

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 6047(e), 6057(b), and 6058(a) of the Internal Revenue Code (the Code). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 2011 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2011 or fiscal plan year beginning <u>04/01/2011</u> and ending <u>03/31/2012</u>	
A This return/report is for:	<input checked="" type="checkbox"/> a multiemployer plan; <input type="checkbox"/> a multiple-employer plan; or <input type="checkbox"/> a single-employer plan; <input type="checkbox"/> a DFE (specify) ____
B This return/report is:	<input type="checkbox"/> the first return/report; <input type="checkbox"/> the final return/report; <input type="checkbox"/> an amended return/report; <input type="checkbox"/> a short plan year return/report (less than 12 months).
C If the plan is a collectively-bargained plan, check here.	<input checked="" type="checkbox"/>
D Check box if filing under:	<input checked="" type="checkbox"/> Form 5558; <input type="checkbox"/> automatic extension; <input type="checkbox"/> the DFVC program; <input type="checkbox"/> special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>09/09/1962</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>09/09/1962</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>09/09/1962</u>					
2a Plan sponsor's name and address, including room or suite number (Employer, if for single-employer plan) <u>RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u> <u>200 ST. PAUL STREET, SUITE 2420</u> <u>BALTIMORE, MD 21202</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>13-6043636</u></td> </tr> <tr> <td>2c Sponsor's telephone number <u>410-685-5069</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>711210</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>13-6043636</u>	2c Sponsor's telephone number <u>410-685-5069</u>	2d Business code (see instructions) <u>711210</u>	
2b Employer Identification Number (EIN) <u>13-6043636</u>					
2c Sponsor's telephone number <u>410-685-5069</u>					
2d Business code (see instructions) <u>711210</u>					

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.	01/10/2013	RICHARD CASS
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	01/11/2013	JEFFEREY VAN NOTE
	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

For Paperwork Reduction Act Notice and OMB Control Numbers, see the instructions for Form 5500.

Form 5500 (2011)
v.012611

3a Plan administrator's name and address (if same as plan sponsor, enter "Same") RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN 200 ST. PAUL STREET, SUITE 2420 BALTIMORE, MD 21202	3b Administrator's EIN 13-6043636 3c Administrator's telephone number 410-685-5069
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4 If the name and/or EIN of the plan sponsor has changed since the last return/report filed for this plan, enter the name, EIN and the plan number from the last return/report: a Sponsor's name	4b EIN 4c PN
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5 Total number of participants at the beginning of the plan year	5	11407
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6 Number of participants as of the end of the plan year (welfare plans complete only lines 6a , 6b , 6c , and 6d).		
a Active participants.....	6a	2138
b Retired or separated participants receiving benefits.....	6b	3110
c Other retired or separated participants entitled to future benefits.....	6c	5679
d Subtotal. Add lines 6a , 6b , and 6c	6d	10927
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.....	6e	515
f Total. Add lines 6d and 6e	6f	11442
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....	6g	
h Number of participants that terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	32

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions:
 1B 1G

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions:
 4H 4L

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

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

a Pension Schedules

- (1) ☒ **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

b General Schedules

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

SCHEDULE MB (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
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For calendar plan year 2011 or fiscal plan year beginning 04/01/2011 and ending 03/31/2012

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN	D Employer Identification Number (EIN) 13-6043636

E Type of plan: (1) <input checked="" type="checkbox"/> Multiemployer Defined Benefit (2) <input type="checkbox"/> Money Purchase (see instructions)	
1a Enter the valuation date: Month 04 Day 01 Year 2011	
b Assets	
(1) Current value of assets	1b(1) 1325356067
(2) Actuarial value of assets for funding standard account.....	1b(2) 1354324777
c (1) Accrued liability for plan using immediate gain methods	1c(1) 2099253693
(2) Information for plans using spread gain methods:	
(a) Unfunded liability for methods with bases.....	1c(2)(a) 0
(b) Accrued liability under entry age normal method.....	1c(2)(b)
(c) Normal cost under entry age normal method.....	1c(2)(c)
(3) Accrued liability under unit credit cost method.....	1c(3) 2099253693
d Information on current liabilities of the plan:	
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)
(2) "RPA '94" information :	
(a) Current liability	1d(2)(a) 3391179000
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b) 55685104
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)
(3) Expected plan disbursements for the plan year	1d(3) 121849504

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		12/12/2012
Signature of actuary		Date
JAMES RITCHIE		11-05643
Type or print name of actuary		Most recent enrollment number
AON HEWITT		410-547-5932
Firm name		Telephone number (including area code)
500 EAST PRATT STREET, BALTIMORE, MD 21202		
Address of the firm		

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions ☐

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	1325356067
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	3712	1112128162
(2) For terminated vested participants	5552	1751144266
(3) For active participants:		
(a) Non-vested benefits		45038629
(b) Vested benefits		482867943
(c) Total active	2162	527906572
(4) Total	11426	3391179000
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	39.08 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/30/2012	172120000				
Totals ▶ 3(b)				172120000	3(c) 0

4 Information on plan status:

a Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to item 5.....	4a	E
b Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4b	64.5 %
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
d If the plan is in critical status, were any adjustable benefits reduced?	<input type="checkbox"/> Yes <input type="checkbox"/> No	
e If line d is "Yes," enter the reduction in liability resulting from the reduction in adjustable benefits, measured as of the valuation date	4e	

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

- a** ☐ Attained age normal
b ☐ Entry age normal
c ☒ Accrued benefit (unit credit)
d ☐ Aggregate
e ☐ Frozen initial liability
f ☐ Individual level premium
g ☐ Individual aggregate
h ☐ Shortfall
i ☐ Reorganization
j ☐ Other (specify):

k If box h is checked, enter period of use of shortfall method	5k	
l Has a change been made in funding method for this plan year?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
m If line l is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
n If line l is "Yes," and line m is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method.....	5n	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a	4.50 %
b Rates specified in insurance or annuity contracts	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males	6c(1)	A
(2) Females	6c(2)	A
d Valuation liability interest rate	6d	7.25 %
e Expense loading	6e	31.3 % <input type="checkbox"/> N/A
f Salary scale	6f	% <input type="checkbox"/> N/A
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	2.1 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	11.8 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
4	187478376	19496816
5	124853059	12984095
1	162030373	16850351

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval..... **8a** _____

b Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach schedule. ☐ Yes ☒ No

c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?..... ☐ Yes ☒ No

d If line c is "Yes," provide the following additional information:

(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?..... ☐ Yes ☐ No

(2) If line (1) is "Yes," enter the number of years by which the amortization period was extended..... **8d(2)** _____

(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?..... ☐ Yes ☐ No

(4) If line (3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))..... **8d(4)** _____

(5) If line (3) is "Yes," enter the date of the ruling letter approving the extension..... **8d(5)** _____

(6) If line (3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?..... ☐ Yes ☐ No

e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)..... **8e** _____

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any..... **9a** 0

b Employer's normal cost for plan year as of valuation date..... **9b** 30495377

c Amortization charges as of valuation date:

	Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended..... 9c(1)	1449206048	161205590
(2) Funding waivers..... 9c(2)		
(3) Certain bases for which the amortization period has been extended..... 9c(3)		

d Interest as applicable on lines 9a, 9b, and 9c..... **9d** 13898320

e Total charges. Add lines 9a through 9d..... **9e** 205599287

Credits to funding standard account:

f Prior year credit balance, if any..... **9f** 386075241

g Employer contributions. Total from column (b) of line 3..... **9g** 172120000

h Amortization credits as of valuation date..... **9h** 318201891 51208505

i Interest as applicable to end of plan year on lines 9f, 9g, and 9h..... **9i** 31703072

j Full funding limitation (FFL) and credits:

(1) ERISA FFL (accrued liability FFL)..... 9j(1)	1276777192
(2) "RPA '94" override (90% current liability FFL)..... 9j(2)	1803396909
(3) FFL credit..... 9j(3)	0

k (1) Waived funding deficiency..... **9k(1)** 0

(2) Other credits..... **9k(2)** 0

l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)..... **9l** 641106818

m Credit balance: If line 9l is greater than line 9e, enter the difference..... **9m** 435507531

n Funding deficiency: If line 9e is greater than line 9l, enter the difference..... **9n** _____

9 o Current year's accumulated reconciliation account:

(1) Due to waived funding deficiency accumulated prior to the 2011 plan year	9o(1)	0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)	0
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)	0
(3) Total as of valuation date.....	9o(3)	0

10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.)	10	
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11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider 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
		2011
		This Form is Open to Public Inspection.

For calendar plan year 2011 or fiscal plan year beginning **04/01/2011** and ending **03/31/2012**

A Name of plan BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN	D Employer Identification Number (EIN) 13-6043636	

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
PIMCO
33-0629048

(b) Enter name and EIN or address of person who provided you disclosure on eligible indirect compensation
PICTET
120 LONDON WALL GB-LONDON, LONDON EC2Y5ET GB

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
GROSVENOR CAPITAL MANAGEMENT
36-3795985

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
SIGULER GUFF
13-3855629

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

PAYDEN & RYGEL

95-3921788

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

(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)

GROOM LAW GROUP

52-1219029

(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?
29 50	NONE	4287470	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

AON HEWITT

22-2232264

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
11 50	NONE	1953519	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MELLON CAPITAL MANAGEMENT

52-6078093

(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?
21 28 50 51 52	NONE	581657	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

THE BOSTON CO ASSET MGT

04-3404987

(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 51 68	NONE	574388	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WELLINGTON TRUST COMPANY, NA

04-2755549

(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 51 68	NONE	545480	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

J.P. MORGAN INVESTMENT MANAGEMENT

13-3200244

(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?
27 28 51	NONE	498293	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

GRANTHAM, MAYO, VAN OTTERLOO CO.

01-0745810

(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 51 52 72	NONE	465078	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

SIBSON CONSULTING

13-1835864

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	434103	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

SARAH E. GAUNT

13-6043636

(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?
35 50	EMPLOYEE	396268	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

NEPC, LLC

26-1429809

(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 51	NONE	371859	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

NEUMEIER POMA INVESTMENT COUNSEL

77-0444891

(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?
27 28 51	NONE	306985	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ALLIANCE BERNSTEIN

13-4064930

(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 51 68	NONE	303483	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

BNY MELLON ASSET SERVICING

13-5160382

(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?
19 50 59	NONE	301536	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CADENCE CAPITAL MANAGEMENT

04-3244012

(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 51 68	NONE	300330	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ALL FLORIDA ORTHOPAEDICS

59-2681990

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	299285	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

LOOMIS SAYLES TRUST COMPANY

94-6799945

(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 51	NONE	267990	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DAVID APPLE, MD

2020 PEACHTREE ROAD NW
ATLANTA, GA 30309

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	264503	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ADAMS STREET

ONE N WACKER DRIVE
SUITE 220
CHICAGO, IL 60606-2823

(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 51	NONE	256666	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

THE TRAVEL STORE

95-2958880

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	244014	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ENERGY SPECTRUM

5956 SHERRY LANE, SUITE 900
DALLAS, TX 75225

(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 51	NONE	203167	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

RIGGS, COUNSELMAN, MICHAELS & DOWNES

52-0555835

(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?
22 50	NONE	202387	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

GLENN PERRY, MD

56-2258322

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	191692	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

STEPHEN S. HAAS, MD

3200 HIGHLAND PLACE, N.W.
WASHINGTON, DC 20008

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	178525	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BRANDYWINE GLOBAL ASSET MGT

51-0294065

(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 51 68	NONE	174407	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	9682	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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)

VISTA EQUITY PARTNERS

150 CALIFORNIA STREET
SAN FRANCISCO, CA 94111

(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 51	NONE	166740	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

KORN/FERRY INTERNATIONAL

95-2623879

(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 51	NONE	159849	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

REHABILITATION INSTITUTE OF CHICAGO

36-2256036

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	156896	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

WESTERN ASSET MGT

95-2705767

(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 51	NONE	152502	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

AUDAX MANAGEMENT COMPANY

04-3525044

(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 51	NONE	152203	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	125516	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

WENTWORTH, HAUSER & VIOLICH

91-1631301

(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 51	NONE	145325	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

ADVANCED COMPUTER SOLUTIONS

20-1859440

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	143109	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

JOSEPH D. EUBANKS, PHD

75-2756750

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	141000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

SAN DIEGO SPORTS MED & ORTHOPAEDIC

33-0834309

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	134316	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

CAROLINA HEADACHE INSTITUTE

103 MARKET STREET
CHAPEL HILL, NC 27516

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	125000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ORTHOPAEDIC ASSOCIATES OF CHICAGO

36-2731428

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	123200	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DEAN DELIS, PHD ABPP

1016 SECOND STREET
ENCINITAS, CA 92024

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	121000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SUSAN CASSIDY

13-6043636

(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?
35 50	EMPLOYEE	111477	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

EIG GLOBAL ENERGY PARTNERS

1700 PENNSYLVANIA AVE, NW
SUITE 800
WASHINGTON, DC 20006

(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 51 52	NONE	111396	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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

GREGORY MACK, MD

20-4015690

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	110148	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

PAUL SAENZ, D.O., P.A.

3 SLEEPY COVE
SAN ANTONIO, TX 78230

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	107734	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PAUL SCOTT

13-6043636

(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?
35 50	EMPLOYEE	100034	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CREDO CAPITAL MANAGEMENT LLC

16-1697145

(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 51 68	NONE	98227	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

FRANK NOBLEZA

13-6043636

(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?
35 50	EMPLOYEE	97642	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

R2 INTEGRATED, LLC

20-8980691

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	91780	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

NUMARA SOFTWARE

06-1615661

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	86465	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

TERRY L. THOMPSON, MD

HUH 2041 GEORGIA AVE, NW, STE 4300
WASHINGTON, DC 20060

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	80000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

HESSAM VINCENT

13-6043636

(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?
35 50	EMPLOYEE	72267	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

EDWARD A. RANKIN, MD

1160 VARNUN ST. NE SUITE 312
WASHINGTON, DC 20017

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	68100	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

PRINTING CORPORATION OF AMERICA

52-2120681

(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?
36 50	NONE	67610	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BERNARD R. BACH JR., MD

1029 FRANKLIN AVE.
RIVER FOREST, IL 60305

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	67164	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ROSE MARY EVES

13-6043636

(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?
35 50	EMPLOYEE	64840	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

MID STATE ORTHOPAEDIC & SPORTS MEDI

72-1310991

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	61784	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

RODNEY D. VANDERPLOEG, PHD

5322 PRIMROSE LAKE CIRCLE
SUITE F
TAMPA, FL 33647

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	61000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

LASHAY ROSE

13-6043636

(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?
35 50	EMPLOYEE	55797	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

CHARISSE CALDWELL

13-6043636

(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?
35 50	EMPLOYEE	55295	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WILLIAM GARMOE, PHD

NATIONAL REHAB HOSPITAL
102 IRVING STREET, NW
WASHINGTON, DC 20010

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	54500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CYNTHIA TIMPSON

13-6043636

(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?
35 50	EMPLOYEE	54412	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SAN DIEGO IMAGING MEDICAL GROUP

95-2669833

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	49880	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MARY HIBBARD, PHD

RUSK INSTITUTE OF REHAB
400 EAST 34TH ST, RR515
NEW YORK, NY 10016

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	48832	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

RACHEL BUTLER

13-6043636

(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?
35 50	EMPLOYEE	45243	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SHELLY WARNER

13-6043636

(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?
35 50	EMPLOYEE	44576	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ANNETTE MILLER

13-6043636

(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?
35 50	EMPLOYEE	43740	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MEYLI MARKWARD

13-6043636

(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?
35 50	EMPLOYEE	43669	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

ONE POINT SOLUTIONS

38-3361105

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	42592	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ORRIN SHERMAN, MD

13-2698716

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	40000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

U.S. MEDGROUP, PA, CO.

P.O. BOX 82730
HAPEVILLE, GA 30354

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	38578	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

ROBERT W. DUGAS, MD

1307 WESTMORELAND DRIVE
BATON ROUGE, LA 70806

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	37506	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MARCUS P. COOK, MD

PERRY ORTHOPAEDICS AND SPORTS
2826 RANDOLPH RD
CHARLOTTE, NC 28211

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	36648	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

HERTZ CORPORATION

13-1938568

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	36304	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SHERI JACKSON

13-6043636

(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?
35 50	EMPLOYEE	36748	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

HOWARD UNIVERSITY HOSPITAL

2041 GEORGIA AVE, NW
WASHINGTON, DC 20060

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	33609	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CHARLES A. BUSH-JOSEPH, MD

419 NORTH LINCOLN
HINSDALE, IL 60521

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	33418	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

STEPHEN N. MACCIOCCHI, PHD

P.O. BOX 15498
ATLANTA, GA 30333

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	32500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ABRAMS, FOSTER, NOLE & WILLIAMS

52-1854049

(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 50	NONE	32400	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BUCK CONSULTANTS, LLC

13-3954297

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	31467	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

ALLEN JACKSON, MD

P.O. BOX 188
MEDINA, WA 98039

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	30253	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

WASHINGTON UNIVERSITY

43-0653611

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	29767	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ALL COVERED

13-1921089

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	28913	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

ROBERT GILBERT, JR.

58-2139816

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	27830	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

TIMOTHY TAFT, MD

UNIVERSITY OF NORTH CAROLINA
JAMES A. TAYLOR STUDEND HEALTH
CHAPEL HILL, NC 27599

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	26543	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

JAMES M. GLICK

94-2968363

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	26000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BARNES JEWISH HOSPITAL

PO BOX 954540
ST. LOUIS, MO 63195-4540

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	25890	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ORTHOPEDIC INSTITUTE OF SOUTH FL

81-0669763

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	24909	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

POINTCLICK TECHNOLOGIES

26-0291557

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	21801	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SANTA MONICA ORTH/SPORTS MEDICINE

2020 SANTA MONICA BLVD., SUITE 400
SANTA MONICA, CA 90404

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	20961	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

KEVIN LAWRENCE

13-6043636

(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?
35 50	EMPLOYEE	20439	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BERT MANDELBAUM, MD

2020 SANTA MONICA BLVD., SUITE 400
SANTA MONICA, CA 90404

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	18000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

THE CHOICE, INC

P.O. BOX 62408
BALTIMORE, MD 21264

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	17500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MICHAEL SAXTON

NYU SCHOOL OF MEDICINE
1 PARK AVENUE
NEW YORK, NY 10016

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	16500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ROBERT P. FUCETOLA, PHD

WASHINGTON UNIVERSITY SCHOOL OF MED
4444 FOREST PARK AVE, SUITE 302
ST. LOUIS, MO 63108

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	12000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

NYU RADIOLOGY ASSOCIATES

P.O. BOX 3286
BOSTON, MA 02241

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	9322	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MARK D. OBERLANDER, MD

59-3587472

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	7001	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

MARILYN KRIEBEL

772 JAMACHA ROAD
EL CAJON, CA 92019

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	6858	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

MYERS ADVERTISING, LLC

56-2471516

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	6700	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

POST STREET XRAY

27-0992464

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	6620	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

DAVINCI ENTERPRISE

1830 FRANKLIN STREET, STE 450
DENVER, CO 80218

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	6500	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

THOMAS J. BOLL, PHD

2904 REDMONT PARK LANE
BIRMINGHAM, AL 35205

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	6069	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

PREMIER TECHNOLOGY SOLUTIONS

232 MADISON AVENUE
NEW YORK, NY 10016

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
16 50	NONE	5963	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

CINCINNATI SPORTS MEDICINE

12115 SHERATON LANE
CINCINNATI, OH 45246

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5351	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

RUSK INSTITUTE OF REHABILITATION

400 EAST 34TH STREET
5TH FL, RR 515
NEW YORK, NY 10016

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5001	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

JOHN HEFFERON, MD

676 N. ST. CLAIR STE 450
CHICAGO, IL 60611

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5095	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

ERIC LARSON, PHD

REHABILITATION INSTITUTE OF CHICAGO
345 E. SUPERIOR STREET
CHICAGO, IL 60611

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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)

SUNCOAST MEDICAL CLINIC LLC

PO BOX 8551
BELFAST, ME 04915-8551

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

BARRY JORDAN, MD

785 MAMARONECK AVENUE
WHITE PLAINS, NY 10605

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
49 50	NONE	5000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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
AUDAX MANAGEMENT COMPANY, LLC	28	125516
(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.	
AUDAX MEZZANINE FUND III, L.P. 20-2906382	INDIRECT	
(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
BUCK CONSULTANTS, LLC 13-3954297	16	INDIRECT COMPENSATION
ONE POINT SOLUTIONS 38-3361105	16	INDIRECT COMPENSATION

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information <p style="text-align: center;">This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p style="text-align: center;">▶ File as an attachment to Form 5500.</p>	<small>OMB No. 1210-0110</small> <div style="text-align: center; font-size: 1.2em; font-weight: bold;">2011</div> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection.</p>
For calendar plan year 2011 or fiscal plan year beginning 04/01/2011 and ending 03/31/2012		
A Name of plan BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN		B Three-digit plan number (PN) ▶ 001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN		D Employer Identification Number (EIN) 13-6043636
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: EB DV GLOBAL ALPHA I FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 68417883
a Name of MTIA, CCT, PSA, or 103-12 IE: EB TEMPORARY INVESTMENT FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8941320
a Name of MTIA, CCT, PSA, or 103-12 IE: JP MORGAN STRATEGIC PROPERTY FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 51220770
a Name of MTIA, CCT, PSA, or 103-12 IE: BENCHMARK PLUS INTL OFFSHORE FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 29466774
a Name of MTIA, CCT, PSA, or 103-12 IE: GOTTEx MKT NEUTRAL S&P 500 FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 24332855
a Name of MTIA, CCT, PSA, or 103-12 IE: GOTTEx AGGREGATE REPLICATION FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27466995
a Name of MTIA, CCT, PSA, or 103-12 IE: ENTRUST CAPITAL DIVERSIFIED FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40171129

a Name of MTIA, CCT, PSA, or 103-12 IE: BENCHMARK PORTABLE ALPHA FIXED INC		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 27548030

a Name of MTIA, CCT, PSA, or 103-12 IE: ALLIANCEBERNSTEIN INTL STRATEGIC		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 41006281

a Name of MTIA, CCT, PSA, or 103-12 IE: LOOMIS SAYLES CREDIT ASSET TRUST		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 58913510

a Name of MTIA, CCT, PSA, or 103-12 IE: PICTET EMERGING LOCAL CURR GLOBAL		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 38650464

a Name of MTIA, CCT, PSA, or 103-12 IE: EB DV STOCK INDEX FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16229925

a Name of MTIA, CCT, PSA, or 103-12 IE: TBC EMERGING MARKETS EQUITY		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 64087520

a Name of MTIA, CCT, PSA, or 103-12 IE: WA FLTG RATE HI INCOME FUND		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1305378

a Name of MTIA, CCT, PSA, or 103-12 IE: WAMCO OPPORTUNISTIC US HIGH YIELD		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2531518

a Name of MTIA, CCT, PSA, or 103-12 IE: WAMCO OPPORTUNISTIC INTL INVESTMENT		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code E	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1018765

a Name of MTIA, CCT, PSA, or 103-12 IE: EB DV LOG SIP		
b Name of sponsor of entity listed in (a): THE BANK OF NEW YORK MELLON		
c EIN-PN 13-5160382-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 54955780

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

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) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 <div style="font-size: 24pt; font-weight: bold;">2011</div> This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning <u>04/01/2011</u> and ending <u>03/31/2012</u>		
A Name of plan <u>BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u>		B Three-digit plan number (PN) ► <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u>		D Employer Identification Number (EIN) <u>13-6043636</u>

Part I	Asset and Liability Statement		(a) Beginning of Year	(b) End of Year
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	Total noninterest-bearing cash	1a		
b	Receivables (less allowance for doubtful accounts):			
	(1) Employer contributions	1b(1)		
	(2) Participant contributions	1b(2)		
	(3) Other.....	1b(3)	20812012	8809298
c	General investments:			
	(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1065808	173046337
	(2) U.S. Government securities.....	1c(2)	26631779	27753216
	(3) Corporate debt instruments (other than employer securities):			
	(A) Preferred	1c(3)(A)	9943450	9489596
	(B) All other.....	1c(3)(B)	11792853	17068043
	(4) Corporate stocks (other than employer securities):			
	(A) Preferred	1c(4)(A)	771830	389205
	(B) Common	1c(4)(B)	152887736	143997825
	(5) Partnership/joint venture interests	1c(5)	116142330	209255553
	(6) Real estate (other than employer real property)	1c(6)		
	(7) Loans (other than to participants)	1c(7)		
	(8) Participant loans	1c(8)		
	(9) Value of interest in common/collective trusts.....	1c(9)	728096041	551409235
	(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)	4350240	4855661
	(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	288870438	254543964
	(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
	(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	1361364517	1400617933

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	2580851	3889259
i Acquisition indebtedness	1i		
j Other liabilities	1j	33427600	15429478
k Total liabilities (add all amounts in lines 1g through 1j)	1k	36008451	19318737

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	1325356066	1381299196
-----------------------------------------------------------	-----------	------------	------------

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)	172120000	
(B) Participants	2a(1)(B)		
(C) Others (including rollovers)	2a(1)(C)		
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		172120000
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)	735513	
(C) Corporate debt instruments	2b(1)(C)	852263	
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)	5084813	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		6672589
(2) Dividends: (A) Preferred stock	2b(2)(A)	32215	
(B) Common stock	2b(2)(B)	2062270	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	12493513	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		14587998
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	409025855	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	410555781	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-1529926

		(a) Amount	(b) Total
2b (5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)		
(B) Other	2b(5)(B)	6307647	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		6307647
(6) Net investment gain (loss) from common/collective trusts	2b(6)		7169337
(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)		185562
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		3399851
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		208913058

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	134023771	
(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)		134023771
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)	6279502	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	5982924	
(4) Other	2i(4)	6683731	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		18946157
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		152969928

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		55943130
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

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) ☒ Unqualified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

b Did the accountant perform a limited scope audit pursuant to 29 CFR 2520.103-8 and/or 103-12(d)? ☐ Yes ☒ No

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

(1) Name: ABRAMS, FOSTER, NOLE & WILLIAMS, PA

(2) EIN: 52-1854049

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete 4j and 4l. MTIAs also do not complete 4l.

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.).....		X	
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.).....		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.)		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.).....		X	
e Was this plan covered by a fidelity bond?.....	X		2000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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?		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?		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.).....	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.).....	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?.....		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.).....			
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

- 5a** Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?

If "Yes," enter the amount of any plan assets that reverted to the employer this year..... ☐ Yes ☒ No Amount:

- 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)

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 section 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 2011 This Form is Open to Public Inspection.
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For calendar plan year 2011 or fiscal plan year beginning 04/01/2011 and ending 03/31/2012

A Name of plan <u>BERT BELL / PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>RETIREMENT BOARD OF BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN</u>	D Employer Identification Number (EIN) <u>13-6043636</u>

Part I	Distributions
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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	<u>0</u>
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): <u>13-5160382</u>		
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	<u>0</u>

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)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Part III	Amendments
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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.....	<input checked="" type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.).....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (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 items 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 items 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 items 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 items 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 items 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 items 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 participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year	14a	
b The plan year immediately preceding the current plan year	14b	
c The second preceding plan year	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 item 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 items (a) through (c)

- a** Enter the percentage of plan assets held as:

Stock: 41% Investment-Grade Debt: 24% High-Yield Debt: 6% Real Estate: 7% Other: 22%

- b** Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☒ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

- c** What duration measure was used to calculate item 19(b)?

☒ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

**BERT BELL/PETE ROZELLE NFL PLAYER
RETIREMENT PLAN**

**Financial Statements
and
Independent Auditors' Report**

Years Ended March 31, 2012 and 2011

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Certified Public Accountants

2 Hamill Road, Suite 241
West Quadrangle
Baltimore, MD 21210-1886
(410) 433-6830 / Fax (410) 433-6871

Member: American Institute of Certified Public Accountants
and Maryland Association of Certified Public Accountants

INDEPENDENT AUDITORS' REPORT

To the Retirement Board of the
Bert Bell/Pete Rozelle NFL Player Retirement Plan

We have audited the accompanying statements of net assets available for benefits of the Bert Bell/Pete Rozelle NFL Player Retirement Plan (Plan) as of March 31, 2012 and 2011, and the related statements of changes in net assets available for benefits for the years then ended. These financial statements and supplemental schedules are the responsibility of the Plan's Retirement Board. Our responsibility is to express an opinion on these financial statements based on our audits.

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audits to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation. We believe that our audits provide a reasonable basis for our opinion.

In our opinion, the financial statements referred to above present fairly, in all material respects, information regarding the Plan's net assets available for benefits as of March 31, 2012 and 2011 and changes therein for the years then ended, in conformity with accounting principles generally accepted in the United States of America.

Our audits of the financial statements of the Bert Bell/Pete Rozelle NFL Player Retirement Plan as of and for the year ended March 31, 2012 and 2011 were made for the purpose of forming an opinion on the basic financial statements taken as a whole. The accompanying supplemental schedules of investment and administrative expenses, assets acquired and disposed of within the plan year, assets held for investment purposes, reportable transactions and loans and fixed income securities in default together referred to as supplemental information, are presented for the purpose of additional analysis and are not a required part of the basic financial statement, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. These supplemental schedules are the responsibility of the Plan's management. The supplemental schedules have been subjected to the auditing procedures applied in our audits of the basic 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 auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements taken as a whole.



Abrams, Foster, Nole & Williams, P.A.
Certified Public Accountants
Baltimore, Maryland

November 26, 2012

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Statements of Net Assets Available for Benefits
March 31, 2012 and 2011

	2012	2011
ASSETS		
Investments, at Fair Value		
Foreign cash	\$ 38,942	\$ -
Common stock	143,997,825	152,887,736
Preferred stock	389,205	771,830
Corporate debt	18,395,789	21,736,303
United States government agency securities	27,753,216	26,631,779
Pooled funds	1,201,233,658	1,138,524,857
Total investments	<u>1,391,808,635</u>	<u>1,340,552,505</u>
Receivable for securities sold	6,484,516	18,694,655
Interest and dividends receivable	538,991	924,629
Other plan receivables	1,194,489	1,051,669
Total receivables	<u>8,217,996</u>	<u>20,670,953</u>
Prepaid expenses	-	84,545
Cash	591,302	56,514
Total assets	<u>1,400,617,933</u>	<u>1,361,364,517</u>
LIABILITIES		
Payable for securities purchased	15,429,478	33,427,600
Accrued expenses	3,889,259	2,580,850
Total liabilities	<u>19,318,737</u>	<u>36,008,450</u>
Net Assets Available for Benefits	<u>\$ 1,381,299,196</u>	<u>\$ 1,325,356,067</u>

"See Accompanying Notes"

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Statements of Changes in Net Assets Available for Benefits
Years Ended March 31, 2012 and 2011

	2012	2011
ADDITIONS		
Net Investment Income		
Dividend and interest income	\$ 21,260,587	\$ 19,806,826
Net realized and unrealized appreciation (depreciation) in fair value of investments	15,532,470	122,142,206
Total investment income	36,793,057	141,949,032
Less investment expenses	5,990,110	4,226,880
Net investment income	30,802,946	137,722,152
Contributions	172,120,000	166,638,860
Other income	-	53,597
Total additions	202,922,946	304,414,609

DEDUCTIONS		
Administrative Expenses	12,956,046	9,556,252
Benefit payments	134,023,771	108,192,868
Total deductions	146,979,816	117,749,120
Net increase	55,943,130	186,665,489
Net assets available for benefits:		
Beginning of year	1,325,356,066	1,138,690,577
End of Year	<u>\$ 1,381,299,196</u>	<u>\$ 1,325,356,066</u>

"See Accompanying Notes"

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN

Notes to Financial Statements

March 31, 2012 and 2011

1. DESCRIPTION OF THE PLAN

The following brief description of the Bert Bell/Pete Rozelle NFL Player Retirement Plan (Plan) is provided for general information purposes only. Participants should refer to the Plan document for more complete information. Capitalized terms have the meaning provided for in the Plan documents.

A. General

The Plan is a multiemployer defined benefit pension plan, which provides eligible Players with pension and disability benefits, and offers survivor protections for their wives and family. The Plan is maintained in accordance with the 2011 Collective Bargaining Agreement ("CBA") between the National Football League Players Association ("NFLPA") and the National Football League Management Council ("NFL Management Council"). The Bert Bell/Pete Rozelle NFL Player Retirement Plan Trust holds the assets of the Plan.

The Plan has been revised and amended many times since it was created. Most recently, the Plan was amended and restated effective April 1, 2012, and immediately prior to this date, the Plan was amended and restated effective August 1, 2011. These amendments were necessary in order to reflect new Plan terms and provisions provided for in the 2011 CBA and to comply with applicable law. The current key features are summarized below.

B. Vesting

A Vested Player is a Player who is eligible to receive retirement benefits. Generally speaking, Players become Vested Players either by earning enough Credited Seasons or by satisfying special rules. A Player may also become vested if he qualifies for total and permanent disability benefits while an Active Player.

C. Benefits

There are two retirement benefits under the Plan: (1) the Benefit Credit Pension; and (2) the Legacy Credit Pension. All Vested Players are entitled to Benefit Credit Pension benefits. Only certain Vested Players are entitled to a Legacy Credit Pension. In addition, some Vested Players who are entitled to a Legacy Credit Pension also will receive an increase to their Benefit Credit Pension due to the Legacy Floor.

The Plan also provides total and permanent disability, line-of-duty disability, spouse's preretirement death and widow's and surviving children's benefits.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

1. DESCRIPTION OF THE PLAN (Continued)

D. Distributions

Players may elect to receive their retirement benefits at Normal Retirement, Early Retirement, or Deferred Retirement. In some cases, a Player may also be eligible to receive an Early Payment Benefit before he retires.

The Benefit Credit Pension and Legacy Credit Pension will be paid in the form of a Life Only Pension if the Player is single and in the form of a Qualified Joint and Survivor Annuity if the Player is married, unless the Player chooses an optional form of payment and a spousal waiver, if applicable, is signed. Optional forms of payment include the following, although not every option is available for the Legacy Credit Pension: Life Only Pension, Qualified Joint and Survivor Annuity, Qualified Optional Joint and Survivor Annuity, Life Only Pension with Social Security Adjustment, Life and Contingent Annuitant Pension, and Life and 10-Year Certain Pension.

E. Plan Amendment or Termination

The Plan may be amended or terminated in accordance with the Plan documents, governing CBA between the NFLPA and the NFL Management Council, and the Employee Retirement Income Security Act of 1974 (ERISA). Retirement benefits under this Plan are insured by the Pension Benefit Guaranty Corporation ("PBGC"), a federal insurance agency, up to limits set by ERISA.

2. PLAN AMENDMENTS

As noted previously, the Plan was recently amended and restated effective as of August 1, 2011 to implement the changes required by the 2011 CBA, and to comply with applicable law. Some of the most important of these amendments are described below. Participants should refer to the Plan document for more complete information.

- A. The amount of monthly Benefit Credit Pension that Players earn for each year in the NFL was increased beginning in 2012, and will be increased again in both 2015 and 2018.
- B. A new Legacy Credit Pension is provided for certain Vested Players with Credited Seasons prior to 1993.
- C. The prior Benefit Credit Pension of certain Vested Players with Credited Seasons prior to 1993 is increased to be at least \$600 a month.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

2. PLAN AMENDMENTS (Continued)

- D. The survivor benefits paid to certain widows and other beneficiaries of deceased Players with Credited Seasons prior to 1993 were generally increased.
- E. Total and permanent disability benefits changes include:
 - i. Two new categories, Inactive A and Inactive B, have replaced the prior Football Degenerative and Inactive categories.
 - ii. Some disability benefits increased in 2011 and will be further increased in 2016.
 - iii. Players who received an award of Social Security disability benefits before they reached age 55 and who have elected to receive their retirement benefits can now qualify for total and permanent disability benefits.
 - iv. Players who earn up to \$30,000 in income can still receive total and permanent disability benefits.
 - v. Total and permanent disability benefits paid after a Player reaches age 55 will be reduced by the amount of his Life Only Pension at age 55. Such Player may elect to begin his retirement benefits at that time, or at a later date.
- F. Line-of-duty benefit minimum amounts have increased for new line-of-duty applications.

3. SIGNIFICANT ACCOUNTING POLICIES

A. Dividend and Interest Income

Dividend income is recognized on the ex-dividend date. Interest income is recognized on the accrual basis.

B. Security Transactions

Purchases and sales of securities are recorded on the trade date. Realized gains or losses resulting from sales or disposals of securities are determined based on the average cost method of securities sold.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

3. SIGNIFICANT ACCOUNTING POLICIES (Continued)

C. Contributions

Contributions from member clubs are accrued based upon amounts required to be funded under the Collective Bargaining Agreement between the NFLPA and the NFL Management Council. The contributions meet the minimum funding requirements under ERISA.

D. Income Tax Status

- (1) On November 26, 2003 the Internal Revenue Service (IRS) provided the Plan a determination letter that the Plan document, as amended, is qualified under Section 401(a) of the Internal Revenue Code (Code), and the Trust is, therefore, exempt from federal income tax under Section 501(a) of the Code. 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 Internal Revenue Service or Department of Labor.
- (2) The Retirement Board is not aware of any course of action or series of events that have occurred that will adversely affect the Plan's qualified status at March 31, 2010.

