERS GROUP LLC	88-3974750	0.01	20852
LONG BEACH EXCHANGE LLC	93-3024172	0.01	36161
LONOLIFE INC	47-5414508	0.03	196868
LOS AMIGOS AUTHENTIC MEXICAN FOOD	26-0044732	0.02	91311

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LOTTOCOM INC PARTICIPATING EMPLOYERS	32-0583597	0.48	3053055
LOUISIANA ELECTRIC RESOURCE SUPPLY LLC	81-2165963	0.06	358152
LOVE TO DREAM INC	35-2765399	0.05	232697
LUDEO	88-3266737	0.03	37772
LUMANA INC	86-3929844	0.07	314345
LUNA GOURMET COFFEE TEA COMPANY LLC	20-5812917	0.07	822495
LUSHA USA OPERATION INC	86-2016580	0.15	645748
M3TER US SERVICES INC	92-1170733	0.05	208765
MAAP APPAREL US INC	37-2060295	0.02	39714

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MAGIC CITY GRANITE COMPANY INC	20-1251441	0.01	13491
MAGNUSON COMPANY LLC	73-1665208	0.06	267170
MAGOS AMERICA INC	82-4003816	0.09	1068890
MAJOR MAJOR CREATIVE LLC	92-0780875	0.11	285791
MAPLE HILL BUILDERS LLC	20-2127671	0.03	326947
MARATHONFOTO DIGITAL SOLUTIONS INC	92-2502273	0.06	204542
MARK CHATHAM MASONRY LLC	59-3715810	0.01	301703
MARK E MARANDINO INC	65-0887850	0.06	703678
MASS ELECTRICAL APPARATUS SERVICE LLC	04-3477301	0.02	191871

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Part II Participating Employer Information (Continued).

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MASSOOD SADIGHINOURI DDS	75-2952633	0.01	115263
MASTRACCO FOOT ANKLE LTD	85-0709880	0.02	33973
MATRIX ITG INC DBA SECURESI	46-1416719	0.06	1378561
MAUREEN DATA SYSTEMS INC	13-3817821	0.13	3587381
MAXWELL GOSS PLLC	81-5376055	0.03	103249
MC SHEETS DDS PC DBA ADVANCED DENTAL SLEEP TREATMENT	87-1130013	0.03	854048
MCGILL LAW PC LLO	27-4831202	0.02	307597
MCKEE DOOR SALES OF COLUMBUS INC	31-0938547	0.14	2001072
MDI HEALTH TECHNOLOGIES INC	88-0899618	0.07	265966

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MEDICAL COMPONENT SPECIALISTS INC	20-1614094	0.24	1386924
MEDICAL REHABILITATION ASSOCIATES INC PC	55-0784372	0.02	1318326
MEDUS HEALTHCARE TRAVELERS FORMERLY AXIS PROVIDERS INC	46-4026103	0.05	306095
MEMCYCO INC	93-3444957	0.10	231242
MEMED US INC	61-1867190	0.10	831623
MERONA LEADERSHIP FOUNDATION	47-1603664	0.04	147375
MESQUITE PLUMBING	75-2799302	0.02	138990
MEZCAL BAR GRILL INC	91-2199858	0.01	52629
MICHAEL EDLEN	55-8606240	0.02	982534

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MICHIGAN ORTHOPAEDIC PHYSICAL THERAPY	45-4861135	0.01	294617
MICHIGAN ORTHOPAEDIC REHABILITATION	46-1192600	0.02	394438
MICROPYRETICS HEATERS INTERNATIONAL INC	31-1338488	0.01	497516
MIDWEST AIR LLC DBA CROSSWINDS AVIATION	45-3607480	0.04	59173
MINIMALLY INVASIVE SPINE SURGERY CENTER OF PARADISE VALLEY	46-1416301	0.02	77501
MISFITS HEALTH INC	30-1364673	0.01	13254
MITCHELL ASSOCIATES INC	47-0685851	0.02	2575916
MITIGA SECURITY INC	32-0632347	0.22	1182005
MK BROWN HOLDINGS LLC PARTICIPATING EMPLOYERS	83-1386087	0.17	2726300

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
MM MARKETING MANAGEMENTALL STAR GAMING	27-2213713	0.16	2244030
MOBILE AND MODULAR HOMES INC	37-2905639	0.05	291221
MOBILICOM INC	93-1808826	0.03	166830
MONTANA CANCER CONSORTIUM	81-0503295	0.01	423204
MOTOR RACING OUTREACH INC	58-1859610	0.02	286966
MOUNTAINPACIFIC QUALITY HEALTH FOUNDATION	81-0343791	0.91	21920348
MOYER PROPERTY SERVICES INC	34-1801055	0.02	630553
MR MACS HOLDINGS LLC DBA MR MACS	47-5487289	0.02	317321
MR ROOTER PLUMBING OF GREATER FORT SMITH	84-3671275	0.01	106272

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MRK INC	47-0799026	0.02	504726
MSPLIFT LLC	92-1851095	0.07	209256
MUGHAL GAUDRY FRANKLIN PC	47-1111028	0.13	924958
NALU FEDERAL LLC	83-0872231	0.02	94868
NARIKA	94-3162871	0.07	272489
NATIONAL ATAXIA FOUNDATION	41-0832903	0.15	1300223
NATIONAL RESTAURANTS MANAGEMENT INC	13-1964041	0.03	2688532
NATIONWIDE HAUL LLC PARTICIPATING EMPLOYERS	45-5403194	0.14	1340127
NAVARRETE FIRE PROTECTION LLC	90-0658039	0.03	71513

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NAVIGATION FINANCIAL ADVISORS INC	12-3654789	0.02	429710
NAVINA INC	38-4213407	0.24	631100
NECKCARE ENTERPRISES	83-1303676	0.01	17170
NEIGHBORHOOD IMPACT INVESTMENT FUND INC	83-2643429	0.08	649972
NEOGAMES US LLP	37-1763566	0.03	203904
NEOS PARTNERS LP	88-3745131	0.25	662119
NEUROBLADE INC	84-4506251	0.04	150680
NEW ENERGY ONE LLC	80-0603641	0.02	102994
NEW YORK SURGERY CENTER QUEENS LLC	61-1583102	0.02	150757

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NEWVUE COMMUNITIES INC	04-2690210	0.08	589066
NEXT SILICON INC	61-1946637	0.36	1725446
NEXUS NEUROTECH LLC	92-3996615	0.08	277875
NIKIRA LABS INC	81-5114326	0.10	681192
NIMBLE BEAUTY INC	83-3818739	0.03	318376
NITELINES USA	59-3246289	0.10	386702
NORCOM LLC	86-2736431	0.18	2015995
NORTH MANAGEMENT LLC	38-3234174	0.06	91262
NORTH POINT SURGERY CENTER INC	77-0557917	0.01	13206

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NORTHBORO BUILDERS INC	01-0798438	0.06	451634
NORTHCOAST MOVING ENTERPRISES	34-1714935	0.06	355836
NORTHEAST CARTAGE COMPANY INC	04-2895374	0.05	880938
NORTHWESTERN TOOLS INC	31-0598158	0.07	2019636
NSC FINANCIAL INC	86-0223783	0.01	290420
NSURE	87-3099996	0.04	254725
NUKUDO LLC	99-2359533	0.05	120177
ODONOVAN PHILLIPS INC DBA BIG BUZZ	26-4028620	0.02	346142
OHIO AMBULANCE SOLUTIONS LLC	26-1905324	0.03	206174

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OHIO MULCH	31-1120540	0.18	2977031
OLIGO SECURITY INC	92-1490252	0.23	600849
OLIVE BRANCH CHAMBER OF COMMERCE	64-0562619	0.01	97332
OMAHA BY DESIGN	45-4457803	0.01	272310
OMAHA COUNTRY CLUB	47-0258920	0.06	3200113
OMEGA AIR	52-1445604	0.50	4729806
OMNISOURCE UNITED INC	75-1243053	0.05	271208
ON SCENE TECHNOLOGY INC DBA DIRECT ALARM	58-2112158	0.01	10443
ONE DISCOVERY INC	47-5669739	0.22	3130488

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ONEBEAT NORTH AMERICA INC	92-1961188	0.01	205365
ONYX 7 LLC	84-2054552	0.25	578145
OPENEYES INSURANCE AGENCY INC	85-4262417	0.06	222926
ORASIS PHARMACEUTICALS INC	87-0819925	0.45	857077
ORIGEN CARBON SOLUTIONS CORP	87-2353895	0.04	281129
OTORIO INC	30-1363781	0.04	78465
OTTA TECHNOLOGY INC	88-0839902	0.01	49068
OURCROWD MANAGEMENT US INC	46-2338972	0.01	147878
OVERWOLF INC	92-1772381	0.02	98054

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OVESCO ENDOSCOPY USA INC	27-2550020	0.13	1050307
OWNID INC	87-1087124	0.04	97410
OX APPSEC SECURITY INC	92-2432628	0.11	228105
OXG LLC	84-4644786	0.46	1134591
OYSTER HR AMERICAS INC	86-2382438	1.46	5865420
PACIFIC COAST POOLS INC DBA PREMIER POOLS SPAS	56-2653700	0.06	605943
PACIFIC STATES AVIATION INC	94-1198426	0.04	359358
PACIFIC WEST MANAGEMENT	95-4156359	0.17	2224064
PACIFIC WORLD CORPORATION	33-0368740	0.36	9444889

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PANORAYS INC	30-1102802	0.05	236159
PAPAYA GLOBAL	81-0695974	0.41	2739124
PARAGON SYSTEMS INTEGRATION LLC	47-5343585	0.44	3606156
PARIKSHAT ALKA PC DBA UNITYCARE HOSPITALISTS	47-2672229	0.01	11380
PARTICULAR SOFTWARE INC	92-0673387	0.17	799466
PATHWAY STAFFING INC DBA PATHWAY GROUP	45-2748953	0.04	646488
PDS SERVICES LLC	30-0334793	0.02	445946
PEACE SERVICES LLC PARTICIPATING EMPLOYERS	45-7796032	0.01	34006
PEARL COHEN ZEDEK LATZER BARATZ LLP	20-2012625	0.68	14631772

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PEEBLES PROSTHETICS INC	84-1160766	0.15	3201551
PEERLESS MAINTENANCE SERVICE INC	33-0097568	0.08	247054
PEERSPOT INC	61-1772802	0.04	164207
PENCOR LLC	81-2238636	0.02	183058
PEPPERS SENIOR DOG SANCTUARY	83-3612767	0.02	63817
PETKEY LLC	20-5963381	0.01	60625
PICO PRODUCTIONS DBA EL CID COADOPTING COMPANIES	81-4048043	0.06	102249
PINE CREEK MANAGEMENT LLC	84-1920353	0.11	236495
PITWORKS LLC DBA KCS RIBSHACK	02-0515456	0.02	410634

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PIXCELL MEDICAL INC	87-2500760	0.03	73960
PIXELLOT US INC	83-3027963	0.11	935254
PLATAINE INC	91-1927728	0.05	530162
PLATIVE INC	47-0976220	0.54	2754454
PLAYSAFE	45-1806143	0.07	1140449
PMC FIG OPPORTUNITIES	85-0979604	0.02	141405
POINTFIVE US INC	30-1344841	0.15	302992
POINTSMITH HOLDING COMPANY INC47CONCEPTS LLC	88-0480686	0.30	13618633
POPLAR RESOURCES LLC	20-8144049	0.03	161128

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
PREMIER BUILDING REMODELING	38-3078801	0.03	160269
PREMIER OFFICE TECHNOLOGIES INC	34-1827148	0.02	361752
PRESCOTT VALLEY CHARTER SCHOOL	20-4595288	0.01	97700
PRISMA PHOTONICS INC	35-2780921	0.01	66292
PROCTORFREE	46-3109350	0.01	142139
PROFESSIONAL BUILDING SERVICES BY PMC LLC	45-3129617	0.05	804012
PROFITABLE ENDEAVORS INC	82-4274481	0.02	215808
PROTEUS SUPPLY AND TRADING LLC	85-0776336	0.02	165871
PT EMPLOYMENT INC	99-2294981	0.06	872153

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
QBIQAI INC	38-4224763	0.04	80967
QM TECHNOLOGIES INC	61-1888609	0.10	444270
QUALTERO INC	27-1817087	0.01	148931
QUANT HEALTH INC	86-2669397	0.08	662413
QUIKLY	45-4772512	0.05	1206854
QUORSO US INC	83-4712115	0.09	535988
RAM REAL ESTATE CAPITAL LLC	47-2104399	0.02	541
RAVEN CLOUD INC	88-3832897	0.03	49444
RAYCOM COMMUNICATIONS SOLUTIONS INC	88-2975598	0.05	147172

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RECOURSE COMMUNICATION INC	04-2906741	0.06	1336018
RED OXX MANUFACTURING INC	81-0494595	0.01	106912
REDIRECT INC	13-4086218	0.29	5406244
REDSTOR INC	32-0614007	0.02	128204
REFLECTIZ INC	86-1391381	0.06	234215
REJIMUS INC	45-2845645	0.04	702042
RELIANCE HOSPITALISTS PLLC	81-5017313	0.06	1176198
RELIANT GERIATRICS INC	57-1124682	0.07	588060
REMEPY INC	88-3918383	0.02	31469

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RENAISSANCE LOFTS CONDO ASSOCIATION	58-2537814	0.01	88924
RENEWABLE FUELS NEBRASKA	51-0672623	0.01	111078
RENOVA HEALTH LLC	82-2931318	0.04	115577
REPLACEMENT METAL CASTINGS INC	59-2753198	0.04	743591
RHINO ECO INC	87-4278698	0.01	20030
RICORE INVESTMENT MANAGEMENT INC	31-1816636	0.15	5353429
RIDGELINE ENERGY ANALYTICS INC	83-2966462	0.16	770139
RJG UNIVERSAL BUILDERS CORP	47-1443053	0.02	671112
RMS ASSOCIATES LLC	30-0033644	0.01	445415