The plan administrator has analyzed the tax positions taken by the plan, and has concluded that as of March 31, 2012, 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 tax periods in progress. The plan administrator believes it is no longer subject to income tax examinations for years prior to March 31, 2010.

E. Accumulated Plan Benefits

- (1) Accumulated plan benefits are those estimated future periodic payments, including lump-sum distributions that are attributable under the Plan's provisions to the credited seasons players earned through the valuation date. Accumulated plan benefits are expected to be paid to: (a) retired and vested inactive players or their beneficiaries, (b) beneficiaries of players who have died, and (c) present players or their beneficiaries. Benefits payable under all circumstances (retirement, death and disability) are included to the extent they are deemed attributable to service rendered to the valuation date.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

3. SIGNIFICANT ACCOUNTING POLICIES (Continued)

E. Accumulated Plan Benefits

(2) Benefit payments to participants are recorded upon distribution.

F. Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

G. Market Risk

The Plan provides for investments in various investment securities that are exposed to certain risks such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, changes in value of investment securities could occur in the near term and these changes could materially affect the amounts reported in the statement of net assets available for benefits.

H. Party in Interest

The Bank of New York Mellon is the Trustee of the Plan and provides investment custody service to the Plan. Fees paid to The Bank of New York Mellon for these services for the year ended March 31, 2012, was \$301,536.

I. Adoption of Accounting Standards

The Plan adopted FASB Statement No. 168 which recognizes the FASB Accounting Standards Codification (ASC) (Codification) as the source of authoritative U.S. generally accepted accounting principles (GAAP) recognized by the FASB to be applied by nongovernmental entities. The Codification supersedes all pre-existing non-SEC accounting and reporting standards. All other non-grandfathered non-SEC accounting literature not included in the Codification is non authoritative.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
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March 31, 2012 and 2011

4. ACCUMULATED PLAN BENEFITS

The actuarial present value of accumulated plan benefits was calculated by the Plan's enrolled actuary, and is that amount that results from applying actuarial assumptions to adjust the accumulated plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, disability, withdrawal or retirement) between the valuation date and the expected date of payment.

The accumulated plan benefit information as of April 1, 2011 and 2010 is as follows:

Actuarial present value of accumulated plan benefits	<u>2011</u>	<u>2010</u>
Vested benefits		
Participants currently receiving payments	\$ 855,054,696	\$ 728,084,755
Other participants	<u>1,111,510,106</u>	<u>881,623,515</u>
	1,966,564,802	1,609,708,270
Nonvested benefits	<u>132,688,891</u>	<u>41,401,406</u>
Total	<u>\$2,099,253,693</u>	<u>\$1,651,109,676</u>

The changes in accumulated plan benefit information for the years ended March 31, 2011 and 2010 are as follow:

	<u>2011</u>	<u>2010</u>
Value of benefits accumulated and changes in data	\$128,221,990	\$ 79,266,812
Increase due to passage of time	115,783,460	109,442,237
Less benefits paid	(108,192,868)	(94,294,949)
Changes in actuarial assumptions	<u>312,331,435</u>	<u>0</u>
Total	<u>\$ 448,144,017</u>	<u>\$ 94,414,100</u>

Significant assumptions underlying the actuarial computations as of April 1, 2011 and 2010 are as follow:

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

4. ACCUMULATED PLAN BENEFITS (Continued)

Assumed rate of return
on investments 7.25%

Retirement age

Mortality basis RP-2000 Table projected to
2020

Player Turnover	1 year of service –	19.5%
	2 years of service –	11.0%
	3 years of service –	16.5%
	4 years of service –	15.8%
	5 years of service –	17.4%
	6 years of service –	18.4%
	7 years of service –	19.9%
	8 years of service –	21.4%
	9 years of service –	24.6%
	10 years of service –	26.2%
	11 years of service –	28.2%
	12 years of service –	30.5%
	13 years of service –	35.6%
	14 years of service –	37.2%
	15 years of service –	42.5%
	16 years of service –	55.8%
	17 years of service –	68.7%
	18 years of service –	78.6%
	19 years of service –	90.6%
	20 years of service –	100.0%

Actuarial Cost Method Unit credit cost method

<u>Retirement Age</u>	<u>Player with Pre-93 Season Rate</u>	<u>Player without Pre-93 Season Rate</u>
45	15%	0%
46-49	3%	0%
50-54	2%	0%
55	25%	50%
56-59	5%	5%
60	10%	10%
61	5%	5%
62-63	10%	10%
64	25%	25%
65	100%	100%

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

5. INVESTMENTS

The Trustee and custodian of the Plan's securities is The Bank of New York Mellon. Investment advisory agreements are currently in force with various investment managers.

The Plan's investments (including investments bought, sold, as well as held during the year) appreciated (depreciated) in value during years ended March 31, 2012 and 2011, as follows:

	<u>2012</u>	<u>2011</u>
Common stocks	\$ 3,852,098	\$ 30,896,481
Preferred stocks	(144,610)	(34,233)
Corporate debt	200,168	1,891,304
Government securities	1,681,349	346,929
Pooled funds	9,943,466	89,041,725
Total	<u>\$15,532,470</u>	<u>\$122,142,206</u>

The investments that represent more than 5% of the plan's net assets as of March 31, 2012 and 2011, respectively are as follows:

	<u>2012</u>	<u>2011</u>
BNY Mellon Cash Reserve	\$173,007,138	-0-

	<u>2012</u>	<u>2011</u>
EB Temporary Investment Fund II	-0-	\$183,525,211
Loomis Sayles Credit Asset Trust – Class B	-0-	70,642,045
EB DV Stock Index Fund	-0-	70,425,003
Pimco Diversified Income Fund Institution	-0-	87,983,702

6. FAIR VALUE MEASUREMENTS

ASC 820-10-50-2, formerly Financial Accounting Standards Board No. 157, *Fair Value Measurements* (FASB Statement No. 157), establishes a framework for measuring fair value. 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 820-10-50-2 are described below:

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

6. FAIR VALUE MEASUREMENTS (Continued)

Level 1 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 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 assets or liabilities;
- Inputs that are derived principally from or corroborate 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.

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

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of March 31, 2012.

Cash: Valued at the closing price reported on the active market on which cash is traded.

Common stocks, corporate bonds and U.S. government securities: Valued at the closing price reported on the active market in which the individual securities are traded.

Mutual funds: Valued at the net assets value ("NAV") of shares held by the plan at year end.

Treasury Prime Cash: Value at the closing price reported on the active market on which the securities are traded.

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN

Notes to Financial Statements

March 31, 2012 and 2011

6. FAIR VALUE MEASUREMENTS (Continued)

Guaranteed investment contract: Valued at the relative fair value of the underlying market value of investments in the contract.

The methods described above may produce a fair value calculation that may not be indicative of net realized value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following table is a roll-forward of the statement of financial position amounts for financial instruments classified within Level 3 of the fair value hierarchy defined above:

Fair Value recorded at March 31, 2011	\$ 848,157,468
Realized and unrealized gains/(losses), net	14,454,103
Purchase of portfolio investments:	
Preferred Stock	1,816,608
Pooled funds	126,940,212
Proceeds from sale or distribution of investments	(224,031,334)
Fair Value at March 31, 2012	<u><u>\$ 767,337,057</u></u>

There were no transfers of assets between level 1, 2, or 3 classification for the year ended.

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits for the years ending March 31, 2012 and 2011 are as follows:

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

6. FAIR VALUE MEASUREMENTS (Continued)

Fair Value Measurement at Reporting Date Using:				
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
<u>March 31, 2012</u>				
Cash	\$ 173,007,394	\$ -	\$ 173,007,394	\$ -
Common stock	143,997,825	142,181,217	-	1,816,608
Preferred stock	389,205	-	389,205	-
Corporate debt	18,395,789	-	18,395,789	-
United States government agency securities	27,753,217	5,336,974	22,416,243	-
Pooled funds	1,028,226,263	254,640,919	8,064,895	765,520,449
Total	<u>\$ 1,391,769,693</u>	<u>\$ 402,159,110</u>	<u>\$ 222,273,526</u>	<u>\$ 767,337,057</u>

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits for the year ending March 31, 2011 as follows:

Fair Value Measurement at Reporting Date Using:				
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
<u>March 31, 2011</u>				
Cash	\$ 2,173	\$ 2,173	\$ -	\$ -
Common stock	152,322,483	152,322,483	-	-
Preferred stock	771,830	-	771,830	-
Corporate debt	21,818,474	-	21,818,474	-
United States government agency securities	26,631,779	4,137,434	22,494,345	-
Pooled funds	1,139,005,766	288,804,408	2,043,890	848,157,468
Total	<u>\$ 1,340,552,505</u>	<u>\$ 445,266,498</u>	<u>\$ 47,128,539</u>	<u>\$ 848,157,468</u>

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Notes to Financial Statements
March 31, 2012 and 2011

7. RECEIVABLES FROM OTHER PLANS

The Plan provided certain administrative services to other plans and incurred reimbursable expenses in connection with the provision of these services, as follows:

	<u>2012</u>	<u>2011</u>
NFL Player Qualified Annuity Plan	\$ 76,465	\$ 95,505
NFL Player Non Qualified Annuity Program	254,394	123,732
NFL Player Annuity & Insurance Company	78,926	73,656
NFL Player Second Career Savings Plan	415,264	434,538
NFL Player Supplemental Disability Plan	136,299	101,119
88 Plan	170,724	133,106
Gene Upshaw NFL Player Health Reimbursement Account Plan	<u>62,417</u>	<u>90,013</u>
Total	<u>\$1,119,489</u>	<u>\$1,051,669</u>

These amounts are reflected as receivables on the Statements of Net Assets Available for Benefits as of March 31, 2012 and 2011 because the amounts had not yet been reimbursed from the respective benefit plans as of those dates.

8. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

There were no reconciling differences, the net assets available for benefits per financial statement agree to net assets available for benefits per the form 5500. Benefits paid to participants per the financial statement also agree to benefits paid to participants per form 5500.

9. SUBSEQUENT EVENTS

FASB Accounting Standards Codification ASC 855-10-50 subsequent events requires organizations to evaluate events and transactions that occur after the statement of financial position date but before the date the financial statements are available to be issued. ASC 855-10-50 requires entities to recognize in the financial statements the effect of all events or transactions that provide additional evidence of conditions that existed at the statement of financial position date, including the estimates inherent in the financial statement preparation process. Subsequent events that provide evidence about conditions that arose after the statement of financial position date should be disclosed if the financial statements would otherwise be misleading. The Plan has evaluated subsequent events through the date the financial statements were available to be issued on November 26, 2012, and determined there were not material transactions which need to be disclosed.

SCHEDULES OF INVESTMENT AND ADMINISTRATIVE EXPENSES

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Schedules of Investment and Administrative Expenses
Years Ended March 31, 2012 and 2011

	2012	2011
INVESTMENT EXPENSES		
Trustee fees	\$ 301,536	\$ 284,126
Investment management fees	5,309,519	3,589,526
Investment advisory fees	379,056	353,228
Total Investment Expenses	<u>\$ 5,990,110</u>	<u>\$ 4,226,880</u>

ADMINISTRATIVE EXPENSES		
Actuarial, Auditing and Benefit Statement Preparation		
Aon Consulting Inc.	\$ 1,953,519	\$ 474,989
Abrams, Foster, Nole & Williams, P.A.	32,400	68,086
Attorney Fees		
Groom Law Group	4,287,470	4,059,458
Legal settlement fees	6,113	2,745
Insurance Expense		
Pension Benefit Guaranty Corporation	103,518	26,395
Fiduciary Liability Insurance	197,580	145,514
Plan Office Expenses		
Salaries and and related expenses	845,290	709,556
Rent	149,989	211,581
Insurance	202,387	193,110
Retirement Board costs	70,247	68,234
Plan Office Pension Contributions	59,911	56,512
Other Plan Office expenses	462,477	353,516
Other		
Akin, Gump, Strauss, Hauer, & Feld	1,785	-
Sibson Consulting	434,103	218,714
Buck Consultants, LLC	31,467	107,767
Korn Ferry	159,849	-
Advanced Computer Solutions	143,109	121,682
Stephen S. Haas, M.D.	170,805	138,506
Mary Hibbard	41,832	-
Player medical and travel expenses	3,198,943	2,368,197
Printing expenses	67,610	91,548
One Point Solutions	42,592	9,876
PointClick Tech	21,801	-
R2Integrated, LLC	91,780	-

BERT BELL/PETE ROZELLE NFL PLAYER RETIREMENT PLAN
Schedules of Investment and Administrative Expenses (Continued)
Years Ended March 31, 2012 and 2011

	2012	2011
ADMINISTRATIVE EXPENSES (continued)		
Thomas Keating	-	9,740
Premier Tech Solutions	5,963	13,680
All Covered	28,913	35,881
Numara Software	86,465	65,150
Miscellaneous expenses	58,127	5,815
Total Administrative Expenses	<u>\$ 12,956,046</u>	<u>\$ 9,556,252</u>

**SCHEDULE OF ASSETS ACQUIRED AND
DISPOSED OF WITHIN THE PLAN YEAR**

SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	* INDICATES PENDING SETTLEMENT			
	** INDICATES TRANSACTION PENDING IN PRIOR YEAR			
20,000.0000	00206RAZ5	AT&T INC 3.875% 08/15/2021 DD 08/18/11	19,941.00-	21,466.80
10,000.0000	00206RBA9	AT&T INC 5.550% 08/15/2041 DD 08/18/11	10,126.30-	11,462.10
4,805,000.0000	99ZAFR825	BARCLAYS CP REPO REPO 0.010% 08/09/2011 DD 08/08/11	4,805,000.00-	4,805,000.00
5,077,000.0000	99ZAFQUP1	BARCLAYS CP REPO REPO 0.020% 07/29/2011 DD 07/28/11	5,077,000.00-	5,077,000.00
3,950,000.0000	99ZAFW006	BARCLAYS CP REPO REPO 0.030% 09/14/2011 DD 09/13/11	3,950,000.00-	3,950,000.00
4,935,000.0000	99ZAGEQ23	BARCLAYS CP REPO REPO 0.040% 01/27/2012 DD 01/26/12	4,935,000.00-	4,935,000.00
4,849,000.0000	99ZAFV8U4	BARCLAYS CP REPO REPO 0.040% 09/08/2011 DD 09/07/11	4,849,000.00-	4,849,000.00
4,758,000.0000	99ZAFWF67	BARCLAYS CP REPO REPO 0.040% 09/09/2011 DD 09/08/11	4,758,000.00-	4,758,000.00
1,200,000.0000	99ZAGEXK5	BARCLAYS CP REPO REPO 0.050% 01/30/2012 DD 01/27/12	1,200,000.00-	1,200,000.00
4,547,000.0000	99ZAFV1M9	BARCLAYS CP REPO REPO 0.050% 09/07/2011 DD 09/06/11	4,547,000.00-	4,547,000.00
3,764,000.0000	99ZAFXMR1	BARCLAYS CP REPO REPO 0.050% 09/19/2011 DD 09/16/11	3,764,000.00-	3,764,000.00
3,659,000.0000	99ZAFXUW1	BARCLAYS CP REPO REPO 0.050% 09/20/2011 DD 09/19/11	3,659,000.00-	3,659,000.00

<u>SHARES/ PAR VALUE</u>	<u>SECURITY ID</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PROCEEDS</u>
* INDICATES PENDING SETTLEMENT				
** INDICATES TRANSACTION PENDING IN PRIOR YEAR				
5,000,000.0000	99ZAGE5R1	BARCLAYS CP REPO REPO 0.060% 01/31/2012 DD 01/30/12	5,000,000.00-	5,000,000.00
4,785,000.0000	99ZAFS021	BARCLAYS CP REPO REPO 0.060% 08/15/2011 DD 08/12/11	4,785,000.00-	4,785,000.00
4,587,000.0000	99ZAFVNY9	BARCLAYS CP REPO REPO 0.060% 09/02/2011 DD 09/01/11	4,587,000.00-	4,587,000.00
3,558,000.0000	99ZAFXE90	BARCLAYS CP REPO REPO 0.060% 09/16/2011 DD 09/15/11	3,558,000.00-	3,558,000.00
3,642,000.0000	99ZAFX0X2	BARCLAYS CP REPO REPO 0.060% 09/21/2011 DD 09/20/11	3,642,000.00-	3,642,000.00
3,100,000.0000	99ZAF3VW6	BARCLAYS CP REPO REPO 0.060% 11/04/2011 DD 11/03/11	3,100,000.00-	3,100,000.00
5,100,000.0000	99ZAGH1F4	BARCLAYS CP REPO REPO 0.070% 02/17/2012 DD 02/16/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGKF05	BARCLAYS CP REPO REPO 0.070% 02/29/2012 DD 02/28/12	5,100,000.00-	5,100,000.00
1,000,000.0000	99ZAGLS41	BARCLAYS CP REPO REPO 0.070% 03/08/2012 DD 03/07/12	1,000,000.00-	1,000,000.00
4,808,000.0000	99ZAFS732	BARCLAYS CP REPO REPO 0.070% 08/16/2011 DD 08/15/11	4,808,000.00-	4,808,000.00
5,100,000.0000	99ZAGHKG1	BARCLAYS CP REPO REPO 0.080% 02/15/2012 DD 02/14/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGFU58	BARCLAYS CP REPO REPO 0.090% 02/03/2012 DD 02/02/12	5,100,000.00-	5,100,000.00

SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	* INDICATES PENDING SETTLEMENT			
	** INDICATES TRANSACTION PENDING IN PRIOR YEAR			
5,100,000.0000	99ZAGF1X9	BARCLAYS CP REPO REPO 0.090% 02/06/2012 DD 02/03/12	5,100,000.00-	5,100,000.00
5,010,000.0000	99ZAGJ2C6	BARCLAYS CP REPO REPO 0.090% 02/27/2012 DD 02/24/12	5,010,000.00-	5,010,000.00
2,700,000.0000	99ZAGMNF9	BARCLAYS CP REPO REPO 0.090% 03/14/2012 DD 03/13/12	2,700,000.00-	2,700,000.00
5,100,000.0000	99ZAGFMM0	BARCLAYS CP REPO REPO 0.100% 02/02/2012 DD 02/01/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGLEB9	BARCLAYS CP REPO REPO 0.100% 03/06/2012 DD 03/05/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGLEK23	BARCLAYS CP REPO REPO 0.100% 03/07/2012 DD 03/06/12	5,100,000.00-	5,100,000.00
2,800,000.0000	99ZAGLOF6	BARCLAYS CP REPO REPO 0.100% 03/09/2012 DD 03/08/12	2,800,000.00-	2,800,000.00
3,571,000.0000	99ZAGME10	BARCLAYS CP REPO REPO 0.100% 03/13/2012 DD 03/12/12	3,571,000.00-	3,571,000.00
2,700,000.0000	99ZAGMVZ6	BARCLAYS CP REPO REPO 0.100% 03/15/2012 DD 03/14/12	2,700,000.00-	2,700,000.00
5,026,000.0000	99ZAGP7U7	BARCLAYS CP REPO REPO 0.100% 03/30/2012 DD 03/29/12	5,026,000.00-	5,026,000.00
5,100,000.0000	99ZAGG448	BARCLAYS CP REPO REPO 0.110% 02/13/2012 DD 02/10/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGJ9M7	BARCLAYS CP REPO REPO 0.110% 02/28/2012 DD 02/27/12	5,100,000.00-	5,100,000.00

5500 ACQUISITIONS/DISPOSITIONS OF ASSETS WITHIN THE SAME PLAN YEAR REPORT
 Bert Bell/Pete Rozelle NFL Player Retirement Plan
 FOR THE PERIOD 01 APRIL 2011 THROUGH 31 MARCH 2012
 EIN/PN 13-0043636/001 Accountant's Opinion

SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	* INDICATES PENDING SETTLEMENT			
	** INDICATES TRANSACTION PENDING IN PRIOR YEAR			
5,100,000.0000	99ZAGK3B4	BARCLAYS CP REPO REPO 0.110% 03/05/2012 DD 03/02/12	5,100,000.00-	5,100,000.00
4,700,000.0000	99ZAGL7G7	BARCLAYS CP REPO REPO 0.120% 03/12/2012 DD 03/09/12	4,700,000.00-	4,700,000.60
5,082,000.0000	99ZAFQ1L2	BARCLAYS CP REPO REPO 0.120% 08/01/2011 DD 07/29/11	5,082,000.00-	5,082,000.00
5,100,000.0000	99ZAGFDP3	BARCLAYS CP REPO REPO 0.130% 02/01/2012 DD 01/31/12	5,100,000.00-	5,100,000.00
5,100,000.0000	99ZAGKV98	BARCLAYS CP REPO REPO 0.130% 03/02/2012 DD 03/01/12	5,100,000.00-	5,100,000.00
5,015,000.0000	99ZAGPMG1	BARCLAYS CP REPO REPO 0.130% 03/27/2012 DD 03/26/12	5,015,000.00-	5,015,000.00
5,100,000.0000	99ZAGHCT2	BARCLAYS CP REPO REPO 0.140% 02/14/2012 DD 02/13/12	5,100,000.00-	5,100,000.00
4,794,000.0000	99ZAFRFX9	BARCLAYS CP REPO REPO 0.180% 08/03/2011 DD 08/02/11	4,794,000.00-	4,794,000.00
3,608,000.0000	99ZAFQ8R2	BARCLAYS CP REPO REPO 0.250% 08/02/2011 DD 08/01/11	3,608,000.00-	3,608,000.00
1,900,000.0000	99ZAGP083	BARCLAYS DBT REPO REPO 0.120% 03/29/2012 DD 03/28/12	1,900,000.00-	1,900,000.00
40,000.0000	149123BV2	CATERPILLAR INC 3.900% 05/27/2021 DD 05/27/11	39,813.20-	43,910.60
10,000.0000	167593GE6	CHICAGO ILL O HARE INTL ARPT R 5.500% 01/01/2031 DD 05/05/11	9,776.00-	11,448.30

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SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	* INDICATES PENDING SETTLEMENT			
	** INDICATES TRANSACTION PENDING IN PRIOR YEAR			
10,000.0000	167593FJ6	CHICAGO ILL O HARE INTL ARPT R 5.625% 01/01/2035 DD 05/05/11	9,700.30-	11,403.50
10,000.0000	181006FS1	CLARK CNTY NEV PASSENGER FAC C 5.250% 07/01/2039 DD 02/03/10	9,110.90-	10,688.60
7.0000	EDF215C2S	EURO-BOBL FUTURE (EUX) EXP MAR 12	.00	6,387.25
4.0000	EDF306L1S	EURO-BUND FUTURE (EUX) EXP DEC 11	.00	508.85
4.0000	EDF306C2S	EURO-BUND FUTURE (EUX) EXP MAR 12	.00	17,411.92
1,265,000.0000	99ZAGEQ56	GREENWH CAT 2 REPO 0.060% 01/27/2012 DD 01/26/12	1,265,000.00-	1,265,000.00
2,490,000.0000	99ZAGJ2F9	GREENWH CAT 2 REPO 0.080% 02/27/2012 DD 02/24/12	2,490,000.00-	2,490,000.00
1,000,000.0000	99ZAGL7W2	GREENWH CAT 2 REPO 0.100% 03/12/2012 DD 03/09/12	1,000,000.00-	1,000,000.00
2,700,000.0000	99ZAGMNL6	GREENWH CAT 2 REPO 0.100% 03/14/2012 DD 03/13/12	2,700,000.00-	2,700,000.00
4,800,000.0000	99ZAGLS82	GREENWH CAT 2 REPO 0.110% 03/08/2012 DD 03/07/12	4,800,000.00-	4,800,000.00
3,000,000.0000	99ZAGLOJ8	GREENWH CAT 2 REPO 0.110% 03/09/2012 DD 03/08/12	3,000,000.00-	3,000,000.00
1,829,000.0000	99ZAGMPH4	GREENWH CAT 2 REPO 0.110% 03/13/2012 DD 03/12/12	1,829,000.00-	1,829,000.00

SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	* INDICATES PENDING SETTLEMENT			
	** INDICATES TRANSACTION PENDING IN PRIOR YEAR			
2,700,000.0000	99ZAGMV29	GREENWH CAT 2 REPO 0.110% 03/15/2012 DD 03/14/12	2,700,000.00-	2,700,000.00
5,100,000.0000	99ZAGP1C3	GREENWH CAT 2 REPO 0.120% 03/29/2012 DD 03/28/12	5,100,000.00-	5,100,000.00
1,885,000.0000	99ZAGPHF9	GREENWH CAT 2 REPO 0.160% 03/27/2012 DD 03/26/12	1,885,000.00-	1,885,000.00
20,000.0000	460690BF6	INTERPUBLIC GROUP OF COS INC/T 10.000% 07/15/2017 DD 06/15/09	22,875.00-	22,975.00
576,174.9850 **	55028BAG2	LUMINENT MORTGAGE TRUST 7 2A1 VAR RT 12/25/2036 DD 12/27/06	.00	348,585.88
4,842,000.0000	99ZAFWF91	MORGAN ST REV REPO 0.040% 09/09/2011 DD 09/08/11	4,842,000.00-	4,842,000.00
4,723,000.0000	99ZAFQVB1	MORGAN ST REV REPO 0.050% 07/29/2011 DD 07/28/11	4,723,000.00-	4,723,000.00
3,195,000.0000	99ZAFR9D0	MORGAN ST REV REPO 0.050% 08/09/2011 DD 08/08/11	3,195,000.00-	3,195,000.00
4,851,000.0000	99ZAFV8C4	MORGAN ST REV REPO 0.050% 09/08/2011 DD 09/07/11	4,851,000.00-	4,851,000.00
4,813,000.0000	99ZAFVM79	MORGAN ST REV REPO 0.060% 09/02/2011 DD 09/01/11	4,813,000.00-	4,813,000.00
4,850,000.0000	99ZAFW0Q9	MORGAN ST REV REPO 0.060% 09/14/2011 DD 09/13/11	4,850,000.00-	4,850,000.00
4,841,000.0000	99ZAFXVA8	MORGAN ST REV REPO 0.070% 09/20/2011 DD 09/19/11	4,841,000.00-	4,841,000.00

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	*	INDICATES PENDING SETTLEMENT		
	**	INDICATES TRANSACTION PENDING IN PRIOR YEAR		
4,853,000.0000	99ZAPV2A4	MORGAN ST REV REPO 0.080% 09/07/2011 DD 09/06/11	4,853,000.00-	4,853,000.00
4,952,000.0000	99ZAFBFR7	MORGAN ST REV REPO 0.110% 04/18/2011 DD 04/15/11	4,952,000.00-	4,952,000.00
4,836,000.0000	99ZAFXMC4	MORGAN ST REV REPO 0.110% 09/19/2011 DD 09/16/11	4,836,000.00-	4,836,000.00
4,842,000.0000	99ZAFXFJ7	MORGAN ST REV REPO 0.120% 09/16/2011 DD 09/15/11	4,842,000.00-	4,842,000.00
2,906,000.0000	99ZAFRGR1	MORGAN ST REV REPO 0.150% 08/03/2011 DD 08/02/11	2,906,000.00-	2,906,000.00
4,858,000.0000	99ZAFX012	MORGAN STANLEY REPO 0.090% 09/21/2011 DD 09/20/11	4,858,000.00-	4,858,000.00
30,000.0000	718546AA2	PHILLIPS 66 144A 4.300% 04/01/2022 DD 03/12/12	29,928.90-	30,415.70
10,000.0000 *	718546AA2	PHILLIPS 66 144A 4.300% 04/01/2022 DD 03/12/12	9,976.30-	.00
3,115,000.0000	99ZAFS1L8	RBS CITIZENS BANK REPO 0.060% 08/15/2011 DD 08/12/11	3,115,000.00-	3,115,000.00
5,000,000.0000	99ZAGEXM1	RBS CITIZENS BANK REPO 0.070% 01/30/2012 DD 01/27/12	5,000,000.00-	5,000,000.00
4,192,000.0000	99ZAFS708	RBS CITIZENS BANK REPO 0.070% 08/16/2011 DD 08/15/11	4,192,000.00-	4,192,000.00
2,700,000.0000	99ZAF3UR8	RBS CITIZENS BANK REPO 0.080% 11/04/2011 DD 11/03/11	2,700,000.00-	2,700,000.00

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SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	*	INDICATES PENDING SETTLEMENT		
	**	INDICATES TRANSACTION PENDING IN PRIOR YEAR		
1,874,000.0000	99ZAGP7V5	RBS CITIZENS BANK REPO 0.090% 03/30/2012 DD 03/29/12	1,874,000.00-	1,874,000.00
4,948,000.0000	99ZAFBFT3	RBS CITIZENS BANK REPO 0.150% 04/18/2011 DD 04/15/11	4,948,000.00-	4,948,000.00
5,018,000.0000	99ZAFQ157	RBS CITIZENS BANK REPO 0.180% 08/01/2011 DD 07/29/11	5,018,000.00-	5,018,000.00
4,092,000.0000	99ZAFQ8U5	RBS CITIZENS BANK REPO 0.300% 08/02/2011 DD 08/01/11	4,092,000.00-	4,092,000.00
30,000.0000	87938WAP8	TELEFONICA EMISIONES SAU 5.462% 02/16/2021 DD 02/16/11	30,363.60-	29,265.20
30,000.0000	88732JBA5	TIME WARNER CABLE INC 4.000% 09/01/2021 DD 09/12/11	29,954.70-	30,335.10
875.0000	907818DH8	UNION PACIFIC CORP 144A 4.163% 07/15/2022 DD 06/23/11	884.76-	875.00
17.0000	99F133L1A	US TREAS BD FUTURE (CBT) EXP DEC 11	.00	64,390.64-
13.0000	99F133C2A	US TREAS BD FUTURE (CBT) EXP MAR 12	.00	3,664.05-
20.0000	99F133I1A	US TREAS BD FUTURE (CBT) EXP SEP 11	.00	208,562.49-
1.0000	99F1339IA	US TREAS BD FUTURE DEC 11 CALL OCT 11 140.000 ED 9/23/11	1,356.13	1,565.75-
1.0000	99F1339IG	US TREAS BD FUTURE DEC 11 CALL OCT 11 141.000 ED 09/23/11	1,309.25	1,315.75-

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SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	*	INDICATES PENDING SETTLEMENT		
	**	INDICATES TRANSACTION PENDING IN PRIOR YEAR		
1.0000	99F1339UL	US TREAS BD FUTURE DEC 11 PUT OCT 11 131.000 ED 09/23/11	981.13	81.38-
4.0000	99F700L1A	US ULTRA BOND (CBT) EXP DEC 11	.00	24,000.00-
7.0000	99F700C2A	US ULTRA BOND (CBT) EXP MAR 12	.00	39,835.95
13.0000	99F700I1A	US ULTRA BOND (CBT) EXP SEP 11	.00	109,499.99
2.0000	99F1399IT	US 10 YR TREAS NTS FUT DEC 11 CALL OCT 11 131.000 ED 9/23/11	993.50	881.51-
2.0000	99F1399UN	US 10 YR TREAS NTS FUT DEC 11 PUT OCT 11 127.000 ED 09/23/11	1,056.01	365.88-
1.0000	99F1399UP	US 10 YR TREAS NTS FUT DEC 11 PUT OCT 11 132.000 ED 09/23/11	1,028.00	81.38-
6.0000 *	99F1399QN	US 10 YR TREAS NTS FUT JUN 12 PUT JUN 12 128.000 ED 05/25/12	3,168.00	.00
8.0000	99F1399QN	US 10 YR TREAS NTS FUT JUN 12 PUT JUN 12 128.000 ED 05/25/12	4,224.00	4,026.00-
4.0000	99F1399PM	US 10 YR TREAS NTS FUT JUN 12 PUT MAY 12 126.500 ED 04/20/12	2,174.50	575.50-
66.0000	99F139L1A	US 10 YR TREAS NTS FUTURE (CBT) EXP DEC 11	.00	38,320.31
109.0000	99F139I1A	US 10YR NOTE FUTURE (CBT) EXP SEP 11	.00	365,804.73

SHARES/ PAR VALUE	SECURITY ID	SECURITY DESCRIPTION	COST	PROCEEDS
	*	INDICATES PENDING SETTLEMENT		
	**	INDICATES TRANSACTION PENDING IN PRIOR YEAR		
14.0000	99F1399EE	US 10YR NOTE FUTURE JUN 12 CALL JUN 12 134.000 ED 5/25/12	5,704.53	1,139.25-
70.0000	99F139C2A	US 10YR TREAS NTS FUTURE (CBT) EXP MAR 12	.00	64,351.55
9.0000	99F217L1A	US 2YR TREAS NTS FUT (CBT) EXP DEC 11	.00	1,140.62-
9.0000	99F217C2A	US 2YR TREAS NTS FUT (CBT) EXP MAR 12	.00	843.74-
3.0000	99F217I1A	US 2YR TREAS NTS FUT (CBT) EXP SEP 11	.00	4,656.26-
51.0000	99F183L1A	US 5YR TREAS NTS FUT (CBT) EXP DEC 11	.00	19,390.61-
94.0000	99F183I1A	US 5YR TREAS NTS FUT (CBT) EXP SEP 11	.00	327,500.03-
57.0000	99F183C2A	US 5YR TREAS NTS FUTURE (CBT) EXP MAR 12	.00	22,984.38-
17.0000	99F167F2C	90DAY EURODOLLAR FUTURE (CME) EXP JUN 12	.00	2,250.00
17.0000	99F167I3C	90DAY EURODOLLAR FUTURE (CME) EXP SEP 13	.00	1,412.50

**SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES,
SCHEDULE H, PART IV, 4 (i)**

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5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR
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DESCRIPTION	COST	MARKET VALUE	UNREALIZED GAIN/LOSS
GENERAL INVESTMENTS			
INTEREST-BEARING CASH	173,048,049.54	173,046,336.68	1,712.86-
U. S. GOVERNMENT SECURITIES	27,525,368.55	27,753,216.43	227,847.88
CORPORATE DEBT INSTRUMENTS - PREFERRED	9,277,833.46	9,489,595.50	211,762.04
CORPORATE DEBT INSTRUMENTS	9,025,995.36	8,906,193.33	119,802.03-
CORPORATE STOCK - PREFERRED	448,259.99	389,205.00	59,054.99-
CORPORATE STOCK - COMMON	135,520,265.14	143,997,824.71	8,477,559.57
PARTNERSHIP/JOINT VENTURE INTEREST	212,072,056.07	209,255,552.93	2,816,503.14-
OTHER INVESTMENTS	7,990,876.98	8,153,575.67	162,698.69
WRITTEN OPTIONS	8,734.00-	8,000.00-	734.00
PURCHASE OPTIONS	15,503.50	16,275.00	771.50
TOTAL GENERAL INVESTMENTS	574,915,474.59	580,999,775.25	6,084,300.66
CERTAIN INVESTMENT ARRANGEMENTS			
COMMON/COLLECTIVE TRUST	498,072,050.29	551,409,234.91	53,337,184.62
103-12 INVESTMENT ENTITIES	3,652,423.72	4,855,661.34	1,203,237.62
REGISTERED INVESTMENT COMPANIES	242,313,004.64	254,543,964.10	12,230,959.46
TOTAL CERTAIN INVESTMENT ARRANGEMENTS	744,037,478.65	810,808,860.35	66,771,381.70
NET CHANGE UNREALIZED CURRENCY GAIN/LOSS			
INTEREST RECEIVABLE			87.93

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<u>DESCRIPTION</u>	<u>COST</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
DIVIDEND RECEIVABLE			55,428.61-
TOTAL NET CHANGE UNREALIZED CURRENCY GAIN/LOSS			55,340.68-
GRAND TOTALS	1,318,952,953.24	1,391,808,635.60	72,800,341.68

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
<u>INTEREST-BEARING CASH</u>					
0.2300	NZD (NEW ZEALAND DOLLAR)	0.18	0.0000	0.19	0.01
751.9800	GBP (GREAT BRITISH POUNDS)	1,205.39	0.0000	1,201.48	3.91-
99,988.8800	MXN (MEXICAN PESO)	7,181.13	0.0000	7,734.97	553.84
681.7200	EUR (EURO)	967.43	0.0000	907.85	59.58-
21,850.1300	EUR CURRENCY AT BROKER	28,990.92	0.0000	29,097.82	106.90
173,007,137.6900	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	173,007,137.69	100.0000	173,007,137.69	0.00
51,335.9300	LEHMAN PROXY WAMCO - REC	2,566.80	0.0050	256.68	2,310.12-
TOTAL INTEREST-BEARING CASH		173,048,049.54		173,046,336.68	1,712.86-
<u>U. S. GOVERNMENT SECURITIES</u>					
230,000.0000	FEDERAL HOME LN MTG CORP 5.625% 11/23/2035 DD 11/22/05	237,146.10	111.6430	256,778.90	19,632.80
110,000.0000	FEDERAL HOME LN BK CONS BD 5.000% 12/21/2015 DD 11/04/05	123,877.60	115.7820	127,360.20	3,482.60
120,000.0000	FEDERAL HOME LN BK CONS BD 5.500% 07/15/2036 DD 07/17/06	136,127.40	125.4560	150,547.20	14,419.80
40,000.0000	FEDERAL HOME LN BK CONS BD 3.625% 10/18/2013 DD 09/15/08	42,373.20	105.0120	42,004.80	368.40-
120,000.0000	FEDERAL HOME LN MTG CORP 6.750% 03/15/2031 DD 10/25/00	175,724.64	143.9580	172,749.60	2,975.04-

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40,000.0000	FEDERAL HOME LN MTG CORP 1.350% 04/29/2014 DD 04/01/11	40,881.60	101.9000	40,760.00	121.60-
110,000.0000	FEDERAL NATL MTG ASSN 0.000% 10/09/2019 DD 10/09/84	74,731.80	77.3320	85,065.20	10,333.40
130,000.0000	FEDERAL NATL MTG ASSN 6.250% 05/15/2029 DD 05/15/99	156,327.60	135.7320	176,451.60	20,124.00
50,000.0000	FEDERAL NATL MTG ASSN 5.000% 02/13/2017 DD 01/12/07	55,904.00	117.6910	58,845.50	2,941.50
120,000.0000	ALLY FINANCIAL INC 1.750% 10/30/2012 DD 10/30/09	122,008.80	100.8860	121,063.20	945.60-
300,000.0000	TENNESSEE VALLEY AUTH BD 5.980% 04/01/2036 DD 04/18/96	345,021.00	129.9370	389,811.00	44,790.00
50,000.0000	TENNESSEE VALLEY AUTH BD 5.250% 09/15/2039 DD 09/15/09	52,439.50	119.9000	59,950.00	7,510.50
90,000.0000	TENNESSEE VALLEY AUTH BD 4.625% 09/15/2060 DD 09/15/10	83,387.70	109.1420	98,227.80	14,840.10
110,000.0000	TENNESSEE VALLEY AUTH BD 3.875% 02/15/2021 DD 02/08/11	110,363.00	111.6440	122,808.40	12,445.40
60,116.0000	US TREAS-CPI INFLATION INDEX 2.375% 01/15/2025 DD 07/15/04	67,231.68	127.2030	76,469.36	9,237.68
118,998.0000	US TREAS-CPI INFLATION INDEX 1.750% 01/15/2028 DD 01/15/08	140,940.76	119.2580	141,914.63	973.87
1,220,000.0000	U S TREASURY BOND 4.375% 05/15/2040 DD 05/15/10	1,475,372.68	120.1720	1,466,098.40	9,274.28-

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1,235,000.0000	U S TREASURY BOND 4.375% 05/15/2041 DD 05/15/11	1,383,086.89	120.2190	1,484,704.65	101,617.76
840,000.0000	U S TREASURY BOND 3.125% 11/15/2041 DD 11/15/11	849,556.89	95.9220	805,744.80	43,812.09-
50,000.0000	U S TREASURY BOND 3.125% 02/15/2042 DD 02/15/12	47,585.94	95.8590	47,929.50	343.56
323,886.5000	US TREAS-CPI INFLAT 2.000% 04/15/2012 DD 04/15/07	327,095.43	100.2270	324,621.72	2,473.71-
300,000.0000	U S TREASURY NOTE 1.875% 02/28/2014 DD 02/28/09	310,212.17	102.9060	308,718.00	1,494.17-
40,000.0000	U S TREASURY NOTE 1.000% 08/31/2016 DD 08/31/11	40,200.00	100.4300	40,172.00	28.00-
80,000.0000	U S TREASURY NOTE 2.000% 11/15/2021 DD 11/15/11	80,878.47	98.4450	78,756.00	2,122.47-
10,000.0000	U S TREASURY NOTE 2.000% 02/15/2022 DD 02/15/12	9,873.44	98.0780	9,807.80	65.64-
560,000.0000	U S TREASURY NOTE 1.375% 02/28/2019 DD 02/29/12	558,269.55	98.5780	552,036.80	6,232.75-
600,000.0000	COMMIT TO PUR FNMA SF MTG 2.500% 05/01/2027 DD 05/01/12	609,375.00	101.1094	606,656.40	2,718.60-
1,700,000.0000	COMMIT TO PUR FNMA SF MTG 3.000% 04/01/2027 DD 04/01/12	1,761,843.76	103.5160	1,759,772.00	2,071.76-
300,000.0000	COMMIT TO PUR FNMA SF MTG 4.000% 05/01/2042 DD 05/01/12	313,890.63	104.6250	313,875.00	15.63-

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2,100,000.0000	COMMIT TO PUR FNMA SF MTG 4.500% 05/01/2042 DD 05/01/12	2,226,984.38	106.2030	2,230,263.00	3,278.62
200,000.0000	COMMIT TO PUR FNMA SF MTG 6.500% 05/01/2042 DD 05/01/12	223,515.63	111.9380	223,876.00	360.37
100,000.0000	COMMIT TO PUR GNMA SF MTG 4.000% 04/15/2042 DD 04/01/12	107,593.75	107.3130	107,313.00	280.75-
300,000.0000	COMMIT TO PUR GNMA SF MTG 5.000% 04/15/2042 DD 04/01/12	330,562.51	110.4380	331,314.00	751.49
100,000.0000	COMMIT TO PUR GNMA SF MTG 6.000% 04/15/2042 DD 04/01/12	111,882.81	112.8440	112,844.00	961.19
200,000.0000	COMMIT TO PUR FHLIC GOLD SFM 3.500% 05/01/2042 DD 05/01/12	204,656.25	102.1410	204,282.00	374.25-
300,000.0000	COMMIT TO PUR FHLIC GOLD SFM 4.000% 05/01/2042 DD 05/01/12	312,609.38	104.3440	313,032.00	422.62
400,000.0000	COMMIT TO PUR GNMA II JUMBOS 5.000% 04/20/2042 DD 04/01/12	439,406.26	110.1250	440,500.00	1,093.74
700,000.0000	COMMIT TO PUR GNMA II JUMBOS 5.500% 04/20/2042 DD 04/01/12	775,812.51	111.1250	777,875.00	2,062.49
100,000.0000	COMMIT TO PUR GNMA II JUMBOS 6.000% 04/20/2042 DD 04/01/12	112,093.75	112.5000	112,500.00	406.25
338,617.2300	FHLIC POOL #A7-4793 5.000% 03/01/2038 DD 03/01/08	366,553.15	107.7860	364,981.97	1,571.18-
851,294.4820	FHLIC POOL #G0-2427 5.500% 12/01/2036 DD 11/01/06	909,736.04	108.6967	925,329.66	15,593.62

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31,275.6250	FHLMC POOL #G0-4222 5.500% 04/01/2038 DD 04/01/08	33,395.33	108.6715	33,987.69	592.36
198,060.4870	FHLMC POOL #G0-6172 5.500% 12/01/2038 DD 11/01/10	214,307.63	108.8430	215,574.98	1,267.35
452,422.1560	FHLMC POOL #G0-6409 6.000% 11/01/2039 DD 04/01/11	504,167.94	110.7120	500,885.62	3,282.32-
85,313.7970	FHLMC POOL #G0-6669 6.500% 09/01/2039 DD 08/01/11	95,764.74	112.7320	96,175.95	411.21
27,235.1600	FHLMC POOL #1N-1447 VAR RT 02/01/2037 DD 04/01/07	28,882.72	105.3900	28,703.14	179.58-
60,693.7200	FHLMC POOL #1N-1463 VAR RT 05/01/2037 DD 05/01/07	64,403.98	104.9240	63,682.28	721.70-
67,264.1300	FHLMC POOL #1N-1582 VAR RT 05/01/2037 DD 06/01/07	71,450.70	105.2560	70,799.53	651.17-
31,503.2590	FHLMC POOL #A3-9304 5.500% 11/01/2035 DD 11/01/05	33,771.86	109.1250	34,377.93	606.07
230,000.0000	FEDERAL HOME LN MTG CORP DISC 0.000% 06/05/2012 DD 06/06/201	229,836.96	99.9291	229,836.96	0.00
2,000,000.0000	FEDERAL NATL MTG ASSN DISC NT MAT 05/01/2012	1,998,890.00	99.9445	1,998,890.00	0.00
193,000.8760	FNMA GTD REMIC P/T 87 SJ VAR RT 09/25/2041 DD 08/25/11	33,051.40	18.2260	35,176.34	2,124.94
364,497.3900	FNMA GTD REMIC P/T 11-96 SA IO VAR RT 10/25/2041 DD 09/25/11	67,204.21	16.6340	60,630.50	6,573.71-

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100,000.0000	FNMA GTD REMIC P/T 12-28 B 6.500% 06/25/2039 DD 02/01/12	116,875.00	113.6130	113,613.00	3,262.00-
500,000.0000	FNMA GTD REMIC P/T 2012-25 B 6.500% 03/25/2042 DD 02/01/12	596,328.13	117.4940	587,470.00	8,858.13-
300,000.0000	FNMA GTD REMIC P/T 12-35 MB 5.500% 04/25/2042 DD 03/01/12	337,875.00	113.3160	339,948.00	2,073.00
934,157.0000	FHLMC MULTICLASS MT VAR RT 02/25/2018 DD 06/01/11	76,847.50	7.5700	70,716.43	6,131.07-
169,023.3900	FHLMC MULTICLASS MT VAR RT 04/25/2021 DD 08/01/11	14,919.03	8.7150	14,730.39	188.64-
289,583.7200	FHLMC MULTICLASS MTG K703 X1 VAR RT 05/25/2018 DD 09/01/11	31,670.91	10.4547	30,275.31	1,395.60-
409,720.3800	FHLMC MULTICLASS MT VAR RT 08/25/2018 DD 11/01/11	43,468.04	10.5780	43,340.22	127.82-
155,752.7100	FHLMC MULTICL CTFs VAR RT 10/25/2021 DD 12/01/11	16,782.35	11.3340	17,653.01	870.66
120,000.0000	FHLMC MULTICLASS MT K017 X1 IO VAR RT 12/25/2021 DD 03/01/12	12,391.32	10.2480	12,297.60	93.72-
276,213.7440	FHLMC MULTICLASS MT VAR RT 06/25/2020 DD 09/01/10	27,776.26	9.9780	27,560.61	215.65-
216,982.3000	FHLMC MULTICLASS MT K009 X1 VAR RT 08/25/2020 DD 11/01/10	19,821.26	8.7820	19,055.39	765.87-
289,653.1420	FNMA POOL #0AJ5304 4.000% 11/01/2041 DD 11/01/11	301,386.36	104.9620	304,025.73	2,639.37

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551,468.2680	FNMA POOL #0AL0215 4.500% 04/01/2041 DD 04/01/11	587,988.81	107.3700	592,111.48	4,122.67
176,493.6900	FNMA POOL #0AL0814 6.500% 06/01/2040 DD 10/01/11	197,672.93	112.3350	198,264.19	591.26
463,964.0500	FNMA POOL #0AL1176 6.500% 10/01/2039 DD 12/01/11	521,669.57	112.3350	521,194.02	475.55-
294,585.4500	FNMA POOL #0AJ7689 4.000% 12/01/2041 DD 12/01/11	310,327.36	104.9620	309,202.78	1,124.58-
141,783.0520	FHLMC MULTICLASS MTG R007 ZA 6.000% 05/15/2036 DD 05/01/06	165,088.64	116.4980	165,174.42	85.78
104,201.4400	FNMA GTD REMIC P/T 2011-59 NZ 5.500% 07/25/2041 DD 06/01/11	116,388.94	117.4770	122,412.73	6,023.79
139,885.3800	FNMA GTD REMIC P/T 10-118 YBIO VAR RT 10/25/2040 DD 09/25/10	21,900.81	13.7480	19,231.44	2,669.37-
559,526.5620	FHLMC MULTICLASS MT VAR RT 04/25/2020 DD 06/01/10	40,948.96	7.2060	40,319.48	629.48-
151,094.7450	FNMA GTD REMIC P/T 10-142 SM I VAR RT 12/25/2040 DD 11/25/10	19,972.84	14.4230	21,792.40	1,819.56
628,417.5800	FHLMC MULTICLASS MTG K006 AX1 VAR RT 01/25/2020 DD 04/01/10	41,821.13	6.3300	39,778.83	2,042.30-
89,753.9690	FNMA POOL #0745959 5.500% 11/01/2036 DD 10/01/06	96,255.82	109.2070	98,017.62	1,761.80
122,682.4400	FNMA POOL #0836464 VAR RT 10/01/2035 DD 09/01/05	125,840.35	103.9420	127,518.58	1,678.23

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126,483.2100	FNMA POOL #0836641 VAR RT 10/01/2035 DD 09/01/05	130,160.11	103.9990	131,541.27	1,381.16
102,590.8710	FNMA POOL #0888832 6.500% 11/01/2037 DD 10/01/07	115,735.33	112.8030	115,725.58	9.75-
79,440.5180	FNMA POOL #0889117 5.000% 10/01/2035 DD 01/01/08	85,845.40	108.2740	86,013.43	168.03
84,788.3200	FNMA POOL #0995072 5.500% 08/01/2038 DD 11/01/08	92,803.48	109.8950	93,178.12	374.64
93,753.1580	FNMA POOL #0AB3517 4.500% 09/01/2041 DD 08/01/11	100,081.50	107.4210	100,710.58	629.08
209,204.2450	FNMA POOL #0AB0758 7.000% 02/01/2039 DD 12/01/10	241,630.90	114.6250	239,800.37	1,830.53-
75,740.0480	GNMA II POOL #0004040 6.500% 10/20/2037 DD 10/01/07	85,120.50	114.6840	86,861.72	1,741.22
687,463.2700	GNMA II POOL #0004245 6.000% 09/20/2038 DD 09/01/08	769,314.37	112.5910	774,021.77	4,707.40
206,226.4500	GNMA II POOL #0004559 VAR RT 10/20/2039 DD 10/01/09	227,622.44	110.2520	227,368.79	253.65-
81,600.1380	GNMA II POOL #0004617 4.500% 01/20/2040 DD 01/01/10	89,058.90	108.9660	88,916.41	142.49-
85,082.4910	GNMA II POOL #0004696 4.500% 05/20/2040 DD 05/01/10	92,859.56	108.9660	92,710.99	148.57-
83,737.7660	GNMA II POOL #0004746 4.500% 07/20/2040 DD 07/01/10	91,391.93	108.9660	91,245.69	146.24-

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80,123.8430	GNMA II POOL #0004772 5.000% 08/20/2040 DD 08/01/10	85,144.33	110.2830	88,362.98	3,218.65
241,328.9100	GNMA II POOL #0004837 6.000% 10/20/2040 DD 10/01/10	267,346.57	112.9660	272,619.62	5,273.05
87,641.3940	GNMA II POOL #0004923 4.500% 01/20/2041 DD 01/01/11	92,790.32	109.1220	95,636.04	2,845.72
611,919.9690	GNMA II POOL #0004978 4.500% 03/20/2041 DD 03/01/11	647,870.27	109.1220	667,739.31	19,869.04
87,213.1300	GNMA GTD REMIC P/T 10-85 HS VAR RT 01/20/2040 DD 07/20/10	16,543.24	17.0980	14,911.70	1,631.54-
172,658.5200	GNMA GTD REMIC P/T 10-H010 FC VAR RT 05/20/2060 DD 06/20/10	174,774.84	101.7500	175,680.04	905.20
278,593.1700	GNMA GTD REMIC P/T 10-H20 AF 0.590% 10/20/2060 DD 10/20/10	274,826.58	98.5000	274,414.27	412.31-
243,047.0800	GNMA GTD REMIC P/T 10-H24 FA VAR RT 10/20/2060 DD 11/20/10	241,732.65	98.6330	239,724.63	2,008.02-
126,982.0100	GNMA GTD REMIC P/T 10-H22 FE VAR RT 05/20/2059 DD 11/20/10	126,334.17	99.0310	125,751.55	582.62-
232,958.4400	GNMA GTD REMIC P/T 11-H06 FA VAR RT 02/20/2061 DD 02/20/11	231,870.24	99.1960	231,085.45	784.79-
96,927.6700	GNMA GTD REMIC P/T 11-H09 AF VAR RT 03/20/2061 DD 03/20/11	96,933.54	99.4710	96,414.92	518.62-
128,114.8400	GNMA GTD REMIC P/T 10-3 MS VAR RT 11/20/2038 DD 01/20/10	23,300.89	15.6960	20,108.91	3,191.98-

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77,907.7100	GNMA GTD REMIC P/T 10-113 BS VAR RT 09/20/2040 DD 09/20/10	11,929.62	15.9030	12,389.66	460.04
77,474.3340	GNMA GTD REMIC P/T 10-121 SE VAR RT 09/20/2040 DD 09/20/10	11,863.26	16.0140	12,406.74	543.48
81,835.8780	GNMA GTD REMIC P/T 11-11 SA IO VAR RT 01/20/2041 DD 01/20/11	12,531.12	15.7700	12,905.52	374.40
88,026.3900	GNMA GTD REMIC P/T 11-70 BS IO VAR RT 12/16/2036 DD 05/16/11	17,674.05	19.0110	16,734.70	939.35-
TOTAL U. S. GOVERNMENT SECURITIES		27,525,368.55		27,753,216.43	227,847.88
<u>CORPORATE DEBT INSTRUMENTS - PREFERRED</u>					
90,000.0000	AT&T INC 5.500% 02/01/2018 DD 02/01/08	104,145.70	117.8140	106,032.60	1,886.90
50,000.0000	AT&T INC 6.550% 02/15/2039 DD 02/03/09	52,112.00	121.6960	60,848.00	8,736.00
40,000.0000	AMERICA MOVIL SAB DE CV 5.625% 11/15/2017 DD 10/30/07	44,056.00	116.4300	46,572.00	2,516.00
40,000.0000	AMERICAN EXPRESS CREDIT CORP 5.125% 08/25/2014 DD 08/25/09	43,148.00	108.7600	43,504.00	356.00
130,000.0000	ANHEUSER-BUSCH INBEV WORLDWIDE 5.000% 04/15/2020 DD 03/29/10	135,955.30	115.3500	149,955.00	13,999.70
120,000.0000	APACHE CORP 6.000% 09/15/2013 DD 10/01/08	132,745.20	107.7420	129,290.40	3,454.80-
50,000.0000	AVIS BUDGET RENTAL 2A A 144A 2.802% 05/20/2018 DD 03/22/12	49,998.66	99.9210	49,960.50	38.16-

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100,000.0000	BEVA US SENIOR SAU 3.250% 05/16/2014 DD 05/18/11	99,890.00	99.6980	99,698.00	192.00-
160,000.0000	BHP BILLITON FINANCE USA LTD 3.250% 11/21/2021 DD 11/21/11	158,555.20	100.9220	161,475.20	2,920.00
180,000.0000	BP CAPITAL MARKETS PLC 5.250% 11/07/2013 DD 11/07/08	194,662.80	106.8610	192,349.80	2,313.00-
60,000.0000	BP CAPITAL MARKETS PLC 3.875% 03/10/2015 DD 03/10/09	62,302.20	107.2490	64,349.40	2,047.20
10,000.0000	BP CAPITAL MARKETS PLC 3.561% 11/01/2021 DD 11/01/11	10,000.00	102.9720	10,297.20	297.20
140,000.0000	BAKER HUGHES INC 7.500% 11/15/2018 DD 10/28/08	174,762.00	131.9330	184,706.20	9,944.20
240,000.0000	BANC OF AMERICA MERRILL L 2 A4 VAR RT 05/10/2045 DD 06/01/06	267,515.63	113.6280	272,707.20	5,191.57
70,000.0000	BANK OF AMERICA CORP 5.420% 03/15/2017 DD 03/15/07	71,461.60	102.2480	71,573.60	112.00
100,000.0000	BARRICK NORTH AMERICA FINANCE 4.400% 05/30/2021 DD 06/01/11	100,819.30	105.4060	105,406.00	4,586.70
30,000.0000	BOEING CAPITAL CORP 4.700% 10/27/2019 DD 10/27/09	31,673.70	115.5370	34,661.10	2,987.40
80,000.0000	BOEING CO/THE 4.875% 02/15/2020 DD 07/28/09	85,484.00	118.0460	94,436.80	8,952.80
170,000.0000	CATERPILLAR FINANCIAL SERVICES 6.200% 09/30/2013 DD 09/26/08	189,550.00	108.3700	184,229.00	5,321.00-

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240,000.0000	CITIGROUP INC 5.000% 09/15/2014 DD 09/16/04	250,608.00	103.5630	248,551.20	2,056.80-
150,000.0000	CITIGROUP INC 6.875% 03/05/2038 DD 03/05/08	164,841.00	115.4600	173,190.00	8,349.00
60,000.0000	CITIGROUP INC 6.500% 08/19/2013 DD 08/19/08	65,601.00	105.7920	63,475.20	2,125.80-
140,000.0000	CITIGROUP INC 6.000% 12/13/2013 DD 06/15/10	152,226.20	105.9500	148,330.00	3,896.20-
70,000.0000	CONOCOPHILLIPS HOLDING CO 6.950% 04/15/2029 DD 04/20/99	83,577.20	134.3460	94,042.20	10,465.00
190,000.0000	COOPERATIEVE CENTRALE RAIFFEIS 3.375% 01/19/2017 DD 01/19/12	189,942.60	102.2340	194,244.60	4,302.00
100,000.0000	CREDIT AGRICOLE SA VAR RT 10/29/2049 DD 10/13/09	107,000.00	93.0000	93,000.00	14,000.00-
208,730.3600	DBUS MORTGAGE TR LC3A XA 144A VAR RT 08/10/2044 DD 08/01/11	12,774.38	5.5490	11,582.45	1,191.93-
160,000.0000	DIAGEO CAPITAL PLC 4.828% 07/15/2020 DD 05/14/10	165,385.60	114.1140	182,582.40	17,196.80
105,000.0000	DUKE ENERGY CAROLINAS LLC 5.625% 11/30/2012 DD 11/20/02	112,480.20	103.3020	108,467.10	4,013.10-
100,000.0000	EDUCATION FUNDING CAPITAL 3 A7 VAR RT 12/15/2042 DD 10/31/03	94,770.00	91.0041	91,004.17	3,765.83-
99,456.1440	GS MORTGAGE SECURI GCS XA 144A VAR RT 08/10/2044 DD 10/01/11	8,957.69	9.3200	9,269.31	311.62

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160,000.0000	GENERAL ELECTRIC CAPITAL CORP VAR RT 11/15/2067 DD 11/15/07	164,400.00	102.0000	163,200.00	1,200.00-
370,000.0000	GENERAL ELECTRIC CAPITAL CORP 6.875% 01/10/2039 DD 01/09/09	412,916.30	123.4940	456,927.80	44,011.50
10,000.0000	GENERAL ELECTRIC CAPITAL CORP 5.300% 02/11/2021 DD 02/11/11	10,395.10	108.3030	10,830.30	435.20
20,000.0000	GOLDMAN SACHS GROUP INC/THE 3.625% 08/01/2012 DD 07/22/09	20,625.20	100.8780	20,175.60	449.60-
140,000.0000	GOLDMAN SACHS GROUP INC/THE 5.375% 03/15/2020 DD 03/08/10	142,146.20	101.6580	142,321.20	175.00
60,000.0000	GOLDMAN SACHS GROUP INC/THE 6.000% 06/15/2020 DD 06/03/10	63,427.20	105.2210	63,132.60	294.60-
20,000.0000	GOLDMAN SACHS GROUP INC/THE 5.250% 10/15/2013 DD 10/14/03	21,476.80	104.6760	20,935.20	541.60-
140,000.0000	GOLDMAN SACHS GROUP INC/THE 6.250% 02/01/2041 DD 01/28/11	139,593.80	98.7650	138,271.00	1,322.80-
20,000.0000	GOLDMAN SACHS GROUP INC/THE 5.250% 07/27/2021 DD 07/27/11	20,119.80	98.9920	19,798.40	320.60-
60,000.0000	GOLDMAN SACHS GROUP INC/THE 5.450% 11/01/2012 DD 10/18/07	63,770.40	102.2790	61,367.40	2,403.00-
110,000.0000	HSEC FINANCE CORP 6.676% 01/15/2021 DD 07/15/11	114,177.80	106.7430	117,417.30	3,239.50
150,000.0000	JPMORGAN CHASE & CO 5.125% 09/15/2014 DD 09/15/04	160,998.00	107.1580	160,737.00	261.00-

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230,000.0000	JPMORGAN CHASE & CO 5.150% 10/01/2015 DD 10/04/05	246,378.30	108.7870	250,210.10	3,831.80
120,000.0000	JPMORGAN CHASE & CO 6.125% 06/27/2017 DD 06/27/07	130,584.00	114.1240	136,948.80	6,364.80
10,000.0000	JPMORGAN CHASE & CO 4.350% 08/15/2021 DD 08/10/11	10,224.50	102.1730	10,217.30	7.20-
300,000.0000	JP MORGAN CHASE COMMER LD11 A3 VAR RT 06/15/2049 DD 07/01/07	312,816.00	106.5410	319,623.00	6,807.00
94,983.2140	KEYCORP STUDENT LOAN TRU A 1A2 VAR RT 08/27/2031 DD 09/24/02	86,316.00	89.3580	84,875.10	1,440.90-
1,000,000.0000	MASTR ADJUSTABLE RATE M 13 3A7 VAR RT 11/21/2034 DD 11/01/04	971,830.00	97.7940	977,940.00	6,110.00
40,000.0000	MEDTRONIC INC 4.450% 03/15/2020 DD 03/16/10	40,978.40	112.6080	45,043.20	4,064.80
60,000.0000	METLIFE INC 6.750% 06/01/2016 DD 05/29/09	69,356.40	118.8060	71,283.60	1,927.20
50,000.0000	MORGAN STANLEY VAR RT 10/18/2016 DD 10/18/06	46,761.50	85.8690	42,934.50	3,827.00-
10,000.0000	MORGAN STANLEY 4.750% 03/22/2017 DD 03/22/12	9,982.00	100.0330	10,003.30	21.30
100,000.0000	MORGAN STANLEY 4.750% 04/01/2014 DD 03/30/04	104,202.00	101.6360	101,636.00	2,566.00-
184,515.9160	MORGAN STANLEY MORTGA 11AR 1A1 VAR RT 01/25/2035 DD 12/29/04	143,665.98	76.7550	141,625.19	2,040.79-

<u>SHARES/ PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PRICE</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
60,000.0000	OCCIDENTAL PETROLEUM CORP 3.125% 02/15/2022 DD 08/18/11	59,011.63	100.8870	60,532.20	1,520.57
10,000.0000	PACIFIC GAS & ELECTRIC CO 5.800% 03/01/2037 DD 03/13/07	10,109.50	119.4670	11,946.70	1,837.20
10,000.0000	PACIFIC GAS & ELECTRIC CO 8.250% 10/15/2018 DD 10/21/08	12,773.40	132.3760	13,237.60	464.20
28,000.0000	PEPSICO INC 7.900% 11/01/2018 DD 10/24/08	35,539.28	134.4080	37,634.24	2,094.96
32,000.0000	PETROBRAS INTERNATIONAL FINANC 5.750% 01/20/2020 DD 10/30/09	33,012.16	110.7800	35,449.60	2,437.44
220,000.0000	PETROBRAS INTERNATIONAL FINANC 5.375% 01/27/2021 DD 01/27/11	229,198.20	107.6740	236,882.80	7,684.60
80,000.0000	PHILIP MORRIS INTERNATIONAL IN 2.900% 11/15/2021 DD 11/15/11	78,924.80	98.6090	78,887.20	37.60-
40,000.0000	PHILIP MORRIS INTERNATIONAL IN 4.500% 03/20/2042 DD 03/20/12	39,022.00	98.6530	39,461.20	439.20
30,000.0000	RAYTHEON CO 3.125% 10/15/2020 DD 10/20/10	27,488.70	101.7800	30,534.00	3,045.30
20,000.0000	RIO TINTO FINANCE USA LTD 2.500% 05/20/2016 DD 05/20/11	19,901.20	103.6440	20,728.80	827.60
20,000.0000	RIO TINTO FINANCE USA LTD 4.125% 05/20/2021 DD 05/20/11	19,827.00	105.5000	21,100.00	1,273.00
50,000.0000	RIO TINTO FINANCE USA LTD 3.750% 09/20/2021 DD 09/19/11	50,214.60	103.2360	51,618.00	1,403.40

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190,000.0000	ROYAL BANK OF SCOTLAND PLC/THE 3.950% 09/21/2015 DD 09/20/10	190,144.40	101.1100	192,109.00	1,964.60
110,000.0000	AT&T INC 5.100% 09/15/2014 DD 11/03/04	120,290.50	110.0710	121,078.10	787.60
100,000.0000	SLM STUDENT LOAN TRUST 5 B VAR RT 09/16/2024 DD 08/29/02	92,379.00	90.6300	90,630.00	1,749.00-
100,000.0000	SLM STUDENT LOAN TRUST 3 A5 VAR RT 07/25/2023 DD 03/18/04	95,625.00	97.7800	97,780.00	2,155.00
100,000.0000	SANTANDER US DEBT SAU 144A 3.781% 10/07/2015 DD 10/07/10	96,658.00	96.9450	96,945.00	287.00
30,000.0000	SHELL INTERNATIONAL FINANCE BV 6.375% 12/15/2038 DD 12/11/08	33,902.70	132.3060	39,691.80	5,789.10
20,000.0000	SHELL INTERNATIONAL FINANCE BV 4.375% 03/25/2020 DD 03/25/10	20,645.80	114.4290	22,885.80	2,240.00
68,425.1400	STRUCTURED ADJUSTABLE 16XS A1 VAR RT 08/25/2035 DD 07/25/05	53,457.42	81.4120	55,706.27	2,248.85
100,000.0000	SUMITOMO MITSUI BANKING C 144A 3.150% 07/22/2015 DD 07/22/10	99,555.00	104.1220	104,122.00	4,567.00
10,000.0000	TEVA PHARMACEUTICAL FINANCE CO 3.650% 11/10/2021 DD 11/10/11	9,950.30	101.2280	10,122.80	172.50
10,000.0000	TEVA PHARMACEUTICAL FINANCE IV 3.650% 11/10/2021 DD 11/10/11	9,905.00	101.2280	10,122.80	217.80
20,000.0000	THERMO FISHER SCIENTIFIC INC 3.600% 08/15/2021 DD 08/16/11	19,961.80	105.5500	21,110.00	1,148.20

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20,000.0000	UNITEDHEALTH GROUP INC 5.800% 03/15/2036 DD 03/02/06	19,868.80	115.0300	23,006.00	3,137.20
30,000.0000	UNITEDHEALTH GROUP INC 3.875% 10/15/2020 DD 10/25/10	28,559.70	105.6310	31,689.30	3,129.60
40,000.0000	UNITEDHEALTH GROUP INC 5.700% 10/15/2040 DD 10/25/10	38,996.00	116.0920	46,436.80	7,440.80
172,000.0000	VALE OVERSEAS LTD 4.375% 01/11/2022 DD 01/11/12	174,318.94	100.4450	172,765.40	1,553.54-
80,000.0000	VERIZON COMMUNICATIONS INC 6.350% 04/01/2019 DD 03/27/09	97,662.40	121.7760	97,420.80	241.60-
30,000.0000	VERIZON COMMUNICATIONS INC 6.000% 04/01/2041 DD 03/28/11	30,177.60	118.4500	35,535.00	5,357.40
30,000.0000	VERIZON COMMUNICATIONS INC 3.500% 11/01/2021 DD 11/03/11	29,762.40	102.3060	30,691.80	929.40
256,211.9120	WF-RBS COMMERCIAL M C2 XA 144A VAR RT 02/15/2044 DD 03/01/11	14,812.24	5.4190	13,884.12	928.12-
255,000.0000	WACHOVIA CORP 5.250% 08/01/2014 DD 07/22/04	272,714.85	107.6330	274,464.15	1,749.30
10,000.0000	WELLS FARGO & CO 4.600% 04/01/2021 DD 03/29/11	10,739.60	107.2420	10,724.20	15.40-
50,000.0000	WELLS FARGO & CO STEP 06/15/2016 DD 09/15/10	50,295.50	106.7910	53,395.50	3,100.00
120,000.0000	WYETH LLC 5.950% 04/01/2037 DD 03/27/07	128,286.00	126.6850	152,022.00	23,736.00
TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED		9,277,833.46		9,489,595.50	211,762.04

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<u>CORPORATE DEBT INSTRUMENTS</u>					
159,602.1750	ACE SECURITIES CORP FM1 M1 VAR RT 09/25/2033 DD 01/29/04	134,827.16	76.5530	122,180.25	12,646.91-
60,000.0000	ALTRIA GROUP INC 8.500% 11/10/2013 DD 11/10/08	69,972.60	111.7400	67,044.00	2,928.60-
110,000.0000	ALTRIA GROUP INC 4.750% 05/05/2021 DD 05/05/11	109,814.60	107.4930	118,242.30	8,427.70
50,000.0000	HESS CORP 7.875% 10/01/2029 DD 10/01/99	61,737.00	133.0770	66,538.50	4,801.50
60,000.0000	HESS CORP 7.300% 08/15/2031 DD 08/15/01	70,347.60	127.2500	76,350.00	6,002.40
140,000.0000	AMERICAN EXPRESS CO VAR RT 09/01/2066 DD 08/01/06	143,150.00	102.0000	142,800.00	350.00-
230,000.0000	AMERICAN INTERNATIONAL GROUP I 6.250% 03/15/2037 DD 03/13/07	210,450.00	90.0000	207,000.00	3,450.00-
20,000.0000	AMERICAN INTERNATIONAL GROUP I 6.400% 12/15/2020 DD 12/03/10	20,499.20	113.1730	22,634.60	2,135.40
20,000.0000	ANADARKO FINANCE CO 7.500% 05/01/2031 DD 04/26/01	22,079.80	123.5340	24,706.80	2,627.00
20,000.0000	ANADARKO PETROLEUM CORP 6.375% 09/15/2017 DD 08/12/10	22,901.40	118.8220	23,764.40	863.00
170,000.0000	ARISTOTLE HLDG INC C 144A 3.500% 11/15/2016 DD 11/21/11	169,954.10	104.4550	177,573.50	7,619.40

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10,000.0000	BAC CAPITAL TRUST XIV VAR RT 09/29/2049 DD 02/16/07	7,700.00	70.5000	7,050.00	650.00-
320,000.0000	BANK OF AMERICA CORP 4.500% 04/01/2015 DD 03/11/10	332,291.20	103.5760	331,443.20	848.00-
20,000.0000	BANK OF AMERICA CORP 5.625% 07/01/2020 DD 06/22/10	20,533.60	104.2530	20,850.60	317.00
100,000.0000	BANK OF AMERICA CORP 5.000% 05/13/2021 DD 05/13/11	97,349.46	100.1540	100,154.00	2,804.54
20,000.0000	BANK OF AMERICA CORP 3.875% 03/22/2017 DD 03/22/12	19,941.60	100.5510	20,110.20	168.60
20,000.0000	BARRICK GOLD CORP 144A 3.850% 04/01/2022 DD 04/03/12	19,988.60	99.9430	19,988.60	0.00
10,000.0000	BELLSOUTH CORP 4.750% 11/15/2012 DD 11/15/04	10,580.30	102.5260	10,252.60	327.70-
80,000.0000	CCO HOLDINGS LLC / CCO HOLDING 6.625% 01/31/2022 DD 01/26/12	79,600.00	103.7500	83,000.00	3,400.00
147,827.9700	COUNTRYWIDE ALTERNATIVE 36 3A1 VAR RT 08/25/2035 DD 06/01/05	102,225.93	69.3820	102,566.00	340.07
234,184.2400	COUNTRYWIDE ALTERNATIVE 44 1A1 VAR RT 10/25/2035 DD 08/30/05	139,351.90	53.2310	124,658.61	14,693.29-
25,051.0200	COUNTRYWIDE ASSET-BACKED 4 AF3 VAR RT 10/25/2035 DD 06/01/05	24,841.82	96.3530	24,137.41	704.41-
185,241.2600	COUNTRYWIDE HOME LOAN HYB1 1A1 VAR RT 03/25/2035 DD 01/28/05	108,401.34	68.2070	126,347.51	17,946.17

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29,464.9200	COUNTRYWIDE HOME LOAN MO 4 4A1 VAR RT 02/25/2035 DD 01/28/05	17,669.77	64.1950	18,915.01	1,245.24
62,651.2300	COUNTRYWIDE HOME LOAN MO 7 2A1 VAR RT 03/25/2035 DD 01/27/05	37,095.83	61.2760	38,390.17	1,294.34
101,052.8300	COUNTRYWIDE HOME LOAN M 11 6A1 VAR RT 03/25/2035 DD 02/28/05	59,081.39	63.7180	64,388.84	5,307.45
30,000.0000	CELULOSA ARAUCO Y CONSTIT 144A 4.750% 01/11/2022 DD 01/11/12	30,187.50	102.3650	30,709.50	522.00
80,000.0000	COMCAST CABLE COMMUNICATIONS L 8.875% 05/01/2017 DD 05/01/97	100,096.80	129.9160	103,932.80	3,836.00
110,000.0000	COMCAST CORP 6.500% 01/15/2015 DD 01/10/03	124,483.70	114.1060	125,516.60	1,032.90
20,000.0000	COMCAST CORP 5.875% 02/15/2018 DD 11/17/06	22,048.00	118.3470	23,669.40	1,621.40
40,000.0000	CONCHO RESOURCES INC 5.500% 10/01/2022 DD 03/12/12	40,068.75	98.5000	39,400.00	668.75-
39,341.4340	CONTINENTAL AIRLINES 98-1A 6.648% 09/15/2017 DD 02/20/98	41,013.45	104.6200	41,159.01	145.56
129,896.3400	COUNTRYWIDE HOME EQUITY L E 2A VAR RT 07/15/2036 DD 06/29/06	73,192.79	64.4090	83,664.93	10,472.14
136,029.0100	DOWNNEY SAVINGS & LOAN ARL 2A1A VAR RT 03/19/2045 DD 02/28/05	90,818.40	66.3310	90,229.40	589.00-
219,880.1690	DELTA AIR LINES 2007-1 CLASS A 6.821% 08/10/2022 DD 02/10/08	227,026.28	109.5000	240,768.79	13,742.51