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ROBERT HARRIS GROUP LLC	84-4433309	0.02	244631
ROBISON DENTAL GROUP PLLC	45-5156415	0.01	806270
ROCK HOSPITALITY LLC DBA THE GOLDEN LAMB	27-2261791	0.01	98875
ROCKPORT MUSIC INC	22-2479696	0.07	615086
RRG MANAGEMENT LLC AND PARTICIPATING EMPLOYERS	26-2955528	0.04	224898
RUSH TRANSPORTATION LOGISTICS INC	06-1701503	0.29	3918228
RYAN LOGISTICS INC	31-1685203	0.17	1439153
SABAL CAPITAL OPERATIONS LLC	87-3107277	0.34	2653178
SABCON UNDERGROUND LLC	81-1667614	0.10	59520

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SAFEGUARD AI INC	35-2765061	0.03	207988
SAFETY CENTER	94-2831134	0.11	1716384
SAJO MANAGEMENT GROUP LLC	27-0110815	0.01	38171
SALTO LABS INC	83-3033593	0.21	992321
SAMCO SALES AND SERVICES	38-3333424	0.08	902594
SANDBEAR EXPRESS INC	38-2291386	0.01	369725
SANDY BAY SOLUTIONS LLC PARTICIPATING EMPLOYERS	81-4176436	0.10	650028
SANO GENETICS INC	87-2850364	0.04	118957
SAPIENT INVESTIGATIONS INC	27-1878377	0.02	147050

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SAPP BROS CONTRACTING LLC	01-0840304	0.02	196671
SAVOURYS GOOD EARTH CUISINEWEST COAST MOPAR INC	33-0636243	0.02	56335
SAYMINE TECHNOLOGIES INC	87-3680891	0.04	79623
SCALEOPS LABS INC	93-3524816	0.13	261433
SCHAUMBURG SPECIALTY LLC	47-3066165	0.04	78624
SCOPIO LABS INC	82-2276537	0.07	341568
SCOTTSDALE MEDICAL CENTER PLC	26-2912575	0.03	631615
SDBW LLC DBA DEBENHAM PROPERTIES	87-0733445	0.01	128808
SECBERUS INC	82-3501320	0.01	177118

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SECTOR 7 LLC	27-0800996	0.03	363194
SECUPI INC	85-0612171	0.06	253499
SECURITHINGS INC	35-2621278	0.14	610223
SECURITY SAVVY INC	88-0612006	0.08	245444
SEDRIC INC	36-5043325	0.06	133951
SEEDX TECHNOLOGIES INC	82-4085350	0.01	77896
SENECA ENTERPRISES LLC	26-3237278	0.11	512068
SENTRA INC	38-4187494	0.17	381115
SEQUENCE FINANCIAL SPECIALISTS LLC	20-2717468	0.02	205194

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SERAPHIC ALGORITHMS US INC	88-1092483	0.25	515088
SERENITY POOLS INC	20-2225875	0.01	28477
SFARA INC	46-0992111	0.04	347260
SH PASSEY INC	87-0650220	0.06	506924
SHOOTERS OF JACKSONVILLE PARTICIPATING EMPLOYERS	03-0503401	0.11	808045
SHOPIC INC	35-2634295	0.06	164269
SIERRA MANAGEMENT INC	38-3051254	0.04	281036
SITEAWARE INC	38-4060472	0.05	378247
SKYHAWK SECURITY INC	35-2789544	0.08	207697

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SKYVIEW NATURALS PBC	81-3764795	0.08	825700
SKYWAY DESIGN COMPANY LLC	85-3956983	0.01	163892
SLOW LIFE GAMES LLC DBA HANDCRAFTED LEARNING	46-3897248	0.07	207238
SNAPDRAGON SHIPPING INC DBA THE UPS SHIPPING STORE 2601	27-4590500	0.03	399573
SOFTIL INC	30-0996942	0.05	799910
SOLAMERE CAPITAL LLC	26-2037091	0.37	3487656
SOLSTEIN CAPITAL LLC	27-3112445	0.06	192577
SOMAC CONSTRUCTION INC	55-0586251	0.02	168003
SONIC ODEEO US INC	99-1612674	0.01	17713

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SONIC STAFFING SOLUTIONS LLC	84-1898663	1.10	2826493
SONS CHIMNEY SERVICES INC	02-0480962	0.04	598767
SOUTH BAY PEDIATRIC DENTAL GROUP	20-8894917	0.08	1288989
SOUTH FLORIDA GLAZING DBA UNITED GLASS SERVICE	65-0538701	0.02	252482
SPANISH AMERICAN CENTER INC	04-2761759	0.04	139938
SPECTROUV LLC	85-0545334	0.12	818831
SPEEDATA	88-0948957	0.03	140249
SPHAERA INC	87-1847637	0.05	539512
SPIN GLOBAL LLC	47-3458706	0.02	194622

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SPINE AND SPORTS SURGERY CENTER LLC	46-1141188	0.09	612502
SPIVAK FINANCIAL GROUP THE	23-2690188	0.08	274251
SPRING CREEK RECREATIONAL FUND	27-1770637	0.07	431244
SPRING CREEK SENIOR PARTNERS	74-3158439	0.01	100120
SQUADRON NYC LLC	38-4195550	0.02	50938
STACKED STEEL INSTALLATION INC	33-1062775	0.01	11705
STAFFING MANAGEMENT GROUP LLC	82-3765016	0.01	142066
STAINLESS STRUCTURAL WORKS LLC	45-2745576	0.13	2179312
STALLONES MOBILITY LLC	82-4216003	0.01	8457

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STARRETT EARLY LEARNING CENTER	11-2463137	0.03	971227
STEEL PLUMBING DRAIN EXPERTS INC	82-3435606	0.01	43089
STEELE AND LOEBER LUMBER CO	36-2113056	0.07	1192720
STEPHEN G COOK ENGINEERING INC	74-2924848	0.02	178539
STEVE SARETTE SON EXCAVATION LLC	02-0530069	0.04	391413
STONE RIDGE DEVELOPMENT INC	04-3281752	0.01	71884
STOREDOT US INC	87-3263352	0.13	641373
STRATEGIC RESOLUTION EXPERTS	88-3133586	0.31	3779674
STRATFORDCAMBRIDGE GROUP	38-3201390	0.02	567356

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STREAMLINE MANAGEMENT LLC	47-5001054	0.01	12239
STRONGTOWER BEHAVIOR HEALTHCARE LLC	45-2621912	0.02	366221
SUDBURY ACCESS CORPORATION	26-2998786	0.01	219181
SUN CITY TEXAS COMMUNITY ASSOCIATION	74-2777582	0.29	3587867
SUN COMMERCIAL ROOFS INC	75-2214198	0.18	2424340
SUNRIVER OF IDAHO INC	82-0447626	0.01	486117
SWAPPIO INC	88-3450522	0.01	41926
SWEEPIO INC	87-1980022	0.17	690751
SWIMM INC	37-1981274	0.06	242162

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SWIPE TRACK SOLUTIONS	45-2650253	0.06	645896
SWISS WATER DECAFFEINATED COFFEE COMPANY	98-0362395	0.04	398855
SYNPHNE HEALTH INC	84-5060690	0.04	68929
SYNTHETIC GRASS STORE LLC	26-2697256	0.10	1660282
SYNTHETIC GRASS STORE OF CALIFORNIA LLC	46-5079468	0.03	256073
TABBY US INC	92-1704634	0.01	1344
TAGS HAWAII INC	80-0769884	0.04	150564
TAHOE BEACH CLUB LLC	38-4021703	0.06	146565
TALKISRAEL FOUNDATION	87-3194268	0.01	22345

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TAMPA BAY DESIGN GROUP LLC	99-1703711	0.02	88062
TAMPA VA RESEARCH AND EDUCATION FOUNDATION INC	59-3444354	0.04	322168
TAMWOOD LIMITED PARTNERSHIP PARTICIPATING EMPLOYERS	94-3293170	0.02	47324
TARGET POINT CONSULTING	68-0552158	0.01	920236
TEBEX INC	92-0481592	0.12	396263
TEDESCO COUNTRY CLUB	04-1895530	0.17	2201610
TEMPEST CAPITAL MANAGEMENT LLC	92-1011243	0.01	9882
TERRA FERMA LANDSCAPES	94-3205179	0.04	224713
TEXAS GENERAL MECHANICAL LLC	75-2758326	0.03	564582

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Part II Participating Employer Information (Continued).

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE ADAM AND GILA MILSTEIN FAMILY FOUNDATION DBA MILSTEIN FA	95-4824595	0.02	133419
THE COMMONS CLUB AT THE BROOKS INC	27-0396390	0.09	1628206
THE CORPORATE BENEFITS ALLIANCE INSURANCE SOLUTIONS INC	88-3357018	0.01	12254
THE DESTINATION MANAGER	86-0982783	0.14	1973108
THE DURABLE SLATE CO	31-1381403	0.10	1647489
THE GREEN SPOT LLC	45-1058334	0.01	391359
THE LORENZ CORPORATION	31-0504056	0.07	2811401
THE MARCONI SHOP INC	47-2026139	0.02	30177
THE MARK FOUNDATION FOR CANCER RESEARCH US LTD	36-4825921	0.11	1553526

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Part II Participating Employer Information (Continued).

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THE MOREL COMPANY	27-4983728	0.46	4201210
THE PARTNERSHIP INC DBA TPI MANAGEMENT SERVICES LLC	65-0522900	0.12	1207787
THE PINEMONT APARTMENTS INC	74-2110755	0.02	230004
THE POVERELLO CENTER	65-0056218	0.04	295961
THE POWERSONIC CORPORATION	94-1735545	0.27	4243870
THE RELEAF CENTER	82-1557903	0.04	397992
THE STERN INSURANCE BROKERAGE INC	86-1774845	0.02	71774
THOMAS E SMITH FOUNDATION INC	99-3994958	0.03	72579
THREE GABLES SURGERY CENTER	87-0648900	0.11	2794811

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TILLO INC	38-4123550	0.09	361280
TIMBUKTU TRAVEL INC	87-1854056	0.02	49427
TIMBUR LLC	26-4402516	0.01	13554
TIMELESS WCP LLC	27-4546193	0.01	236365
TITAN WORKFORCE	20-2159452	0.02	174271
TJC HOME IMPROVEMENT	85-3509218	0.02	99700
TLC CONTENTS RESTORATION INC	27-0285827	0.02	41154
TLC MEDICAL LLC	26-3696195	0.02	89932
TOGETHER WE THRIVE	83-2951879	0.01	31479

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TOGETHER WOMEN RISE	20-0031928	0.03	319305
TRANSAK INC	32-0614630	0.02	71117
TRANSFICC INC	87-4756998	0.05	56854
TRANSGLOBAL SOLUTIONS LLC	95-4816350	0.01	97443
TRANSPORTATION RISK MANAGEMENT INC WITH MACOMB BENEFITS LLC	20-1272289	0.06	806230
TRAVALCO USA INC	59-2530471	0.10	3785402
TREEVERSE INC	37-1962377	0.15	567949
TRES FINANCE	87-4658356	0.06	115751
TRESTLE STUDIO LLC	86-3017719	0.06	135745

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TRIPP ELECTRIC MOTORS INC	65-0373189	0.12	407062
TRM TAX AND CFO SERVICES INC	87-2211413	0.07	180756
TRULLION	83-2996799	0.34	1042772
TRULY FREE INC	88-2232352	0.14	372387
TULU INC	84-3465603	0.04	102033
TURF MASTERS LLC DBA ARIZONA TURF MASTERS	26-5686323	0.06	1065131
TWEED PAYMENTS INC	88-2576708	0.04	200738
TWINS SMOKE SHOP INC	02-0499466	0.02	304050
UKKO	81-4221615	0.04	166433

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UMOTIF INC	87-3287191	0.18	1414900
UNDERWOOD LAW OFFICE INC	55-0778824	0.01	103768
UNI LUXURY USA INC	86-2417434	0.03	154277
UNIFIED OFFICE INC	45-2043147	0.09	574264
UNIQUEST INC	83-2718440	0.03	128312
UNITED TISSUE NETWORK INC	46-1285250	0.09	1063423
UNIVERSAL AUTOMATION INC	92-2745914	0.05	211216
UPSTREAM SECURITY INC	82-3941784	0.03	169324
UPTAKE TECHNOLOGIES INC	47-1427490	0.30	9200110

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URBANBLOC INC	46-2235616	0.01	78112
UTP SERVICES LLC	46-1969580	0.08	830288
VAGABOND AMERICA INC	81-4025163	0.01	153838
VALERANN US INC	92-2379040	0.03	139684
VANGUARD FABRICATION CORP	33-0514209	0.03	782798
VARISCITE AMERICA INC	30-1192966	0.01	26124
VELOX EXPRESS INC	35-2132243	0.01	76544
VENA SECURITY INC	92-1490532	0.16	289333
VENSURE EMPLOYER SERVICES INC	37-1508462	13.26	165982009

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VENTURI CAPITAL INC DBA DESIGNCO	75-2927038	0.02	256176
VERDE SERVICES LLC	47-4051524	0.14	1286597
VERIFI TECHNOLOGIES	85-1977893	0.22	971143
VERITAS ENVIRONMENTAL CONSULTING INC	46-2400494	0.10	3894383
VERITY COMMERCIAL LLC	61-1612507	0.35	274
VERSATILE MORTGAGE LLC	38-3675081	0.03	550391
VERTES MONTES CAPITAL LLC	93-4944922	0.03	70395
VESTED METALS INTERNATIONAL LLC	35-2490777	0.09	371741
VICTORBRANDON CORP	04-3363148	0.06	1072010

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VILARDI WEALTH MANAGEMENT	93-1429703	0.05	177512
VIM INC	47-4054415	0.20	1963693
VINTAGE CAR SOLUTIONS LLC	45-3119693	0.03	88728
VISMO USA LLC	61-1747635	0.01	19146
VOLUMEZ TECHNOLOGIES INC	87-3418998	0.04	44472
VONDRA DENTAL PC	27-5486161	0.03	1382200
VOYANTIS INC	38-4208779	0.07	177738
VUNO MED INC	86-1931294	0.08	281738
WAC CORPORATION OF GREENVILLE	56-1407577	0.01	26321

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WAIBEL RANCHES LLC WAIBEL RANCHES TEXAS LLC	26-1793503	0.07	803455
WALDRONS AUTO BODY INC	04-2741886	0.09	2081000
WALKER PROPERTY SERVICES LLC	33-1166411	0.05	682561
WALLACE TRUCK EQUIPMENT SALES INC	58-2598253	0.02	195183
WALTZ INC	37-2026723	0.03	106777
WAY TO STAY HOMECARE LLC	82-2949102	0.01	94891
WEALTH INSIGHT PARTNERS LLC	84-2701512	0.10	702336
WEST KERN ADULT EDUCATION NETWORK	82-2894362	0.02	91427
WEST MICHIGAN TOURIST ASSOCIATION	38-1160980	0.01	369139