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75,000.0000	DEUTSCHE TELEKOM INTERNATIONAL 5.750% 03/23/2016 DD 03/23/06	83,969.25	112.9260	84,694.50	725.25
100,000.0000	DEVON ENERGY CORP 5.600% 07/15/2041 DD 07/12/11	100,304.60	112.5210	112,521.00	12,216.40
155,000.0000	DOMINION RESOURCES INC/VA 5.700% 09/17/2012 DD 09/16/02	164,752.60	102.2700	158,518.50	6,234.10-
20,000.0000	ECOLAB INC 4.350% 12/08/2021 DD 12/08/11	19,987.20	106.0120	21,202.40	1,215.20
100,000.0000	ENTERPRISE PRODUCTS OPERATING 9.750% 01/31/2014 DD 12/08/08	119,826.00	114.7550	114,755.00	5,071.00-
10,000.0000	ENTERPRISE PRODUCTS OPERATING 6.125% 10/15/2039 DD 10/05/09	11,370.00	112.6150	11,261.50	108.50-
70,000.0000	ENTERPRISE PRODUCTS OPERATING 4.050% 02/15/2022 DD 08/24/11	69,866.06	103.5530	72,487.10	2,621.04
40,000.0000	ENTERPRISE PRODUCTS OPERATING 5.700% 02/15/2042 DD 08/24/11	40,031.12	108.1240	43,249.60	3,218.48
150,000.0000	FIRSTENERGY CORP 7.375% 11/15/2031 DD 11/15/01	162,479.99	123.1060	184,659.00	22,179.01
80,000.0000	FREEPORT-MCMORAN COPPER & GOLD 3.550% 03/01/2022 DD 02/13/12	79,447.40	96.0420	76,833.60	2,613.80-
10,000.0000	GOLDMAN SACHS CAPITAL II VAR RT 06/01/2043 DD 05/15/07	8,625.00	68.6250	6,862.50	1,762.50-
56,435.9500	GREENPOINT MORTGAGE FU AR4 1A1 VAR RT 10/25/2045 DD 07/29/05	33,980.32	65.6180	37,032.14	3,051.82

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70,000.0000	HUMANA INC 7.200% 06/15/2018 DD 06/05/08	79,562.00	119.8180	83,872.60	4,310.60
20,000.0000	INTELSAT JACKSON HOLDINGS SA 8.500% 11/01/2019 DD 10/20/09	20,400.00	109.7500	21,950.00	1,550.00
30,000.0000	INTERNATIONAL LEASE FINAN 144A 6.500% 09/01/2014 DD 08/20/10	32,025.00	105.6250	31,687.50	337.50-
170,000.0000	INTERNATIONAL LEASE FINAN 144A 6.750% 09/01/2016 DD 08/20/10	181,900.00	107.1250	182,112.50	212.50
202,250.2700	JETBLUE AWYS CORP 04-2 04-2G-1 VAR RT 08/15/2016 DD 11/15/04	185,930.00	90.0000	182,025.24	3,904.76-
400,000.0000	JETBLUE AWYS CORP 04-2 P/T VAR RT 11/15/2016 DD 11/15/04	336,000.00	80.0000	320,000.00	16,000.00-
10,000.0000	KERR-MCGEE CORP 7.875% 09/15/2031 DD 10/03/01	11,406.80	128.9520	12,895.20	1,488.40
140,000.0000	KERR-MCGEE CORP 6.950% 07/01/2024 DD 07/01/04	155,497.40	120.7750	169,085.00	13,587.60
25,000.0000	KINDER MORGAN ENERGY PARTNERS 5.000% 12/15/2013 DD 11/21/03	27,028.75	106.1930	26,548.25	480.50-
140,000.0000	KRAFT FOODS INC 5.375% 02/10/2020 DD 02/08/10	147,805.00	115.6040	161,845.60	14,040.60
10,000.0000	MARKWEST ENERGY PARTNERS LP / 6.250% 06/15/2022 DD 11/03/11	10,000.00	105.0000	10,500.00	500.00
10,000.0000	MERRILL LYNCH & CO INC 6.875% 04/25/2018 DD 04/25/08	11,106.90	111.1700	11,117.00	10.10

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39,725.7300	MLCC MORTGAGE INVESTORS 1 2A1 VAR RT 04/25/2035 DD 04/01/05	37,639.27	90.8830	36,103.94	1,535.33-
240,000.0000	METLIFE INC 6.400% 12/15/2036 DD 12/21/06	231,144.00	98.0000	235,200.00	4,056.00
100,000.0000	NOBLE ENERGY INC 4.150% 12/15/2021 DD 12/08/11	100,131.80	102.2110	102,211.00	2,079.20
50,000.0000	PACIFIC GAS & ELECTRIC CO 6.050% 03/01/2034 DD 03/23/04	53,818.80	121.5570	60,778.50	6,959.70
161,000.0000	PEMEX PROJECT FUNDING MASTER T 6.625% 06/15/2035 DD 12/15/05	161,500.71	114.0000	183,540.00	22,039.29
40,000.0000	PETROBRAS INTERNATIONAL FINANC 6.125% 10/06/2016 DD 10/06/06	44,325.60	113.1000	45,240.00	914.40
70,000.0000	REED ELSEVIER CAPITAL INC 8.625% 01/15/2019 DD 01/16/09	88,706.10	126.0810	88,256.70	449.40-
60,000.0000	REYNOLDS AMERICAN INC 7.625% 06/01/2016 DD 12/01/06	71,307.60	120.0200	72,012.00	704.40
10,000.0000	REYNOLDS AMERICAN INC 7.250% 06/01/2012 DD 12/01/06	10,669.10	100.9280	10,092.80	576.30-
120,000.0000	RIO TINTO FINANCE USA LTD 6.500% 07/15/2018 DD 06/27/08	138,166.80	123.2290	147,874.80	9,708.00
20,000.0000	ROGERS COMMUNICATIONS INC 6.800% 08/15/2018 DD 08/06/08	23,380.60	124.4710	24,894.20	1,513.60
10,000.0000	ROYAL BANK OF SCOTLAND GROUP P VAR RT 08/29/2049 DD 08/20/01	9,075.00	84.7500	8,475.00	600.00-

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35,000.0000	KONINKLIJKE KPN NV 8.375% 10/01/2030 DD 10/04/00	45,157.01	128.3940	44,937.90	219.11-
10,000.0000	SESI LLC 144A 7.125% 12/15/2021 DD 12/06/11	10,000.00	108.0000	10,800.00	800.00
86,917.3700	SACO I INC 7 A1 VAR RT 07/25/2036 DD 06/30/06	23,358.18	35.1140	30,520.17	7,161.99
19,149.1500	SACO I INC 7 A VAR RT 09/25/2035 DD 09/30/05	14,935.33	96.7280	18,522.59	3,587.26
20,000.0000	SAFEWAY INC 3.950% 08/15/2020 DD 08/03/10	19,710.40	99.1670	19,833.40	123.00
60,000.0000	SAFEWAY INC 4.750% 12/01/2021 DD 12/05/11	60,556.00	103.3770	62,026.20	1,470.20
30,000.0000	SPRINT NEXTEL CORP 144A 9.000% 11/15/2018 DD 11/09/11	30,000.00	109.7500	32,925.00	2,925.00
100,000.0000	STATE STREET CORP STEP 03/15/2018 DD 09/15/10	103,046.00	104.4270	104,427.00	1,381.00
248,534.8400	STRUCTURED ADJUSTABLE R 15 1A1 VAR RT 07/25/2035 DD 06/01/05	190,206.12	66.3020	164,783.57	25,422.55-
40,000.0000	TELEFONICA EMISIONES SAU 5.877% 07/15/2019 DD 07/06/09	40,234.40	101.5200	40,608.00	373.60
15,000.0000	TIME WARNER ENTERTAINMENT CO L 8.375% 07/15/2033 DD 01/15/94	18,349.05	133.5860	20,037.90	1,688.85
10,000.0000	TIME WARNER INC 6.250% 03/29/2041 DD 04/01/11	10,405.30	114.2650	11,426.50	1,021.20

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140,000.0000	TIME WARNER CABLE INC 8.750% 02/14/2019 DD 11/18/08	174,542.20	130.3610	182,505.40	7,963.20
10,000.0000	TIME WARNER CABLE INC 8.250% 04/01/2019 DD 03/26/09	12,182.30	127.8900	12,789.00	606.70
20,000.0000	TIME WARNER CABLE INC 6.750% 06/15/2039 DD 06/29/09	20,911.40	119.2330	23,846.60	2,935.20
90,000.0000	TIME WARNER CABLE INC 5.875% 11/15/2040 DD 11/15/10	85,299.20	107.7480	96,973.20	11,674.00
21,000.0000	UNION PACIFIC CORP 5.375% 05/01/2014 DD 05/04/04	23,021.46	108.4700	22,778.70	242.76-
42,000.0000	UNION PACIFIC CORP 4.163% 07/15/2022 DD 06/23/11	42,468.30	108.0450	45,378.90	2,910.60
40,000.0000	UBM PLC 144A 5.750% 11/03/2020 DD 11/03/10	38,908.80	98.8770	39,550.80	642.00
86,000.0000	VALE OVERSEAS LTD 6.875% 11/21/2036 DD 11/21/06	91,577.96	115.9840	99,746.24	8,168.28
100,432.7600	WAMU MORTGAGE PASS TH AR6 2A1A VAR RT 04/25/2045 DD 04/26/05	85,007.78	79.9050	80,250.80	4,756.98-
166,923.4600	WAMU MORTGAGE PASS TH AR8 1A1A VAR RT 07/25/2045 DD 07/15/05	136,082.10	79.7660	133,148.17	2,933.93-
202,901.4900	WAMU MORTGAGE PASS TH AR10 1A4 VAR RT 09/25/2035 DD 07/01/05	181,584.62	87.8230	178,194.18	3,390.44-
156,560.1900	WAMU MORTGAGE PASS T AR13 1A1A VAR RT 10/25/2045 DD 10/25/05	132,612.26	79.8770	125,055.58	7,556.68-

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
577,345.7700	WAMU MORTGAGE PASS TH OA6 1A1B VAR RT 07/25/2047 DD 06/01/07	189,277.01	35.1310	202,827.34	13,550.33
330,000.0000	WACHOVIA CAPITAL TRUST III VAR RT 03/29/2049 DD 02/01/06	302,633.88	94.5000	311,850.00	9,216.12
229,047.0800	WAMU MORTGAGE PASS TH ARI A2A3 VAR RT 01/25/2045 DD 01/18/05	189,275.29	77.6850	177,935.22	11,340.67-
10,000.0000	WASTE MANAGEMENT INC 7.375% 05/15/2029 DD 11/15/99	12,591.60	129.2230	12,922.30	330.70
10,000.0000	WELLPOINT INC 5.875% 06/15/2017 DD 06/08/07	11,216.70	116.7630	11,676.30	459.60
40,000.0000	WELLPOINT INC 7.000% 02/15/2019 DD 02/05/09	47,412.00	124.1650	49,666.00	2,254.00
40,000.0000	WELLPOINT INC 3.700% 08/15/2021 DD 08/15/11	39,953.60	103.7810	41,512.40	1,558.80
24,000.0000	WILLIAMS COS INC/THE 7.500% 01/15/2031 DD 01/17/01	28,077.60	120.0170	28,804.08	726.48
26,000.0000	WILLIAMS COS INC/THE 7.750% 06/15/2031 DD 06/13/01	30,878.13	121.8210	31,673.46	795.33
33,000.0000	WILLIAMS COS INC/THE 7.875% 09/01/2021 DD 08/21/01	41,066.85	124.6210	41,124.93	58.08
5,000.0000	WILLIAMS COS INC/THE 8.750% 03/15/2032 DD 03/15/03	6,471.00	131.8320	6,591.60	120.60
30,000.0000	WPX ENERGY INC 144A 6.000% 01/15/2022 DD 11/14/11	30,000.00	100.0000	30,000.00	0.00

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150,000.0000	* DEUBS MORTGAGE TRUST LC3A A2 3.642% 08/10/2044 DD 08/01/11	151,497.19	106.8980	160,347.00	8,849.81
130,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 5.857% 11/30/2056 DD 05/17/07	125,664.70	96.6651	125,664.70	0.00
270,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 0.000% 12/28/2017 DD 12/21/07	262,635.00	0.0000	0.00	262,635.00-
70,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 0.000% 08/19/2065 DD 06/14/06	42,700.00	0.0000	0.00	42,700.00-
TOTAL CORPORATE DEBT INSTRUMENTS		9,025,995.36		8,906,193.33	119,802.03-
<u>CORPORATE STOCK - PREFERRED</u>					
9,300.0000	GENERAL MOTORS CO PPD 4.750% CUMULATIVE	448,259.99	41.8500	389,205.00	59,054.99-
TOTAL CORPORATE STOCK - PREFERRED		448,259.99		389,205.00	59,054.99-
<u>CORPORATE STOCK - COMMON</u>					
23,700.0000	NABORS INDUSTRIES LTD SHS	720,006.00	17.4900	414,513.00	305,493.00-
2,600.0000	PARTNERRE HLDGS LTD BERMUDA COM	206,024.00	67.8900	176,514.00	29,510.00-
3,000.0000	CORE LABORATORIES N V	306,510.00	131.5700	394,710.00	88,200.00
1,970.0000	STEINER LEISURE LTD	91,132.24	48.8300	96,195.10	5,062.86
27,600.0000	AT&T INC	844,836.01	31.2300	861,948.00	17,111.99

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5,980.0000	AZZ INC	298,966.86	51.6400	308,807.20	9,840.34
1,830.0000	ABOVENET INC	118,693.81	82.8000	151,524.00	32,830.19
36,660.0000	ACACIA RESEARCH - ACACIA TECHN	1,326,809.98	41.7400	1,530,188.40	203,378.42
10,570.0000	ACTUANT CORP	306,530.00	28.9900	306,424.30	105.70-
9,175.0000	AGRIUM INC	794,689.39	86.3700	792,444.75	2,244.64-
5,200.0000	AIR PRODUCTS & CHEMICALS INC	468,936.01	91.8000	477,360.00	8,423.99
2,119.0000	AIRGAS INC	150,690.87	88.9700	188,527.43	37,836.56
19,150.0000	AMERIGON INC	292,985.28	16.1800	309,847.00	16,861.72
6,340.0000	AMGEN INC	340,563.08	67.9700	430,929.80	90,366.72
13,580.0000	AMSURG CORP	317,697.31	27.9800	379,968.40	62,271.09
5,220.0000	ANALOGIC CORP	295,191.01	67.5400	352,558.80	57,367.79
29,000.0000	ANNALY CAPITAL MANAGEMENT INC	503,328.66	15.8200	458,780.00	44,548.66-
2,020.0000	APPLE INC	704,619.45	599.5500	1,211,091.00	506,471.55
15,080.0000	ASPEN TECHNOLOGY INC	249,636.16	20.5300	309,592.40	59,956.24
7,915.0000	AUTODESK INC	282,578.92	42.3200	334,962.80	52,383.88
14,600.0000	AUXILIUM PHARMACEUTICALS INC	280,348.32	18.5700	271,122.00	9,226.32-
19,300.0000	AVNET INC	634,520.99	36.3900	702,327.00	67,806.01
191,172.0000	BANK OF AMERICA CORP	2,252,143.08	9.5700	1,829,516.04	422,627.04-

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38,700.0000	BANK OF THE OZARKS INC	845,788.52	31.2600	1,209,762.00	363,973.48
10,280.0000	BEACON ROOFING SUPPLY INC	198,464.01	25.7600	264,812.80	66,348.79
36,870.0000	BEBE STORES INC	275,759.93	9.2300	340,310.10	64,550.17
6,819.0000	BELDEN INC	258,079.70	37.9100	258,508.29	428.59
7,400.0000	BOEING CO/THE	547,082.00	74.3700	550,338.00	3,256.00
4,240.0000	BOTTOMLINE TECHNOLOGIES INC	106,466.43	27.9400	118,465.60	11,999.17
29,330.0000	BRIGHTPOINT INC	286,035.15	8.0500	236,106.50	49,928.65-
2,244.0000	BUFFALO WILD WINGS INC	130,899.16	90.6900	203,508.36	72,609.20
16,570.0000	CEL & ASSOCIATES PROPERTIES IN	300,466.42	18.9200	313,504.40	13,037.98
11,325.0000	CANADIAN NATIONAL RAILWAY CO	852,432.75	79.4300	899,544.75	47,112.00
8,400.0000	CANADIAN NATURAL RESOURCES LTD	395,836.64	33.1800	278,712.00	117,124.64-
12,725.0000	CANADIAN PACIFIC RAILWAY LTD	818,726.50	75.9500	966,463.75	147,737.25
12,900.0000	CASCADE CORP	582,689.93	50.1200	646,548.00	63,858.07
5,850.0000	CEPHEID INC	163,917.02	41.8300	244,705.50	80,788.48
5,462.0000	CERNER CORP	343,840.61	76.1600	415,985.92	72,145.31
10,000.0000	CHEVRON CORP	1,076,010.01	107.2100	1,072,100.00	3,910.01-
50,400.0000	CISCO SYSTEMS INC	870,862.41	21.1500	1,065,960.00	195,097.59
2,640.0000	CLEAN HARBORS INC	143,090.15	67.3300	177,751.20	34,661.05

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7,900.0000	COHERENT INC	358,254.40	58.3300	460,807.00	102,552.60
23,200.0000	COMCAST CORP	486,306.83	30.0100	696,232.00	209,925.17
12,320.0000	CONCEPTUS INC	162,597.00	14.3800	177,161.60	14,564.60
18,000.0000	CONOCOPHILLIPS	1,417,927.81	76.0100	1,368,180.00	49,747.81-
7,180.0000	CORPORATE EXECUTIVE BOARD CO/T	291,621.29	43.0100	308,811.80	17,190.51
10,809.0000	CREE INC	304,477.40	31.6300	341,888.67	37,411.27
7,930.0000	CUBIST PHARMACEUTICALS INC	200,153.20	43.2500	342,972.50	142,819.30
8,060.0000	CYBERONICS INC	246,839.57	38.1300	307,327.80	60,488.23
3,941.0000	DECKERS OUTDOOR CORP	345,167.81	63.0500	248,480.05	96,687.76-
6,588.0000	DICK'S SPORTING GOODS INC	244,888.03	48.0800	316,751.04	71,863.01
11,400.0000	DIODES INC	231,604.48	23.1800	264,252.00	32,647.52
21,400.0000	DOW CHEMICAL CO/THE	807,850.00	34.6400	741,296.00	66,554.00-
4,330.0000	DRIL-QUIP INC	304,092.93	65.0200	281,536.60	22,556.33-
26,400.0000	EBIX INC	479,187.05	23.1600	611,424.00	132,236.95
4,652.0000	EDWARDS LIFESCIENCES CORP	326,107.25	72.7300	338,339.96	12,232.71
7,660.0000	ELIZABETH ARDEN INC	222,085.42	34.9800	267,946.80	45,861.38
7,910.0000	EMCOR GROUP INC	211,234.95	27.7200	219,265.20	8,030.25
17,580.0000	ENDOLOGIX INC	150,880.60	14.6500	257,547.00	106,666.40

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35,600.0000	ENERSYS	1,293,084.04	34.6500	1,233,540.00	59,544.04-
30,430.0000	ENTEGRIS INC	299,487.86	9.3400	284,216.20	15,271.66-
1,548.0000	EQUINIX INC	141,022.79	157.4500	243,732.60	102,709.81
5,880.0000	EZCORP INC	178,286.47	32.4550	190,835.40	12,548.93
9,600.0000	EXXON MOBIL CORP	807,648.01	86.7300	832,608.00	24,959.99
23,800.0000	FBI CO	764,250.89	49.1100	1,168,818.00	404,567.11
36,200.0000	FIFTH THIRD BANCORP	498,265.79	14.0450	508,429.00	10,163.21
14,390.0000	FINISH LINE INC/THE	292,538.39	21.2200	305,355.80	12,817.41
1,375.0000	FINNING INTERNATIONAL INC	40,483.16	27.6800	38,060.00	2,423.16-
52,300.0000	FIRST FINANCIAL BANCORP	864,154.36	17.3000	904,790.00	40,635.64
9,390.0000	FORWARD AIR CORP	314,882.34	36.6700	344,331.30	29,448.96
2,476.0000	FOSSIL INC	228,776.94	131.9800	326,782.48	98,005.54
29,800.0000	GAP INC/THE	675,268.03	26.1400	778,972.00	103,703.97
79,000.0000	GENERAL ELECTRIC CO	1,428,435.12	20.0700	1,585,530.00	157,094.88
3,600.0000	GENESCO INC	142,586.98	71.6500	257,940.00	115,353.02
6,900.0000	GOLDMAN SACHS GROUP INC/THE	846,501.53	124.3700	858,153.00	11,651.47
6,290.0000	GREEN MOUNTAIN COFFEE ROASTERS	361,997.45	46.8400	294,623.60	67,373.85-
6,801.0000	GREENHILL & CO INC	393,395.77	43.6400	296,795.64	96,600.13-

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14,500.0000	HAEMONETICS CORP	927,506.93	69.6800	1,010,360.00	82,853.07
8,590.0000	HAIN CELESTIAL GROUP INC/THE	288,617.44	43.8100	376,327.90	87,710.46
5,771.0000	HARMAN INTERNATIONAL INDUSTRIE	253,669.23	46.8100	270,140.51	16,471.28
52,080.0000	HARMONIC INC	317,745.59	5.4700	284,877.60	32,867.99-
28,100.0000	HARTFORD FINANCIAL SERVICES GR	733,849.30	21.0800	592,348.00	141,501.30-
8,950.0000	HEALTHCARE SERVICES GROUP INC	194,693.89	21.2700	190,366.50	4,327.39-
6,340.0000	HEICO CORP	324,615.59	51.5900	327,080.60	2,465.01
42,660.0000	JACK HENRY & ASSOCIATES INC	1,424,794.76	34.1200	1,455,559.20	30,764.44
4,270.0000	HORNBECK OFFSHORE SERVICES INC	117,282.57	42.0300	179,468.10	62,185.53
6,490.0000	ICU MEDICAL INC	261,063.98	49.1600	319,048.40	57,984.42
4,272.0000	ILLUMINA INC	218,872.98	52.6100	224,749.92	5,876.94
11,250.0000	IMMUNOGEN INC	136,792.53	14.3900	161,887.50	25,094.97
14,420.0000	IMPAX LABORATORIES INC	314,688.51	24.5800	354,443.60	39,755.09
63,000.0000	JPMORGAN CHASE & CO	2,703,863.72	45.9800	2,896,740.00	192,876.28
13,500.0000	JOHNSON & JOHNSON	799,875.00	65.9600	890,460.00	90,585.00
19,677.0000	KEY ENERGY SERVICES INC	308,335.62	15.4500	304,009.65	4,325.97-
42,100.0000	KROGER CO/THE	1,029,764.45	24.2300	1,020,083.00	9,681.45-
9,756.0000	LKQ CORP	286,972.85	31.1700	304,094.52	17,121.67

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45,780.0000	LATTICE SEMICONDUCTOR CORP	307,369.46	6.4300	294,365.40	13,004.06-
11,897.0000	LEGG MASON INC	409,387.75	27.9300	332,283.21	77,104.54-
30,300.0000	LINCOLN NATIONAL CORP	846,754.04	26.3600	798,708.00	48,046.04-
13,940.0000	LITHIA MOTORS INC	279,662.15	26.2000	365,228.00	85,565.85
11,510.0000	LUMINEX CORP	246,436.78	23.3500	268,758.50	22,321.72
29,140.0000	STEVEN MADDEN LTD	915,274.90	42.7500	1,245,735.00	330,460.10
19,759.0000	MANITOWOC CO INC/THE	348,105.57	13.8600	273,859.74	74,245.83-
5,656.0000	MANPOWER INC	311,377.73	47.3700	267,924.72	43,453.01-
5,000.0000	MANULIFE FINANCIAL CORP	88,450.00	13.5500	67,750.00	20,700.00-
463.0000	MEDICAL RES INC COM	0.00	0.0000	0.00	0.00
11,040.0000	MEDICINES CO/THE	208,304.28	20.0700	221,572.80	13,268.52
22,580.0000	MENTOR GRAPHICS CORP	290,126.32	14.8600	335,538.80	45,412.48
36,650.0000	METLIFE INC	1,480,109.75	37.3500	1,368,877.50	111,232.25-
52,000.0000	MICROSOFT CORP	1,311,322.22	32.2550	1,677,260.00	365,937.78
2,190.0000	MICROSTRATEGY INC	286,422.04	140.0000	306,600.00	20,177.96
7,000.0000	NEWMONT MINING CORP	433,068.30	51.2700	358,890.00	74,178.30-
11,710.0000	OM GROUP INC	287,634.78	27.5100	322,142.10	34,507.32
4,249.0000	OIL STATES INTERNATIONAL INC	355,223.58	78.0600	331,676.94	23,546.64-

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10,128.0000	OMNICARE INC	333,690.70	35.5700	360,252.96	26,562.26
18,660.0000	OMNIVISION TECHNOLOGIES INC	333,236.93	20.0000	373,200.00	39,963.07
10,240.0000	OMNICELL INC	156,500.18	15.2100	155,750.40	749.78-
28,310.0000	ORASURE TECHNOLOGIES INC	244,723.80	11.4900	325,281.90	80,558.10
107,200.0000	ORIENTAL FINANCIAL GROUP INC	1,345,625.04	12.1000	1,297,120.00	48,505.04-
8,230.0000	PSS WORLD MEDICAL INC	231,642.47	25.3400	208,548.20	23,094.27-
12,570.0000	PAREXEL INTERNATIONAL CORP	311,415.13	26.9700	339,012.90	27,597.77
6,930.0000	PEGASYS INC	252,905.99	38.1600	264,448.80	11,542.81
13,300.0000	PEPSICO INC/NC	849,422.22	66.3500	882,455.00	33,032.78
61,400.0000	PFIZER INC	1,247,034.00	22.6450	1,390,403.00	143,369.00
107,040.0000	PIER 1 IMPORTS INC	1,193,888.84	18.1800	1,945,987.20	752,098.36
18,250.0000	PINNACLE FINANCIAL PARTNERS IN	309,703.72	18.3500	334,887.50	25,183.78
9,023.0000	PLAINS EXPLORATION & PRODUCTIO	277,590.38	42.6500	384,830.95	107,240.57
14,257.0000	POLYCOM INC	309,412.41	19.0700	271,880.99	37,531.42-
18,420.0000	POTASH CORP OF SASKATCHEWAN IN	1,085,490.60	45.6900	841,609.80	243,880.80-
21,090.0000	PRIVATEBANCORP INC	310,433.63	15.1700	319,935.30	9,501.67
16,682.0000	QUANTA SERVICES INC	349,513.11	20.9000	348,653.80	859.31-
136,030.0000	QUANTUM CORP	372,283.64	2.6200	356,398.60	15,885.04-

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8,500.0000	QUESTCOR PHARMACEUTICALS INC	188,461.66	37.6200	319,770.00	131,308.34
18,220.0000	QUIDEL CORP	311,096.10	18.3700	334,701.40	23,605.30
4,700.0000	REGAL-BELOIT CORP	338,691.54	65.5500	308,085.00	30,606.54-
6,525.0000	RELIANCE STEEL & ALUMINUM CO	350,502.89	56.4800	368,532.00	18,029.11
11,311.0000	ROBERT HALF INTERNATIONAL INC	339,987.62	30.3000	342,723.30	2,735.68
30,490.0000	RUDOLPH TECHNOLOGIES INC	309,236.93	11.1100	338,743.90	29,506.97
3,503.0000	SPX CORP	273,570.67	77.5300	271,587.59	1,983.08-
5,246.0000	SALIX PHARMACEUTICALS LTD	183,767.38	52.5000	275,415.00	91,647.62
9,800.0000	SCHLUMBERGER LTD	913,948.00	69.9300	685,314.00	228,634.00-
8,140.0000	SCHOLASTIC CORP	244,131.38	35.2800	287,179.20	43,047.82
59,200.0000	CHARLES SCHWAB CORP/THE	793,364.83	14.3700	850,704.00	57,339.17
20,540.0000	SINCLAIR BROADCAST GROUP INC	227,495.94	11.0600	227,172.40	323.54-
16,600.0000	SNAP-ON INC	914,559.28	60.9700	1,012,102.00	97,542.72
8,350.0000	SOTHEBY'S	301,090.15	39.3400	328,489.00	27,398.85
34,650.0000	STANDARD PACIFIC CORP	159,470.37	4.4600	154,539.00	4,931.37-
36,900.0000	STAPLES INC	558,586.35	16.1900	597,411.00	38,824.65
8,397.0000	STIFEL FINANCIAL CORP	366,607.75	37.8400	317,742.48	48,865.27-
19,300.0000	SUNTRUST BANKS INC	469,543.50	24.1700	466,481.00	3,062.50-

<u>SHARES/ PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PRICE</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
12,314.0000	SUPERIOR ENERGY SERVICES INC	430,486.06	26.3600	324,597.04	105,889.02-
19,430.0000	TAKE-TWO INTERACTIVE SOFTWARE	302,720.81	15.3850	298,930.55	3,790.26-
9,600.0000	TALISMAN ENERGY INC	237,120.00	12.6000	120,960.00	116,160.00-
10,700.0000	TARGET CORP	535,107.00	58.2700	623,489.00	88,382.00
8,500.0000	TECK RESOURCES LTD	450,670.00	35.6600	303,110.00	147,560.00-
28,050.0000	THOR INDUSTRIES INC	796,034.62	31.5600	885,258.00	89,223.38
10,400.0000	3M CO	972,400.00	89.2100	927,784.00	44,616.00-
3,410.0000	TIFFANY & CO	230,504.88	69.1300	235,733.30	5,228.42
6,512.0000	TIMKEN CO	315,038.36	50.7400	330,418.88	15,380.52
7,480.0000	TITAN INTERNATIONAL INC	197,049.16	23.6500	176,902.00	20,147.16-
28,910.0000	TIVO INC	343,639.50	11.9900	346,630.90	2,991.40
5,480.0000	TREX CO INC	161,152.02	32.0800	175,798.40	14,646.38
5,920.0000	TRIMBLE NAVIGATION LTD	327,312.36	54.4200	322,166.40	5,145.96-
10,050.0000	TRINITY INDUSTRIES INC	351,155.01	32.9500	331,147.50	20,007.51-
2,320.0000	TRIUMPH GROUP INC	107,205.17	62.6600	145,371.20	38,166.03
15,500.0000	TUPPERWARE BRANDS CORP	932,290.12	63.5000	984,250.00	51,959.88
27,400.0000	UMB FINANCIAL CORP	1,030,822.34	44.7350	1,225,739.00	194,916.66
16,300.0000	ULTRATECH INC	458,716.05	28.9800	472,374.00	13,657.95

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11,100.0000	UNITED STATES STEEL CORP	288,054.51	29.3700	326,007.00	37,952.49
2,874.0000	VALMONT INDUSTRIES INC	312,090.94	117.4100	337,436.34	25,345.40
14,230.0000	VALUECLICK INC	230,985.31	19.7400	280,900.20	49,914.89
37,550.0000	WABASH NATIONAL CORP	396,560.32	10.3500	388,642.50	7,917.82-
8,800.0000	WABTEC CORP/DE	587,235.44	75.3700	663,256.00	76,020.56
17,700.0000	WAL-MART STORES INC	926,354.48	61.2000	1,083,240.00	156,885.52
4,230.0000	WATSON PHARMACEUTICALS INC	279,143.16	67.0600	283,663.80	4,520.64
48,100.0000	WELLS FARGO & CO	1,468,043.62	34.1400	1,642,134.00	174,090.38
3,871.0000	WESCO INTERNATIONAL INC	230,374.04	65.3100	252,815.01	22,440.97
11,600.0000	WESTERN DIGITAL CORP	453,054.57	41.3900	480,124.00	27,069.43
8,100.0000	WOODWARD INC	276,037.18	42.8300	346,923.00	70,885.82
8,600.0000	XCEL ENERGY INC	202,450.73	26.4700	227,642.00	25,191.27
14,700.0000	ZIONS BANCORPORATION	349,618.26	21.4600	315,462.00	34,156.26-
7,870.0000	ENERGY XXI BERMUDA LIMITED USD SHS	241,733.34	36.1100	284,185.70	42,452.36
11,100.0000	COOPER INDUSTRIES PLC	720,390.00	63.9500	709,845.00	10,545.00-
17,900.0000	HERBALIFE LTD USD COM SHS	728,172.00	68.8200	1,231,878.00	503,706.00
11,000.0000	INGERSOLL-RAND PUBLIC LIMITED COMPANY	531,410.00	41.3500	454,850.00	76,560.00-

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55,400.0000	SEAGATE TECHNOLOGY	662,212.88	26.9550	1,493,307.00	831,094.12
7,300.0000	ACE LIMITED SHS	472,310.00	73.2000	534,360.00	62,050.00
46,900.0000	WEATHERFORD INTERNATIONL LTD REG	900,940.40	15.0900	707,721.00	193,219.40-
20,700.0000	NOBLE CORPORATION BAAR NAMEN-AKT CHF3.28	944,334.00	37.4700	775,629.00	168,705.00-
25,990.0000	TRANSOCEAN LTD ZUG NAMEN-AKT	1,474,010.72	54.7000	1,421,653.00	52,357.72-
10,900.0000	UBS AG SHS NEW	196,745.00	14.0200	152,818.00	43,927.00-
6,770.0000	ACI WORLDWIDE INC	222,172.99	40.2700	272,627.90	50,454.91
6,020.0000	ALLEGiant TRAVEL CO	321,652.48	54.5000	328,090.00	6,437.52
15,250.0000	ALLIED NEVADA GOLD CORP	552,429.38	32.5300	496,082.50	56,346.88-
28,000.0000	ARCELORMITTAL	520,059.26	19.1300	535,640.00	15,580.74
5,200.0000	AXA SA ADR	108,810.00	16.5530	86,075.60	22,734.40-
12,030.0000	B&G FOODS INC	223,315.53	22.5100	270,795.30	47,479.77
5,500.0000	BASF SE ADR	477,125.00	87.3460	480,403.00	3,278.00
51,128.3620	BP PLC ADR	2,278,383.05	45.0000	2,300,776.29	22,393.24
45,300.0000	BANK OF NEW YORK MELLON CORP/T	933,726.75	24.1300	1,093,089.00	159,362.25
11,640.0000	BANKRATE INC	268,423.53	24.7500	288,090.00	19,666.47

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8,230.0000	BASIC ENERGY SERVICES INC	218,766.96	17.3500	142,790.50	75,976.46-
11,400.0000	BHP BILLITON LTD ADR	1,093,032.00	72.4000	825,360.00	267,672.00-
6,650.0000	BRITISH AMERICAN TOBACCO PLC ADR	552,944.25	101.2200	673,113.00	120,168.75
8,140.0000	BROADSOFT INC	275,889.81	38.2500	311,355.00	35,465.19
6,200.0000	BROOKFIELD ASSET MANAGEMENT IN	201,252.00	31.5700	195,734.00	5,518.00-
11,000.0000	CVR ENERGY INC	265,277.17	26.7500	294,250.00	28,972.83
11,780.0000	CARDTRONICS INC	292,574.31	26.2500	309,225.00	16,650.69
3,880.0000	CATALYST HEALTH SOLUTIONS INC	214,245.78	63.7300	247,272.40	33,026.62
16,172.0000	CHART INDUSTRIES INC	911,870.20	73.3300	1,185,892.76	274,022.56
19,310.0000	CHEMTURA CORP	276,118.56	16.9800	327,883.80	51,765.24
176,300.0000	CHIMERA INVESTMENT CORP	658,549.09	2.8300	498,929.00	159,620.09-
801.0000	CHIPOTLE MEXICAN GRILL INC	263,384.85	418.0000	334,818.00	71,433.15
5,700.0000	CLIFFS NATURAL RESOURCES INC	396,997.66	69.2600	394,782.00	2,215.66-
16,410.0000	CROCS INC	294,422.08	20.9200	343,297.20	48,875.12
4,200.0000	CUMMINS INC	494,807.88	120.0400	504,168.00	9,360.12
19,200.0000	DANA HOLDING CORP	313,212.13	15.5000	297,600.00	15,612.13-
9,310.0000	DEALERTRACK HOLDINGS INC	205,609.27	30.2600	281,720.60	76,111.33

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51,300.0000	DELTA AIR LINES INC	520,046.01	9.9150	508,639.50	11,406.51-
7,250.0000	DIAGEO PLC ADR	567,574.47	96.5000	699,625.00	132,050.53
3,636.0000	DIGITAL REALTY TRUST INC	211,397.06	73.9700	268,954.92	57,557.86
20,707.0000	DRESSER-RAND GROUP INC	1,015,744.10	46.3900	960,597.73	55,146.37-
22,600.0000	DUKE ENERGY CORP	414,983.99	21.0100	474,826.00	59,842.01
1,720.0000	FIBRIA CELULOSE SA	28,242.40	8.3900	14,430.80	13,811.60-
12,700.0000	FIDELITY NATIONAL INFORMATION	422,169.59	33.1200	420,624.00	1,545.59-
6,860.0000	FRESH MARKET INC/THE	273,727.91	47.9500	328,937.00	55,209.09
28,900.0000	GENERAL MOTORS CO	728,740.90	25.6500	741,285.00	12,544.10
16,500.0000	HFF INC	195,796.74	16.4700	271,755.00	75,958.26
22,300.0000	HANESBRANDS INC	539,740.00	29.5400	658,742.00	119,002.00
3,940.0000	HAYNES INTERNATIONAL INC	211,333.41	63.3500	249,599.00	38,265.59
15,490.0000	HELIX ENERGY SOLUTIONS GROUP I	261,945.71	17.8000	275,722.00	13,776.29
51,720.0000	HERCULES OFFSHORE INC	259,781.68	4.7300	244,635.60	15,146.08-
18,947.0000	HUNTSMAN CORP	335,119.86	14.0100	265,447.47	69,672.39-
12,500.0000	IPG PHOTONICS CORP	500,263.52	52.0500	650,625.00	150,361.48
28,100.0000	INNOPHOS HOLDINGS INC	1,284,941.13	50.1200	1,408,372.00	123,430.87
10,600.0000	INTERLINE BRANDS INC	214,262.99	21.6100	229,066.00	14,803.01

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37,940.0000	JAMES RIVER COAL CO	262,272.34	5.1200	194,252.80	68,019.54-
67,450.0000	KIT DIGITAL INC	812,910.94	7.2000	485,640.00	327,270.94-
14,340.0000	KAPSTONE PAPER AND PACKAGING C	252,870.65	19.7000	282,498.00	29,627.35
18,560.0000	KODIAK OIL & GAS CORP	122,604.07	9.9600	184,857.60	62,253.53
7,890.0000	LIQUIDITY SERVICES INC	246,664.64	44.8000	353,472.00	106,807.36
6,170.0000	LULULEMON ATHLETICA INC	293,214.14	74.7300	461,084.10	167,869.96
4,160.0000	MAKO SURGICAL CORP	162,944.17	42.1500	175,344.00	12,399.83
8,410.0000	MARKETAXESS HOLDINGS INC	220,734.88	37.2900	313,608.90	92,874.02
2,750.0000	MATTRESS FIRM HOLDING CORP	102,876.67	37.9000	104,225.00	1,348.33
47,600.0000	MERCK & CO INC	1,571,276.00	38.4000	1,827,840.00	256,564.00
27,510.0000	MERITOR INC	218,414.79	8.0700	222,005.70	3,590.91
15,901.0000	METROPCS COMMUNICATIONS INC	236,426.49	9.0200	143,427.02	92,999.47-
640.0000	MICRO STRATEGY INC WTS TO PUR COM 06/24/2007	6.40	0.0100	6.40	0.00
12,250.0000	NESTLE SA ADR	704,987.50	62.8420	769,814.50	64,827.00
7,700.0000	NOVARTIS AG ADR	418,495.00	55.4100	426,657.00	8,162.00
10,668.0000	NUANCE COMMUNICATIONS INC	259,237.46	25.5800	272,887.44	13,649.98
35,900.0000	OCZ TECHNOLOGY GROUP INC	307,253.58	6.9800	250,582.00	56,671.58-

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
17,770.0000	OPTIMER PHARMACEUTICALS INC	216,531.12	13.9000	247,003.00	30,471.88
3,311.0000	PVH CORP	220,242.57	89.3300	295,771.63	75,529.06
9,424.0000	PARAMETRIC TECHNOLOGY CORP	211,945.77	27.9400	263,306.56	51,360.79
44,640.0000	PILGRIM'S PRIDE CORP	265,181.16	7.4600	333,014.40	67,833.24
9,550.0000	PRIMORIS SERVICES CORP	157,582.54	16.0600	153,373.00	4,209.54-
10,060.0000	QLIK TECHNOLOGIES INC	276,656.62	32.0000	321,920.00	45,263.38
4,029.0000	RACKSPACE HOSTING INC	172,642.67	57.7900	232,835.91	60,193.24
11,800.0000	RIO TINTO PLC ADR	839,216.00	55.5900	655,962.00	183,254.00-
9,539.0000	ROVI CORP	425,775.56	32.5500	310,494.45	115,281.11-
14,874.0000	ROYAL DUTCH SHELL PLC ADR	952,226.18	70.1300	1,043,113.62	90,887.44
5,020.0000	SVB FINANCIAL GROUP	284,481.52	64.3400	322,986.80	38,505.28
1,550.0000	SHORETEL INC	14,646.40	5.6800	8,804.00	5,842.40-
19,100.0000	SIRONA DENTAL SYSTEMS INC	868,761.27	51.5400	984,414.00	115,652.73
11,985.0000	SNYDERS-LANCE INC	253,126.61	25.8500	309,812.25	56,685.64
8,830.0000	SOLARWINDS INC	207,151.83	38.6500	341,279.50	134,127.67
37,200.0000	STANTEC INC	1,109,618.95	31.8400	1,184,448.00	74,829.05
16,000.0000	SUNCOR ENERGY INC	717,440.00	32.7000	523,200.00	194,240.00-

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14,400.0000	TENARIS SA ADR	712,224.00	38.2300	550,512.00	161,712.00-
8,800.0000	TRAVELERS COS INC/THE	523,424.00	59.2000	520,960.00	2,464.00-
5,826.0000	TREEHOUSE FOODS INC	331,693.00	59.5000	346,647.00	14,954.00
11,410.0000	TRUEBLUE INC	180,889.40	17.8800	204,010.80	23,121.40
41,220.0000	US AIRWAYS GROUP INC	307,139.60	7.5900	312,859.80	5,720.20
3,157.0000	UNDER ARMOUR INC	235,575.74	94.0000	296,758.00	61,182.26
16,300.0000	UNILEVER NV	519,704.64	34.0300	554,689.00	34,984.36
20,650.0000	VALE SA ADR	688,677.50	23.3300	481,764.50	206,913.00-
8,778.0000	VERA BRADLEY INC	341,896.09	30.1900	265,007.82	76,888.27-
7,473.0000	VERIFONE SYSTEMS INC	345,126.88	51.8700	387,624.51	42,497.63
48,000.0000	VODAFONE GROUP PLC ADR	1,378,815.13	27.6700	1,328,160.00	50,655.13-
20,550.0000	WEB.COM GROUP INC	249,267.40	14.4300	296,536.50	47,269.10
21,176.0000	WESTERN UNION CO/THE	409,491.49	17.6000	372,697.60	36,793.89-
500.0000	YARA INTERNATIONAL ASA ADR	25,326.50	47.6150	23,807.50	1,519.00-
4,960.0000	ZUMIEZ INC	130,433.93	36.1100	179,105.60	48,671.67
1,816,608.0000	AUDAX MEZZANINE FUND III, LP	1,728,729.12	1.0000	1,816,608.00	87,878.88
TOTAL CORPORATE STOCK - COMMON		135,520,265.14		143,997,824.71	8,477,559.57

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<u>PARTNERSHIP/JOINT VENTURE INTEREST</u>					
371,415.0000	ADAMS STREET DIRECT FUND LP	266,426.00	1.0000	371,415.00	104,989.00
569,057.0000	ADAMS STREET NON US DEV MKT FUND	473,763.00	1.0000	569,057.00	95,294.00
1,167,423.0000	ADAMS SREET US FUND LP	923,938.67	1.0000	1,167,423.00	243,484.33
3,250.0000	WESTERN TECH VENTURE LENDING & LEASING VI	3,250,630.00	1,014.1500	3,295,987.50	45,357.50
1,071,191.9000	ENERGY SPECTRUM PARTNERS VI	1,071,191.90	1.0000	1,071,191.90	0.00
4,164,374.0600	ENERGY FUND XV-A LP	3,906,949.81	1.0000	4,164,374.06	257,424.25
70,472.0000	ADAMS STREET NON US EMERGING MARKETS FUND	82,451.00	1.0000	70,472.00	11,979.00-
8,281,707.0000	SIGULER GUFF DIST OFF FD IV	8,741,878.52	1.0000	8,281,707.00	460,171.52-
4,500,000.0000	INDUSTRY VENTURES VI	4,500,000.00	1.0000	4,500,000.00	0.00
4,451,492.0000	VISTA EQUITY PARTNERS FUND IV LP	4,442,124.00	1.0000	4,451,492.00	9,368.00
20,463,537.0000	GMO MULTI STRATEGY FD OFFSHORE CLASS E	18,779,950.65	1.0000	20,463,537.00	1,683,586.35
533,441.0900	RREEF AMERICA II	42,191,202.29	81.9298	43,704,752.22	1,513,549.93
3,805,905.6110	WELLINGTON CIF DIVERSIFIED INFLATION HEDGE FUND	65,738,704.97	15.5500	59,181,832.25	6,556,872.72-
35,304,835.0000	GROSVENOR INSTL PARTNERS LP	35,856,360.00	1.0000	35,304,835.00	551,525.00-

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
13,775,791.0000	SIGULER GUFF LP	13,506,351.31	1.0000	13,775,791.00	269,439.69
4,817,710.0000	LANDMARK EQUITY PARTNERS XIV LP	4,752,150.95	1.0000	4,817,710.00	65,559.05
4,063,976.0000	PANTHEON GLOBAL SECONDARY PD IV LP	3,587,983.00	1.0000	4,063,976.00	475,993.00
	TOTAL PARTNERSHIP/JOINT VENTURE INTEREST	212,072,056.07		209,255,552.93	2,816,503.14-
<u>OTHER INVESTMENTS</u>					
2,450,000.0000	MEXICAN BONOS 8.000% 06/11/2020	208,161.24	8.8032	215,680.71	7,519.47
190,000.0000	SVENSK EXPORTKREDIT AB 1.750% 10/20/2015 DD 10/20/10	184,387.40	100.9990	191,898.10	7,510.70
10,000.0000	AMERICAN MUN FWR-OHIO INC 6.270% 02/15/2050 DD 05/23/11	11,021.30	110.2240	11,022.40	1.10
50,000.0000	CALIFORNIA ST 7.300% 10/01/2039 DD 10/15/09	52,712.50	125.2090	62,604.50	9,892.00
10,000.0000	COOK CNTY ILL 6.229% 11/15/2034 DD 06/23/10	11,521.60	115.5330	11,553.30	31.70
100,000.0000	FLORIDA EDL LN MARKETING CORP VAR RT 12/01/2036 DD 01/14/03	83,375.00	75.0000	75,000.00	8,375.00-
50,000.0000	ILLINOIS ST 5.665% 03/01/2018 DD 03/10/11	49,904.50	109.4390	54,719.50	4,815.00
50,000.0000	ILLINOIS ST 5.877% 03/01/2019 DD 03/10/11	49,937.50	109.8940	54,947.00	5,009.50

5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR
 Bert Bell/Pete Rozelle NFL Player Retirement Plan
 NFL GCALL10 EIN/PN: 13-6043636/001 Accountant's Opinion
 BERT BELL/PETE ROZELLE NFL RET REVALUED COST
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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
150,000.0000	JAPAN BANK FOR INTERNATIONAL C 2.875% 02/02/2015 DD 02/02/10	153,295.50	105.4780	158,217.00	4,921.50
100,000.0000	JAPAN FINANCE ORGANIZATION FOR 4.000% 01/13/2021 DD 01/13/11	98,768.00	110.8830	110,883.00	12,115.00
30,000.0000	LOS ANGELES CALIF DEPT WTR & P 6.574% 07/01/2045 DD 12/02/10	31,056.90	132.3940	39,718.20	8,661.30
30,000.0000	MUNICIPAL ELEC AUTH GA 6.637% 04/01/2057 DD 03/11/10	28,500.00	111.2160	33,364.80	4,864.80
20,000.0000	MUNICIPAL ELEC AUTH GA 6.655% 04/01/2057 DD 03/12/10	18,802.80	110.6700	22,134.00	3,331.20
100,000.0000	NORTHSTAR EDU FIN INC DE VAR RT 01/29/2046 DD 03/13/07	82,171.74	80.0000	80,000.00	2,171.74-
100,000.0000	PENNSYLVANIA ST HIGHER ED ASSI VAR RT 05/01/2046 DD 05/17/06	93,500.00	92.5100	92,510.00	990.00-
225,000.0000	PENNSYLVANIA ST HIGHER ED ASSI VAR RT 06/01/2047 DD 06/21/07	199,170.00	92.5081	208,143.29	8,973.29
50,000.0000	SANTA CLARA VY CALIF TRANSN AU 5.876% 04/01/2032 DD 11/17/10	54,435.00	120.8390	60,419.50	5,984.50
15,000.0000	MEXICO GOVERNMENT INTERNATIONA 6.750% 09/27/2034 DD 09/27/04	16,920.00	128.5000	19,275.00	2,355.00
12,000.0000	MEXICO GOVERNMENT INTERNATIONA 5.625% 01/15/2017 DD 03/10/06	13,236.00	115.6500	13,878.00	642.00
50,000.0000	UNIV OF CALIFORNIA CA REVENUES 4.858% 05/15/2112 DD 03/01/12	50,000.00	97.8540	48,927.00	1,073.00-

Bert Bell/Pete Rozelle NFL Player Retirement Plan

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
3.0000	EURO-BOBL FUTURE (EUX) EXP JUN 12	0.00	165.2772	319.61-	319.61-
14.0000-	US TREAS BD FUTURE (CBT) EXP JUN 12	0.00	137.7500	59,320.33	59,320.33
24.0000	US 10YR NOTE FUTURE (CBT) EXP JUN 12	0.00	129.4843	23,187.54-	23,187.54-
49.0000-	US 5YR TREAS NTS FUT (CBT) EXP JUN 12	0.00	122.5390	32,125.00	32,125.00
7.0000-	US 2YR TREAS NTS FUT (CBT) EXP JUN 12	0.00	110.0703	1,125.00	1,125.00
3.0000-	US ULTRA BOND (CBT) EXP JUN 12	0.00	150.9687	19,617.19	19,617.19
3,250,000.0000	BARCLAYS CP REPO REPO 0.060% 04/02/2012 DD 03/30/12	3,250,000.00	100.0000	3,250,000.00	0.00
3,250,000.0000	RBS CITIZENS BANK REPO 0.060% 04/02/2012 DD 03/30/12	3,250,000.00	100.0000	3,250,000.00	0.00
TOTAL OTHER INVESTMENTS		7,990,876.98		8,153,575.67	162,698.69
<u>WRITTEN OPTIONS</u>					
8.0000-	90DAY EURODOLLAR FUT EXP SEP12 PUT SEP 12 098.875 ED 09/19/12	2,299.00-	0.0125	250.00-	2,049.00
20.0000-	EUROS 2YR MID-CRV FUT DEC 14 PUT DEC 12 098.250 ED 12/14/12	6,435.00-	0.1550	7,750.00-	1,315.00-
TOTAL WRITTEN OPTIONS		8,734.00-		8,000.00-	734.00

Bert Bell/Pete Rozelle NFL Player Retirement Plan

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
<u>PURCHASE OPTIONS</u>					
8.0000	90DAY EURODOLLAR FUTURE DEC 12 PUT DEC 12 098.875 ED 121712	3,051.00	0.0325	650.00	2,401.00-
20.0000	EURO\$ 2YR MID-CRV FUT DEC 14 PUT DEC 12 098.750 ED 12/14/12	12,452.50	0.3125	15,625.00	3,172.50
TOTAL PURCHASE OPTIONS		15,503.50		16,275.00	771.50
<u>COMMON/COLLECTIVE TRUST</u>					
401,152.3870	EB DV GLOBAL ALPHA I FUND	64,134,562.66	170.5533	68,417,882.66	4,283,320.00
8,941,319.9900	EB TEMP INV FD VAR RT 12/31/49 FEE CL 15	8,941,319.99	1.0000	8,941,319.99	0.00
29,781.4330	JP MORGAN STRATEGIC PROPERTY FUND	35,235,068.27	1,719.8893	51,220,769.89	15,985,701.62
28,552.0000	BENCHMARK PLUS INTL OFFSHORE FUND	28,552,000.00	1,032.0388	29,466,773.99	914,773.99
269,927.1700	GOTTEX MKT NEUTRAL S&P 500 FUND	28,641,696.78	90.1460	24,332,854.67	4,308,842.11-
244,326.9800	GOTTEX AGGREGATE REPLICATION FUND	24,430,903.76	112.4190	27,466,994.76	3,036,091.00
37,097.0870	ENTRUST CAPITAL DIVERSIFIED FUND LTD	36,718,500.00	1,082.8647	40,171,128.99	3,452,628.99
21,569.2800	BENCHMARK PORTABLE ALPHA FIXED INC	21,569,280.00	1,277.1882	27,548,030.01	5,978,750.01

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SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
1,327,433.5580	ALLIANCEBERNSTEIN INTL STRATEGIC VALUES SERIES DBT	33,185,318.40	30.8914	41,006,281.01	7,820,962.61
379,731.4730	EE DV NSL LCG SIF	46,823,348.74	144.7227	54,955,780.00	8,132,431.26
3,668,338.1080	LOOMIS SAYLES CREDIT ASSET TRUST - CLASS B	46,790,653.01	16.0600	58,913,510.01	12,122,857.00
2,513,359.2700	PICTET EMERGING LOCAL CURRENCY DEBT FUND LLC	38,756,000.00	15.3780	38,650,463.99	105,536.01-
9,203.9680	EE DV STOCK INDEX FUND	12,434,348.68	1,763.3617	16,229,925.17	3,795,576.49
1,084,758.2900	TBC EMERGING MARKETS EQUITY	71,859,050.00	59.0800	64,087,519.77	7,771,530.23-
TOTAL COMMON/COLLECTIVE TRUST		498,072,050.29		551,409,234.91	53,337,184.62
<u>103-12 INVESTMENT ENTITIES</u>					
79,171.3680	WA FLTG RATE HI INCOME FD	868,189.52	16.4880	1,305,377.52	437,188.00
105,282.5150	WAMCO OPPORTUNISTIC US\$ HIGH YIELD SEC PORT LLC	1,726,377.78	24.0450	2,531,518.07	805,140.29
41,467.1830	WAMCO OPPORTUNISTIC INTL INVESTMENT GRADE SEC LLC	1,057,856.42	24.5680	1,018,765.75	39,090.67-
TOTAL 103-12 INVESTMENT ENTITIES		3,652,423.72		4,855,661.34	1,203,237.62

SCHEDULE OF REPORTABLE TRANSACTIONS
Schedule H, Part IV, 4 (j)

		5% VALUE:		71,608,107.77			
TRAN CODE	SHARES/ PAR VALUE	SECURITY DESCRIPTION	TRANSACTION EXPENSE	COST OF PURCHASES	PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
B	173,002,508.00	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	173,002,508.00	.00	.00	.00
S	144,412,000.67	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	.00	144,412,000.67	144,412,000.67	.00

Bert Bell/Pete Rozelle NFL Player Retirement Plan

OF THE CURRENT VALUE OF THE PLAN ASSETS
 ACCOUNTANT'S OPINION
 PERIOD 01 APRIL 2011 THROUGH 31 MARCH 2012

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		5% VALUE:				71,608,107.77
<u>TRAN</u> <u>COUNT</u>	<u>SHARES/</u> <u>PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST OF</u> <u>PURCHASES</u>	<u>PROCEEDS</u> <u>FROM SALES</u>	<u>COST OF ASSETS</u> <u>DISPOSED</u>	<u>GAIN/LOSS</u>
16	1,869,928.26	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	21,502,235.06	.00	.00	
6	4,428,579.88	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	.00	50,236,520.00	48,608,682.02	1,627,837.98
137	186,656,768.43	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	186,656,768.43	.00	.00	.00
137	14,710,699.32	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	14,710,699.32	14,710,699.32	.00
754	271,895,645.33	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	271,895,645.33	.00	.00	.00
804	446,479,535.92	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	446,479,535.92	446,479,535.92	.00
5	21,436.41	EB DV STOCK INDEX FUND	34,123,994.39	.00	.00	.00
68	56,207.89	EB DV STOCK INDEX FUND	.00	89,764,081.60	73,732,759.60	16,031,322.00

SCHEDULE OF LOANS AND FIXED INCOME SECURITIES IN DEFAULT
Schedule G, Part I

SCHEDULE MB (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500 or 5500-SF.	OMB No. 1210-0110 2011 This Form is Open to Public Inspection
For calendar plan year 2011 or fiscal plan year beginning <u>04/01/2011</u> and ending <u>03/31/2012</u>		

► **Round off amounts to nearest dollar.**

► **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>Bert Bell / Pete Rozelle NFL Player Retirement Plan</u>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">B Three-digit plan number (PN) ►</td> <td style="width:30%; text-align: center;">001</td> </tr> </table>	B Three-digit plan number (PN) ►	001
B Three-digit plan number (PN) ►	001		
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>Retirement Board of Bert Bell/Pete Rozelle NFL Player Retirement Plan</u>			
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;">D Employer Identification Number (EIN) 13-6043636</td> </tr> </table>		D Employer Identification Number (EIN) 13-6043636	
D Employer Identification Number (EIN) 13-6043636			

E Type of plan: (1) ☒ Multiemployer Defined Benefit (2) ☐ Money Purchase (see instructions)

1a Enter the valuation date: Month <u>4</u> Day <u>1</u> Year <u>2011</u>		
b Assets		
(1) Current value of assets	1b(1)	1,325,356,067
(2) Actuarial value of assets for funding standard account.....	1b(2)	1,354,324,777
c (1) Accrued liability for plan using immediate gain methods	1c(1)	2,099,253,693
(2) Information for plans using spread gain methods:		
(a) Unfunded liability for methods with bases.....	1c(2)(a)	
(b) Accrued liability under entry age normal method.....	1c(2)(b)	
(c) Normal cost under entry age normal method.....	1c(2)(c)	
(3) Accrued liability under unit credit cost method.....	1c(3)	2,099,253,693
d Information on current liabilities of the plan:		
(1) Amount excluded from current liability attributable to pre-participation service (see instructions).....	1d(1)	
(2) "RPA '94" information :		
(a) Current liability	1d(2)(a)	3,391,179,000
(b) Expected increase in current liability due to benefits accruing during the plan year	1d(2)(b)	55,685,104
(c) Expected release from "RPA '94" current liability for the plan year	1d(2)(c)	
(3) Expected plan disbursements for the plan year	1d(3)	121,849,504

Statement by Enrolled Actuary
 To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE	 Signature of actuary	<u>12/11/12</u> Date 11-05643 Most recent enrollment number (410) 547-5932 Telephone number (including area code)
James Ritchie Type or print name of actuary Aon Hewitt 500 East Pratt Street Firm name Baltimore MD 21202- Address of the firm		

2 Operational information as of beginning of this plan year:

a Current value of assets (see instructions)	2a	1,325,356,067
b "RPA '94" current liability/participant count breakdown:	(1) Number of participants	(2) Current liability
(1) For retired participants and beneficiaries receiving payment	3,712	1,112,128,162
(2) For terminated vested participants	5,552	1,751,144,266
(3) For active participants:		
(a) Non-vested benefits		45,038,629
(b) Vested benefits		482,867,943
(c) Total active	2,162	527,906,572
(4) Total	11,426	3,391,179,000
c If the percentage resulting from dividing line 2a by line 2b(4), column (2), is less than 70%, enter such percentage	2c	39.08 %

3 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
03/30/2012	172,120,000				
Totals ▶			3(b)	172,120,000	3(c) 0

4 Information on plan status:

a Enter code to indicate plan's status (see instructions for attachment of supporting evidence of plan's status). If code is "N," go to item 5	4a	E
b Funded percentage for monitoring plan's status (line 1b(2) divided by line 1c(3))	4b	64.5 %
c Is the plan making the scheduled progress under any applicable funding improvement or rehabilitation plan?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
d If the plan is in critical status, were any adjustable benefits reduced?		<input type="checkbox"/> Yes <input type="checkbox"/> No
e If line d is "Yes," enter the reduction in liability resulting from the reduction in adjustable benefits, measured as of the valuation date	4e	

5 Actuarial cost method used as the basis for this plan year's funding standard account computations (check all that apply):

- | | | | |
|------------------------------------------------------------|------------------------------------------------------------|----------------------------------------------------------------------------|---------------------------------------------|
| a <input type="checkbox"/> Attained age normal | b <input type="checkbox"/> Entry age normal | c <input checked="" type="checkbox"/> Accrued benefit (unit credit) | d <input type="checkbox"/> Aggregate |
| e <input type="checkbox"/> Frozen initial liability | f <input type="checkbox"/> Individual level premium | g <input type="checkbox"/> Individual aggregate | h <input type="checkbox"/> Shortfall |
| i <input type="checkbox"/> Reorganization | j <input type="checkbox"/> Other (specify): | | |

k If box h is checked, enter period of use of shortfall method	5k	
l Has a change been made in funding method for this plan year?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
m If line l is "Yes," was the change made pursuant to Revenue Procedure 2000-40 or other automatic approval?		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
n If line l is "Yes," and line m is "No," enter the date (MM-DD-YYYY) of the ruling letter (individual or class) approving the change in funding method	5n	

6 Checklist of certain actuarial assumptions:

a Interest rate for "RPA '94" current liability	6a	4.50 %
b Rates specified in insurance or annuity contracts	Pre-retirement	Post-retirement
	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A
c Mortality table code for valuation purposes:		
(1) Males	6c(1)	A
(2) Females	6c(2)	A
d Valuation liability interest rate	6d	7.25 %
e Expense loading	6e	31.3 % <input type="checkbox"/> N/A
f Salary scale	6f	% <input type="checkbox"/> N/A
g Estimated investment return on actuarial value of assets for year ending on the valuation date	6g	2.1 %
h Estimated investment return on current value of assets for year ending on the valuation date	6h	11.8 %

7 New amortization bases established in the current plan year:

(1) Type of base	(2) Initial balance	(3) Amortization Charge/Credit
4	187,478,376	19,496,816
5	124,853,059	12,984,095
1	162,030,373	16,850,351

8 Miscellaneous information:

a If a waiver of a funding deficiency has been approved for this plan year, enter the date (MM-DD-YYYY) of the ruling letter granting the approval	8a	
b Is the plan required to provide a Schedule of Active Participant Data? (See the instructions.) If "Yes," attach schedule.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
c Are any of the plan's amortization bases operating under an extension of time under section 412(e) (as in effect prior to 2008) or section 431(d) of the Code?		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
d If line c is "Yes," provide the following additional information:		
(1) Was an extension granted automatic approval under section 431(d)(1) of the Code?		<input type="checkbox"/> Yes <input type="checkbox"/> No
(2) If line (1) is "Yes," enter the number of years by which the amortization period was extended	8d(2)	
(3) Was an extension approved by the Internal Revenue Service under section 412(e) (as in effect prior to 2008) or 431(d)(2) of the Code?		<input type="checkbox"/> Yes <input type="checkbox"/> No
(4) If line (3) is "Yes," enter number of years by which the amortization period was extended (not including the number of years in line (2))	8d(4)	
(5) If line (3) is "Yes," enter the date of the ruling letter approving the extension	8d(5)	
(6) If line (3) is "Yes," is the amortization base eligible for amortization using interest rates applicable under section 6621(b) of the Code for years beginning after 2007?		<input type="checkbox"/> Yes <input type="checkbox"/> No
e If box 5h is checked or line 8c is "Yes," enter the difference between the minimum required contribution for the year and the minimum that would have been required without using the shortfall method or extending the amortization base(s)	8e	

9 Funding standard account statement for this plan year:**Charges to funding standard account:**

a Prior year funding deficiency, if any	9a	0
b Employer's normal cost for plan year as of valuation date	9b	30,495,377
c Amortization charges as of valuation date:	Outstanding balance	
(1) All bases except funding waivers and certain bases for which the amortization period has been extended	9c(1)	1,449,206,048
(2) Funding waivers	9c(2)	
(3) Certain bases for which the amortization period has been extended	9c(3)	
d Interest as applicable on lines 9a, 9b, and 9c	9d	13,898,320
e Total charges. Add lines 9a through 9d	9e	205,599,287

Credits to funding standard account:

f Prior year credit balance, if any	9f	386,075,241
g Employer contributions. Total from column (b) of line 3	9g	172,120,000
	Outstanding balance	
h Amortization credits as of valuation date	9h	318,201,891
i Interest as applicable to end of plan year on lines 9f, 9g, and 9h	9i	31,703,072
j Full funding limitation (FFL) and credits:		
(1) ERISA FFL (accrued liability FFL)	9j(1)	1,276,777,192
(2) "RPA '94" override (90% current liability FFL)	9j(2)	1,803,396,909
(3) FFL credit	9j(3)	0
k (1) Waived funding deficiency	9k(1)	0
(2) Other credits	9k(2)	0
l Total credits. Add lines 9f through 9i, 9j(3), 9k(1), and 9k(2)	9l	641,106,818
m Credit balance: If line 9l is greater than line 9e, enter the difference	9m	435,507,531
n Funding deficiency: If line 9e is greater than line 9l, enter the difference	9n	

9 o Current year's accumulated reconciliation account:

(1) Due to waived funding deficiency accumulated prior to the 2011 plan year	9o(1)	0
(2) Due to amortization bases extended and amortized using the interest rate under section 6621(b) of the Code:		
(a) Reconciliation outstanding balance as of valuation date	9o(2)(a)	0
(b) Reconciliation amount (line 9c(3) balance minus line 9o(2)(a))	9o(2)(b)	0
(3) Total as of valuation date.....	9o(3)	0

10 Contribution necessary to avoid an accumulated funding deficiency. (See instructions.) **10**

11 Has a change been made in the actuarial assumptions for the current plan year? If "Yes," see instructions. ☒ Yes ☐ No

Certification of Status

**Certification of Funded Status
For the
Bert Bell/ Pete Rozelle NFL Player Retirement Plan**

Plan Sponsor: Retirement Board
Address: NFL Player Benefits
200 St. Paul Place, Suite 2420
Baltimore, MD 21202-2040
Telephone Number: 410-685-5069
EIN: 13-6043636
Plan Number: 001
Plan Year for which this
Certification is being made: April 1, 2011 – March 31, 2012

Certification Results

This is a certification of the status for The Bert Bell/ Pete Rozelle NFL Player Retirement Plan (the "Plan") prepared in accordance with Internal Revenue Code (IRC) Section 432 and relevant regulations.

The funded percentage of the Plan as of April 1, 2011 is estimated to be less than 80%. As of April 1, 2011 an Accumulated Funding Deficiency, as defined under IRC Section 431, is not projected to occur within the next seven plan years, the sum of the assets in the Plan plus the present value of the expected contributions for the next six plan years is expected to be greater than the present value of non-forfeitable benefits to be paid in the current plan year and the next six succeeding plan years, and the sum of the assets in the Plan plus the present value of expected contributions for the next four plan years is expected to be greater than the present value of benefits to be paid in the current plan year and the next four succeeding plan years.

A Funding Improvement Plan was adopted by the Plan on February 23, 2011. As of April 1, 2011, the Plan is making the scheduled progress in meeting the requirements of its Funding Improvement Plan.

Assumptions and Methods

The calculations performed for this certification used the census data, actuarial assumptions, and plan provisions which were used for the actuarial valuation as of April 1, 2010, except as noted below. Unaudited financial statements as of March 31, 2011 were used. Employer contributions were projected using the actuarial assumptions and methods stated in the applicable collective bargaining agreement. The terms of the current collective bargaining agreement are assumed to continue in effect for the succeeding plan years pursuant to IRC Section 432 and relevant regulations.

Certification

I hereby certify the plan's funded status for the plan year beginning April 1, 2011 in accordance with the provisions of the Pension Protection Act of 2006. I am an Enrolled Actuary and a Member of the American Academy of Actuaries and meet the Qualification Standards of the American Academy of Actuaries to render the actuarial opinion contained herein.

☐ Neither Endangered nor
Critical

(Green Zone)

☒ Endangered

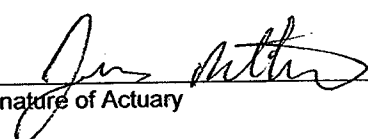
(Yellow Zone)

☐ Seriously Endangered

(Orange Zone)

☐ Critical

(Red Zone)


Signature of Actuary

6/23/11
Date

James E. Ritchie, A.S.A., E.A.
Name of Actuary

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 4a

Illustration Supporting Actuarial Certification of Status

	2011 Plan Year
Valuation Date	04/01/2011
Funded Percentage	75.45%
Value of Assets	\$1,355,883,325
Value of Liabilities	\$1,796,988,532

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 4a

Illustration Supporting Scheduled Progress with Funding Improvement Plan

	2012 Plan year	2013 Plan year	2014 Plan year	2015 Plan year	2016 Plan year	2017 Plan year	2018 Plan year	2019 Plan year	2020 Plan year	2021 Plan year
Valuation Date	04/01/2012	04/01/2013	04/01/2014	04/01/2015	04/01/2016	04/01/2017	04/01/2018`	04/01/2019	04/01/2020	04/01/2021
Expected Funded Percentage	71.0%	65.7%	64.8%	61.9%	61.1%	63.2%	66.5%	69.6%	72.7%	80.0%
Actual Funded Percentage	51.7%	47.4%	50.7%	59.9%	70.7%	76.0%	81.5%	84.1%	85.8%	86.3%

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 11

Justification for Change in Actuarial Assumptions

The following assumptions were changed to better reflect current trends:

	Old	New
Mortality	RP-2000 Combined Healthy Mortality Table projected to 2006	RP-2000 Combined Healthy Mortality Table projected to 2020
Withdrawal Rates	<u>For Players with</u>	<u>For Players with</u>
	<u>Service of</u> 1 year 2 years 3 years	<u>Service of</u> 1 year 2 years 3 years 4 years 5 years 6 years 7 years 8 years 9 years 10 years 11 years 12 years 13 years 14 years 15 years 16 years 17 years 18 years 19 years 20 years
	<u>Rate</u> 29.1% 19.7% 17.0%	<u>Rate</u> 19.5% 11.0% 16.5% 15.8% 17.4% 18.4% 19.9% 21.4% 24.6% 26.2% 28.2% 30.5% 35.6% 37.2% 42.5% 55.8% 68.7% 78.6% 90.6% 100.0%

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 11

Justification for Change in Actuarial Assumptions
(continued)

Retirement Age	Age 47, except age 55 for players with no Credited Seasons before 1993.	<table><tr><td></td><td><u>Player with Pre-93 Season Rate</u></td><td><u>Player without Pre-93 Season Rate</u></td></tr><tr><td>45</td><td>15%</td><td>0%</td></tr><tr><td>46 – 49</td><td>3%</td><td>0%</td></tr><tr><td>50 – 54</td><td>2%</td><td>0%</td></tr><tr><td>55</td><td>25%</td><td>50%</td></tr><tr><td>56 – 59</td><td>5%</td><td>5%</td></tr><tr><td>60</td><td>10%</td><td>10%</td></tr><tr><td>61</td><td>5%</td><td>5%</td></tr><tr><td>62 – 63</td><td>10%</td><td>10%</td></tr><tr><td>64</td><td>25%</td><td>25%</td></tr><tr><td>65</td><td>100%</td><td>100%</td></tr></table>		<u>Player with Pre-93 Season Rate</u>	<u>Player without Pre-93 Season Rate</u>	45	15%	0%	46 – 49	3%	0%	50 – 54	2%	0%	55	25%	50%	56 – 59	5%	5%	60	10%	10%	61	5%	5%	62 – 63	10%	10%	64	25%	25%	65	100%	100%			
	<u>Player with Pre-93 Season Rate</u>	<u>Player without Pre-93 Season Rate</u>																																				
45	15%	0%																																				
46 – 49	3%	0%																																				
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56 – 59	5%	5%																																				
60	10%	10%																																				
61	5%	5%																																				
62 – 63	10%	10%																																				
64	25%	25%																																				
65	100%	100%																																				
Nonfootball Disability Rates Before Retirement	<table><tr><td><u>Age</u></td><td><u>Rate</u></td></tr><tr><td>22</td><td>.05%</td></tr><tr><td>27</td><td>.05%</td></tr><tr><td>32</td><td>.05%</td></tr><tr><td>37</td><td>.07%</td></tr><tr><td>42</td><td>.12%</td></tr><tr><td>47</td><td>.24%</td></tr><tr><td>52</td><td>.55%</td></tr></table>	<u>Age</u>	<u>Rate</u>	22	.05%	27	.05%	32	.05%	37	.07%	42	.12%	47	.24%	52	.55%	<table><tr><td><u>Age</u></td><td><u>Rate</u></td></tr><tr><td>22</td><td>.19%</td></tr><tr><td>27</td><td>.19%</td></tr><tr><td>32</td><td>.19%</td></tr><tr><td>37</td><td>.26%</td></tr><tr><td>42</td><td>.45%</td></tr><tr><td>47</td><td>.90%</td></tr><tr><td>52</td><td>2.06%</td></tr><tr><td>57</td><td>4.28%</td></tr><tr><td>62</td><td>12.19%</td></tr></table>	<u>Age</u>	<u>Rate</u>	22	.19%	27	.19%	32	.19%	37	.26%	42	.45%	47	.90%	52	2.06%	57	4.28%	62	12.19%
<u>Age</u>	<u>Rate</u>																																					
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47	.90%																																					
52	2.06%																																					
57	4.28%																																					
62	12.19%																																					
Football Disability Rates	10% per year for active players and .08% per year for inactive players until age 45 after which it becomes zero. Active players are assumed to become inactive after one year of service or age 30, whichever comes later.	35% per year for active players and .28% per year for inactive players up to 15 years after the player’s last Credited Season after which it becomes zero.																																				
Line-of-Duty Rates	N/A	<table><tr><td><u>Age</u></td><td><u>Rate</u></td></tr><tr><td>25 – 29</td><td>1.25%</td></tr><tr><td>30 – 39</td><td>5.00%</td></tr><tr><td>40 – 44</td><td>2.50%</td></tr></table>	<u>Age</u>	<u>Rate</u>	25 – 29	1.25%	30 – 39	5.00%	40 – 44	2.50%																												
<u>Age</u>	<u>Rate</u>																																					
25 – 29	1.25%																																					
30 – 39	5.00%																																					
40 – 44	2.50%																																					

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 5I

Justification for Change in Methods

	Old	New
Funding Method	Unit Credit Cost Method, except retrospective term cost based on actual experience during the year for line-of-duty disability benefits.	Unit Credit Cost Method as described in Revenue Procedure 2000-40, Section 3.01.