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WEST WIND CONSULTING	20-2015931	0.04	1133838
WHITE CIRCLE BAR ENTERPRISES INC JOHN H WHITE AND ASSOCIATES	74-2257785	0.02	304500
WHITESIDE MANOR INC	23-7126416	0.21	2586423
WHOP INC	85-2300246	0.09	304322
WILLIAM C ABNEY ACADEMY	20-2909618	0.02	677965
WINNING FUTURES	20-2263860	0.06	852822
WIPCO ACQUISITION LLC	26-4788841	0.07	555110
WISE HOMECARE INC	92-2873860	0.01	18082
WISEBYTES SOLUTIONS INC DBA DRISCOLL ASSOCIATES	85-3246062	0.04	208462

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WISESIGHT INC	88-1391425	0.01	77630
WOLFE WHITE ASSOCIATES	81-0964090	0.01	11027
WOLVERINE CABINET COMPANY LLC	20-5365564	0.07	285658
WORKER BEE SOLUTIONS LLC	85-3664303	0.01	11839
WORLDWIDE TROPHY ADVENTURES LLC	38-3937883	0.08	3812384
WRIGHT TOOL COMPANY	38-1855192	0.23	1414550
WYANT INC	32-0046555	0.03	433350
XTYPEIO INC	32-0690585	0.11	415448
XYTE TECHNOLOGIES INC	37-2037397	0.08	245514

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YALP INC	82-3787390	0.02	97422
YOUN PLASTIC SURGERY PLLC	54-2133486	0.14	4007397
YOURGENE HEALTH INC	32-0610009	0.03	232830
YOUTH ADVOCACY FOUNDATION	04-3583353	0.02	176485
YOUTH DEVELOPMENT CORP OF SW OHIO DBA THE FIRST TEE OF GREAT	81-0669666	0.01	53749
ZAFRAN SECURITY INC	92-1935854	0.30	624774
ZERO NETWORKS INC	86-1492132	0.25	782261
ZONECO LLC	85-3420705	0.03	72032
ABSOLUTE DATA DESTRUCTION INC	02-0492472	0.01	0

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ADLARGE MEDIA LLC	26-3176870	0.06	0
AEROCLOUD SYSTEMS INC	35-2616665	0.02	0
ALCO IRON METAL COMPANY	94-2240622	0.25	0
ALTA LOMA ENTERPRISES LLC	81-3992814	0.05	0
AOMNI INC	85-3834260	0.02	0
AQUILA TRANSPORTATION LLC	85-2842003	0.02	0
BASE TECH INC	87-2219226	0.04	0
BERNIER REFRIGERATION GENERATIONS INC	46-2571549	0.01	0
BEST PROPERTY MANAGEMENT INC	36-4534050	0.12	0

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BETTS ENVIRONMENTAL RECOVERY INC	58-2095637	0.02	0
BROAD STREET DEVELOPMENT LLC	20-0470623	0.05	0
BROOKSVILLE COMPANY LLC	81-2438868	0.30	0
BYRNE ACQUISITION GROUP LLC	20-4095744	0.02	0
CARRICK US SERVICES COMPANY LLC	84-3881310	0.05	0
CHEN MOORE ASSOCIATES INC	57-2739866	0.06	0
CIKLUM INC	30-0803711	0.01	0
CINCHY USA INC	61-2166938	0.01	0
CM ENERGY OPERATIONS LP	81-4753182	0.01	0

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COLOR PRO TECHNOLOGIES OF THE SOUTH INC	90-0941943	0.01	0
COMITT WELL SOLUTIONS	47-1750275	0.07	0
CS COMPANY LLC DBA CUSTOM STEMS	27-2843949	0.01	0
CYBERBIT	38-3988615	0.02	0
DAYBREAK	91-0109284	0.02	0
DEAKO INC	47-3320776	0.16	0
EDISON EQUITY RESIDENTIAL LLC	88-4256774	0.01	0
ELEAD RESOURCES INC	36-4592413	0.05	0
ELEVEN LABS INC	88-2721123	0.12	0

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
ENGAGE NOW AFRICA INC	45-4100494	0.01	0
EQUINOM INC	83-3316389	0.01	0
ERAE AMS USA	83-1004853	0.05	0
EXPO CONVENTION CONTRACTORS INC	65-0568373	0.12	0
FELIPE M VENEGAS DBA COMMONWEALTH PLANNING GROUP	06-1832601	0.06	0
FIME NORTH AMERICA LLC	99-1286936	0.20	0
FUSION SIGN DESIGN	20-5897387	0.05	0
GALLERY RESIDENTIAL LLC	92-2533159	0.55	0
GEN3 ELECTRIC HVAC	25-1863519	0.01	0

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Part II Participating Employer Information (Continued).

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GENSYN INC	61-2081820	0.03	0
GRAND RAPIDS PRINTING INK COMPANY	38-1459221	0.01	0
HAILO USA INC	86-2821058	0.04	0
HEYCO ENERGY GROUP INC	75-3008779	0.06	0
HIDDENLAYER INC	88-1414566	0.40	0
INNOVAMAT EDUCATION INC	88-1600717	0.02	0
INTERLACED LLC	80-0764293	0.11	0
J KRISTIN SHIVER DC LLC DBA BACK IN BALANCE CHIROPRACTIC	26-2290520	0.01	0
JOYTUNES INC	36-4915072	0.02	0

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KUSA INC	93-4431874	0.15	0
LEGENDS OF VENARI	87-3497719	0.02	0
MERIDIAN FURNITURE INC	45-4166366	0.16	0
MICHAEL TODD BEAUTY LP	26-3986716	0.03	0
MIGHTY CULTURES LLC	92-2349911	0.02	0
MILLENNIUM BUSINESS SERVICES OF LAKE GEM LLC	93-2446827	0.02	0
MINUTEMAN INC	95-2117125	0.01	0
MUSH FOODS US INC	36-5056748	0.04	0
NEW DIRECTION PARTNERS INC	38-3452088	0.03	0

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ONELEET INC	36-5032549	0.02	0
ONSITE LIQUIDATORS INC DBA MIRAMAR OFFICE FURNITURE	20-5080022	0.01	0
PEDAL MOVEMENT INC	81-1374246	0.03	0
PROVIDENCE CONSULTING COMPANY	20-0674926	0.01	0
PURE SOURCE LLCA	47-4033657	0.01	0
R S MARKHAM LTD DBA CALIFORNIA CLOSETS	38-2794120	0.02	0
RECAST LABS INC	87-3698050	0.08	0
RED HEAD HOLDINGS LLC	88-2959818	0.01	0
REI EMPLOYMENT COMPANY LLC	93-4940767	0.02	0

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RHINOAI	36-4961887	0.04	0
RJ TELECOMMUNICATIONS INC	38-3345287	0.01	0
SCOREPLAY INC	92-0919228	0.02	0
SQUAN CONSTRUCTION SERVICES LLC	20-4224437	0.03	0
STRUCTURED SOCIAL LLC	81-5272895	0.01	0
SUPERMOVE INC	61-1937019	0.05	0
SUPPLY WISDOM INC	84-4016410	0.09	0
SURFACE TECH LLC	46-3382368	0.02	0
TAHOE CREATIONS	94-3387430	0.01	0

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TORQ TECHNOLOGIES INC	85-1047671	0.03	0
TRICON INFOTECH LLC	81-0958112	0.01	0
TRUE AVIATION CHARTER SERVICES LLC	26-2934850	0.07	0
UNITED AMERICAN INDUSTRIES INC DBA WISDOM NATURAL BRANDS	86-0505744	0.10	0
UNIVERSAL EBUSINESS LLC	20-5092680	0.14	0
UNIVERSAL NETWORK SERVICES LLC	99-0476018	0.03	0
WHITEHALL SURGERY CENTER	31-1479613	0.10	0
WILLIAM MCCONNELL SON INC DBA THE KINGS JEWELERS	94-2429382	0.02	0
ZENNER INC	32-0611096	0.03	0

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ZIGABYTE CORPORATION	46-3028474	0.02	0
ZIP BIO INC	92-3023932	0.01	0
10232 LLC	83-4653959	0.00	64
1ST CHOICE RESTORATION INC	46-1555546	0.00	116276
1X PLASTICS DBA OF SHOWME PLASTICS	45-2550125	0.00	23353
3 SEASONS LAWN LANDSCAPING INC3 SEASONS LAWN PEST	59-3105505	0.00	0
365 HEALTH CARE GROUP PLC	83-2564930	0.00	971
3E J LLC DBA TOWN SQUARE NW AUSTIN TX	84-4485472	0.00	9373
3KC INC	71-0845063	0.00	19444

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4M ANALYTICS INC	87-2152784	0.00	0
7FIGURE GODDESS LLC	45-2696672	0.00	308395
7TH LEGACY LLC	83-4694947	0.00	86
A J RX CORPORATION DBA MEDICAP PHARMACY	84-4321411	0.00	3781
A KIDS PLACE CHILDRENS PROGRAMS LLC	38-3976836	0.00	6400
AAQUA BV	86-3393218	0.00	12008
ABACUS SEARCH STAFFING LLC	20-2590096	0.00	4766
ABIO INC	47-5309620	0.00	2604
ABSOLUTE DUCT AND CHIMNEY CLEANING INC	82-0627313	0.00	7020

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ABSOLUTE ROOFING CONSTRUCTION INC	45-4010366	0.00	147678
ABW SOLUTIONS LLC	26-2463538	0.00	40229
ACCARDI CLINICAL SERVICES INC	59-3532289	0.00	399
ACCEL EMPLOYMENT INC	01-0560986	0.00	14919
ACCESS ADVANTAGE LLC	20-8285914	0.00	0
ACCESS ED HR CHARLEVOIX MONTESSORI	12-3488888	0.00	1199
ACCESS ED HR FRANCIS STREET PRIMARY	46-3179950	0.00	5368
ACCESS ED HR GENESEE STEM ACADEMY	46-3079981	0.00	22300
ACCESS ED HR GREENSPIRE	46-3079952	0.00	81041

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ACCESS ED HR LLC MICHIGAN ONLINE SCHOOL	46-3079961	0.00	13828
ACCESS ED HR NEW SCHOOL HIGH	46-3079960	0.00	2762
ACCESS ED HR WOODLAND SCHOOLS	46-3079954	0.00	1206405
ACK OF SOUTH CAROLINA LLC	27-0382203	0.00	5798
ACKLEY SHEETMETAL INC	75-3023063	0.00	293613
ACORN VETERINARY CORP PC DBA WHOLE PET VETERINARY CENTER	45-2214137	0.00	19899
ADA HEALTH INC	56-2399046	0.00	0
ADAPTIVE SHIELD INC	87-4232783	0.00	0
ADVANCE REPROGRAPHICS	33-0783990	0.00	249410

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ADVANCED CONSTRUCTION SYSTEMS LLC	83-4028262	0.00	52
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ADVANCED ENTERPRISE SYSTEMS CORPORATION	27-4907219	0.00	450502
ADVANCED MECHANICAL ARIZONA LLC DBA GRAZAKSWISHER HVAC	99-0789572	0.00	0
ADVANCED OUTDOOR SOLUTIONS LLC	46-4405077	0.00	10873
AEML INC	20-4389763	0.00	122950
AG FERTILIZERS INC	26-4815283	0.00	40471
AGENCY MATRIX LLC	26-4766846	0.00	476
AGS WHOLESALERS INC	33-0452322	0.00	20534

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AIR QUALITY HEATING AIR CONDITIONING INC	77-0553820	0.00	110612
AIRE TEXAS RESIDENTIAL SERVICES	37-1712957	0.00	17707
AKEYLESS SECURITY USA INC	61-1961761	0.00	2569
ALC US LLC	87-1146180	0.00	0
ALEPH FARMS INC	61-2030503	0.00	7431
ALEXANDER ACCOUNTING LLC	93-3111198	0.00	0
ALFA COUNSELING AND CONSULTATION LLC	46-4479011	0.00	20512
ALGOPIX HOLDINGS US INC	82-1275448	0.00	60989
ALL ABOUT KIDS LEARNING CENTER LLC	26-4100670	0.00	119631

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ALLEGAN COUNTY RESOURCE DEVELOPMENT COMMITTEE	38-1790220	0.00	237
ALLIED MACHINE WORK	20-3677496	0.00	0
ALMEIDA LAW GROUP LLC	92-0421463	0.00	0
ALPHA MARBLE INC	65-0117461	0.00	13991
ALYSSAS LLC	20-0629988	0.00	0
AMBLITEL LLC	27-0757675	0.00	412
AMERICAN STEEL INC	81-0519973	0.00	0
ANCHORAGE SPORTPLEX DBA THE DOME	30-0274501	0.00	0
ANCIENT AND ACCEPTED SCOTTISH RITE BODIES OF SAN DIEGO DBA	95-6035851	0.00	31197

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ANN ARBOR BOARD OF REALTORS	38-0303899	0.00	19245
ANTIDOTE AI HEALTH INC	85-3535641	0.00	38424
ANTS TRUCKING LLC	27-2216653	0.00	217177
APEX RENOVATION CONSTRUCTION LLC	83-1409972	0.00	12467
APOGEE ADVISORS LLC	46-3623619	0.00	0
APORIA TECHNOLOGIES INC	86-2473962	0.00	53941
APPLEGATE INSULATION	38-3507880	0.00	647432
APSNISSAN	13-4361519	0.00	27482
APTIVIO INC	82-5500309	0.00	0

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AQUA PLASTICS INC	20-4622124	0.00	11510
AQUAEL PRODUCTS USA LLC	82-1420931	0.00	0
ARCHERS AUTO CARE INC	62-1407533	0.00	16660
ARIZONA HISPANIC CHAMBER OF COMMERCE	86-0445372	0.00	0
ARIZONA NATURAL PAIN SOLUTIONS	46-1963255	0.00	151
ARMSTRONG CRAVEN INC	30-1058885	0.00	57512
ARROWHEAD INCUBATOR INC	84-3631006	0.00	8167
ARTEL LLC	25-3513966	0.00	353346
ARTEVA HOMES INC ARTERRA REALTY LLC	20-5071106	0.00	71967

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ASCOT SUPPLY CORPORATION	36-2703571	0.00	0
ASH GROUP OF FLORIDA INC	82-4963589	0.00	264
ASOCS INC	82-2097426	0.00	96682
ASSOCIATED SURGICAL CENTER OF DEARBORN LLC	27-5209399	0.00	0
ASSOCIATION OF RECIPROCAL SAFETY COUNCILS	76-0565198	0.00	10540
ATLANTIC STATE DEVELOPMENT CORP	20-1822749	0.00	12543
ATMOSEC	86-2640661	0.00	8885
AUBURN ANIMAL HOSPITAL	38-3613092	0.00	53258
AUL PIPE TUBING AND STEEL INC	95-2943670	0.00	63096

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
AUSTIN ADVENTURES INC	27-3968245	0.00	98948
AUTHENTIC AQUARIUMS LLC	93-3843929	0.00	181
AUTOMATED MACHINERY INC	31-1109411	0.00	0
AUTOMOTIVE CORE SUPPLY OF GEORGIA LLC	26-2139899	0.00	26610
AVIAN INNOVATIONS LLC	83-3090025	0.00	21919
AVITUS DENTAL MANAGEMENT SOLUTIONS	81-0986882	0.00	4666
AYAAN CELL INC	47-1288768	0.00	14621
B L LANDSCAPING	38-3285871	0.00	4933
B M STAFFING INC	47-4766780	0.00	91950

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Part II Participating Employer Information (Continued).