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 6

Actuarial Assumptions and Actuarial Cost Method

Mortality Rates: RP-2000 Table projected to 2020

Disability Mortality Before Age 65: RP-2000 Table, disabled mortality

Nonfootball Disability Rates Before Retirement:

<u>Age</u>	<u>Rate*</u>
22	.19%
27	.19%
32	.19%
37	.26%
42	.45%
47	.90%
52	2.06%
57	4.28%
62	12.19%

*Rounded

Football Disability Rates: .35% per year for active players and .28% per year for inactive players up to 15 years after the player's last Credited Season after which it becomes zero.

<u>Line-of-Duty Rates:</u>	<u>Age</u>	<u>Rate</u>
	25 – 29	1.25%
	30 – 39	5.00%
	40 – 44	2.50%
	45+	0.00%

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 6

Actuarial Assumptions and Actuarial Cost Method
(continued)

Withdrawal Rates:

<u>For Players With Service of</u>	<u>Rate</u>
1 year	19.5%
2 years	11.0%
3 years	16.5%
4 years	15.8%
5 years	17.4%
6 years	18.4%
7 years	19.9%
8 years	21.4%
9 years	24.6%
10 years	26.2%
11 years	28.2%
12 years	30.5%
13 years	35.6%
14 years	37.2%
15 years	42.5%
16 years	55.8%
17 years	68.7%
18 years	78.6%
19 years	90.6%
20 years	100.0%

Election of Early Payment Benefit: 35% of all players will elect the benefit at termination. No assumption is made for a player who does not have a Credited Season before 1993.

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 6

Actuarial Assumptions and Actuarial Cost Method
(continued)

<u>Retirement Age:</u>	<u>Age</u>	<u>Player with Pre-93 Season Rate</u>	<u>Player without Pre-93 Season Rate</u>
	45	15%	0%
	46 – 49	3%	0%
	50 – 54	2%	0%
	55	25%	50%
	56 – 59	5%	5%
	60	10%	10%
	61	5%	5%
	62 – 63	10%	10%
	64	25%	25%
	65	100%	100%

Percent Married: Social Security Awards in 1972

Age of Player's Wife: Three years younger than player

Remarriage Rates: 1980 Railroad Retirement Board rates

Net Investment Return: 7.25%

Administrative Expenses: \$9,556,252. This amount was the actual administrative expenses during the preceding year.

Actuarial Value of Assets: The actuarial value of assets was fresh started to market as of April 1, 2007. Thereafter, a smoothing method is used.

Funding Method: Unit Credit Cost Method

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 6

**Actuarial Assumptions and Actuarial Cost Method
(continued)****Amortization for Determining Negotiated Contribution Only:**

Contribution Amount: The contribution for each year will equal the Non-Legacy Benefits Contribution plus the Legacy Benefits Contribution in the table below. In no event shall the Non-Legacy Benefits Contribution in a year exceed an amount which is expected to produce a negative unfunded actuarial liability at the end of the Plan Year; nor shall the contribution be less than the minimum required under ERISA.

Amortization Period: The plan's unfunded actuarial accrued liability, not including the Legacy Benefit, as of April 1, 2011, will be amortized in level amounts over seven years.

Contribution Amounts (\$ mil)		
Season	Non-Legacy Benefits*	Legacy Benefits
2011	\$140.5	\$31.62
2012	Normal Cost plus unpaid amortizations from years on or after 2011 plus seven-year amortization of new bases for the current year minus \$139.04.	\$31.62
2013	Normal Cost plus unpaid amortizations from years on or after 2011 plus seven-year amortization of new bases for the current year minus amounts to keep salary cap at \$3,859.2 ("Salary Cap Offset"), not less than the amount to account for benefit changes (other than the Legacy Benefit) occurring in or after 2011.	\$31.62
2014	Normal Cost plus unpaid amortizations from years on or after 2011 plus seven-year amortization of new bases for the current year plus \$99.2 with interest from 2012 at 7.25%.	\$63.375
2015	Normal Cost plus unpaid amortizations from years on or after 2011 plus seven-year amortization of new bases for the current year plus \$39.84 with interest at 7.25% from 2012 plus Salary Cap Offset from 2013 with interest at 7.25%.	\$63.375 plus \$33.755 with 7.25% interest from 2012 plus \$33.755 with interest at 7.25% from 2013
2016 – 2020	Normal Cost plus unpaid amortizations from years on or after 2011 plus 7-year amortization of new bases for the current year.	\$65.375

*Non-Legacy amounts will not be less than the amounts necessary to meet any funding improvement plan plus a contribution equal to the Normal Cost plus seven-year amortization for any plan amendments occurring in or after 2011 while the plan is under the funding improvement plan that started in the 2011 plan year.

Summary of Plan Provisions

1. Normal Retirement Pension

- (a) **Age Requirement:** 55
- (b) **Service Requirement:** Three Credited Seasons for those active after 1992. (A player will, under certain circumstances, become vested even if he does not meet the preceding requirements if he has 10 years of service with Clubs in the NFL due to any employment, such as a coach.)
- (c) **Monthly Amount:**

<u>Credited Season</u>	<u>Benefit Credit</u>
Before 1982	\$250
1982 to 1992	255
1993 and 1994	265
1995 and 1996	315
1997	365
1998 through the Plan Year that begins prior to the expiration of the Final League Year	470

2. Early Retirement Pension (Not applicable to players who do not have a Credited Season prior to 1993)

- (a) **Age Requirement:** 45 through 54
- (b) **Service Requirement:** Same as 1(b) above.
- (c) **Monthly Amount:** Normal pension actuarially reduced to reflect earlier benefit payments.

Summary of Plan Provisions (continued)

3. Deferred Retirement Pension

- (a) **Age Requirement:** Over age 55 to age 65
- (b) **Service Requirement:** Same as 1(b) above.
- (c) **Monthly Amount:** Normal pension actuarially increased to reflect delayed benefit payments.

4. Total and Permanent Disability

- (a) **Age Requirement:** N/A
- (b) **Service Requirement:** None if active, otherwise service required for vested status.
- (c) **Monthly Amount:** Normal pension earned except that benefit will be no less than \$4,000 if disability is for active football, active nonfootball, or football degenerative and \$3,334 for inactive nonfootball. An additional \$100 per month will be paid for each dependent child for a player whose application was filed prior to April 1, 2007.

5. Line-of-Duty Disability

- (a) **Age Requirement:** None
- (b) **Service Requirement:** None
- (c) **Duration of Payments:** 90 months
- (d) **Nature of Disability:** The disability must have arisen out of football activities and must be expected to persist for at least 12 months and result in player's retirement from professional football. The disability must be substantial in the sense that it results in a major bodily impairment with the percentage loss of function depending upon the particular part of the body involved.

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

Schedule MB Line 6

Summary of Plan Provisions
(continued)

(e) **Monthly Amount:** Normal pension earned, but not less than \$1,000 per month.

6. Early Payment Benefit (Not applicable to players who do not have a Credited Season prior to 1993)

(a) **Age Requirement:** None

(b) **Service Requirement:** Vested and left football on or after March 1, 1977.

(c) **Amount:** A lump sum equal to 25% of the actuarial present value of the player's benefit credits as of the date of payment. If the player makes application for this benefit after March 31, 1982, any and all future benefits payable (normal or early retirement, death or disability) will be reduced 25%. If application was made prior to April 1, 1982, only the normal or early retirement benefit will be reduced 25%.

7. Preretirement Widow's and Surviving Children's Benefit

(a) **Eligibility Requirement:** Active player or vested inactive player and survived by widow or dependent children.

(b) **Monthly Amount:** 50% of the normal pension accrued, but not less than \$9,000 per month for the 48 months immediately following death and no less than \$3,600 per month thereafter. (For vested players not active in a season after 1976, the \$3,000 minimum benefit is not applicable. For vested players active in a season after 1976, but not after 1981, the \$9,000 minimum benefit is \$6,000.)

(c) **Duration of Payment:** Benefits are paid to the widow until her death or remarriage. If there are surviving dependent children at the point that the widow's benefit ceases, payments will continue to the children until they reach age 19, or age 23 if in college. If any dependent child is mentally or physically incapacitated, benefits will continue for the child's lifetime.

Summary of Plan Provisions **(continued)**

8. Spouse's Preretirement Death Benefit

The surviving spouse of a married vested player is eligible to receive a spouse's preretirement death benefit. The spouse's preretirement death benefit is the benefit which would have become payable to such surviving spouse upon the death of such player as if he had retired and died on the day following his annuity starting date and elected benefits in the form of a Joint and Survivor annuity. The benefit begins to be paid as of the first day of the month following the date of the death of the vested player or, if later, the first day of the month following the month in which such player would have reached his early retirement date had he lived to that date. The monthly benefit payments continue for the life of the surviving spouse. If a spouse is eligible to receive the benefit described in this section and the benefit described in 7 above, she elects which one of the two benefits she is to receive.

8. Postretirement Death Benefit

- (a) Eligibility Requirement:** Upon retirement, pensioners may elect to receive benefit payments in various alternative forms involving survivor benefit protection.
- (b) Monthly Benefit Amount:** When a player elects a form of pension involving survivor benefit rights, the amount payable to him is actuarially reduced. Upon the player's death, the designated percentage of the pensioner's benefit is thereafter continued for the balance of the beneficiary's lifetime. Alternatively, the player may elect that his benefit payments will be made for at least 10 years. If he dies prior to that time, payments will be continued to the designated beneficiary for the remainder of the 10-year period.

Note:

This is intended to be a brief summary of the most pertinent plan provisions. There are benefits that apply before and after specified dates in the plan which have not been included.

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 9c and 9h

Schedule of Funding Standard Account Bases

As of 4/01/2011						
Type	Date	Years	Original Amount	Annual Payment	Years	Outstanding Balance
Charges						
IL	3/31/1977	40	\$27,413,000	\$1,780,787	5.00	\$7,778,791
PA	11/01/1977	40	1,692,600	112,808	5.42	526,584
PA	2/01/1979	40	651,600	43,341	6.83	243,723
PA	1/01/1983	30	14,128,300	776,819	0.75	776,819
PA	3/31/1989	30	1,303,288	93,144	7.00	533,703
PA	3/31/1992	30	124,393,450	8,968,644	10.00	66,785,065
PA	4/01/1993	30	5,579,111	428,686	12.00	3,603,633
PA	4/01/1994	30	23,799,617	1,833,394	13.00	16,203,416
EL	4/01/1997	15	13,020,320	1,354,048	1.00	1,354,048
PA	4/01/1998	30	50,168,724	3,864,728	17.00	39,776,333
EL	4/01/1999	15	8,158,287	848,421	3.00	2,377,085
EL	4/01/2001	15	27,102,402	2,818,515	5.00	12,311,782
PA	4/01/2002	30	125,518,055	9,669,234	21.00	110,144,643
EL	4/01/2002	15	29,562,857	3,074,390	6.00	15,596,059
EL	4/01/2003	15	60,394,203	6,280,696	7.00	35,988,222
EL	4/01/2004	15	14,620,943	1,520,505	8.00	9,644,007
EL	4/01/2005	15	17,333,722	1,802,621	9.00	12,463,095
EL	4/01/2006	15	15,903,903	1,653,927	10.00	12,315,971
PA	4/01/2006	30	233,549,828	17,991,420	25.00	219,890,365
CA	4/01/2007	15	57,655,763	5,995,912	11.00	47,626,297
EL	4/01/2007	15	8,876,667	923,129	11.00	7,332,533
PA	4/01/2008	15	19,605,761	2,038,901	12.00	17,139,374
EL	4/01/2008	15	31,424,147	3,267,955	12.00	27,471,014
EL	4/01/2009	15	333,980,469	34,732,303	13.00	306,961,678
CA	4/01/2011	15	187,478,376	19,496,816	15.00	187,478,376
CF	4/01/2011	15	124,853,059	12,984,095	15.00	124,853,059
EL	4/01/2011	15	162,030,373	16,850,351	15.00	162,030,373
Total Amortization Charges:				\$161,205,590		\$1,449,206,048

Bert Bell/Pete Rozelle NFL Player Retirement Plan
EIN/PN: 13-6043636/001
Schedule MB Line 9c and 9h

Schedule of Funding Standard Account Bases
(continued)

As of 4/01/2011						
Type	Date	Years	Original Amount	Annual Payment	Years	Outstanding Balance
Credits						
CF	3/31/1980	37	1,375,300	91,263	5.00	398,648
PA	3/31/1983	30	484,900	33,994	1.00	33,994
CF	4/01/1993	30	55,410,763	4,257,640	12.00	35,790,480
CA	4/01/1994	30	83,007,633	6,394,461	13.00	56,513,788
EG	4/01/1998	15	36,549,784	3,800,995	2.00	7,345,049
EG	4/01/2000	15	22,918,036	2,383,361	4.00	8,609,604
CF	4/01/2007	10	191,088,768	25,661,537	6.00	130,178,330
EG	4/01/2010	15	82,554,483	8,585,254	14.00	79,331,998
Total Amortization Credits:				\$51,208,505		\$318,201,891

**SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES,
SCHEDULE H, PART IV, 4 (i)**

NFL GCALL10

BERT BELL/PETE ROZELLE NFL RET

OVERALL COMPOSITE

5500 SCHEDULE OF INVESTMENTS AT END OF PLAN YEAR
 REVALUED COST - SUMMARY REPORT
 31 MARCH 2012

Bert Bell/Pete Rozelle NFL Player Retirement Plan

EIN/PN: 13-6043636/001

PAGE: 1
M1102ES

DESCRIPTION	COST	MARKET VALUE	UNREALIZED GAIN/LOSS
GENERAL INVESTMENTS			
INTEREST-BEARING CASH	173,048,049.54	173,046,336.68	1,712.86-
U. S. GOVERNMENT SECURITIES	27,525,368.55	27,753,216.43	227,847.88
CORPORATE DEBT INSTRUMENTS - PREFERRED	9,277,833.46	9,489,595.50	211,762.04
CORPORATE DEBT INSTRUMENTS	9,025,995.36	8,906,193.33	119,802.03-
CORPORATE STOCK - PREFERRED	448,259.99	389,205.00	59,054.99-
CORPORATE STOCK - COMMON	135,520,265.14	143,997,824.71	8,477,559.57
PARTNERSHIP/JOINT VENTURE INTEREST	212,072,056.07	209,255,552.93	2,816,503.14-
OTHER INVESTMENTS	7,990,876.98	8,153,575.67	162,698.69
WRITTEN OPTIONS	8,734.00-	8,000.00-	734.00
PURCHASE OPTIONS	15,503.50	16,275.00	771.50
TOTAL GENERAL INVESTMENTS	574,915,474.59	580,999,775.25	6,084,300.66
CERTAIN INVESTMENT ARRANGEMENTS			
COMMON/COLLECTIVE TRUST	498,072,050.29	551,409,234.91	53,337,184.62
103-12 INVESTMENT ENTITIES	3,652,423.72	4,855,661.34	1,203,237.62
REGISTERED INVESTMENT COMPANIES	242,313,004.64	254,543,964.10	12,230,959.46
TOTAL CERTAIN INVESTMENT ARRANGEMENTS	744,037,478.65	810,808,860.35	66,771,381.70
NET CHANGE UNREALIZED CURRENCY GAIN/LOSS			
INTEREST RECEIVABLE			87.93

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<u>DESCRIPTION</u>	<u>COST</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
DIVIDEND RECEIVABLE			55,428.61-
TOTAL NET CHANGE UNREALIZED CURRENCY GAIN/LOSS			55,340.68-
GRAND TOTALS	1,318,952,953.24	1,391,808,635.60	72,800,341.68

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
<u>INTEREST-BEARING CASH</u>					
0.2300	NZD (NEW ZEALAND DOLLAR)	0.18	0.0000	0.19	0.01
751.9800	GBP (GREAT BRITISH POUNDS)	1,205.39	0.0000	1,201.48	3.91-
99,988.8800	MXN (MEXICAN PESO)	7,181.13	0.0000	7,734.97	553.84
681.7200	EUR (EURO)	967.43	0.0000	907.85	59.58-
21,850.1300	EUR CURRENCY AT BROKER	28,990.92	0.0000	29,097.82	106.90
173,007,137.6900	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	173,007,137.69	100.0000	173,007,137.69	0.00
51,335.9300	LEHMAN PROXY WAMCO - REC	2,566.80	0.0050	256.68	2,310.12-
TOTAL INTEREST-BEARING CASH		173,048,049.54		173,046,336.68	1,712.86-
<u>U. S. GOVERNMENT SECURITIES</u>					
230,000.0000	FEDERAL HOME LN MTG CORP 5.625% 11/23/2035 DD 11/22/05	237,146.10	111.6430	256,778.90	19,632.80
110,000.0000	FEDERAL HOME LN BK CONS BD 5.000% 12/21/2015 DD 11/04/05	123,877.60	115.7820	127,360.20	3,482.60
120,000.0000	FEDERAL HOME LN BK CONS BD 5.500% 07/15/2036 DD 07/17/06	136,127.40	125.4560	150,547.20	14,419.80
40,000.0000	FEDERAL HOME LN BK CONS BD 3.625% 10/18/2013 DD 09/15/08	42,373.20	105.0120	42,004.80	368.40-
120,000.0000	FEDERAL HOME LN MTG CORP 6.750% 03/15/2031 DD 10/25/00	175,724.64	143.9580	172,749.60	2,975.04-

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40,000.0000	FEDERAL HOME LN MTG CORP 1.350% 04/29/2014 DD 04/01/11	40,881.60	101.9000	40,760.00	121.60-
110,000.0000	FEDERAL NATL MTG ASSN 0.000% 10/09/2019 DD 10/09/84	74,731.80	77.3320	85,065.20	10,333.40
130,000.0000	FEDERAL NATL MTG ASSN 6.250% 05/15/2029 DD 05/15/99	156,327.60	135.7320	176,451.60	20,124.00
50,000.0000	FEDERAL NATL MTG ASSN 5.000% 02/13/2017 DD 01/12/07	55,904.00	117.6910	58,845.50	2,941.50
120,000.0000	ALLY FINANCIAL INC 1.750% 10/30/2012 DD 10/30/09	122,008.80	100.8860	121,063.20	945.60-
300,000.0000	TENNESSEE VALLEY AUTH BD 5.980% 04/01/2036 DD 04/18/96	345,021.00	129.9370	389,811.00	44,790.00
50,000.0000	TENNESSEE VALLEY AUTH BD 5.250% 09/15/2039 DD 09/15/09	52,439.50	119.9000	59,950.00	7,510.50
90,000.0000	TENNESSEE VALLEY AUTH BD 4.625% 09/15/2060 DD 09/15/10	83,387.70	109.1420	98,227.80	14,840.10
110,000.0000	TENNESSEE VALLEY AUTH BD 3.875% 02/15/2021 DD 02/08/11	110,363.00	111.6440	122,808.40	12,445.40
60,116.0000	US TREAS-CPI INFLATION INDEX 2.375% 01/15/2025 DD 07/15/04	67,231.68	127.2030	76,469.36	9,237.68
118,998.0000	US TREAS-CPI INFLATION INDEX 1.750% 01/15/2028 DD 01/15/08	140,940.76	119.2580	141,914.63	973.87
1,220,000.0000	U S TREASURY BOND 4.375% 05/15/2040 DD 05/15/10	1,475,372.68	120.1720	1,466,098.40	9,274.28-

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1,235,000.0000	U S TREASURY BOND 4.375% 05/15/2041 DD 05/15/11	1,383,086.89	120.2190	1,484,704.65	101,617.76
840,000.0000	U S TREASURY BOND 3.125% 11/15/2041 DD 11/15/11	849,556.89	95.9220	805,744.80	43,812.09-
50,000.0000	U S TREASURY BOND 3.125% 02/15/2042 DD 02/15/12	47,585.94	95.8590	47,929.50	343.56
323,886.5000	US TREAS-CPI INFLAT 2.000% 04/15/2012 DD 04/15/07	327,095.43	100.2270	324,621.72	2,473.71-
300,000.0000	U S TREASURY NOTE 1.875% 02/28/2014 DD 02/28/09	310,212.17	102.9060	308,718.00	1,494.17-
40,000.0000	U S TREASURY NOTE 1.000% 08/31/2016 DD 08/31/11	40,200.00	100.4300	40,172.00	28.00-
80,000.0000	U S TREASURY NOTE 2.000% 11/15/2021 DD 11/15/11	80,878.47	98.4450	78,756.00	2,122.47-
10,000.0000	U S TREASURY NOTE 2.000% 02/15/2022 DD 02/15/12	9,873.44	98.0780	9,807.80	65.64-
560,000.0000	U S TREASURY NOTE 1.375% 02/28/2019 DD 02/29/12	558,269.55	98.5780	552,036.80	6,232.75-
600,000.0000	COMMIT TO PUR FNMA SF MTG 2.500% 05/01/2027 DD 05/01/12	609,375.00	101.1094	606,656.40	2,718.60-
1,700,000.0000	COMMIT TO PUR FNMA SF MTG 3.000% 04/01/2027 DD 04/01/12	1,761,843.76	103.5160	1,759,772.00	2,071.76-
300,000.0000	COMMIT TO PUR FNMA SF MTG 4.000% 05/01/2042 DD 05/01/12	313,890.63	104.6250	313,875.00	15.63-

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2,100,000.0000	COMMIT TO PUR FNMA SF MTG 4.500% 05/01/2042 DD 05/01/12	2,226,984.38	106.2030	2,230,263.00	3,278.62
200,000.0000	COMMIT TO PUR FNMA SF MTG 6.500% 05/01/2042 DD 05/01/12	223,515.63	111.9380	223,876.00	360.37
100,000.0000	COMMIT TO PUR GNMA SF MTG 4.000% 04/15/2042 DD 04/01/12	107,593.75	107.3130	107,313.00	280.75-
300,000.0000	COMMIT TO PUR GNMA SF MTG 5.000% 04/15/2042 DD 04/01/12	330,562.51	110.4380	331,314.00	751.49
100,000.0000	COMMIT TO PUR GNMA SF MTG 6.000% 04/15/2042 DD 04/01/12	111,882.81	112.8440	112,844.00	961.19
200,000.0000	COMMIT TO PUR FHLIC GOLD SFM 3.500% 05/01/2042 DD 05/01/12	204,656.25	102.1410	204,282.00	374.25-
300,000.0000	COMMIT TO PUR FHLIC GOLD SFM 4.000% 05/01/2042 DD 05/01/12	312,609.38	104.3440	313,032.00	422.62
400,000.0000	COMMIT TO PUR GNMA II JUMBOS 5.000% 04/20/2042 DD 04/01/12	439,406.26	110.1250	440,500.00	1,093.74
700,000.0000	COMMIT TO PUR GNMA II JUMBOS 5.500% 04/20/2042 DD 04/01/12	775,812.51	111.1250	777,875.00	2,062.49
100,000.0000	COMMIT TO PUR GNMA II JUMBOS 6.000% 04/20/2042 DD 04/01/12	112,093.75	112.5000	112,500.00	406.25
338,617.2300	FHLIC POOL #A7-4793 5.000% 03/01/2038 DD 03/01/08	366,553.15	107.7860	364,981.97	1,571.18-
851,294.4820	FHLIC POOL #G0-2427 5.500% 12/01/2036 DD 11/01/06	909,736.04	108.6967	925,329.66	15,593.62

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31,275.6250	FHLMC POOL #G0-4222 5.500% 04/01/2038 DD 04/01/08	33,395.33	108.6715	33,987.69	592.36
198,060.4870	FHLMC POOL #G0-6172 5.500% 12/01/2038 DD 11/01/10	214,307.63	108.8430	215,574.98	1,267.35
452,422.1560	FHLMC POOL #G0-6409 6.000% 11/01/2039 DD 04/01/11	504,167.94	110.7120	500,885.62	3,282.32-
85,313.7970	FHLMC POOL #G0-6669 6.500% 09/01/2039 DD 08/01/11	95,764.74	112.7320	96,175.95	411.21
27,235.1600	FHLMC POOL #1N-1447 VAR RT 02/01/2037 DD 04/01/07	28,882.72	105.3900	28,703.14	179.58-
60,693.7200	FHLMC POOL #1N-1463 VAR RT 05/01/2037 DD 05/01/07	64,403.98	104.9240	63,682.28	721.70-
67,264.1300	FHLMC POOL #1N-1582 VAR RT 05/01/2037 DD 06/01/07	71,450.70	105.2560	70,799.53	651.17-
31,503.2590	FHLMC POOL #A3-9304 5.500% 11/01/2035 DD 11/01/05	33,771.86	109.1250	34,377.93	606.07
230,000.0000	FEDERAL HOME LN MTG CORP DISC 0.000% 06/05/2012 DD 06/06/201	229,836.96	99.9291	229,836.96	0.00
2,000,000.0000	FEDERAL NATL MTG ASSN DISC NT MAT 05/01/2012	1,998,890.00	99.9445	1,998,890.00	0.00
193,000.8760	FNMA GTD REMIC P/T 87 SJ VAR RT 09/25/2041 DD 08/25/11	33,051.40	18.2260	35,176.34	2,124.94
364,497.3900	FNMA GTD REMIC P/T 11-96 SA IO VAR RT 10/25/2041 DD 09/25/11	67,204.21	16.6340	60,630.50	6,573.71-

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<u>SHARES/ PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PRICE</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
100,000.0000	FNMA GTD REMIC P/T 12-28 B 6.500% 06/25/2039 DD 02/01/12	116,875.00	113.6130	113,613.00	3,262.00-
500,000.0000	FNMA GTD REMIC P/T 2012-25 B 6.500% 03/25/2042 DD 02/01/12	596,328.13	117.4940	587,470.00	8,858.13-
300,000.0000	FNMA GTD REMIC P/T 12-35 MB 5.500% 04/25/2042 DD 03/01/12	337,875.00	113.3160	339,948.00	2,073.00
934,157.0000	FHLMC MULTICLASS MT VAR RT 02/25/2018 DD 06/01/11	76,847.50	7.5700	70,716.43	6,131.07-
169,023.3900	FHLMC MULTICLASS MT VAR RT 04/25/2021 DD 08/01/11	14,919.03	8.7150	14,730.39	188.64-
289,583.7200	FHLMC MULTICLASS MTG K703 X1 VAR RT 05/25/2018 DD 09/01/11	31,670.91	10.4547	30,275.31	1,395.60-
409,720.3800	FHLMC MULTICLASS MT VAR RT 08/25/2018 DD 11/01/11	43,468.04	10.5780	43,340.22	127.82-
155,752.7100	FHLMC MULTICL CTFs VAR RT 10/25/2021 DD 12/01/11	16,782.35	11.3340	17,653.01	870.66
120,000.0000	FHLMC MULTICLASS MT K017 X1 IO VAR RT 12/25/2021 DD 03/01/12	12,391.32	10.2480	12,297.60	93.72-
276,213.7440	FHLMC MULTICLASS MT VAR RT 06/25/2020 DD 09/01/10	27,776.26	9.9780	27,560.61	215.65-
216,982.3000	FHLMC MULTICLASS MT K009 X1 VAR RT 08/25/2020 DD 11/01/10	19,821.26	8.7820	19,055.39	765.87-
289,653.1420	FNMA POOL #0AJ5304 4.000% 11/01/2041 DD 11/01/11	301,386.36	104.9620	304,025.73	2,639.37

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551,468.2680	FNMA POOL #0AL0215 4.500% 04/01/2041 DD 04/01/11	587,988.81	107.3700	592,111.48	4,122.67
176,493.6900	FNMA POOL #0AL0814 6.500% 06/01/2040 DD 10/01/11	197,672.93	112.3350	198,264.19	591.26
463,964.0500	FNMA POOL #0AL1176 6.500% 10/01/2039 DD 12/01/11	521,669.57	112.3350	521,194.02	475.55-
294,585.4500	FNMA POOL #0AJ7689 4.000% 12/01/2041 DD 12/01/11	310,327.36	104.9620	309,202.78	1,124.58-
141,783.0520	FHLMC MULTICLASS MTG R007 ZA 6.000% 05/15/2036 DD 05/01/06	165,088.64	116.4980	165,174.42	85.78
104,201.4400	FNMA GTD REMIC P/T 2011-59 NZ 5.500% 07/25/2041 DD 06/01/11	116,388.94	117.4770	122,412.73	6,023.79
139,885.3800	FNMA GTD REMIC P/T 10-118 YBIO VAR RT 10/25/2040 DD 09/25/10	21,900.81	13.7480	19,231.44	2,669.37-
559,526.5620	FHLMC MULTICLASS MT VAR RT 04/25/2020 DD 06/01/10	40,948.96	7.2060	40,319.48	629.48-
151,094.7450	FNMA GTD REMIC P/T 10-142 SM I VAR RT 12/25/2040 DD 11/25/10	19,972.84	14.4230	21,792.40	1,819.56
628,417.5800	FHLMC MULTICLASS MTG K006 AX1 VAR RT 01/25/2020 DD 04/01/10	41,821.13	6.3300	39,778.83	2,042.30-
89,753.9690	FNMA POOL #0745959 5.500% 11/01/2036 DD 10/01/06	96,255.82	109.2070	98,017.62	1,761.80
122,682.4400	FNMA POOL #0836464 VAR RT 10/01/2035 DD 09/01/05	125,840.35	103.9420	127,518.58	1,678.23

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126,483.2100	FNMA POOL #0836641 VAR RT 10/01/2035 DD 09/01/05	130,160.11	103.9990	131,541.27	1,381.16
102,590.8710	FNMA POOL #0888832 6.500% 11/01/2037 DD 10/01/07	115,735.33	112.8030	115,725.58	9.75-
79,440.5180	FNMA POOL #0889117 5.000% 10/01/2035 DD 01/01/08	85,845.40	108.2740	86,013.43	168.03
84,788.3200	FNMA POOL #0995072 5.500% 08/01/2038 DD 11/01/08	92,803.48	109.8950	93,178.12	374.64
93,753.1580	FNMA POOL #0AB3517 4.500% 09/01/2041 DD 08/01/11	100,081.50	107.4210	100,710.58	629.08
209,204.2450	FNMA POOL #0AB0758 7.000% 02/01/2039 DD 12/01/10	241,630.90	114.6250	239,800.37	1,830.53-
75,740.0480	GNMA II POOL #0004040 6.500% 10/20/2037 DD 10/01/07	85,120.50	114.6840	86,861.72	1,741.22
687,463.2700	GNMA II POOL #0004245 6.000% 09/20/2038 DD 09/01/08	769,314.37	112.5910	774,021.77	4,707.40
206,226.4500	GNMA II POOL #0004559 VAR RT 10/20/2039 DD 10/01/09	227,622.44	110.2520	227,368.79	253.65-
81,600.1380	GNMA II POOL #0004617 4.500% 01/20/2040 DD 01/01/10	89,058.90	108.9660	88,916.41	142.49-
85,082.4910	GNMA II POOL #0004696 4.500% 05/20/2040 DD 05/01/10	92,859.56	108.9660	92,710.99	148.57-
83,737.7660	GNMA II POOL #0004746 4.500% 07/20/2040 DD 07/01/10	91,391.93	108.9660	91,245.69	146.24-

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<u>SHARES/ PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PRICE</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
80,123.8430	GNMA II POOL #0004772 5.000% 08/20/2040 DD 08/01/10	85,144.33	110.2830	88,362.98	3,218.65
241,328.9100	GNMA II POOL #0004837 6.000% 10/20/2040 DD 10/01/10	267,346.57	112.9660	272,619.62	5,273.05
87,641.3940	GNMA II POOL #0004923 4.500% 01/20/2041 DD 01/01/11	92,790.32	109.1220	95,636.04	2,845.72
611,919.9690	GNMA II POOL #0004978 4.500% 03/20/2041 DD 03/01/11	647,870.27	109.1220	667,739.31	19,869.04
87,213.1300	GNMA GTD REMIC P/T 10-85 HS VAR RT 01/20/2040 DD 07/20/10	16,543.24	17.0980	14,911.70	1,631.54-
172,658.5200	GNMA GTD REMIC P/T 10-H010 FC VAR RT 05/20/2060 DD 06/20/10	174,774.84	101.7500	175,680.04	905.20
278,593.1700	GNMA GTD REMIC P/T 10-H20 AF 0.590% 10/20/2060 DD 10/20/10	274,826.58	98.5000	274,414.27	412.31-
243,047.0800	GNMA GTD REMIC P/T 10-H24 FA VAR RT 10/20/2060 DD 11/20/10	241,732.65	98.6330	239,724.63	2,008.02-
126,982.0100	GNMA GTD REMIC P/T 10-H22 FE VAR RT 05/20/2059 DD 11/20/10	126,334.17	99.0310	125,751.55	582.62-
232,958.4400	GNMA GTD REMIC P/T 11-H06 FA VAR RT 02/20/2061 DD 02/20/11	231,870.24	99.1960	231,085.45	784.79-
96,927.6700	GNMA GTD REMIC P/T 11-H09 AF VAR RT 03/20/2061 DD 03/20/11	96,933.54	99.4710	96,414.92	518.62-
128,114.8400	GNMA GTD REMIC P/T 10-3 MS VAR RT 11/20/2038 DD 01/20/10	23,300.89	15.6960	20,108.91	3,191.98-

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77,907.7100	GNMA GTD REMIC P/T 10-113 BS VAR RT 09/20/2040 DD 09/20/10	11,929.62	15.9030	12,389.66	460.04
77,474.3340	GNMA GTD REMIC P/T 10-121 SE VAR RT 09/20/2040 DD 09/20/10	11,863.26	16.0140	12,406.74	543.48
81,835.8780	GNMA GTD REMIC P/T 11-11 SA IO VAR RT 01/20/2041 DD 01/20/11	12,531.12	15.7700	12,905.52	374.40
88,026.3900	GNMA GTD REMIC P/T 11-70 BS IO VAR RT 12/16/2036 DD 05/16/11	17,674.05	19.0110	16,734.70	939.35-
TOTAL U. S. GOVERNMENT SECURITIES		27,525,368.55		27,753,216.43	227,847.88
<u>CORPORATE DEBT INSTRUMENTS - PREFERRED</u>					
90,000.0000	AT&T INC 5.500% 02/01/2018 DD 02/01/08	104,145.70	117.8140	106,032.60	1,886.90
50,000.0000	AT&T INC 6.550% 02/15/2039 DD 02/03/09	52,112.00	121.6960	60,848.00	8,736.00
40,000.0000	AMERICA MOVIL SAB DE CV 5.625% 11/15/2017 DD 10/30/07	44,056.00	116.4300	46,572.00	2,516.00
40,000.0000	AMERICAN EXPRESS CREDIT CORP 5.125% 08/25/2014 DD 08/25/09	43,148.00	108.7600	43,504.00	356.00
130,000.0000	ANHEUSER-BUSCH INBEV WORLDWIDE 5.000% 04/15/2020 DD 03/29/10	135,955.30	115.3500	149,955.00	13,999.70
120,000.0000	APACHE CORP 6.000% 09/15/2013 DD 10/01/08	132,745.20	107.7420	129,290.40	3,454.80-
50,000.0000	AVIS BUDGET RENTAL 2A A 144A 2.802% 05/20/2018 DD 03/22/12	49,998.66	99.9210	49,960.50	38.16-