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B Z PRINTING INC	33-0053338	0.00	1952
BATTLE CREEK AREA HABITAT FOR HUMANITY	38-2846821	0.00	6002
BEACON CONSTRUCTION GROUP	74-3257251	0.00	62865
BEAMUP INC	88-3364586	0.00	39406
BEAVERTON APPLIANCE PARTS SERVICE	47-2052695	0.00	2696
BECKLEY SALES INC	31-1497988	0.00	0
BEE INTERNATIONAL INC	06-1707123	0.00	757207
BELLING DENTAL PC	32-0226455	0.00	0
BETH SCALONE PT INC	33-0988741	0.00	0

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BETI TECHNOLOGIES INC	87-4689499	0.00	0
BEYONDMINDS US INC	85-3945926	0.00	11211
BLUECUBE TECHNOLOGY SOLUTIONS	86-1531259	0.00	1988
BLYP INC	86-3324219	0.00	31834
BMLL TECHNOLOGIES INC	36-5051299	0.00	0
BPSI SUPPORT SERVICES LLC	88-1908233	0.00	4982
BROWN FAMILY MINISTRIES	26-4659508	0.00	86
BUCKS T4 HOSPITALITY INC	27-4169533	0.00	104903
BURNING GLASS CONSULTING	46-3090857	0.00	0

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BUSINESS TRANSITION 360 LLC	45-4683438	0.00	69
BUYWITH INC	32-0677841	0.00	6225
C ADAM TONEY DISCOUNT TIRES INC	55-0652562	0.00	3043
C S MACHINE CO INC	58-1598324	0.00	14843
C THE SIGNS INC	61-2028055	0.00	510
CALIFORNIA INDOOR COMFORT INC	20-8974189	0.00	0
CALIFORNIA LEAK DETECTION SPECIALISTS INC	81-0622278	0.00	9336
CALWORKSAFETY HR LLC	82-4130680	0.00	11038
CAMALLERGY INC	10-0919847	0.00	147

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CAMELLIA CATERING LLC	36-5026566	0.00	23485
CAMP VERDE RV AUTO COLLISION REPAIRS DBA VINCES AUTO BODY	84-4979542	0.00	505
CANYON CONSTRUCTION COMPANY	76-0539064	0.00	822
CAPITAL AREA BINS LLC	83-1880484	0.00	0
CAREBOOK TECHNOLOGIES US INC	86-6755706	0.00	1400
CASEY CONSTRUCTION COMPANY INC DBA CASEY EQUIPMENT CASEY CO	27-4619316	0.00	5867
CATAMOUNT CARPET OF THE BERKSHIRES INC	20-5680997	0.00	9479
CEN CAL INSURANCE SERVICES LLC	68-0120370	0.00	9284
CENTER FOR FREEDOM AND SAFETY	83-2605379	0.00	0

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CENTER FOR SPECIALIZED SURGERY LLC	46-4609402	0.00	135305
CENTURY FINANCIAL SERVICES INC	06-1110797	0.00	16400
CERTIFIED PROPERTY MANAGEMENT INC	20-4075381	0.00	41360
CES INC	57-0966817	0.00	53395
CH PATRICK COMPANY INC	56-2228993	0.00	15869
CHADHAM BY THE SEA HOMEOWNERS ASSO INC	59-3066644	0.00	0
CHEF SUPPLY LLC	26-3233993	0.00	0
CHILDERS MANAGEMENT SERVICES	55-0730207	0.00	0
CIRCLE ROCK LLC	82-4028923	0.00	0

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CITIZENS FOR TRADITIONAL VALUES	38-2701546	0.00	17001
CLASSIC INSTALLATION LLCWINDOW CLASSICS CORPORATION	20-4812756	0.00	0
CLASSIC MARBLE	26-1603659	0.00	23195
CLEW MEDICAL INC	81-1810440	0.00	6048
CLIMATE CONTROL HEATING AC INC	20-0410875	0.00	7842
CLINONE INC	47-1280690	0.00	55703
CLUB FUGAZI EXPERIENCE LLC	86-1938711	0.00	0
COACH WIN INC	92-2039674	0.00	0
COASTAL BEND HOME SERVICES LLC	83-2174228	0.00	14497

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COASTAL LOGISTICS INC COADOPTING COMPANIES	20-0662453	0.00	0
COCACOLA BOTTLING CO OF SANTA FE INC	85-0098195	0.00	0
COGAR ENTERPRISES LLC	55-0691888	0.00	0
COHO AI INC	93-1373386	0.00	3411
COMMLOANCOM INC	45-5678756	0.00	49873
COMMUNITY AGING RETIREMENT SERVICES INC	23-7348090	0.00	111533
COMPASS HOMES INC	31-1734264	0.00	0
CONCIERGE NURSING DIRECT INC	27-0224836	0.00	60624
CONNEXUS HOLDINGS	87-3300999	0.00	11587

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CONSTRU INC	38-4134722	0.00	87468
COOL ACE AIR LLC DBA ACE HOME SERVICESACE AIRLLCACE MECH	90-0922159	0.00	52520
COPPER CREEK LLC	82-3441311	0.00	33266
CORPORATE DIRECTORS FORUM	33-0459645	0.00	34278
COSENTUS LLC	83-3393137	0.00	173335
COUNTRY VILLAGE POWER	54-2137825	0.00	26896
CRUISE AND TOUR LLC	83-2256168	0.00	9976
CULINARY STAFFING OF AMERICA	05-0560487	0.00	1061
CUSTOM PACK INC	47-0530324	0.00	257844

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CUTANEOUS LYMPHOMA	38-3443135	0.00	223
CYBERCATCH INC	84-2431198	0.00	0
CYMBIO DIGITAL INC	87-4407024	0.00	179449
DAISY INC	36-4953434	0.00	7005
DANTE IN DUNDEE LLC	26-2812860	0.00	140806
DATOS INC	85-3818243	0.00	24832
DAVE SHAPIRO DBA RK ELECTRIC	26-4035786	0.00	52770
DC POWER SPECIALIST LLC	52-2196251	0.00	0
DECIAI	61-1947087	0.00	28883

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DECISION MANAGEMENT INTL HEALTH CARE GROUP INC	59-3355764	0.00	98866
DEL TORO EDUCATION CORPORATION DBA ALL ABOUT KIDS NEW ALBANY	84-2746793	0.00	9651
DELANEY MANUFACTURING INC	45-1022693	0.00	0
DENVER COLE FARMS LLC	86-3949021	0.00	33191
DEPARTURE TRAVEL MANAGEMENT LLC	38-3490635	0.00	0
DESIGN TREE ENGINEERING	20-5205210	0.00	0
DETOXIFY LLC	38-3713900	0.00	0
DFC TRANSPORTATION AND LOGISTICS	83-4717605	0.00	10194
DH CONTRACT SERVICES	47-3884496	0.00	58

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DIABLO HOLDING COMPANY LLC	92-0609805	0.00	11279
DIAMOND GLASS BOZEMAN LLC	80-0782734	0.00	1655
DIMILL ENTERPRISES LLC	46-0536292	0.00	46710
DIVERSIFIED ASSOCIATION MANAGEMENT INC	38-3790831	0.00	215
DJM INTERNATIONAL ENTERPRISES DBA ASTRO AUTO SALVAGE	59-2667046	0.00	83
DKRH ENTERPRISES LLC	16-1663608	0.00	3728732
DL ENGINEERING TECHNOLOGY DBA RYTAM TECHNOLOGY INC	38-3143834	0.00	102753
DOLCEFINO COMMUNICATIONS LLC	46-1444999	0.00	376
DONEEN ELECTRIC INC	41-2030766	0.00	0

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DOUGLAS SMITH DBA PRESTIGE ELECTRIC SERVICE	20-1643519	0.00	59616
DR VAPE IT LLC	46-4236526	0.00	1055
DREAMED DIABETES INC	86-3707980	0.00	0
DRK ENTERPRISES LLC DBA MR ELECTRIC OF WICHITA	81-2738519	0.00	113688
DROUGHT PROPERTIES INC	74-2765024	0.00	1064880
DUNHAM PRODUCTS INC	34-0687958	0.00	0
DUNWOODY CHAMBER OF COMMERCE DBA DUNWOODY PERIMETER CHAMBER	26-3082325	0.00	39270
DUSCANY LLC	20-2712649	0.00	0
DW TRUCK LINES INC	55-0384610	0.00	81928

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EARNINGS FROM LEARNINGS LLC DBA ALL ABOUT KIDS ANDERSON	21-3557921	0.00	0
ECLECTRIC ELECTRIC SERVICE LLC DBA MR ELECTRIC OF COLUMBIA	27-3109205	0.00	0
ECONCRETE INC	32-0489644	0.00	0
ECTON INC	93-4434170	0.00	4608
EGATEWAY CAPITAL LLC	86-2019903	0.00	17773
ELEGUS EPS LLC	61-1799342	0.00	28309
ELEMENT TWO ENTERPRISES INC DBA WALES GARAGE	59-2339983	0.00	0
ELLIOTT CAPITAL INC DBA GRAVITATE	84-2992875	0.00	0
EMPOWRU INC	83-2524325	0.00	45308

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ENACT INC	65-1314136	0.00	231750
ENHANCED COMMUNICATIONS NETWORKSINC DBA ASIAN AMERICAN	22-3558165	0.00	230444
ENSO SECURITY INC	88-4142035	0.00	1355
ENTERONE CORPORATION	64-0959993	0.00	0
ENTREPRENEURS ORGANIZATION OF DC	54-2057512	0.00	32159
ESPARZA PEST CONTROL OF CORPUS CHRISTI	74-2946894	0.00	63882
ESTRA AUTOMOTIVE SYSTEMS CO LTD	98-0610301	0.00	1344293
EUPHORIA LLC DBA THE CAZBAH	57-1106633	0.00	0
EXPRESS MEDICAL MANAGEMENT LLC	84-2363795	0.00	0

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EYE CARE PROFESSIONALS LLC	46-4419862	0.00	1033807
FABRICATIONS PLUS LLC	38-3345140	0.00	201064
FAMILY PHARMACY	92-0165500	0.00	11391
FAWN CIRCLE LLC	81-2876621	0.00	24704
FBCC HOLDINGS LLC	46-1805589	0.00	81653
FERN HEALTH	83-4408176	0.00	447657
FERNISHED INC DBA FERNISH	37-1872998	0.00	187660
FERROCRETE BUILDERS INC	27-2696413	0.00	4261
FETZER ENTERPRISES INC	74-1860789	0.00	42521

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
FIBERMARK MARK THE CARPETBAGGER INC	51-0445903	0.00	19844
FJ TRUCKING INC	27-2077422	0.00	5645
FLASHOVER MAINTENANCE LLC	82-0702465	0.00	0
FLEET SOLUTION EXPERTS INC	82-0918978	0.00	25999
FOCAL POINT COMMUNICATION LLC	02-0493475	0.00	44726
FOLLROD ENTERPRISES INC DBA ECONOMIC APPLIANCE REPAIR	85-1767415	0.00	3986
FOUNDERS FACTORY NEW YORK LLC	84-3667930	0.00	115088
G2 VENTURES LLC DBA MR APPLIANCE OF MIDTOWN	90-0822872	0.00	14039
GAPPS	81-4625437	0.00	0

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GATCHELL EARTH LLC	81-5431234	0.00	132600
GC CORP PARTICIPATING EMPLOYERS	90-0994010	0.00	3693
GENESEE COUNTY BAR ASSOCIATION	38-6094459	0.00	15332
GENEYX INC	61-1987173	0.00	61725
GLACIER POWER SOLUTIONS LLC	84-3917552	0.00	0
GLEASONINESON STONE SUPPLIERS INC	81-0584170	0.00	0
GLOBACAP INC	93-2498044	0.00	0
GLOBAL CENTURY INSURANCE BROKERS INC	41-2135118	0.00	542240
GLOBAL PRODUCTIVITY SOLUTIONS LLC	38-3540968	0.00	1018388

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GMT SERVICE CORP	76-0561254	0.00	94301
GOLDEN MAILER INC	68-0037175	0.00	42917
GOMBOC AI INC	88-2277252	0.00	0
GOOD NEIGHBOR SPECIALTY FOODS LLC	16-1707374	0.00	32257
GR OPERATIONS LLC	86-3238220	0.00	103388
GRAND BOULE OF THE SIGMA PI PHI FRATERNITY	59-1314521	0.00	25856
GRAND CIRCUS DETROIT LLC	46-2170503	0.00	100227
GRAPPA TECHNOLOGIES INC	88-1619010	0.00	66728
GREAT LAKES DOCK DOOR LLC	20-0737131	0.00	376576

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GREENWICH RETAIL GROUP LLC	81-3753058	0.00	349961
GREGORIES	33-0802634	0.00	8690
H H EQUIPMENT INCDBA LEWIS LEWIS COMPUTER STORE	92-0121525	0.00	245959
HABITAT FOR HUMANITY OF MICHIGAN INC	38-3142455	0.00	0
HALES LOCATION GOLF COURSE	02-0496312	0.00	7305
HALITICS	83-3413131	0.00	70802
HANSON TRUSS COMPONENTS INC	45-5639272	0.00	135284
HARBOR AMERICA SPECIALTY BROKERAGE LLC	20-3829069	0.00	270042
HARBOR AMERICA SUSPENSE PLAN	75-2727272	0.00	163247

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HARD CORE DRILLING PROFESSIONALS LLC	83-2030288	0.00	30562
HCSG GROUP 11	47-3306490	0.00	3025
HCSG GROUP 12	23-2018555	0.00	96
HCSG GROUP 13	22-5562221	0.00	1161
HCSG GROUP 15	22-2111555	0.00	30260
HCSG GROUP 18	22-2222553	0.00	16549
HCSG GROUP 2	47-3306477	0.00	83127
HCSG GROUP 21	22-5545622	0.00	29885
HCSG GROUP 22	22-5545623	0.00	45995

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HCSG GROUP 27	47-3306481	0.00	10656
HCSG GROUP 28	47-3306482	0.00	27860
HCSG GROUP 29	47-3306483	0.00	16734
HCSG GROUP 34	95-6321451	0.00	1977
HCSG GROUP 36	56-1727729	0.00	1708
HCSG GROUP 37 OAKLAND CARE FACILITY	45-3212412	0.00	2650
HCSG GROUP 38	47-3306000	0.00	273
HCSG GROUP 39	47-3300004	0.00	84896
HCSG GROUP 4	47-3306476	0.00	48850

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HCSG GROUP 6	47-3306478	0.00	62196
HCSG GROUP 8	47-3306474	0.00	41445
HCSG GROUP 9	46-3333225	0.00	11761
HEALTH CARE ADVANTAGE LLC	81-3903416	0.00	184106
HEALTH HOPE PHARMA INC	93-2540874	0.00	9689
HEALTHLYNKED CORP PARTICIPATING EMPLOYERS	47-1634127	0.00	4799
HELP ME SEE INC	27-3207754	0.00	0
HENRY BATH LLC	02-0566977	0.00	43261
HH WATER INC	20-8941635	0.00	0

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HIG RESOURCES NORTH AMERICA LTD CO	88-2759918	0.00	0
HIGHSTEELE LANDSCAPING AND HOME IMPROVEMENT LLC	47-3267844	0.00	100537
HLJ FOODS INC	82-0713094	0.00	2783
HOLLAND AC AND HEATING	26-1450131	0.00	28294
HOME ADVANTAGE DIALYSIS	82-2732515	0.00	0
HOME BREATHING CARE LLC	52-2391058	0.00	0
HOMES IN PROGRESS INC	68-0595883	0.00	57212
HOMETOWN PREOWNED VEHICLES DBA HYUNDAI BECKLEY	47-0852865	0.00	220142
HOMEZ INC	35-2733051	0.00	26137

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HOPE RISING DETOX AND REHAB LLC	45-5632534	0.00	13311
HOPE UNITY FREEDOM CENTER INC	32-0505243	0.00	65
HOTWELL US LLC	45-3650073	0.00	140650
HOUSTON GENERAL INSURANCE MANAGEMENT COMPANY INC	20-0890144	0.00	2893
HOUSTON RESPONDS	82-4354555	0.00	2532
HUBBLE TERMITE MANAGEMENT	46-2791560	0.00	15723
HUMAN CAPITAL SUSPENSE	42-5645145	0.00	0
HUMANE SOCIETY OF BAY COUNTY INC	59-2097704	0.00	326
HUNTER MODULAR CONSTRUCTION INC	43-1667167	0.00	14961

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HUSSONS INC DBA HUSSONS PIZZA	55-0572016	0.00	135780
HVAC USA CORP DBA OLDACH	47-1664413	0.00	34008
HVMS LLC	47-1974575	0.00	37226
HYBRID MACHINING INC	84-3116424	0.00	12521
IDENTIQ INC	84-4758725	0.00	300280
IEMPLOYEE SERVICES LLC DBA AUXILIARY GROUP	83-2922036	0.00	0
IHG HEALTHCARE INC	20-0268173	0.00	68790
IIVI FOUNDATION	20-8824719	0.00	0
IMPERIAL FLEET SERVICE LLC	83-0657239	0.00	12756

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IN OUR BACKYARDS INC	26-3283639	0.00	354849
INCITUAR INC	86-2579903	0.00	6256
INDEPENDENCE WEALTH PARTNERS LLC	92-0586226	0.00	9921
INDIE FLOW INC	35-2684553	0.00	110
INDUSTRIAL SYSTEMS CONSULTING LLC	51-0667158	0.00	205651
INMATE PHYSICIANS SERVICES	58-2649279	0.00	20158
INNOVATIVE SOLUTIONS LLC	27-1931534	0.00	133560
INSPECTIX	82-1125666	0.00	14893
INST OF HEALTH BEHAVIORAL MEDICINE MEDICAL PSYCHOLOGY	81-4912967	0.00	0

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INSURANCE BROKERS OF GEORGIA INC	58-1971851	0.00	0
INTERNATIONAL AERO SERVICES LLC	33-0758299	0.00	224215
INTIGUA INC	27-2129581	0.00	49561
IP SECURITY REPS	20-8419840	0.00	68
IRON HORSE SURGERY CENTER	81-4619006	0.00	13315
IWASA EYE CENTER	82-0368134	0.00	176113
J H OFFICE EQUIPMENT INC	81-0341266	0.00	453772
JACK C CARMENITA DBA MR ROOTER PLUMBING MONTEREY	77-0344765	0.00	968
JB JL ENTERPRISES	80-2734960	0.00	118291

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JC BECK ENTERPRISES LLC	87-3885297	0.00	32227
JC ENTERPRISES	20-8385733	0.00	416291
JL OF MS INC	27-1973385	0.00	4144
JOB IMPULSE	46-4944592	0.00	2231
JOEY L ADKINS DDS PLLC DBA ELK FAMILY DENTISTRY	20-3235763	0.00	0
JONES HEAVY HAUL INC	04-3813688	0.00	148171
JONES WATER TRUCKS INC	04-3813699	0.00	33177
JOURNEY21 SERVICES LLC	87-3864132	0.00	0
JRW SERVICES INC DBA RIGHT AT HOME TRICOUNTY METRO	20-8599282	0.00	377

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KALISPELL GOLF ASSOCIATION INC	81-0267713	0.00	136690
KANSAS CITY MEDICAL SOCIETY FOUNDATION	56-2552704	0.00	0
KATHERINE M CYRAN MD LLC	45-3967050	0.00	0
KBI INDUSTRIES INC	81-0679625	0.00	1445
KELLY FAETANINI LLC	45-4135426	0.00	27250
KIDS KARE PEDIATRICS PC	86-1041571	0.00	125569
KIMBERLY ENTERTAINMENT LLC DBA BIG RIVER BOWLING	47-5443159	0.00	68
KITOV SYSTEMS INC	84-3681211	0.00	93580
KLEOS SPACE INC	84-3501500	0.00	209530

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KM HIGHLINE LLC	45-3748852	0.00	140928
KNUTEC LLC	81-4063377	0.00	54
KSA FARMS LLC	47-1716282	0.00	8510
KVH APPLIANCE REPAIR LLC	27-1490925	0.00	5290
L L MONARCH INC	87-0969833	0.00	131949
LA MANCHESTER PIZZA INC	47-2145696	0.00	48144
LADV MANAGEMENT LLC	26-1403488	0.00	1350683
LADY VISTA LLC	46-5495638	0.00	7950
LAMINAR INC	85-4129031	0.00	2838

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LANEFINDER WORKFORCE SOLUTIONS LLC	88-1858994	0.00	12963
LAW OFFICES OF I DAVID SMALL	56-5745377	0.00	95684
LEGACY	82-2338241	0.00	0
LEGACY CORP LLC DBA HAZEL SEYBERT CONSULTING	83-3571091	0.00	3723
LEGION LOGISTICS LLC	27-0890289	0.00	0
LEMORE TRANSPORTATION INC DBA ROYAL TRUCKING	94-1656391	0.00	588002
LENDAI USA INC	85-0887376	0.00	5443
LEO BERWICK LP	84-4200344	0.00	0
LOGO LOC INC	35-2553440	0.00	42091

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
LORDS LAMBS CHILD CARE LLC	36-4845232	0.00	61311
LOUD AND CLEAR INC	87-2952834	0.00	5295
LOUISIANAS FIRST CHOICE AUTO AUCTION LLC	76-0665727	0.00	56779
LUNDEQUAM DEVELOPMENT LLC DBA LUNDEV	27-0898651	0.00	56151
LUXE SALON SPA LLC	81-4884991	0.00	28524
LYNC HOLDCO INC	93-2074880	0.00	0
M SOHAIL JILANI MD	20-0566194	0.00	86
MAGTECH LLC	83-4656274	0.00	13739
MAJESTIC SOTERIA USA LLC	85-0699982	0.00	74659

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MAPLE ISLAND LOG HOMESTIMELESS WOOD CARE	38-2479927	0.00	100846
MARE RIDING CENTER	77-0297678	0.00	3020
MAREADY MEDICAL	27-1359001	0.00	7727
MARK OLCOTT MD INC DBA MISSION MEDICAL SUPPORT	81-4376359	0.00	0
MARY E BARNA DPM ASSOCIATES PC	38-2804759	0.00	116989
MATANUSKA TOWING RECOVERY INC	92-0141621	0.00	119494
MAXON REPAIR GROUP LLC	83-0597580	0.00	1091
MCLAREN MASONRY INC	20-1030543	0.00	1756
MEC ELECTRICAL CONTRACTORS INC	34-2025489	0.00	0

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MEC TECHNOLOGIES INC	47-2527593	0.00	0
MEDCASE HEALTH INC	82-2405469	0.00	7789
MEDIA 3 TECHNOLOGIES LLC	04-3390890	0.00	135579
MEDICA BILLING SOLUTIONS	56-2336477	0.00	69006
MEDINA RECYCLING INC	34-1139526	0.00	764877
MEDSEARCH FINANCIAL INC	33-1036044	0.00	148375
METRO COURIER SERVICES INC	59-2485372	0.00	14364
MICHAEL HARDCASTLE DDS DBA VILLAGE DENTAL CARE	47-3296913	0.00	19381
MICHAELIAN ENDODONTIC DENTAL GROUP INC DBA BAY AREA ENDO	81-3204246	0.00	18495

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MIDTOWN PERSONNEL INC	52-1645512	0.00	131
MIKES TRUCKING LTD	31-1326535	0.00	38734
MILLARD FAMILY DENTISTRY	83-1821050	0.00	95835
MIS SOLUTIONS LLC	80-0062063	0.00	0
MKIND INC	39-2071132	0.00	10856
MODERN FANATIC LLC	85-2499433	0.00	0
MONARCH COUNTRY CLUB HOMEOWNERS ASSOCIATION INC	59-2794647	0.00	93433
MONITORED THERAPEUTICS INC	45-3997071	0.00	51
MORLEY MASON PLC	26-1279021	0.00	6304

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MORNINGSTAR LEARNING CENTER	20-5113402	0.00	96960
MOTHERSHIP ENTERTAINMENT LLC	90-1018706	0.00	86575
MP RELOCATION INC DBA MOVE PLUS RELOCATION SERVICES	47-2824571	0.00	624
MR SOMERS CONSTRUCTION INC	33-0460348	0.00	1245030
MUNETRIX LLC	27-2386087	0.00	0
MURPHY TRANSPORTATION INC	31-1190302	0.00	231321
MY BACKYARD SPORTS LLC	82-1314214	0.00	0
MYHOMEDOC INC	86-1976507	0.00	106928
NATELLA INVESTMENT CORP DBA PRIME POOL SERVICE	20-2470173	0.00	2400

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NATIONAL EARTH SCIENCE TEACHERS ASSOCIATION	38-2602114	0.00	178367
NATURE LIFE FORMS LLC	83-1121530	0.00	2394
NEW ENGLAND HOME PERFORMANCE KINGS	14-1864704	0.00	110
NEWCOVID LLC DBA NINES	85-0820061	0.00	2249
NEWEGG STAFFING INC	27-4834118	0.00	562
NIGHTS ENTERTAINMENT INC	88-2439520	0.00	8114
NO DIGTEC LLC	36-4563359	0.00	218
NOMINAL ERP INC	92-2725121	0.00	0
NONAME GATE INC	85-3256389	0.00	0

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NORA MEDICAL INC DBA YOUTHOLOGY	83-0871243	0.00	9354
NORCAL ORTHOPEDIC SURGERY CENTER LLC	26-3588724	0.00	86804
NORTHEAST BASEMENT SYSTEMS LLC	46-5180457	0.00	42663
NOVO DR INC	87-3455569	0.00	0
NYRN MANAGEMENT LLC	83-4721724	0.00	3741
OAKLAND MACOMB ORTHOPEDIC SURGEONS	45-4154640	0.00	11277
OCEANS FOUR CONDOMINIUM ASSOCIATION INC	59-2067988	0.00	0
ODIN VENTURES INCDBA DREAMMAKER BATH KITCHEN BY WORLDWIDE	41-1870399	0.00	0
OLMAN INC DBA HUSSONS PIZZA	55-0660267	0.00	80775

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OMCAN INC	35-2535880	0.00	167743
OMNI WELLNESS GROUP LLC	38-4056612	0.00	9461
ONE STOP EMPLOYMENT	81-4945636	0.00	5147
ONYX MANUFACTURING	46-2588908	0.00	43156
OOH DE LALLY	93-2833689	0.00	0
OWL INC DBA OILFIELD WASTE LOGISTICS	90-0932927	0.00	0
PAINTS WELL WITH COLOR LLC	55-0826405	0.00	59
PAPER CRANES HEALTHCARE LLC	81-3084282	0.00	382206
PARADYME TECHNICAL SERVICES	27-1811177	0.00	407104