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100,000.0000	BEVA US SENIOR SAU 3.250% 05/16/2014 DD 05/18/11	99,890.00	99.6980	99,698.00	192.00-
160,000.0000	BHP BILLITON FINANCE USA LTD 3.250% 11/21/2021 DD 11/21/11	158,555.20	100.9220	161,475.20	2,920.00
180,000.0000	BP CAPITAL MARKETS PLC 5.250% 11/07/2013 DD 11/07/08	194,662.80	106.8610	192,349.80	2,313.00-
60,000.0000	BP CAPITAL MARKETS PLC 3.875% 03/10/2015 DD 03/10/09	62,302.20	107.2490	64,349.40	2,047.20
10,000.0000	BP CAPITAL MARKETS PLC 3.561% 11/01/2021 DD 11/01/11	10,000.00	102.9720	10,297.20	297.20
140,000.0000	BAKER HUGHES INC 7.500% 11/15/2018 DD 10/28/08	174,762.00	131.9330	184,706.20	9,944.20
240,000.0000	BANC OF AMERICA MERRILL L 2 A4 VAR RT 05/10/2045 DD 06/01/06	267,515.63	113.6280	272,707.20	5,191.57
70,000.0000	BANK OF AMERICA CORP 5.420% 03/15/2017 DD 03/15/07	71,461.60	102.2480	71,573.60	112.00
100,000.0000	BARRICK NORTH AMERICA FINANCE 4.400% 05/30/2021 DD 06/01/11	100,819.30	105.4060	105,406.00	4,586.70
30,000.0000	BOEING CAPITAL CORP 4.700% 10/27/2019 DD 10/27/09	31,673.70	115.5370	34,661.10	2,987.40
80,000.0000	BOEING CO/THE 4.875% 02/15/2020 DD 07/28/09	85,484.00	118.0460	94,436.80	8,952.80
170,000.0000	CATERPILLAR FINANCIAL SERVICES 6.200% 09/30/2013 DD 09/26/08	189,550.00	108.3700	184,229.00	5,321.00-

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240,000.0000	CITIGROUP INC 5.000% 09/15/2014 DD 09/16/04	250,608.00	103.5630	248,551.20	2,056.80-
150,000.0000	CITIGROUP INC 6.875% 03/05/2038 DD 03/05/08	164,841.00	115.4600	173,190.00	8,349.00
60,000.0000	CITIGROUP INC 6.500% 08/19/2013 DD 08/19/08	65,601.00	105.7920	63,475.20	2,125.80-
140,000.0000	CITIGROUP INC 6.000% 12/13/2013 DD 06/15/10	152,226.20	105.9500	148,330.00	3,896.20-
70,000.0000	CONOCOPHILLIPS HOLDING CO 6.950% 04/15/2029 DD 04/20/99	83,577.20	134.3460	94,042.20	10,465.00
190,000.0000	COOPERATIEVE CENTRALE RAIFFEIS 3.375% 01/19/2017 DD 01/19/12	189,942.60	102.2340	194,244.60	4,302.00
100,000.0000	CREDIT AGRICOLE SA VAR RT 10/29/2049 DD 10/13/09	107,000.00	93.0000	93,000.00	14,000.00-
208,730.3600	DBUS MORTGAGE TR LC3A XA 144A VAR RT 08/10/2044 DD 08/01/11	12,774.38	5.5490	11,582.45	1,191.93-
160,000.0000	DIAGEO CAPITAL PLC 4.828% 07/15/2020 DD 05/14/10	165,385.60	114.1140	182,582.40	17,196.80
105,000.0000	DUKE ENERGY CAROLINAS LLC 5.625% 11/30/2012 DD 11/20/02	112,480.20	103.3020	108,467.10	4,013.10-
100,000.0000	EDUCATION FUNDING CAPITAL 3 A7 VAR RT 12/15/2042 DD 10/31/03	94,770.00	91.0041	91,004.17	3,765.83-
99,456.1440	GS MORTGAGE SECURI GCS XA 144A VAR RT 08/10/2044 DD 10/01/11	8,957.69	9.3200	9,269.31	311.62

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160,000.0000	GENERAL ELECTRIC CAPITAL CORP VAR RT 11/15/2067 DD 11/15/07	164,400.00	102.0000	163,200.00	1,200.00-
370,000.0000	GENERAL ELECTRIC CAPITAL CORP 6.875% 01/10/2039 DD 01/09/09	412,916.30	123.4940	456,927.80	44,011.50
10,000.0000	GENERAL ELECTRIC CAPITAL CORP 5.300% 02/11/2021 DD 02/11/11	10,395.10	108.3030	10,830.30	435.20
20,000.0000	GOLDMAN SACHS GROUP INC/THE 3.625% 08/01/2012 DD 07/22/09	20,625.20	100.8780	20,175.60	449.60-
140,000.0000	GOLDMAN SACHS GROUP INC/THE 5.375% 03/15/2020 DD 03/08/10	142,146.20	101.6580	142,321.20	175.00
60,000.0000	GOLDMAN SACHS GROUP INC/THE 6.000% 06/15/2020 DD 06/03/10	63,427.20	105.2210	63,132.60	294.60-
20,000.0000	GOLDMAN SACHS GROUP INC/THE 5.250% 10/15/2013 DD 10/14/03	21,476.80	104.6760	20,935.20	541.60-
140,000.0000	GOLDMAN SACHS GROUP INC/THE 6.250% 02/01/2041 DD 01/28/11	139,593.80	98.7650	138,271.00	1,322.80-
20,000.0000	GOLDMAN SACHS GROUP INC/THE 5.250% 07/27/2021 DD 07/27/11	20,119.80	98.9920	19,798.40	320.60-
60,000.0000	GOLDMAN SACHS GROUP INC/THE 5.450% 11/01/2012 DD 10/18/07	63,770.40	102.2790	61,367.40	2,403.00-
110,000.0000	HSEC FINANCE CORP 6.676% 01/15/2021 DD 07/15/11	114,177.80	106.7430	117,417.30	3,239.50
150,000.0000	JPMORGAN CHASE & CO 5.125% 09/15/2014 DD 09/15/04	160,998.00	107.1580	160,737.00	261.00-

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230,000.0000	JPMORGAN CHASE & CO 5.150% 10/01/2015 DD 10/04/05	246,378.30	108.7870	250,210.10	3,831.80
120,000.0000	JPMORGAN CHASE & CO 6.125% 06/27/2017 DD 06/27/07	130,584.00	114.1240	136,948.80	6,364.80
10,000.0000	JPMORGAN CHASE & CO 4.350% 08/15/2021 DD 08/10/11	10,224.50	102.1730	10,217.30	7.20-
300,000.0000	JP MORGAN CHASE COMMER LD11 A3 VAR RT 06/15/2049 DD 07/01/07	312,816.00	106.5410	319,623.00	6,807.00
94,983.2140	KEYCORP STUDENT LOAN TRU A 1A2 VAR RT 08/27/2031 DD 09/24/02	86,316.00	89.3580	84,875.10	1,440.90-
1,000,000.0000	MASTR ADJUSTABLE RATE M 13 3A7 VAR RT 11/21/2034 DD 11/01/04	971,830.00	97.7940	977,940.00	6,110.00
40,000.0000	MEDTRONIC INC 4.450% 03/15/2020 DD 03/16/10	40,978.40	112.6080	45,043.20	4,064.80
60,000.0000	METLIFE INC 6.750% 06/01/2016 DD 05/29/09	69,356.40	118.8060	71,283.60	1,927.20
50,000.0000	MORGAN STANLEY VAR RT 10/18/2016 DD 10/18/06	46,761.50	85.8690	42,934.50	3,827.00-
10,000.0000	MORGAN STANLEY 4.750% 03/22/2017 DD 03/22/12	9,982.00	100.0330	10,003.30	21.30
100,000.0000	MORGAN STANLEY 4.750% 04/01/2014 DD 03/30/04	104,202.00	101.6360	101,636.00	2,566.00-
184,515.9160	MORGAN STANLEY MORTGA 11AR 1A1 VAR RT 01/25/2035 DD 12/29/04	143,665.98	76.7550	141,625.19	2,040.79-

<u>SHARES/ PAR VALUE</u>	<u>SECURITY DESCRIPTION</u>	<u>COST</u>	<u>PRICE</u>	<u>MARKET VALUE</u>	<u>UNREALIZED GAIN/LOSS</u>
60,000.0000	OCCIDENTAL PETROLEUM CORP 3.125% 02/15/2022 DD 08/18/11	59,011.63	100.8870	60,532.20	1,520.57
10,000.0000	PACIFIC GAS & ELECTRIC CO 5.800% 03/01/2037 DD 03/13/07	10,109.50	119.4670	11,946.70	1,837.20
10,000.0000	PACIFIC GAS & ELECTRIC CO 8.250% 10/15/2018 DD 10/21/08	12,773.40	132.3760	13,237.60	464.20
28,000.0000	PEPSICO INC 7.900% 11/01/2018 DD 10/24/08	35,539.28	134.4080	37,634.24	2,094.96
32,000.0000	PETROBRAS INTERNATIONAL FINANC 5.750% 01/20/2020 DD 10/30/09	33,012.16	110.7800	35,449.60	2,437.44
220,000.0000	PETROBRAS INTERNATIONAL FINANC 5.375% 01/27/2021 DD 01/27/11	229,198.20	107.6740	236,882.80	7,684.60
80,000.0000	PHILIP MORRIS INTERNATIONAL IN 2.900% 11/15/2021 DD 11/15/11	78,924.80	98.6090	78,887.20	37.60-
40,000.0000	PHILIP MORRIS INTERNATIONAL IN 4.500% 03/20/2042 DD 03/20/12	39,022.00	98.6530	39,461.20	439.20
30,000.0000	RAYTHEON CO 3.125% 10/15/2020 DD 10/20/10	27,488.70	101.7800	30,534.00	3,045.30
20,000.0000	RIO TINTO FINANCE USA LTD 2.500% 05/20/2016 DD 05/20/11	19,901.20	103.6440	20,728.80	827.60
20,000.0000	RIO TINTO FINANCE USA LTD 4.125% 05/20/2021 DD 05/20/11	19,827.00	105.5000	21,100.00	1,273.00
50,000.0000	RIO TINTO FINANCE USA LTD 3.750% 09/20/2021 DD 09/19/11	50,214.60	103.2360	51,618.00	1,403.40

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190,000.0000	ROYAL BANK OF SCOTLAND PLC/THE 3.950% 09/21/2015 DD 09/20/10	190,144.40	101.1100	192,109.00	1,964.60
110,000.0000	AT&T INC 5.100% 09/15/2014 DD 11/03/04	120,290.50	110.0710	121,078.10	787.60
100,000.0000	SLM STUDENT LOAN TRUST 5 B VAR RT 09/16/2024 DD 08/29/02	92,379.00	90.6300	90,630.00	1,749.00-
100,000.0000	SLM STUDENT LOAN TRUST 3 A5 VAR RT 07/25/2023 DD 03/18/04	95,625.00	97.7800	97,780.00	2,155.00
100,000.0000	SANTANDER US DEBT SAU 144A 3.781% 10/07/2015 DD 10/07/10	96,658.00	96.9450	96,945.00	287.00
30,000.0000	SHELL INTERNATIONAL FINANCE BV 6.375% 12/15/2038 DD 12/11/08	33,902.70	132.3060	39,691.80	5,789.10
20,000.0000	SHELL INTERNATIONAL FINANCE BV 4.375% 03/25/2020 DD 03/25/10	20,645.80	114.4290	22,885.80	2,240.00
68,425.1400	STRUCTURED ADJUSTABLE 16XS A1 VAR RT 08/25/2035 DD 07/25/05	53,457.42	81.4120	55,706.27	2,248.85
100,000.0000	SUMITOMO MITSUI BANKING C 144A 3.150% 07/22/2015 DD 07/22/10	99,555.00	104.1220	104,122.00	4,567.00
10,000.0000	TEVA PHARMACEUTICAL FINANCE CO 3.650% 11/10/2021 DD 11/10/11	9,950.30	101.2280	10,122.80	172.50
10,000.0000	TEVA PHARMACEUTICAL FINANCE IV 3.650% 11/10/2021 DD 11/10/11	9,905.00	101.2280	10,122.80	217.80
20,000.0000	THERMO FISHER SCIENTIFIC INC 3.600% 08/15/2021 DD 08/16/11	19,961.80	105.5500	21,110.00	1,148.20

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20,000.0000	UNITEDHEALTH GROUP INC 5.800% 03/15/2036 DD 03/02/06	19,868.80	115.0300	23,006.00	3,137.20
30,000.0000	UNITEDHEALTH GROUP INC 3.875% 10/15/2020 DD 10/25/10	28,559.70	105.6310	31,689.30	3,129.60
40,000.0000	UNITEDHEALTH GROUP INC 5.700% 10/15/2040 DD 10/25/10	38,996.00	116.0920	46,436.80	7,440.80
172,000.0000	VALE OVERSEAS LTD 4.375% 01/11/2022 DD 01/11/12	174,318.94	100.4450	172,765.40	1,553.54-
80,000.0000	VERIZON COMMUNICATIONS INC 6.350% 04/01/2019 DD 03/27/09	97,662.40	121.7760	97,420.80	241.60-
30,000.0000	VERIZON COMMUNICATIONS INC 6.000% 04/01/2041 DD 03/28/11	30,177.60	118.4500	35,535.00	5,357.40
30,000.0000	VERIZON COMMUNICATIONS INC 3.500% 11/01/2021 DD 11/03/11	29,762.40	102.3060	30,691.80	929.40
256,211.9120	WF-RBS COMMERCIAL M C2 XA 144A VAR RT 02/15/2044 DD 03/01/11	14,812.24	5.4190	13,884.12	928.12-
255,000.0000	WACHOVIA CORP 5.250% 08/01/2014 DD 07/22/04	272,714.85	107.6330	274,464.15	1,749.30
10,000.0000	WELLS FARGO & CO 4.600% 04/01/2021 DD 03/29/11	10,739.60	107.2420	10,724.20	15.40-
50,000.0000	WELLS FARGO & CO STEP 06/15/2016 DD 09/15/10	50,295.50	106.7910	53,395.50	3,100.00
120,000.0000	WYETH LLC 5.950% 04/01/2037 DD 03/27/07	128,286.00	126.6850	152,022.00	23,736.00
TOTAL CORPORATE DEBT INSTRUMENTS - PREFERRED		9,277,833.46		9,489,595.50	211,762.04

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<u>CORPORATE DEBT INSTRUMENTS</u>					
159,602.1750	ACE SECURITIES CORP FM1 M1 VAR RT 09/25/2033 DD 01/29/04	134,827.16	76.5530	122,180.25	12,646.91-
60,000.0000	ALTRIA GROUP INC 8.500% 11/10/2013 DD 11/10/08	69,972.60	111.7400	67,044.00	2,928.60-
110,000.0000	ALTRIA GROUP INC 4.750% 05/05/2021 DD 05/05/11	109,814.60	107.4930	118,242.30	8,427.70
50,000.0000	HESS CORP 7.875% 10/01/2029 DD 10/01/99	61,737.00	133.0770	66,538.50	4,801.50
60,000.0000	HESS CORP 7.300% 08/15/2031 DD 08/15/01	70,347.60	127.2500	76,350.00	6,002.40
140,000.0000	AMERICAN EXPRESS CO VAR RT 09/01/2066 DD 08/01/06	143,150.00	102.0000	142,800.00	350.00-
230,000.0000	AMERICAN INTERNATIONAL GROUP I 6.250% 03/15/2037 DD 03/13/07	210,450.00	90.0000	207,000.00	3,450.00-
20,000.0000	AMERICAN INTERNATIONAL GROUP I 6.400% 12/15/2020 DD 12/03/10	20,499.20	113.1730	22,634.60	2,135.40
20,000.0000	ANADARKO FINANCE CO 7.500% 05/01/2031 DD 04/26/01	22,079.80	123.5340	24,706.80	2,627.00
20,000.0000	ANADARKO PETROLEUM CORP 6.375% 09/15/2017 DD 08/12/10	22,901.40	118.8220	23,764.40	863.00
170,000.0000	ARISTOTLE HLDG INC C 144A 3.500% 11/15/2016 DD 11/21/11	169,954.10	104.4550	177,573.50	7,619.40

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10,000.0000	BAC CAPITAL TRUST XIV VAR RT 09/29/2049 DD 02/16/07	7,700.00	70.5000	7,050.00	650.00-
320,000.0000	BANK OF AMERICA CORP 4.500% 04/01/2015 DD 03/11/10	332,291.20	103.5760	331,443.20	848.00-
20,000.0000	BANK OF AMERICA CORP 5.625% 07/01/2020 DD 06/22/10	20,533.60	104.2530	20,850.60	317.00
100,000.0000	BANK OF AMERICA CORP 5.000% 05/13/2021 DD 05/13/11	97,349.46	100.1540	100,154.00	2,804.54
20,000.0000	BANK OF AMERICA CORP 3.875% 03/22/2017 DD 03/22/12	19,941.60	100.5510	20,110.20	168.60
20,000.0000	BARRICK GOLD CORP 144A 3.850% 04/01/2022 DD 04/03/12	19,988.60	99.9430	19,988.60	0.00
10,000.0000	BELLSOUTH CORP 4.750% 11/15/2012 DD 11/15/04	10,580.30	102.5260	10,252.60	327.70-
80,000.0000	CCO HOLDINGS LLC / CCO HOLDING 6.625% 01/31/2022 DD 01/26/12	79,600.00	103.7500	83,000.00	3,400.00
147,827.9700	COUNTRYWIDE ALTERNATIVE 36 3A1 VAR RT 08/25/2035 DD 06/01/05	102,225.93	69.3820	102,566.00	340.07
234,184.2400	COUNTRYWIDE ALTERNATIVE 44 1A1 VAR RT 10/25/2035 DD 08/30/05	139,351.90	53.2310	124,658.61	14,693.29-
25,051.0200	COUNTRYWIDE ASSET-BACKED 4 AF3 VAR RT 10/25/2035 DD 06/01/05	24,841.82	96.3530	24,137.41	704.41-
185,241.2600	COUNTRYWIDE HOME LOAN HYB1 1A1 VAR RT 03/25/2035 DD 01/28/05	108,401.34	68.2070	126,347.51	17,946.17

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29,464.9200	COUNTRYWIDE HOME LOAN MO 4 4A1 VAR RT 02/25/2035 DD 01/28/05	17,669.77	64.1950	18,915.01	1,245.24
62,651.2300	COUNTRYWIDE HOME LOAN MO 7 2A1 VAR RT 03/25/2035 DD 01/27/05	37,095.83	61.2760	38,390.17	1,294.34
101,052.8300	COUNTRYWIDE HOME LOAN M 11 6A1 VAR RT 03/25/2035 DD 02/28/05	59,081.39	63.7180	64,388.84	5,307.45
30,000.0000	CELULOSA ARAUCO Y CONSTIT 144A 4.750% 01/11/2022 DD 01/11/12	30,187.50	102.3650	30,709.50	522.00
80,000.0000	COMCAST CABLE COMMUNICATIONS L 8.875% 05/01/2017 DD 05/01/97	100,096.80	129.9160	103,932.80	3,836.00
110,000.0000	COMCAST CORP 6.500% 01/15/2015 DD 01/10/03	124,483.70	114.1060	125,516.60	1,032.90
20,000.0000	COMCAST CORP 5.875% 02/15/2018 DD 11/17/06	22,048.00	118.3470	23,669.40	1,621.40
40,000.0000	CONCHO RESOURCES INC 5.500% 10/01/2022 DD 03/12/12	40,068.75	98.5000	39,400.00	668.75-
39,341.4340	CONTINENTAL AIRLINES 98-1A 6.648% 09/15/2017 DD 02/20/98	41,013.45	104.6200	41,159.01	145.56
129,896.3400	COUNTRYWIDE HOME EQUITY L E 2A VAR RT 07/15/2036 DD 06/29/06	73,192.79	64.4090	83,664.93	10,472.14
136,029.0100	DOWNEY SAVINGS & LOAN ARL 2A1A VAR RT 03/19/2045 DD 02/28/05	90,818.40	66.3310	90,229.40	589.00-
219,880.1690	DELTA AIR LINES 2007-1 CLASS A 6.821% 08/10/2022 DD 02/10/08	227,026.28	109.5000	240,768.79	13,742.51

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75,000.0000	DEUTSCHE TELEKOM INTERNATIONAL 5.750% 03/23/2016 DD 03/23/06	83,969.25	112.9260	84,694.50	725.25
100,000.0000	DEVON ENERGY CORP 5.600% 07/15/2041 DD 07/12/11	100,304.60	112.5210	112,521.00	12,216.40
155,000.0000	DOMINION RESOURCES INC/VA 5.700% 09/17/2012 DD 09/16/02	164,752.60	102.2700	158,518.50	6,234.10-
20,000.0000	ECOLAB INC 4.350% 12/08/2021 DD 12/08/11	19,987.20	106.0120	21,202.40	1,215.20
100,000.0000	ENTERPRISE PRODUCTS OPERATING 9.750% 01/31/2014 DD 12/08/08	119,826.00	114.7550	114,755.00	5,071.00-
10,000.0000	ENTERPRISE PRODUCTS OPERATING 6.125% 10/15/2039 DD 10/05/09	11,370.00	112.6150	11,261.50	108.50-
70,000.0000	ENTERPRISE PRODUCTS OPERATING 4.050% 02/15/2022 DD 08/24/11	69,866.06	103.5530	72,487.10	2,621.04
40,000.0000	ENTERPRISE PRODUCTS OPERATING 5.700% 02/15/2042 DD 08/24/11	40,031.12	108.1240	43,249.60	3,218.48
150,000.0000	FIRSTENERGY CORP 7.375% 11/15/2031 DD 11/15/01	162,479.99	123.1060	184,659.00	22,179.01
80,000.0000	FREEPORT-MCMORAN COPPER & GOLD 3.550% 03/01/2022 DD 02/13/12	79,447.40	96.0420	76,833.60	2,613.80-
10,000.0000	GOLDMAN SACHS CAPITAL II VAR RT 06/01/2043 DD 05/15/07	8,625.00	68.6250	6,862.50	1,762.50-
56,435.9500	GREENPOINT MORTGAGE FU AR4 1A1 VAR RT 10/25/2045 DD 07/29/05	33,980.32	65.6180	37,032.14	3,051.82

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70,000.0000	HUMANA INC 7.200% 06/15/2018 DD 06/05/08	79,562.00	119.8180	83,872.60	4,310.60
20,000.0000	INTELSAT JACKSON HOLDINGS SA 8.500% 11/01/2019 DD 10/20/09	20,400.00	109.7500	21,950.00	1,550.00
30,000.0000	INTERNATIONAL LEASE FINAN 144A 6.500% 09/01/2014 DD 08/20/10	32,025.00	105.6250	31,687.50	337.50-
170,000.0000	INTERNATIONAL LEASE FINAN 144A 6.750% 09/01/2016 DD 08/20/10	181,900.00	107.1250	182,112.50	212.50
202,250.2700	JETBLUE AWYS CORP 04-2 04-2G-1 VAR RT 08/15/2016 DD 11/15/04	185,930.00	90.0000	182,025.24	3,904.76-
400,000.0000	JETBLUE AWYS CORP 04-2 P/T VAR RT 11/15/2016 DD 11/15/04	336,000.00	80.0000	320,000.00	16,000.00-
10,000.0000	KERR-MCGEE CORP 7.875% 09/15/2031 DD 10/03/01	11,406.80	128.9520	12,895.20	1,488.40
140,000.0000	KERR-MCGEE CORP 6.950% 07/01/2024 DD 07/01/04	155,497.40	120.7750	169,085.00	13,587.60
25,000.0000	KINDER MORGAN ENERGY PARTNERS 5.000% 12/15/2013 DD 11/21/03	27,028.75	106.1930	26,548.25	480.50-
140,000.0000	KRAFT FOODS INC 5.375% 02/10/2020 DD 02/08/10	147,805.00	115.6040	161,845.60	14,040.60
10,000.0000	MARKWEST ENERGY PARTNERS LP / 6.250% 06/15/2022 DD 11/03/11	10,000.00	105.0000	10,500.00	500.00
10,000.0000	MERRILL LYNCH & CO INC 6.875% 04/25/2018 DD 04/25/08	11,106.90	111.1700	11,117.00	10.10

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39,725.7300	MLCC MORTGAGE INVESTORS 1 2A1 VAR RT 04/25/2035 DD 04/01/05	37,639.27	90.8830	36,103.94	1,535.33-
240,000.0000	METLIFE INC 6.400% 12/15/2036 DD 12/21/06	231,144.00	98.0000	235,200.00	4,056.00
100,000.0000	NOBLE ENERGY INC 4.150% 12/15/2021 DD 12/08/11	100,131.80	102.2110	102,211.00	2,079.20
50,000.0000	PACIFIC GAS & ELECTRIC CO 6.050% 03/01/2034 DD 03/23/04	53,818.80	121.5570	60,778.50	6,959.70
161,000.0000	PEMEX PROJECT FUNDING MASTER T 6.625% 06/15/2035 DD 12/15/05	161,500.71	114.0000	183,540.00	22,039.29
40,000.0000	PETROBRAS INTERNATIONAL FINANC 6.125% 10/06/2016 DD 10/06/06	44,325.60	113.1000	45,240.00	914.40
70,000.0000	REED ELSEVIER CAPITAL INC 8.625% 01/15/2019 DD 01/16/09	88,706.10	126.0810	88,256.70	449.40-
60,000.0000	REYNOLDS AMERICAN INC 7.625% 06/01/2016 DD 12/01/06	71,307.60	120.0200	72,012.00	704.40
10,000.0000	REYNOLDS AMERICAN INC 7.250% 06/01/2012 DD 12/01/06	10,669.10	100.9280	10,092.80	576.30-
120,000.0000	RIO TINTO FINANCE USA LTD 6.500% 07/15/2018 DD 06/27/08	138,166.80	123.2290	147,874.80	9,708.00
20,000.0000	ROGERS COMMUNICATIONS INC 6.800% 08/15/2018 DD 08/06/08	23,380.60	124.4710	24,894.20	1,513.60
10,000.0000	ROYAL BANK OF SCOTLAND GROUP P VAR RT 08/29/2049 DD 08/20/01	9,075.00	84.7500	8,475.00	600.00-

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35,000.0000	KONINKLIJKE KPN NV 8.375% 10/01/2030 DD 10/04/00	45,157.01	128.3940	44,937.90	219.11-
10,000.0000	SESI LLC 144A 7.125% 12/15/2021 DD 12/06/11	10,000.00	108.0000	10,800.00	800.00
86,917.3700	SACO I INC 7 A1 VAR RT 07/25/2036 DD 06/30/06	23,358.18	35.1140	30,520.17	7,161.99
19,149.1500	SACO I INC 7 A VAR RT 09/25/2035 DD 09/30/05	14,935.33	96.7280	18,522.59	3,587.26
20,000.0000	SAFEWAY INC 3.950% 08/15/2020 DD 08/03/10	19,710.40	99.1670	19,833.40	123.00
60,000.0000	SAFEWAY INC 4.750% 12/01/2021 DD 12/05/11	60,556.00	103.3770	62,026.20	1,470.20
30,000.0000	SPRINT NEXTEL CORP 144A 9.000% 11/15/2018 DD 11/09/11	30,000.00	109.7500	32,925.00	2,925.00
100,000.0000	STATE STREET CORP STEP 03/15/2018 DD 09/15/10	103,046.00	104.4270	104,427.00	1,381.00
248,534.8400	STRUCTURED ADJUSTABLE R 15 1A1 VAR RT 07/25/2035 DD 06/01/05	190,206.12	66.3020	164,783.57	25,422.55-
40,000.0000	TELEFONICA EMISIONES SAU 5.877% 07/15/2019 DD 07/06/09	40,234.40	101.5200	40,608.00	373.60
15,000.0000	TIME WARNER ENTERTAINMENT CO L 8.375% 07/15/2033 DD 01/15/94	18,349.05	133.5860	20,037.90	1,688.85
10,000.0000	TIME WARNER INC 6.250% 03/29/2041 DD 04/01/11	10,405.30	114.2650	11,426.50	1,021.20

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140,000.0000	TIME WARNER CABLE INC 8.750% 02/14/2019 DD 11/18/08	174,542.20	130.3610	182,505.40	7,963.20
10,000.0000	TIME WARNER CABLE INC 8.250% 04/01/2019 DD 03/26/09	12,182.30	127.8900	12,789.00	606.70
20,000.0000	TIME WARNER CABLE INC 6.750% 06/15/2039 DD 06/29/09	20,911.40	119.2330	23,846.60	2,935.20
90,000.0000	TIME WARNER CABLE INC 5.875% 11/15/2040 DD 11/15/10	85,299.20	107.7480	96,973.20	11,674.00
21,000.0000	UNION PACIFIC CORP 5.375% 05/01/2014 DD 05/04/04	23,021.46	108.4700	22,778.70	242.76-
42,000.0000	UNION PACIFIC CORP 4.163% 07/15/2022 DD 06/23/11	42,468.30	108.0450	45,378.90	2,910.60
40,000.0000	UBM PLC 144A 5.750% 11/03/2020 DD 11/03/10	38,908.80	98.8770	39,550.80	642.00
86,000.0000	VALE OVERSEAS LTD 6.875% 11/21/2036 DD 11/21/06	91,577.96	115.9840	99,746.24	8,168.28
100,432.7600	WAMU MORTGAGE PASS TH AR6 2A1A VAR RT 04/25/2045 DD 04/26/05	85,007.78	79.9050	80,250.80	4,756.98-
166,923.4600	WAMU MORTGAGE PASS TH AR8 1A1A VAR RT 07/25/2045 DD 07/15/05	136,082.10	79.7660	133,148.17	2,933.93-
202,901.4900	WAMU MORTGAGE PASS TH AR10 1A4 VAR RT 09/25/2035 DD 07/01/05	181,584.62	87.8230	178,194.18	3,390.44-
156,560.1900	WAMU MORTGAGE PASS T AR13 1A1A VAR RT 10/25/2045 DD 10/25/05	132,612.26	79.8770	125,055.58	7,556.68-

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577,345.7700	WAMU MORTGAGE PASS TH OA6 1A1B VAR RT 07/25/2047 DD 06/01/07	189,277.01	35.1310	202,827.34	13,550.33
330,000.0000	WACHOVIA CAPITAL TRUST III VAR RT 03/29/2049 DD 02/01/06	302,633.88	94.5000	311,850.00	9,216.12
229,047.0800	WAMU MORTGAGE PASS TH ARI A2A3 VAR RT 01/25/2045 DD 01/18/05	189,275.29	77.6850	177,935.22	11,340.07-
10,000.0000	WASTE MANAGEMENT INC 7.375% 05/15/2029 DD 11/15/99	12,591.60	129.2230	12,922.30	330.70
10,000.0000	WELLPOINT INC 5.875% 06/15/2017 DD 06/08/07	11,216.70	116.7630	11,676.30	459.60
40,000.0000	WELLPOINT INC 7.000% 02/15/2019 DD 02/05/09	47,412.00	124.1650	49,666.00	2,254.00
40,000.0000	WELLPOINT INC 3.700% 08/15/2021 DD 08/15/11	39,953.60	103.7810	41,512.40	1,558.80
24,000.0000	WILLIAMS COS INC/THE 7.500% 01/15/2031 DD 01/17/01	28,077.60	120.0170	28,804.08	726.48
26,000.0000	WILLIAMS COS INC/THE 7.750% 06/15/2031 DD 06/13/01	30,878.13	121.8210	31,673.46	795.33
33,000.0000	WILLIAMS COS INC/THE 7.875% 09/01/2021 DD 08/21/01	41,066.85	124.6210	41,124.93	58.08
5,000.0000	WILLIAMS COS INC/THE 8.750% 03/15/2032 DD 03/15/03	6,471.00	131.8320	6,591.60	120.60
30,000.0000	WPX ENERGY INC 144A 6.000% 01/15/2022 DD 11/14/11	30,000.00	100.0000	30,000.00	0.00

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150,000.0000	* DEUBS MORTGAGE TRUST LC3A A2 3.642% 08/10/2044 DD 08/01/11	151,497.19	106.8980	160,347.00	8,849.81
130,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 5.857% 11/30/2056 DD 05/17/07	125,664.70	96.6651	125,664.70	0.00
270,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 0.000% 12/28/2017 DD 12/21/07	262,635.00	0.0000	0.00	262,635.00-
70,000.0000	* LEHMAN BRTH HLD (RICI) ESCROW 0.000% 08/19/2065 DD 06/14/06	42,700.00	0.0000	0.00	42,700.00-
TOTAL CORPORATE DEBT INSTRUMENTS		9,025,995.36		8,906,193.33	119,802.03-
<u>CORPORATE STOCK - PREFERRED</u>					
9,300.0000	GENERAL MOTORS CO PPD 4.750% CUMULATIVE	448,259.99	41.8500	389,205.00	59,054.99-
TOTAL CORPORATE STOCK - PREFERRED		448,259.99		389,205.00	59,054.99-
<u>CORPORATE STOCK - COMMON</u>					
23,700.0000	NABORS INDUSTRIES LTD SHS	720,006.00	17.4900	414,513.00	305,493.00-
2,600.0000	PARTNERRE HLDGS LTD BERMUDA COM	206,024.00	67.8900	176,514.00	29,510.00-
3,000.0000	CORE LABORATORIES N V	306,510.00	131.5700	394,710.00	88,200.00
1,970.0000	STEINER LEISURE LTD	91,132.24	48.8300	96,195.10	5,062.86
27,600.0000	AT&T INC	844,836.01	31.2300	861,948.00	17,111.99

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5,980.0000	AZZ INC	298,966.86	51.6400	308,807.20	9,840.34
1,830.0000	ABOVENET INC	118,693.81	82.8000	151,524.00	32,830.19
36,660.0000	ACACIA RESEARCH - ACACIA TECHN	1,326,809.98	41.7400	1,530,188.40	203,378.42
10,570.0000	ACTUANT CORP	306,530.00	28.9900	306,424.30	105.70-
9,175.0000	AGRIUM INC	794,689.39	86.3700	792,444.75	2,244.64-
5,200.0000	AIR PRODUCTS & CHEMICALS INC	468,936.01	91.8000	477,360.00	8,423.99
2,119.0000	AIRGAS INC	150,690.87	88.9700	188,527.43	37,836.56
19,150.0000	AMERIGON INC	292,985.28	16.1800	309,847.00	16,861.72
6,340.0000	AMGEN INC	340,563.08	67.9700	430,929.80	90,366.72
13,580.0000	AMSURG CORP	317,697.31	27.9800	379,968.40	62,271.09
5,220.0000	ANALOGIC CORP	295,191.01	67.5400	352,558.80	57,367.79
29,000.0000	ANNALY CAPITAL MANAGEMENT INC	503,328.66	15.8200	458,780.00	44,548.66-
2,020.0000	APPLE INC	704,619.45	599.5500	1,211,091.00	506,471.55
15,080.0000	ASPEN TECHNOLOGY INC	249,636.16	20.5300	309,592.40	59,956.24
7,915.0000	AUTODESK INC	282,578.92	42.3200	334,962.80	52,383.88
14,600.0000	AUXILIUM PHARMACEUTICALS INC	280,348.32	18.5700	271,122.00	9,226.32-
19,300.0000	AVNET INC	634,520.99	36.3900	702,327.00	67,806.01
191,172.0000	BANK OF AMERICA CORP	2,252,143.08	9.5700	1,829,516.04	422,627.04-

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38,700.0000	BANK OF THE OZARKS INC	845,788.52	31.2600	1,209,762.00	363,973.48
10,280.0000	BEACON ROOFING SUPPLY INC	198,464.01	25.7600	264,812.80	66,348.79
36,870.0000	BEBE STORES INC	275,759.93	9.2300	340,310.10	64,550.17
6,819.0000	BELDEN INC	258,079.70	37.9100	258,508.29	428.59
7,400.0000	BOEING CO/THE	547,082.00	74.3700	550,338.00	3,256.00
4,240.0000	BOTTOMLINE TECHNOLOGIES INC	106,466.43	27.9400	118,465.60	11,999.17
29,330.0000	BRIGHTPOINT INC	286,035.15	8.0500	236,106.50	49,928.65-
2,244.0000	BUFFALO WILD WINGS INC	130,899.16	90.6900	203,508.36	72,609.20
16,570.0000	CEL & ASSOCIATES PROPERTIES IN	300,466.42	18.9200	313,504.40	13,037.98
11,325.0000	CANADIAN NATIONAL RAILWAY CO	852,432.75	79.4300	899,544.75	47,112.00
8,400.0000	CANADIAN NATURAL RESOURCES LTD	395,836.64	33.1800	278,712.00	117,124.64-
12,725.0000	CANADIAN PACIFIC RAILWAY LTD	818,726.50	75.9500	966,463.75	147,737.25
12,900.0000	CASCADE CORP	582,689.93	50.1200	646,548.00	63,858.07
5,850.0000	CEPHEID INC	163,917.02	41.8300	244,705.50	80,788.48
5,462.0000	CERNER CORP	343,840.61	76.1600	415,985.92	72,145.31
10,000.0000	CHEVRON CORP	1,076,010.01	107.2100	1,072,100.00	3,910.01-
50,400.0000	CISCO SYSTEMS INC	870,862.41	21.1500	1,065,960.00	195,097.59
2,640.0000	CLEAN HARBORS INC	143,090.15	67.3300	177,751.20	34,661.05