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PARIS ACADEMIES OF COMPELLING EDUCATION INC	81-2446287	0.00	8540
PARK PLACE AMBULATORY SURGERY CENTER	82-2031466	0.00	36641
PARTNERHACKER	98-1710398	0.00	83227
PAYEM INC	84-2476411	0.00	9188
PC PROCESSING INC	58-2040836	0.00	249484
PEAK AI USA	87-1896674	0.00	28437
PECAN AI USA INC	85-1279867	0.00	59785
PERFORMANCE INDUSTRIES INC	81-2004781	0.00	0
PERRYSBURG FAMILY PHYSICIANS LLC	41-2168052	0.00	194914

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PFG AMERICA LLC	32-0530185	0.00	0
PGR USA INC	35-2600632	0.00	24825
PHILIPSBURG BREWING COMPANY LLC	45-2650222	0.00	39779
PHILLIPS ENVIROMENTAL PRODUCTS INC DBA CLEAN WASTE	81-0526705	0.00	49892
PIONEER BASEMENT SOLUTIONS	34-1755186	0.00	2201
PIVOT SERVICES LLC PARTICIPATING EMPLOYERS	86-2250898	0.00	363172
PJS TOWING LLC	46-5346033	0.00	0
PLANT DEVAS INC EVANHEALY SKIN CARE	80-0255999	0.00	79
PLATIMUM EXPRESS	32-0095188	0.00	345

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PLEASANTON SURGERY CENTER LLC	56-2629045	0.00	405405
PONDEROSA VISION	84-1217081	0.00	16506
POPCORN INSURANCE AGENCY LLC	86-3830849	0.00	36041
POST FRAME SPECIALISTS INC	26-4150842	0.00	728
PRECISE BIO INC	47-4571992	0.00	177287
PREMIER COLLISION CENTER INC	58-2268255	0.00	27845
PREMIER HEALTHCARE GROUP LLC	81-1502201	0.00	27544
PREMIERE POWERLINE CONSTRUCTION LLC	47-5660939	0.00	5091
PRIORITY GOVERNMENT SOLUTIONS	30-0921695	0.00	57364

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PRIORITY TECHNOLOGIES INC	47-0798739	0.00	321438
PRO CUT LAWN LANDSCAPE INC	84-1662527	0.00	39507
PRO EMPLOYER STAFFING LLC	84-4662647	0.00	26291
PROACTIVE RISK SOLUTIONS LLC	47-3428642	0.00	338213
PROGGIO INC	37-2018267	0.00	0
PROMO TECHNOLOGIES LLC	87-1639427	0.00	26460
PROTHELIA INC	32-0224090	0.00	58437
PSH GROUP LLC	82-2816130	0.00	101
QUALITY EMPLOYMENT MULTI SERVICES INC	45-4591383	0.00	466

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QUALITY TRUCK REPAIR INC	81-0538859	0.00	331
QWAK AI US INC	37-2047815	0.00	0
R J MAYO LLC	27-3315002	0.00	11942
RAMCO ERECTORS INC	76-0337510	0.00	121561
RAMSTAR RENOVATIONS LLC	27-3053182	0.00	73193
RANCHO HOLDING COMPANY LLC	92-0591449	0.00	4238
RC TAYLOR DBA SOUTHWEST PARTITIONS	86-0355088	0.00	115117
RCOZ TAMPA LLC	88-3572742	0.00	0
RE LOGIX INC	82-0947147	0.00	7078

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RE MANAGEMENT	90-0921792	0.00	0
READTHEORY EDUCATION SERVICES INC	84-1858914	0.00	186
REAL ESTATE SYSTEMS	83-0270386	0.00	97695
REAX BIOTECHNOLOGIES INC	86-2989681	0.00	0
RED BONE SERVICES LLC	20-5877074	0.00	4418
REDEIFNE TECHNOLOGIES INC	38-4229790	0.00	61852
REED ELMQUIST PC	26-1642838	0.00	212646
REGENCY OFFICE AND PROMOTIONAL PRODUCTS	75-2141208	0.00	16499
REM LIVING LLC	85-3448856	0.00	58693

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RESINOPLAST USA INC	47-4865791	0.00	43989
RESTORE MAX LLC	20-1717635	0.00	152531
RETIREMENT PLANS DEPARTMENT OF MMGP	23-2727566	0.00	2070
RETRAINAI INC	85-1797900	0.00	0
RIDGEROCK TOOLS INC	71-0865677	0.00	0
RIDLER CARE SOURCE LLC	45-4862499	0.00	10228
RIGHTWORKS STAFFING INCHIGHWORK STAFFING INC	82-4966685	0.00	263
RIMROCK ART FRAME LLC	90-0141766	0.00	1014
RINGALINK LLC	27-1067350	0.00	497

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RJ FINLAY MANAGEMENT COMPANY LLC	20-4557297	0.00	154649
ROBERTSON ROBERTSON CONSULTANTS INC	57-1038540	0.00	301032
RODNEY Z WONG MD INC	20-0919084	0.00	204148
RODOLFO OROZCO DDS APC	33-0815358	0.00	21173
ROGER LLC	37-1964034	0.00	94
ROYAL HEALTH INC	82-2667430	0.00	0
ROZEBOOM COMPANY	84-0643298	0.00	30978
RRG JIF II LLC	83-2618184	0.00	2056
RUBINTON SIMMS PA	45-5051199	0.00	0

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Part II Participating Employer Information (Continued).

Use this page for additional participating employer information.

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

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

2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
RWRA INC DBA MR APPLIANCE OF INDIANAPOLIS	82-1256743	0.00	31087
S MCCALL INVESTMENTS DBA DEANS COLLISION REPAIR CENTER	20-8218897	0.00	115
SAFFELL ENTERPRISES INC	20-3127359	0.00	4832
SAHANA CAPITAL MANAGEMENT LP	84-4246859	0.00	109338
SALVADOR TECHNOLOGIES INC	99-1966190	0.00	0
SAN BERNARDINO VILLAS	27-1146568	0.00	19072
SAN CLEMENTE VILLAS	95-4860868	0.00	184937
SANTA INC	85-4022864	0.00	84685
SCB COMPLIANCE LLC DBA THE CONSORTIUM	81-5197190	0.00	93367

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SCHAALGIVEN CONTRACTING INC	02-0454062	0.00	2589
SCHROEDER CONTRACTING INC	26-2917622	0.00	223420
SEACREST RECOVERY CENTER CINCINNATI LLC	87-1277612	0.00	0
SEACREST RECOVERY CENTER FLORIDA LLC	47-3645267	0.00	12864
SEACREST RECOVERY CENTER NORTH JERSEY LLC	37-1851415	0.00	0
SEACREST RECOVERY CENTER OHIO LLC	83-3735225	0.00	0
SEDULI SUTTER OPERATIONS CORPORATION	36-4965006	0.00	342
SEE VISION EYE INSTITUTE	88-3662880	0.00	0
SELECSOURCE INC SELSO HOLDINGS LLC	58-2166767	0.00	657

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SENSEPASS US INC	61-1961720	0.00	4493
SERVICE CONVENIENCE INC DBA GLASS DOCTOR	34-1644821	0.00	161575
SGH PEDIATRICS PLLC	47-1168368	0.00	71486
SGROUPLES INC DBA MEWE	45-2595677	0.00	0
SHORTS SPORTS LLC RELATED COMPANY	77-0665890	0.00	50458
SIKORA ASSOCIATES INC	57-0953467	0.00	830447
SISTERS OF THE VALLEY LLC	81-1596216	0.00	5225
SJ HAUCK CONSTRUCTION LLC	27-3468918	0.00	47825
SKYWATCH INSURANCE SERVICES INC	35-2602936	0.00	6373

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SMART MONEY EPS INC	46-2079160	0.00	8309
SMILE DENTAL GROUP LLC	20-1935278	0.00	63687
SOCIAL WONDER INC	35-2723915	0.00	3058
SOLUBIT INC	45-0536427	0.00	165440
SOLUTION 1 BUILDING SERVICES INC	83-0475126	0.00	0
SOURCE IT RETAIL INC	85-1112766	0.00	0
SOUTH WILLOW PIZZA LLC	82-0967283	0.00	7124
SOUTHERN MICHIGAN RUBBER	38-2915610	0.00	86
SOUTHFIELD OB DBA GYN ASSOCIATES	38-3531566	0.00	0

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SPARK SBE INC DBA MASTERSCHOOL	37-1973758	0.00	89853
SPECTRA360 INC	46-2935020	0.00	0
SPECTRUM INTERIOR DESIGN INC	30-0718086	0.00	41847
SPERA CYBERSECURITY INC	88-2645607	0.00	15009
SPRING CREEK COMMUNITY CORP	11-3183468	0.00	5998
SRA CONSTRUCTION LLC	93-1488006	0.00	1128
STAFFUSION INC	81-0615234	0.00	16446
STEELE STEELE OF WYOMING INC	46-0396729	0.00	0
STELLAR STAFFING SOLUTIONS LLC	44-4420001	0.00	2274

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STEPPING STONES EDUCATIONAL THERAPY CENTER	58-1903238	0.00	35471
STERLING REMODELING RESTORATION INC	83-3079405	0.00	36375
STORMSENSOR INC	47-4761552	0.00	175448
STUDENT STATESMANSHIP INSTITUTE	38-3033262	0.00	34138
SUDER LLC	85-3454805	0.00	1405
SUMMIT COUNSELING SOLUTIONS LLC	83-3284387	0.00	2236
SUNGRID US LP	88-0933384	0.00	0
SUPPLY CHAIN SOLUTIONS LLC	32-0110875	0.00	135805
SUPREME AIR SYSTEMS INC	77-0517940	0.00	46134

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
SUSTAINABLE BUSINESS CONSULTING	68-0667557	0.00	187183
SWEETCH HEALTH INC	37-1903453	0.00	0
SYNERGY HOMECARE FRANCHISING LLC	77-0619775	0.00	0
SYNERGY RECYCLING LLC	20-3593831	0.00	115532
SYNERGY SAND LLC	81-4472005	0.00	0
SYNERGY SOLUTIONS	86-0965745	0.00	17213
TABULERA INC	45-5251240	0.00	869774
TETRA IMPACT PARTNERS LLC	86-2329938	0.00	623
TGC AUTO	92-0082412	0.00	64012

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
THE ARUBA CONDOMINIUM ASSOCIATION INC	47-4159883	0.00	0
THE BAILEY GROUP INC	61-1658180	0.00	30504
THE BRITT LAW GROUP PC	82-3607993	0.00	0
THE FOOT INSTITUTE	47-4259512	0.00	0
THE HOWARD SLOAN KOLLER GROUP DBA KOLLER SEARCH PARTNERS	13-3530775	0.00	169570
THE LANDINGS YACHT GOLF TENNIS CLUB	59-1526144	0.00	0
THE LANTERN GROUP	84-4038720	0.00	364079
THE MAKERS MOTIF INC	88-3741174	0.00	6691
THE MALIN GROUP INC	86-3562707	0.00	0

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THE PAWS CLINIC	27-3257737	0.00	36325
THE PRISM GROUP	26-3455614	0.00	68820
THE SALUS GROUP INC	46-1524421	0.00	177303
THE VINE WELLNESS LLC	45-3560081	0.00	0
THE WEBB LAW CENTRE PLLC	11-3767402	0.00	35510
THOUSAND CRANES	82-0568832	0.00	423980
THREE PS HOLDINGS LLC	20-8677293	0.00	6977
TIFCO ENTERPRISES INC	59-3694924	0.00	16792
TM CONTRACTORS INC	75-2675165	0.00	6975

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2a Name of Participating Employer	2b EIN	2c Percentage of Total Contributions for the Plan Year	2d Aggregate Account Balances Attributable to Participating Employer
TNT STAFF PRO INC	73-1409643	0.00	0
TOTAL DEPTH WELL SERVICES INC	99-0361501	0.00	13509
TOTAL HOMECARE SOLUTIONS LLC	20-8585162	0.00	0
TOTAL MEDIA	94-3279731	0.00	962199
TRANSPORTATION COLLABORATIVE INC	26-0491075	0.00	0
TRAVELING MEDICAL SERVICES PC	38-3292586	0.00	466757
TRINION QUALITY CARE SERVICES INC	20-3031071	0.00	65604
TRIPLE R ENTERPRISES LLC DBA BLIZZARD TRANSPORTATION LLC	54-1367607	0.00	244319
TTF LLC	45-3696849	0.00	71794

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TUTTLE TILE INC	81-0539536	0.00	2541
TWOMARKINES KITCHEN LLC DBA WHITE MOUNTAIN CIDER CO	20-2857633	0.00	2739
UJIHARA LANDSCAPE INC	95-3677511	0.00	11143
UNITED WAY OF KERN COUNTY	95-2274560	0.00	200556
VACUUM X TRACTION PRODUCTS	47-4091885	0.00	4429
VANTI ANALYTICS INC	87-2604764	0.00	78324
VASCULAR GRAFT SOLUTIONS INC	36-4881103	0.00	0
VAULT PLATFORM INC	32-0574835	0.00	164874
VCI FRAMING INC	20-5986633	0.00	7632

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VEHICLE CITY ONSITE FLEET SERVICE	83-4322565	0.00	0
VELO OPERATING LLCVELO PLANET CYCLERY LLC	87-2749199	0.00	137755
VELOTIX INC	88-2477211	0.00	3851
VENSURE NATIONAL PEO SUSPENSE PLAN	37-0510197	0.00	556664
VENSURE PLAN EXPENSE REIMBURSEMENT ACCT	37-5556655	0.00	8527
VENSURE SUSPENSE PLAN	37-5566552	0.00	13277668
VICTORIA COUNTY WCID 1	74-6017989	0.00	558
VIDEONOR US INK	47-2646435	0.00	46801
VISION SOURCE ATASCOCITA	20-2455364	0.00	261990

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VLS DBA ERRAND EXPRESS	65-2964318	0.00	5707
VOEGELE ACQUISITIONS INC	81-0535586	0.00	322
VOLUNTARY BENEFITS AT WORK	45-2473014	0.00	52877
VOYTKO MECHANICAL	20-8756890	0.00	7845
VYDE INC	99-1235493	0.00	0
W3BCLOUD INC A NEVADA CORPORATION	87-1999554	0.00	112990
WADDLE TRUCKING OF MISSISSIPPI	27-1639209	0.00	6376
WALNUT CREEK FAMILY DENTISRY	87-4406740	0.00	55383
WE SAVE BEES INC	81-0988151	0.00	7302

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WEECYCLE ENVIRONMENTAL CONSULTING INC	38-3680477	0.00	219648
WELLEMENTS LLC	20-1748399	0.00	0
WENDELLS FURNITURE INC	20-0467577	0.00	34334
WOMENS INTEGRATED NETWORK INC	13-3989836	0.00	0
WOOD TECH INC	38-2469136	0.00	27857
WORK LIGHT PRODUCTIONS LLC	26-3139296	0.00	0
WORKLOGIC EPS	82-2383193	0.00	10211
WORKNETAI INC	85-0871260	0.00	60892
WWP STRATEGIES	26-1492001	0.00	788849

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WY CONSTRUCTION CORP	46-1656302	0.00	12106
XED BEVERAGES INC	83-4057089	0.00	263
YORCMO FRANCHISING LLC	86-1313317	0.00	14827
YORK EMPLOYMENT SERVICES INC	33-0928278	0.00	17323
YUBA DOCS MEDICAL GROUP INC DBA YUBA DOCS URGENT CARE	68-0452839	0.00	48560

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Part III Pooled Employer Plan Information

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

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

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

ACK ID _____

VENSURE EMPLOYER SERVICES, INC.
401(K) PROFIT SHARING PLAN

(Modified Cash Basis)
Financial Statements
December 31, 2025 and 2024



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VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
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December 31, 2025 and 2024

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Note: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for reporting and Disclosure under the Employee Retirement Income Securities Act of 1974 have been omitted because they are not applicable.

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INDEPENDENT AUDITOR'S REPORT

To the Participants in and Administrator of
Vensure Employer Services, Inc. 401(k) Profit Sharing Plan

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

We have performed audits of the accompanying financial statements of Vensure Employer Services, Inc. 401(k) Profit Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits (modified cash basis) as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits (modified cash basis) for the year ended December 31, 2025, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of Vensure Employer Services, Inc. 401(k) Profit Sharing Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note F to the financial statements, is complete and accurate.

Opinion

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

- the amounts and disclosures in the accompanying financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting as described in Note B.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Vensure Employer Services, Inc. 401(k) Profit Sharing Plan 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 ERISA Section 103(a)(3)(C) audit opinion.

Emphasis of Matter—Basis of Accounting

We draw attention to Note B of the financial statements, which describes the basis of accounting. The financial statements are prepared on a modified cash basis of accounting, which is a basis other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting as described in Note B, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Vensure Employer Services, Inc. 401(k) Profit Sharing Plan 's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on 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 Vensure Employer Services, Inc. 401(k) Profit Sharing Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Vensure Employer Services, Inc. 401(k) Profit Sharing Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Supplemental Schedules Required by ERISA

The supplemental schedules, Schedule H, Line 4i Schedule of Assets (Held at End of Year) (Modified Cash Basis) as of December 31, 2025 and Schedule H, Line 4a Schedule of Delinquent Participant Contributions (Modified Cash Basis) for the year ended December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion—

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

Metz CPA PLLC

Phoenix, Arizona
October 13, 2026

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Statements of Net Assets Available for Benefits (Modified Cash Basis)
December 31, 2025 and 2024

	2025	2024
ASSETS		
Investments, at fair value		
Mutual funds	$ 998,674,236	$ 958,418,562
Common collective trust	38,588	1,241,495
Self-directed brokerage accounts	2,623,593	1,887,768
Total investments	1,001,336,417	961,547,825
Cash - noninterest bearing	-	19,959
Receivables		
Notes receivable from participants	13,267,055	12,926,623
NET ASSETS AVAILABLE FOR BENEFITS	$ 1,014,603,472	$ 974,494,407

See accompanying notes to financial statements.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Statement of Changes in Net Assets Available for Benefits (Modified Cash Basis)
Year Ended December 31, 2025

ADDITIONS		
Investment income:		
Net appreciation in fair value investments	$	117,708,720
Interest and dividend income		25,145,802
Total investment income		142,854,522
Contributions:		
Participant		111,739,246
Employer		43,854,172
Rollover		15,301,240
Total contributions		170,894,658
TOTAL ADDITIONS		313,749,180
DEDUCTIONS		
Benefits paid to participants		146,411,384
Adminitrative expenses		5,307,078
TOTAL DEDUCTIONS		151,718,462
NET INCREASE		162,030,718
TRANSFERS OF ASSETS TO THIS PLAN		50,321,589
TRANSFERS OF ASSETS FROM THIS PLAN		(172,243,242)
NET ASSETS AVAILABLE FOR BENEFITS		
BEGINNING OF YEAR, AS PREVIOUSLY		981,395,015
Cumulative effect of change to modified cash basis of accounting		(6,900,608)
BEGINNING OF YEAR, AS RESTATED		974,494,407
END OF YEAR	$	1,014,603,472

See accompanying notes to financial statements.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2025 and 2024

NOTE A – DESCRIPTION OF PLAN

The following description of the Vensure Employer Services, Inc. 401(k) Profit Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General – The Plan is a multiple-employer retirement plan in accordance with IRS Rev. Proc 2002-21, as reflected in the Form 5500 completed by the Plan Administrator. Vensure Employer Services, Inc., the Plan Sponsor, is a professional employer organization and the worksite employees participating in the Plan are offered participation as benefit of their co-employment with Vensure Employer Services, Inc.'s client organizations. The Plan utilizes multiple schedules of benefits, matching percentages and profit sharing components as chosen by the management of the client organization co-employing the participating worksite employees.

Pursuant to the election set forth in each worksite employers' Election Agreement, certain worksite employees are eligible to participate in the Plan. The eligibility period applicable to a worksite employee is based on the eligibility option elected in the applicable Election Agreement, made by the worksite employers. Age requirements for participation range from no requirement to the 21 years of age maximum defined by the code. Service requirements range from no prior service required to one year of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions – Each year, participants may contribute from 1% to 100% of pretax annual compensation (as defined in the Plan). Participants may also contribute amounts representing distributions from other qualified plans. Participants direct the investment of their contributions into the investment options offered by the Plan. The Plan currently offers selected mutual funds, self-directed brokerage accounts, and units of common collective trust funds as investment options for participants. Pursuant to the elections set forth in each of the applicable Election Agreements, certain worksite employees may receive one or more of the following types of Company contributions: matching contributions, qualified non-elective contributions, and discretionary profit-sharing contributions.

Participant Accounts – Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and (b) Plan earnings (losses), and charged with an allocation of administrative expenses, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in their contributions plus actual earnings thereon. Employer contributions are based on years of continuous service in the specific worksite employers; vesting schedules vary.

Payment of Benefits – On termination of service due to reasons other than death, vested interest will be received by the participant as a lump sum distribution as soon as administratively feasible after employment is terminated. If vested interest is $5,000 or more the participant may elect installment payments over a specific period of time. Distributions upon death can be elected, by the beneficiary, as lump sum or equal installment payments.

Notes Receivable from Participant – Subject to certain limitations in the plan document, participants may borrow from their fund accounts a minimum of $1,000 up to a maximum equal to the lesser of $50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through payroll deductions. As of December 31, 2025, participant loans have interest rates ranging from 3.25% to 10.50%.

Forfeited Accounts – Any accumulated benefits forfeited during a Plan year due to participant withdrawal prior to full vesting may be applied to reduce employer contributions or to pay administrative expenses which would otherwise be paid by the Plan. Forfeited non-vested accounts totaled $764,680 and $1,051,514 at December 31, 2025 and 2024, respectively.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – Effective December 31, 2024, the Plan changed its accounting framework from the accrual basis of accounting under accounting principles generally accepted in the United States of America to the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America. Contributions to the Plan are recognized when received, and deductions from net assets are recognized when paid. Investments are valued at fair value in accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820. The cumulative effect of this change resulted in a decrease to Net Assets Available for Benefits as of December 31, 2024 of $6,900,608 to remove accruals previously recognized under accounting principles generally accepted in the United States of America.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the plan document.

Estimates – The preparation of financial statements in conformity with modified cash basis of accounting requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition – The Plan'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. See "Note G Fair Value Measurements" for discussion of Fair Value Measurements. Common collective trusts are reported using net asset value (NAV) as a practical expedient. In accordance with the policy of stating investments at fair value, the Plan presents, in the statement of changes in net assets available for benefits, the net appreciation (depreciation) in the fair value of its investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments. Dividends are recorded on the ex-dividend date. Interest income is recorded on an accrual basis. Purchase and sales of securities are recorded on a trade-date basis.

Payment of Benefits – Benefits are recorded when paid.

Administration Expenses – Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to distribution and the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net depreciation in fair value of investments.

NOTE C – PLAN TERMINATION

Although it has not expressed any intent to do so, the Plan's sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of whole or partial plan termination; participants would become fully vested as to the amount credited to their accounts after deductions for estimated liquidation and distribution expenses.

NOTE D – RISKS AND UNCERTAINTIES

The Plan invests in various investment securities which are exposed to various risks such as interest rate, market fluctuations, and credit risks. Due to the risk associated with certain investment securities, it is at least reasonably possible that changes in market values, interest rates, or other factors in the near term would materially affect participants' account balances as well as the amounts reported in the statement of net assets available for benefits (modified cash basis) and the statement of changes in net assets available for benefits (modified cash basis).

NOTE E – TAX STATUS

The Plan uses a non-standardized defined contribution pre-approved plan document sponsored by Slavic Integrated Administration Inc. and has received an advisory letter dated June 30, 2020 from the Internal Revenue Service which states that the specimen plans' form satisfies the applicable provisions of the Internal Revenue Code. The non-standardized pre-approved advisory letter has been relied upon by the Plan. The Plan administrator believes the Plan is being operated in compliance with the applicable requirement of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Department of Labor or Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 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 Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any open tax periods in progress.

NOTE F – INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The Plan administrator has elected the method of annual reporting compliance permitted by 29-CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosures under ERISA. Accordingly, Fidelity Personal Trust Company, FSB, the trustee of the Plan, have certified as being complete and accurate the investments and notes receivable from participants on the statements of net assets available for benefits as of December 31, 2025 and 2024, the investment and interest activity reflected in the statement of changes in net assets available for benefits, and the investment information included in the supplemental schedules of the financial statements as of and for the year ended December 31, 2025. Accordingly, as permitted under such election, the Plan administrator instructed the Plan's independent auditors not to perform any auditing procedures with respect to information certified as complete and accurate

NOTE G – FAIR VALUE MEASUREMENTS

Accounting Standards Codification (ASC) *820 Fair Value Measurements and Disclosures* (ASC 820), provides the framework for measuring fair value. Fair value of a financial instrument 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. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 Fair Value Measurements
Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 Fair Value Measurements
Inputs to the valuation methodology include:

- quoted prices for similar assets or liabilities in active markets
- quoted prices for identical or similar assets or liabilities in inactive markets
- inputs other than quoted prices that are observable for the asset or liability
- inputs that are derived principally from, or corroborated by, observable market data by correlation or other means

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

NOTE G – FAIR VALUE MEASUREMENTS (continued)

Level 3 Fair Value Measurements
Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2025 and 2024.

Mutual Funds – Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Self-directed Brokerage Accounts – Accounts primarily consist of mutual funds and common stocks that are determined by obtaining quoted prices on nationally recognized securities exchange.

Collective Trust Funds – Valued at the net asset value (NAV) of units of a bank collective trust. The NAV, as provided by the custodian, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchased and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment advisor reserves the right to temporarily delay withdrawal from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2025 and 2024.

	Assets at Fair Value as of December 31, 2025		
	Level 1	Level 2	Total
Mutual funds	$ 998,674,236	$ -	$ 998,674,236
Self-directed brokerage accounts	2,623,593	-	2,623,593
Total investments within fair value hierarchy	$ 1,001,297,829	$ -	1,001,297,829
Investments measured at NAV			38,588
Total investments			$ 1,001,336,417

	Assets at Fair Value as of December 31, 2024		
	Level 1	Level 2	Total
Mutual funds	$ 958,418,562	$ -	$ 958,418,562
Self-directed brokerage accounts	1,887,768	-	1,887,768
Total investments within fair value hierarchy	$ 960,306,330	$ -	960,306,330
Investments measured at NAV			1,241,495
Total investments			$ 961,547,825

The Plan invests in fully benefit-responsive common collective trusts. The fair value of the common collective trusts is based on the net asset value per share. The following table summarizes those investments for the years ended December 31, 2025 and 2024:

Year	Fair Value	Uncommitted Funds	Frequency (if currently Eligible)	Redemption Notice Period
December 31, 2025	$38,588	n/a	Daily	n/a
December 31, 2024	$1,241,495	n/a	Daily	n/a

NOTE H – EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity Personal Trust Company, FSB. Fidelity Personal Trust Company, FSB is the custodian as defined by the Plan. These transactions are considered exempt party-in-interest transactions. Fees paid for investment management services were included as a reduction of the return earned on each respective fund. The Plan issues loans to participants, which are secured by the vested balances in the participants' accounts.

NOTE I – TRANSFERS OF ASSETS

During 2025, assets totaling $50,321,589 were transferred into the Plan from other defined contribution plans of companies acquired by the plan sponsor in 2025. Also, during 2025, the Plan transferred to other plans assets totaling $172,243,242.

NOTE J – PARTICIPANT CONTRIBUTIONS TRANSFERRED LATE TO THE PLAN

The Company remitted certain participant contributions and repayments of notes receivable totaling $15,517 and $164,979 for the years ended December 31, 2025 and 2024, respectively, to the Plan later than required by DOL Regulation 2510.3-102. Subsequent to year end, the Company has commenced procedures to remit the investment earnings to the Plan on the late deferrals and repayments of notes receivable from participant. The amount of investment earnings, had the participant contributions and repayments of notes receivable from participants been remitted on a timely basis, is not material to these financial statements and has not been recorded as a receivable as of December 31, 2025.

NOTE K – RECONCILIATION OF FORM 5500 TO FINANCIAL STATEMENTS

Following is a reconciliation of net assets available for benefits as of December 31, 2024 and changes in net assets available for benefits for the year ended December 31, 2025 per Form 5500 to the financial statements:

	2025
Change in net assets available for benefits per Form 5500	$ 154,031,748
Prior year employee contributions receivable	3,563,014
Prior year employer contributions receivable	4,306,226
Prior year other receivable	129,730
Change in net assets available for benefits per the financial statements	$ 162,030,718

	2024
Net assets available for benefits per Form 5500	$ 982,493,377
Prior year employee contributions receivable	(3,563,014)
Prior year employer contributions receivable	(4,306,226)
Prior year other receivable	(129,730)
Net assets available for benefits per the financial statements	$ 974,494,407

NOTE L – SUBSEQUENT EVENTS

The Plan's management has evaluated subsequent events through October 13, 2026, the date the financial statements were available for issuance.

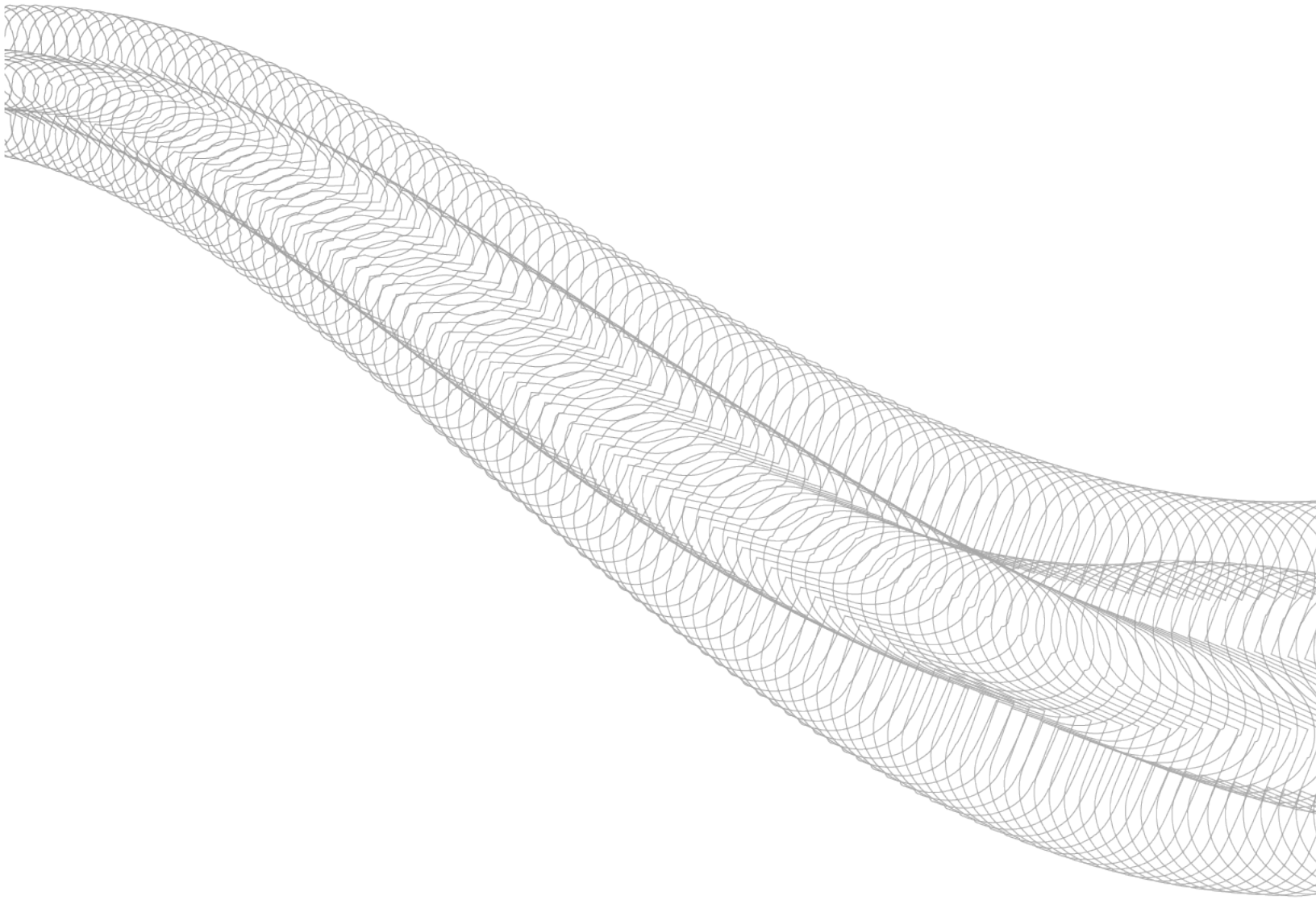
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
EIN: 37-1508469 Plan Number: 001
Schedule H, Line 4i Schedule of Assets (Held at End of Year)
December 31, 2025

(a)	(b) Identity of issue, borrower, lessor or similarly party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost **	(e) Current Value
	Vanguard Total Stock Market Index Admira Fund	Mutual Fund		$ 247,285,044
*	Fidelity US Bond Index Fund	Mutual Fund		144,605,009
	iShares MSCI EAFE International Index K Fund	Mutual Fund		96,780,358
	Vanguard Total Stock Market Index Inst. Fund	Mutual Fund		93,014,265
*	Fidelity 500 Index Fund	Mutual Fund		75,958,261
	Vanguard Intermediate-Term Bond Index Ad Fund	Mutual Fund		59,466,633
	Vanguard Federal Money Market Fund	Mutual Fund		49,679,757
	Vanguard Information Technology Index Ad Fund	Mutual Fund		21,890,584
	Vanguard Consumer Staples Index Fund	Mutual Fund		20,525,166
	iShares Total U.S. Stock Market Index K Fund	Mutual Fund		13,286,176
	Victory Nasdaq 100 Index Fund R6 Shares	Mutual Fund		11,529,823
	Vanguard Target Retirement 2035 Fund	Mutual Fund		11,144,884
	Vanguard Target Retirement 2045 Fund	Mutual Fund		10,924,098
	Vanguard Value Index Admiral Fund	Mutual Fund		10,596,388
	Vanguard Target Retirement 2040 Fund	Mutual Fund		10,399,063
	Vanguard Target Retirement 2055 Fund	Mutual Fund		9,765,365
	Vanguard Mid Cap Index Admiral Fund	Mutual Fund		9,082,963
	Vanguard Target Retirement 2050 Fund	Mutual Fund		8,699,397
	Vanguard Target Retirement 2030 Fund	Mutual Fund		7,945,216
	JPMorgan US Research Enhanced Equity R6 Fund	Mutual Fund		7,551,189
	Vanguard Short-Term Inf Prot Index Admir Fund	Mutual Fund		7,129,703
	Vanguard Global Capital Cycles Fund Invest	Mutual Fund		7,043,191
	Invesco Oppenheimer Gold & Special Miner Fund	Mutual Fund		6,900,951
	Vanguard Utilities Index Admiral	Mutual Fund		5,667,352
	Vanguard Small Cap Index Admiral Fund	Mutual Fund		5,498,277
	Vanguard Small Cap Growth Index Adm Fund	Mutual Fund		4,549,237
	Victory Short Term Bond Fund R6 Shares Fund	Mutual Fund		4,410,968
	BlackRock Health Sciences Ops I Fund	Mutual Fund		4,300,465
*	Fidelity Emerging Markets Index Fund	Mutual Fund		4,050,350
	Vanguard Target Retirement 2025 Fund	Mutual Fund		3,973,020
	Vanguard Target Retirement 2065 Inv Fund	Mutual Fund		2,976,565
	Vanguard Target Retirement 2060 Fund	Mutual Fund		2,783,406
	Vanguard Small Cap Value Index Adm Fund	Mutual Fund		2,438,820
	Vanguard Target Retirement 2020 Fund	Mutual Fund		2,300,632
	Vanguard High Yield Corporate Admiral Fund	Mutual Fund		2,277,156
	MFS MID CAP VALUE FUND CL R6 Fund	Mutual Fund		2,135,740
	Neuberger Berman Mid Cap Growth Fund	Mutual Fund		1,981,586
	Vanguard Short-Term Federal Admiral Fund	Mutual Fund		1,836,421
	DFA Real Estate Securities	Mutual Fund		1,804,818
	Vanguard Target Retirement Income Fund	Mutual Fund		1,689,066
*	Fidelity International Bond Index Fund Fund	Mutual Fund		1,122,695
	Vanguard Inflation Protected Securities Fund	Mutual Fund		988,480
	Vanguard Target Retirement 2070 Fund	Mutual Fund		684,795
	Vanguard Cash Reserves Federal Adm Fund	Mutual Fund		903
	Federated Capital Preservation CL RP Fund	Common Collective Trust		38,588
*	Fidelity SDBA Fund	Self-directed Brokerage Account		2,623,593
*	Participant loans	Interest rates from 3.25% to 10.50%	$0	13,267,055
				$ 1,014,603,472

(a) * A party-in-interest as defined by ERISA
(d) ** Cost is not required for participant directed funds

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
EIN: 37-1508469 Plan Number: 001
Schedule H, Line 4a Schedule of Delinquent Participant Contributions
Year Ended December 31, 2025

2025 Form 5500 Line 4 a - Schedule of Delinquent Participant Contributions				
Participant Contributions Transferred Late to the Plan	Total that Constitute Prohibited Transactions			
$180,496	Contributions Not Corrected	Contributions corrected Outside VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
Check here if late Participant Loan Repayments are included: ☑	$15,517	$164,979		



metz™ CPA

Phoenix

950 W. Indian School Rd
Phoenix, AZ 85013

Wisconsin

3804 W. Vliet St
Milwaukee, WI 53208

New York

175 Varick St.
New York, NY 10014

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

VENSURE EMPLOYER SERVICES **PLAN # 001** **PLAN YEAR ENDING: 12/31/2024** **EIN #** **37-1508469**

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	BlackRock	BKTSX - iShares Total U.S. Stock Market Index K		13,286,176
	Bespoke	BSPKX - Bespoke		903
	BlackRock	BTMKX - iShares MSCI EAFE International Index K		96,780,382
	Dimensional Funds	DFREX - DFA Real Estate Securities		1,804,818
	Fidelity	FBIIX - Fidelity International Bond Index Fund		1,122,695
	Fidelity	FISDB - Fidelity SDBA		2,623,593
	Fidelity	FMIP - Fidelity Managed Income Portfolio		0
	Fidelity	FPADX - Fidelity Emerging Markets Index		4,050,351
	Fidelity	FXAIX - Fidelity 500 Index		75,958,261
	Fidelity	FXNAX - Fidelity US Bond Index		144,605,009
	JPMorgan	JDEUX - JPMorgan US Research Enhanced Equity R6		7,551,189
	MFS	MVCKX - MFS MID CAP VALUE FUND CL R5		2,135,740
	Neuberger	NRMGX - Neuberger Berman Mid Cap Growth Fund Class		1,981,586
	Oppenheimer Funds	OGMIX - Invesco Oppenheimer Gold & Special Miner		6,900,951
	Federated	QEDRQ - Federated Capital Preservation CL R		38,588
	BlackRock	SHSSX - BlackRock Health Sciences Ops I		4,300,465
	Victory	URNQX - Victory Nasdaq 100 Index Fund R6 Shares		11,529,823
	Victory	URSBX - Victory Short Term Bond Fund R6 Shares		4,410,968
	Vanguard	VAIPX - Vanguard Inflation Protected Securities		988,480
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Ad		59,466,473
	Vanguard	VCSAX - Vanguard Consumer Staples Index		20,525,092
	Vanguard	VFFVX - Vanguard Target Retirement 2055		9,765,365
	Vanguard	VFIFX - Vanguard Target Retirement 2050		8,699,397
	Vanguard	VFORX - Vanguard Target Retirement 2040		10,399,063
	Vanguard	VGPMX - Vanguard Global Capital Cycles Fund Investor Class		7,043,163
	Vanguard	VIMAX - Vanguard Mid Cap Index Admiral		9,082,963
	Vanguard	VITAX - Vanguard Information Technology Index Ad		21,890,584
	Vanguard	VITSX - Vanguard Total Stock Market Index Inst.		93,013,813
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		2,976,565
	Vanguard	VMFXX - Vanguard Federal Money Market		49,679,769
	Vanguard	VMRXX - Vanguard Cash Reserves Federal Adm		0
	Vanguard	VSGAX - Vanguard Small Cap Growth Index Adm		4,549,237
	Vanguard	VSGDX - Vanguard Short-Term Federal Admiral		1,836,421
	Vanguard	VSIAX - Vanguard Small Cap Value Index Adm		2,438,820
	Vanguard	VSMAX - Vanguard Small Cap Index Admiral		5,498,277
	Vanguard	VSVNX - Vanguard Target Retirement 2070		684,795
	Vanguard	VTAPX - Vanguard Short-Term Inf Prot Index Admir		7,129,703
	Vanguard	VTHRX - Vanguard Target Retirement 2030		7,945,216
	Vanguard	VTINX - Vanguard Target Retirement Income		1,689,066
	Vanguard	VTIVX - Vanguard Target Retirement 2045		10,924,098
	Vanguard	VTSAX - Vanguard Total Stock Market Index Admira		247,285,053
	Vanguard	VTTHX - Vanguard Target Retirement 2035		11,144,884
	Vanguard	VTTSX - Vanguard Target Retirement 2060		2,783,406
	Vanguard	VTTVX - Vanguard Target Retirement 2025		3,973,020
	Vanguard	VTWNX - Vanguard Target Retirement 2020		2,300,632
	Vanguard	VUIAX - Vanguard Utilities Index Admiral		5,667,331
	Vanguard	VVIAX - Vanguard Value Index Admiral		10,596,388
	Vanguard	VWEAX - Vanguard High Yield Corporate Admiral		2,277,156
	Loan	4.25% - 10.50%		13,176,803
				1,014,512,530

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 01/01/2025 and ending 12/31/2025

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

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

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

D Check box if filing under:
- [X] 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
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 04/01/1997

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)
VENSURE EMPLOYER SERVICES, INC.

1475 S. Price Road

CHANDLER AZ 85286

2b Employer Identification Number (EIN) 37-1508469

2c Plan Sponsor's telephone number (480) 993-2650

2d Business code (see instructions) 561300

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

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

SIGN HERE	Signature of plan administrator	10-14-26 Date	JJ Hutzenbiler Enter name of individual signing as plan administrator
SIGN HERE	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [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**	42,571
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)**	30,380
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	28,304
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	12,834
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**.	**6d**	41,138
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f	Total. Add lines **6d** and **6e**.	**6f**	41,138
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)**	26,087
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)**	26,632
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	76
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:

2A 2E 2F 2G 2J 2T 3D 2V

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)** [X] 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)** [X] 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)** [X] **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)** [X] **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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