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7,900.0000	COHERENT INC	358,254.40	58.3300	460,807.00	102,552.60
23,200.0000	COMCAST CORP	486,306.83	30.0100	696,232.00	209,925.17
12,320.0000	CONCEPTUS INC	162,597.00	14.3800	177,161.60	14,564.60
18,000.0000	CONOCOPHILLIPS	1,417,927.81	76.0100	1,368,180.00	49,747.81-
7,180.0000	CORPORATE EXECUTIVE BOARD CO/T	291,621.29	43.0100	308,811.80	17,190.51
10,809.0000	CREE INC	304,477.40	31.6300	341,888.67	37,411.27
7,930.0000	CUBIST PHARMACEUTICALS INC	200,153.20	43.2500	342,972.50	142,819.30
8,060.0000	CYBERONICS INC	246,839.57	38.1300	307,327.80	60,488.23
3,941.0000	DECKERS OUTDOOR CORP	345,167.81	63.0500	248,480.05	96,687.76-
6,588.0000	DICK'S SPORTING GOODS INC	244,888.03	48.0800	316,751.04	71,863.01
11,400.0000	DIODES INC	231,604.48	23.1800	264,252.00	32,647.52
21,400.0000	DOW CHEMICAL CO/THE	807,850.00	34.6400	741,296.00	66,554.00-
4,330.0000	DRIL-QUIP INC	304,092.93	65.0200	281,536.60	22,556.33-
26,400.0000	EBIX INC	479,187.05	23.1600	611,424.00	132,236.95
4,652.0000	EDWARDS LIFESCIENCES CORP	326,107.25	72.7300	338,339.96	12,232.71
7,660.0000	ELIZABETH ARDEN INC	222,085.42	34.9800	267,946.80	45,861.38
7,910.0000	EMCOR GROUP INC	211,234.95	27.7200	219,265.20	8,030.25
17,580.0000	ENDOLOGIX INC	150,880.60	14.6500	257,547.00	106,666.40

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35,600.0000	ENERSYS	1,293,084.04	34.6500	1,233,540.00	59,544.04-
30,430.0000	ENTEGRIS INC	299,487.86	9.3400	284,216.20	15,271.66-
1,548.0000	EQUINIX INC	141,022.79	157.4500	243,732.60	102,709.81
5,880.0000	EZCORP INC	178,286.47	32.4550	190,835.40	12,548.93
9,600.0000	EXXON MOBIL CORP	807,648.01	86.7300	832,608.00	24,959.99
23,800.0000	FBI CO	764,250.89	49.1100	1,168,818.00	404,567.11
36,200.0000	FIFTH THIRD BANCORP	498,265.79	14.0450	508,429.00	10,163.21
14,390.0000	FINISH LINE INC/THE	292,538.39	21.2200	305,355.80	12,817.41
1,375.0000	FINNING INTERNATIONAL INC	40,483.16	27.6800	38,060.00	2,423.16-
52,300.0000	FIRST FINANCIAL BANCORP	864,154.36	17.3000	904,790.00	40,635.64
9,390.0000	FORWARD AIR CORP	314,882.34	36.6700	344,331.30	29,448.96
2,476.0000	FOSSIL INC	228,776.94	131.9800	326,782.48	98,005.54
29,800.0000	GAP INC/THE	675,268.03	26.1400	778,972.00	103,703.97
79,000.0000	GENERAL ELECTRIC CO	1,428,435.12	20.0700	1,585,530.00	157,094.88
3,600.0000	GENESCO INC	142,586.98	71.6500	257,940.00	115,353.02
6,900.0000	GOLDMAN SACHS GROUP INC/THE	846,501.53	124.3700	858,153.00	11,651.47
6,290.0000	GREEN MOUNTAIN COFFEE ROASTERS	361,997.45	46.8400	294,623.60	67,373.85-
6,801.0000	GREENHILL & CO INC	393,395.77	43.6400	296,795.64	96,600.13-

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14,500.0000	HAEMONETICS CORP	927,506.93	69.6800	1,010,360.00	82,853.07
8,590.0000	HAIN CELESTIAL GROUP INC/THE	288,617.44	43.8100	376,327.90	87,710.46
5,771.0000	HARMAN INTERNATIONAL INDUSTRIE	253,669.23	46.8100	270,140.51	16,471.28
52,080.0000	HARMONIC INC	317,745.59	5.4700	284,877.60	32,867.99-
28,100.0000	HARTFORD FINANCIAL SERVICES GR	733,849.30	21.0800	592,348.00	141,501.30-
8,950.0000	HEALTHCARE SERVICES GROUP INC	194,693.89	21.2700	190,366.50	4,327.39-
6,340.0000	HEICO CORP	324,615.59	51.5900	327,080.60	2,465.01
42,660.0000	JACK HENRY & ASSOCIATES INC	1,424,794.76	34.1200	1,455,559.20	30,764.44
4,270.0000	HORNBECK OFFSHORE SERVICES INC	117,282.57	42.0300	179,468.10	62,185.53
6,490.0000	ICU MEDICAL INC	261,063.98	49.1600	319,048.40	57,984.42
4,272.0000	ILLUMINA INC	218,872.98	52.6100	224,749.92	5,876.94
11,250.0000	IMMUNOGEN INC	136,792.53	14.3900	161,887.50	25,094.97
14,420.0000	IMPAX LABORATORIES INC	314,688.51	24.5800	354,443.60	39,755.09
63,000.0000	JPMORGAN CHASE & CO	2,703,863.72	45.9800	2,896,740.00	192,876.28
13,500.0000	JOHNSON & JOHNSON	799,875.00	65.9600	890,460.00	90,585.00
19,677.0000	KEY ENERGY SERVICES INC	308,335.62	15.4500	304,009.65	4,325.97-
42,100.0000	KROGER CO/THE	1,029,764.45	24.2300	1,020,083.00	9,681.45-
9,756.0000	LKQ CORP	286,972.85	31.1700	304,094.52	17,121.67

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45,780.0000	LATTICE SEMICONDUCTOR CORP	307,369.46	6.4300	294,365.40	13,004.06-
11,897.0000	LEGG MASON INC	409,387.75	27.9300	332,283.21	77,104.54-
30,300.0000	LINCOLN NATIONAL CORP	846,754.04	26.3600	798,708.00	48,046.04-
13,940.0000	LITHIA MOTORS INC	279,662.15	26.2000	365,228.00	85,565.85
11,510.0000	LUMINEX CORP	246,436.78	23.3500	268,758.50	22,321.72
29,140.0000	STEVEN MADDEN LTD	915,274.90	42.7500	1,245,735.00	330,460.10
19,759.0000	MANITOWOC CO INC/THE	348,105.57	13.8600	273,859.74	74,245.83-
5,656.0000	MANPOWER INC	311,377.73	47.3700	267,924.72	43,453.01-
5,000.0000	MANULIFE FINANCIAL CORP	88,450.00	13.5500	67,750.00	20,700.00-
463.0000	MEDICAL RES INC COM	0.00	0.0000	0.00	0.00
11,040.0000	MEDICINES CO/THE	208,304.28	20.0700	221,572.80	13,268.52
22,580.0000	MENTOR GRAPHICS CORP	290,126.32	14.8600	335,538.80	45,412.48
36,650.0000	METLIFE INC	1,480,109.75	37.3500	1,368,877.50	111,232.25-
52,000.0000	MICROSOFT CORP	1,311,322.22	32.2550	1,677,260.00	365,937.78
2,190.0000	MICROSTRATEGY INC	286,422.04	140.0000	306,600.00	20,177.96
7,000.0000	NEWMONT MINING CORP	433,068.30	51.2700	358,890.00	74,178.30-
11,710.0000	OM GROUP INC	287,634.78	27.5100	322,142.10	34,507.32
4,249.0000	OIL STATES INTERNATIONAL INC	355,223.58	78.0600	331,676.94	23,546.64-

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10,128.0000	OMNICARE INC	333,690.70	35.5700	360,252.96	26,562.26
18,660.0000	OMNIVISION TECHNOLOGIES INC	333,236.93	20.0000	373,200.00	39,963.07
10,240.0000	OMNICELL INC	156,500.18	15.2100	155,750.40	749.78-
28,310.0000	ORASURE TECHNOLOGIES INC	244,723.80	11.4900	325,281.90	80,558.10
107,200.0000	ORIENTAL FINANCIAL GROUP INC	1,345,625.04	12.1000	1,297,120.00	48,505.04-
8,230.0000	PSS WORLD MEDICAL INC	231,642.47	25.3400	208,548.20	23,094.27-
12,570.0000	PAREXEL INTERNATIONAL CORP	311,415.13	26.9700	339,012.90	27,597.77
6,930.0000	PEGASYSTEMS INC	252,905.99	38.1600	264,448.80	11,542.81
13,300.0000	PEPSICO INC/NC	849,422.22	66.3500	882,455.00	33,032.78
61,400.0000	PFIZER INC	1,247,034.00	22.6450	1,390,403.00	143,369.00
107,040.0000	PIER 1 IMPORTS INC	1,193,888.84	18.1800	1,945,987.20	752,098.36
18,250.0000	PINNACLE FINANCIAL PARTNERS IN	309,703.72	18.3500	334,887.50	25,183.78
9,023.0000	PLAINS EXPLORATION & PRODUCTIO	277,590.38	42.6500	384,830.95	107,240.57
14,257.0000	POLYCOM INC	309,412.41	19.0700	271,880.99	37,531.42-
18,420.0000	POTASH CORP OF SASKATCHEWAN IN	1,085,490.60	45.6900	841,609.80	243,880.80-
21,090.0000	PRIVATEBANCORP INC	310,433.63	15.1700	319,935.30	9,501.67
16,682.0000	QUANTA SERVICES INC	349,513.11	20.9000	348,653.80	859.31-
136,030.0000	QUANTUM CORP	372,283.64	2.6200	356,398.60	15,885.04-

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8,500.0000	QUESTCOR PHARMACEUTICALS INC	188,461.66	37.6200	319,770.00	131,308.34
18,220.0000	QUIDEL CORP	311,096.10	18.3700	334,701.40	23,605.30
4,700.0000	REGAL-BELOIT CORP	338,691.54	65.5500	308,085.00	30,606.54-
6,525.0000	RELIANCE STEEL & ALUMINUM CO	350,502.89	56.4800	368,532.00	18,029.11
11,311.0000	ROBERT HALF INTERNATIONAL INC	339,987.62	30.3000	342,723.30	2,735.68
30,490.0000	RUDOLPH TECHNOLOGIES INC	309,236.93	11.1100	338,743.90	29,506.97
3,503.0000	SPX CORP	273,570.67	77.5300	271,587.59	1,983.08-
5,246.0000	SALIX PHARMACEUTICALS LTD	183,767.38	52.5000	275,415.00	91,647.62
9,800.0000	SCHLUMBERGER LTD	913,948.00	69.9300	685,314.00	228,634.00-
8,140.0000	SCHOLASTIC CORP	244,131.38	35.2800	287,179.20	43,047.82
59,200.0000	CHARLES SCHWAB CORP/THE	793,364.83	14.3700	850,704.00	57,339.17
20,540.0000	SINCLAIR BROADCAST GROUP INC	227,495.94	11.0600	227,172.40	323.54-
16,600.0000	SNAP-ON INC	914,559.28	60.9700	1,012,102.00	97,542.72
8,350.0000	SOTHEBY'S	301,090.15	39.3400	328,489.00	27,398.85
34,650.0000	STANDARD PACIFIC CORP	159,470.37	4.4600	154,539.00	4,931.37-
36,900.0000	STAPLES INC	558,586.35	16.1900	597,411.00	38,824.65
8,397.0000	STIFEL FINANCIAL CORP	366,607.75	37.8400	317,742.48	48,865.27-
19,300.0000	SUNTRUST BANKS INC	469,543.50	24.1700	466,481.00	3,062.50-

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12,314.0000	SUPERIOR ENERGY SERVICES INC	430,486.06	26.3600	324,597.04	105,889.02-
19,430.0000	TAKE-TWO INTERACTIVE SOFTWARE	302,720.81	15.3850	298,930.55	3,790.26-
9,600.0000	TALISMAN ENERGY INC	237,120.00	12.6000	120,960.00	116,160.00-
10,700.0000	TARGET CORP	535,107.00	58.2700	623,489.00	88,382.00
8,500.0000	TECK RESOURCES LTD	450,670.00	35.6600	303,110.00	147,560.00-
28,050.0000	THOR INDUSTRIES INC	796,034.62	31.5600	885,258.00	89,223.38
10,400.0000	3M CO	972,400.00	89.2100	927,784.00	44,616.00-
3,410.0000	TIFFANY & CO	230,504.88	69.1300	235,733.30	5,228.42
6,512.0000	TIMKEN CO	315,038.36	50.7400	330,418.88	15,380.52
7,480.0000	TITAN INTERNATIONAL INC	197,049.16	23.6500	176,902.00	20,147.16-
28,910.0000	TIVO INC	343,639.50	11.9900	346,630.90	2,991.40
5,480.0000	TREX CO INC	161,152.02	32.0800	175,798.40	14,646.38
5,920.0000	TRIMBLE NAVIGATION LTD	327,312.36	54.4200	322,166.40	5,145.96-
10,050.0000	TRINITY INDUSTRIES INC	351,155.01	32.9500	331,147.50	20,007.51-
2,320.0000	TRIUMPH GROUP INC	107,205.17	62.6600	145,371.20	38,166.03
15,500.0000	TUPPERWARE BRANDS CORP	932,290.12	63.5000	984,250.00	51,959.88
27,400.0000	UMB FINANCIAL CORP	1,030,822.34	44.7350	1,225,739.00	194,916.66
16,300.0000	ULTRATECH INC	458,716.05	28.9800	472,374.00	13,657.95

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11,100.0000	UNITED STATES STEEL CORP	288,054.51	29.3700	326,007.00	37,952.49
2,874.0000	VALMONT INDUSTRIES INC	312,090.94	117.4100	337,436.34	25,345.40
14,230.0000	VALUECLICK INC	230,985.31	19.7400	280,900.20	49,914.89
37,550.0000	WABASH NATIONAL CORP	396,560.32	10.3500	388,642.50	7,917.82-
8,800.0000	WABTEC CORP/DE	587,235.44	75.3700	663,256.00	76,020.56
17,700.0000	WAL-MART STORES INC	926,354.48	61.2000	1,083,240.00	156,885.52
4,230.0000	WATSON PHARMACEUTICALS INC	279,143.16	67.0600	283,663.80	4,520.64
48,100.0000	WELLS FARGO & CO	1,468,043.62	34.1400	1,642,134.00	174,090.38
3,871.0000	WESCO INTERNATIONAL INC	230,374.04	65.3100	252,815.01	22,440.97
11,600.0000	WESTERN DIGITAL CORP	453,054.57	41.3900	480,124.00	27,069.43
8,100.0000	WOODWARD INC	276,037.18	42.8300	346,923.00	70,885.82
8,600.0000	XCEL ENERGY INC	202,450.73	26.4700	227,642.00	25,191.27
14,700.0000	ZIONS BANCORPORATION	349,618.26	21.4600	315,462.00	34,156.26-
7,870.0000	ENERGY XXI BERMUDA LIMITED USD SHS	241,733.34	36.1100	284,185.70	42,452.36
11,100.0000	COOPER INDUSTRIES PLC	720,390.00	63.9500	709,845.00	10,545.00-
17,900.0000	HERBALIFE LTD USD COM SHS	728,172.00	68.8200	1,231,878.00	503,706.00
11,000.0000	INGERSOLL-RAND PUBLIC LIMITED COMPANY	531,410.00	41.3500	454,850.00	76,560.00-

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55,400.0000	SEAGATE TECHNOLOGY	662,212.88	26.9550	1,493,307.00	831,094.12
7,300.0000	ACE LIMITED SHS	472,310.00	73.2000	534,360.00	62,050.00
46,900.0000	WEATHERFORD INTERNATIONL LTD REG	900,940.40	15.0900	707,721.00	193,219.40-
20,700.0000	NOBLE CORPORATION BAAR NAMEN-AKT CHF3.28	944,334.00	37.4700	775,629.00	168,705.00-
25,990.0000	TRANSOCEAN LTD ZUG NAMEN-AKT	1,474,010.72	54.7000	1,421,653.00	52,357.72-
10,900.0000	UBS AG SHS NEW	196,745.00	14.0200	152,818.00	43,927.00-
6,770.0000	ACI WORLDWIDE INC	222,172.99	40.2700	272,627.90	50,454.91
6,020.0000	ALLEGiant TRAVEL CO	321,652.48	54.5000	328,090.00	6,437.52
15,250.0000	ALLIED NEVADA GOLD CORP	552,429.38	32.5300	496,082.50	56,346.88-
28,000.0000	ARCELORMITTAL	520,059.26	19.1300	535,640.00	15,580.74
5,200.0000	AXA SA ADR	108,810.00	16.5530	86,075.60	22,734.40-
12,030.0000	B&G FOODS INC	223,315.53	22.5100	270,795.30	47,479.77
5,500.0000	BASF SE ADR	477,125.00	87.3460	480,403.00	3,278.00
51,128.3620	BP PLC ADR	2,278,383.05	45.0000	2,300,776.29	22,393.24
45,300.0000	BANK OF NEW YORK MELLON CORP/T	933,726.75	24.1300	1,093,089.00	159,362.25
11,640.0000	BANKRATE INC	268,423.53	24.7500	288,090.00	19,666.47

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8,230.0000	BASIC ENERGY SERVICES INC	218,766.96	17.3500	142,790.50	75,976.46-
11,400.0000	BHP BILLITON LTD ADR	1,093,032.00	72.4000	825,360.00	267,672.00-
6,650.0000	BRITISH AMERICAN TOBACCO PLC ADR	552,944.25	101.2200	673,113.00	120,168.75
8,140.0000	BROADSOFT INC	275,889.81	38.2500	311,355.00	35,465.19
6,200.0000	BROOKFIELD ASSET MANAGEMENT IN	201,252.00	31.5700	195,734.00	5,518.00-
11,000.0000	CVR ENERGY INC	265,277.17	26.7500	294,250.00	28,972.83
11,780.0000	CARDTRONICS INC	292,574.31	26.2500	309,225.00	16,650.69
3,880.0000	CATALYST HEALTH SOLUTIONS INC	214,245.78	63.7300	247,272.40	33,026.62
16,172.0000	CHART INDUSTRIES INC	911,870.20	73.3300	1,185,892.76	274,022.56
19,310.0000	CHEMTURA CORP	276,118.56	16.9800	327,883.80	51,765.24
176,300.0000	CHIMERA INVESTMENT CORP	658,549.09	2.8300	498,929.00	159,620.09-
801.0000	CHIPOTLE MEXICAN GRILL INC	263,384.85	418.0000	334,818.00	71,433.15
5,700.0000	CLIFFS NATURAL RESOURCES INC	396,997.66	69.2600	394,782.00	2,215.66-
16,410.0000	CROCS INC	294,422.08	20.9200	343,297.20	48,875.12
4,200.0000	CUMMINS INC	494,807.88	120.0400	504,168.00	9,360.12
19,200.0000	DANA HOLDING CORP	313,212.13	15.5000	297,600.00	15,612.13-
9,310.0000	DEALERTRACK HOLDINGS INC	205,609.27	30.2600	281,720.60	76,111.33

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51,300.0000	DELTA AIR LINES INC	520,046.01	9.9150	508,639.50	11,406.51-
7,250.0000	DIAGEO PLC ADR	567,574.47	96.5000	699,625.00	132,050.53
3,636.0000	DIGITAL REALTY TRUST INC	211,397.06	73.9700	268,954.92	57,557.86
20,707.0000	DRESSER-RAND GROUP INC	1,015,744.10	46.3900	960,597.73	55,146.37-
22,600.0000	DUKE ENERGY CORP	414,983.99	21.0100	474,826.00	59,842.01
1,720.0000	FIBRIA CELULOSE SA	28,242.40	8.3900	14,430.80	13,811.60-
12,700.0000	FIDELITY NATIONAL INFORMATION	422,169.59	33.1200	420,624.00	1,545.59-
6,860.0000	FRESH MARKET INC/THE	273,727.91	47.9500	328,937.00	55,209.09
28,900.0000	GENERAL MOTORS CO	728,740.90	25.6500	741,285.00	12,544.10
16,500.0000	HFF INC	195,796.74	16.4700	271,755.00	75,958.26
22,300.0000	HANESBRANDS INC	539,740.00	29.5400	658,742.00	119,002.00
3,940.0000	HAYNES INTERNATIONAL INC	211,333.41	63.3500	249,599.00	38,265.59
15,490.0000	HELIX ENERGY SOLUTIONS GROUP I	261,945.71	17.8000	275,722.00	13,776.29
51,720.0000	HERCULES OFFSHORE INC	259,781.68	4.7300	244,635.60	15,146.08-
18,947.0000	HUNTSMAN CORP	335,119.86	14.0100	265,447.47	69,672.39-
12,500.0000	IPG PHOTONICS CORP	500,263.52	52.0500	650,625.00	150,361.48
28,100.0000	INNOPHOS HOLDINGS INC	1,284,941.13	50.1200	1,408,372.00	123,430.87
10,600.0000	INTERLINE BRANDS INC	214,262.99	21.6100	229,066.00	14,803.01

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37,940.0000	JAMES RIVER COAL CO	262,272.34	5.1200	194,252.80	68,019.54-
67,450.0000	KIT DIGITAL INC	812,910.94	7.2000	485,640.00	327,270.94-
14,340.0000	KAPSTONE PAPER AND PACKAGING C	252,870.65	19.7000	282,498.00	29,627.35
18,560.0000	KODIAK OIL & GAS CORP	122,604.07	9.9600	184,857.60	62,253.53
7,890.0000	LIQUIDITY SERVICES INC	246,664.64	44.8000	353,472.00	106,807.36
6,170.0000	LULULEMON ATHLETICA INC	293,214.14	74.7300	461,084.10	167,869.96
4,160.0000	MAKO SURGICAL CORP	162,944.17	42.1500	175,344.00	12,399.83
8,410.0000	MARKETAXESS HOLDINGS INC	220,734.88	37.2900	313,608.90	92,874.02
2,750.0000	MATTRESS FIRM HOLDING CORP	102,876.67	37.9000	104,225.00	1,348.33
47,600.0000	MERCK & CO INC	1,571,276.00	38.4000	1,827,840.00	256,564.00
27,510.0000	MERITOR INC	218,414.79	8.0700	222,005.70	3,590.91
15,901.0000	METROPCS COMMUNICATIONS INC	236,426.49	9.0200	143,427.02	92,999.47-
640.0000	MICRO STRATEGY INC WTS TO PUR COM 06/24/2007	6.40	0.0100	6.40	0.00
12,250.0000	NESTLE SA ADR	704,987.50	62.8420	769,814.50	64,827.00
7,700.0000	NOVARTIS AG ADR	418,495.00	55.4100	426,657.00	8,162.00
10,668.0000	NUANCE COMMUNICATIONS INC	259,237.46	25.5800	272,887.44	13,649.98
35,900.0000	OCZ TECHNOLOGY GROUP INC	307,253.58	6.9800	250,582.00	56,671.58-

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17,770.0000	OPTIMER PHARMACEUTICALS INC	216,531.12	13.9000	247,003.00	30,471.88
3,311.0000	PVH CORP	220,242.57	89.3300	295,771.63	75,529.06
9,424.0000	PARAMETRIC TECHNOLOGY CORP	211,945.77	27.9400	263,306.56	51,360.79
44,640.0000	PILGRIM'S PRIDE CORP	265,181.16	7.4600	333,014.40	67,833.24
9,550.0000	PRIMORIS SERVICES CORP	157,582.54	16.0600	153,373.00	4,209.54-
10,060.0000	QLIK TECHNOLOGIES INC	276,656.62	32.0000	321,920.00	45,263.38
4,029.0000	RACKSPACE HOSTING INC	172,642.67	57.7900	232,835.91	60,193.24
11,800.0000	RIO TINTO PLC ADR	839,216.00	55.5900	655,962.00	183,254.00-
9,539.0000	ROVI CORP	425,775.56	32.5500	310,494.45	115,281.11-
14,874.0000	ROYAL DUTCH SHELL PLC ADR	952,226.18	70.1300	1,043,113.62	90,887.44
5,020.0000	SVB FINANCIAL GROUP	284,481.52	64.3400	322,986.80	38,505.28
1,550.0000	SHORETEL INC	14,646.40	5.6800	8,804.00	5,842.40-
19,100.0000	SIRONA DENTAL SYSTEMS INC	868,761.27	51.5400	984,414.00	115,652.73
11,985.0000	SNYDERS-LANCE INC	253,126.61	25.8500	309,812.25	56,685.64
8,830.0000	SOLARWINDS INC	207,151.83	38.6500	341,279.50	134,127.67
37,200.0000	STANTEC INC	1,109,618.95	31.8400	1,184,448.00	74,829.05
16,000.0000	SUNCOR ENERGY INC	717,440.00	32.7000	523,200.00	194,240.00-

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14,400.0000	TENARIS SA ADR	712,224.00	38.2300	550,512.00	161,712.00-
8,800.0000	TRAVELERS COS INC/THE	523,424.00	59.2000	520,960.00	2,464.00-
5,826.0000	TREEHOUSE FOODS INC	331,693.00	59.5000	346,647.00	14,954.00
11,410.0000	TRUEBLUE INC	180,889.40	17.8800	204,010.80	23,121.40
41,220.0000	US AIRWAYS GROUP INC	307,139.60	7.5900	312,859.80	5,720.20
3,157.0000	UNDER ARMOUR INC	235,575.74	94.0000	296,758.00	61,182.26
16,300.0000	UNILEVER NV	519,704.64	34.0300	554,689.00	34,984.36
20,650.0000	VALE SA ADR	688,677.50	23.3300	481,764.50	206,913.00-
8,778.0000	VERA BRADLEY INC	341,896.09	30.1900	265,007.82	76,888.27-
7,473.0000	VERIFONE SYSTEMS INC	345,126.88	51.8700	387,624.51	42,497.63
48,000.0000	VODAFONE GROUP PLC ADR	1,378,815.13	27.6700	1,328,160.00	50,655.13-
20,550.0000	WEB.COM GROUP INC	249,267.40	14.4300	296,536.50	47,269.10
21,176.0000	WESTERN UNION CO/THE	409,491.49	17.6000	372,697.60	36,793.89-
500.0000	YARA INTERNATIONAL ASA ADR	25,326.50	47.6150	23,807.50	1,519.00-
4,960.0000	ZUMIEZ INC	130,433.93	36.1100	179,105.60	48,671.67
1,816,608.0000	AUDAX MEZZANINE FUND III, LP	1,728,729.12	1.0000	1,816,608.00	87,878.88
TOTAL CORPORATE STOCK - COMMON		135,520,265.14		143,997,824.71	8,477,559.57

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<u>PARTNERSHIP/JOINT VENTURE INTEREST</u>					
371,415.0000	ADAMS STREET DIRECT FUND LP	266,426.00	1.0000	371,415.00	104,989.00
569,057.0000	ADAMS STREET NON US DEV MKT FUND	473,763.00	1.0000	569,057.00	95,294.00
1,167,423.0000	ADAMS SREET US FUND LP	923,938.67	1.0000	1,167,423.00	243,484.33
3,250.0000	WESTERN TECH VENTURE LENDING & LEASING VI	3,250,630.00	1,014.1500	3,295,987.50	45,357.50
1,071,191.9000	ENERGY SPECTRUM PARTNERS VI	1,071,191.90	1.0000	1,071,191.90	0.00
4,164,374.0600	ENERGY FUND XV-A LP	3,906,949.81	1.0000	4,164,374.06	257,424.25
70,472.0000	ADAMS STREET NON US EMERGING MARKETS FUND	82,451.00	1.0000	70,472.00	11,979.00-
8,281,707.0000	SIGULER GUFF DIST OFF FD IV	8,741,878.52	1.0000	8,281,707.00	460,171.52-
4,500,000.0000	INDUSTRY VENTURES VI	4,500,000.00	1.0000	4,500,000.00	0.00
4,451,492.0000	VISTA EQUITY PARTNERS FUND IV LP	4,442,124.00	1.0000	4,451,492.00	9,368.00
20,463,537.0000	GMO MULTI STRATEGY FD OFFSHORE CLASS E	18,779,950.65	1.0000	20,463,537.00	1,683,586.35
533,441.0900	RREEF AMERICA II	42,191,202.29	81.9298	43,704,752.22	1,513,549.93
3,805,905.6110	WELLINGTON CIF DIVERSIFIED INFLATION HEDGE FUND	65,738,704.97	15.5500	59,181,832.25	6,556,872.72-
35,304,835.0000	GROSVENOR INSTL PARTNERS LP	35,856,360.00	1.0000	35,304,835.00	551,525.00-

SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST	PRICE	MARKET VALUE	UNREALIZED GAIN/LOSS
13,775,791.0000	SIGULER GUFF LP	13,506,351.31	1.0000	13,775,791.00	269,439.69
4,817,710.0000	LANDMARK EQUITY PARTNERS XIV LP	4,752,150.95	1.0000	4,817,710.00	65,559.05
4,063,976.0000	PANTHEON GLOBAL SECONDARY PD IV LP	3,587,983.00	1.0000	4,063,976.00	475,993.00
	TOTAL PARTNERSHIP/JOINT VENTURE INTEREST	212,072,056.07		209,255,552.93	2,816,503.14-
	<u>OTHER INVESTMENTS</u>				
2,450,000.0000	MEXICAN BONOS 8.000% 06/11/2020	208,161.24	8.8032	215,680.71	7,519.47
190,000.0000	SVENSK EXPORTKREDIT AB 1.750% 10/20/2015 DD 10/20/10	184,387.40	100.9990	191,898.10	7,510.70
10,000.0000	AMERICAN MUN FWR-OHIO INC 6.270% 02/15/2050 DD 05/23/11	11,021.30	110.2240	11,022.40	1.10
50,000.0000	CALIFORNIA ST 7.300% 10/01/2039 DD 10/15/09	52,712.50	125.2090	62,604.50	9,892.00
10,000.0000	COOK CNTY ILL 6.229% 11/15/2034 DD 06/23/10	11,521.60	115.5330	11,553.30	31.70
100,000.0000	FLORIDA EDL LN MARKETING CORP VAR RT 12/01/2036 DD 01/14/03	83,375.00	75.0000	75,000.00	8,375.00-
50,000.0000	ILLINOIS ST 5.665% 03/01/2018 DD 03/10/11	49,904.50	109.4390	54,719.50	4,815.00
50,000.0000	ILLINOIS ST 5.877% 03/01/2019 DD 03/10/11	49,937.50	109.8940	54,947.00	5,009.50

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150,000.0000	JAPAN BANK FOR INTERNATIONAL C 2.875% 02/02/2015 DD 02/02/10	153,295.50	105.4780	158,217.00	4,921.50
100,000.0000	JAPAN FINANCE ORGANIZATION FOR 4.000% 01/13/2021 DD 01/13/11	98,768.00	110.8830	110,883.00	12,115.00
30,000.0000	LOS ANGELES CALIF DEPT WTR & P 6.574% 07/01/2045 DD 12/02/10	31,056.90	132.3940	39,718.20	8,661.30
30,000.0000	MUNICIPAL ELEC AUTH GA 6.637% 04/01/2057 DD 03/11/10	28,500.00	111.2160	33,364.80	4,864.80
20,000.0000	MUNICIPAL ELEC AUTH GA 6.655% 04/01/2057 DD 03/12/10	18,802.80	110.6700	22,134.00	3,331.20
100,000.0000	NORTHSTAR EDU FIN INC DE VAR RT 01/29/2046 DD 03/13/07	82,171.74	80.0000	80,000.00	2,171.74-
100,000.0000	PENNSYLVANIA ST HIGHER ED ASSI VAR RT 05/01/2046 DD 05/17/06	93,500.00	92.5100	92,510.00	990.00-
225,000.0000	PENNSYLVANIA ST HIGHER ED ASSI VAR RT 06/01/2047 DD 06/21/07	199,170.00	92.5081	208,143.29	8,973.29
50,000.0000	SANTA CLARA VY CALIF TRANSN AU 5.876% 04/01/2032 DD 11/17/10	54,435.00	120.8390	60,419.50	5,984.50
15,000.0000	MEXICO GOVERNMENT INTERNATIONA 6.750% 09/27/2034 DD 09/27/04	16,920.00	128.5000	19,275.00	2,355.00
12,000.0000	MEXICO GOVERNMENT INTERNATIONA 5.625% 01/15/2017 DD 03/10/06	13,236.00	115.6500	13,878.00	642.00
50,000.0000	UNIV OF CALIFORNIA CA REVENUES 4.858% 05/15/2112 DD 03/01/12	50,000.00	97.8540	48,927.00	1,073.00-

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3.0000	EURO-BOBL FUTURE (EUX) EXP JUN 12	0.00	165.2772	319.61-	319.61-
14.0000-	US TREAS BD FUTURE (CBT) EXP JUN 12	0.00	137.7500	59,320.33	59,320.33
24.0000	US 10YR NOTE FUTURE (CBT) EXP JUN 12	0.00	129.4843	23,187.54-	23,187.54-
49.0000-	US 5YR TREAS NTS FUT (CBT) EXP JUN 12	0.00	122.5390	32,125.00	32,125.00
7.0000-	US 2YR TREAS NTS FUT (CBT) EXP JUN 12	0.00	110.0703	1,125.00	1,125.00
3.0000-	US ULTRA BOND (CBT) EXP JUN 12	0.00	150.9687	19,617.19	19,617.19
3,250,000.0000	BARCLAYS CP REPO REPO 0.060% 04/02/2012 DD 03/30/12	3,250,000.00	100.0000	3,250,000.00	0.00
3,250,000.0000	RBS CITIZENS BANK REPO 0.060% 04/02/2012 DD 03/30/12	3,250,000.00	100.0000	3,250,000.00	0.00
TOTAL OTHER INVESTMENTS		7,990,876.98		8,153,575.67	162,698.69
<u>WRITTEN OPTIONS</u>					
8.0000-	90DAY EURODOLLAR FUT EXP SEP12 PUT SEP 12 098.875 ED 09/19/12	2,299.00-	0.0125	250.00-	2,049.00
20.0000-	EUROS 2YR MID-CRV FUT DEC 14 PUT DEC 12 098.250 ED 12/14/12	6,435.00-	0.1550	7,750.00-	1,315.00-
TOTAL WRITTEN OPTIONS		8,734.00-		8,000.00-	734.00

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<u>PURCHASE OPTIONS</u>					
8.0000	90DAY EURODOLLAR FUTURE DEC 12 PUT DEC 12 098.875 ED 121712	3,051.00	0.0325	650.00	2,401.00-
20.0000	EURO\$ 2YR MID-CRV FUT DEC 14 PUT DEC 12 098.750 ED 12/14/12	12,452.50	0.3125	15,625.00	3,172.50
TOTAL PURCHASE OPTIONS		15,503.50		16,275.00	771.50
<u>COMMON/COLLECTIVE TRUST</u>					
401,152.3870	EB DV GLOBAL ALPHA I FUND	64,134,562.66	170.5533	68,417,882.66	4,283,320.00
8,941,319.9900	EB TEMP INV FD VAR RT 12/31/49 FEE CL 15	8,941,319.99	1.0000	8,941,319.99	0.00
29,781.4330	JP MORGAN STRATEGIC PROPERTY FUND	35,235,068.27	1,719.8893	51,220,769.89	15,985,701.62
28,552.0000	BENCHMARK PLUS INTL OFFSHORE FUND	28,552,000.00	1,032.0388	29,466,773.99	914,773.99
269,927.1700	GOTTEX MKT NEUTRAL S&P 500 FUND	28,641,696.78	90.1460	24,332,854.67	4,308,842.11-
244,326.9800	GOTTEX AGGREGATE REPLICATION FUND	24,430,903.76	112.4190	27,466,994.76	3,036,091.00
37,097.0870	ENTRUST CAPITAL DIVERSIFIED FUND LTD	36,718,500.00	1,082.8647	40,171,128.99	3,452,628.99
21,569.2800	BENCHMARK PORTABLE ALPHA FIXED INC	21,569,280.00	1,277.1882	27,548,030.01	5,978,750.01

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1,327,433.5580	ALLIANCEBERNSTEIN INTL STRATEGIC VALUES SERIES DBT	33,185,318.40	30.8914	41,006,281.01	7,820,962.61
379,731.4730	EE DV NSL LCG SIF	46,823,348.74	144.7227	54,955,780.00	8,132,431.26
3,668,338.1080	LOOMIS SAYLES CREDIT ASSET TRUST - CLASS B	46,790,653.01	16.0600	58,913,510.01	12,122,857.00
2,513,359.2700	PICTET EMERGING LOCAL CURRENCY DEBT FUND LLC	38,756,000.00	15.3780	38,650,463.99	105,536.01-
9,203.9680	EE DV STOCK INDEX FUND	12,434,348.68	1,763.3617	16,229,925.17	3,795,576.49
1,084,758.2900	TBC EMERGING MARKETS EQUITY	71,859,050.00	59.0800	64,087,519.77	7,771,530.23-
TOTAL COMMON/COLLECTIVE TRUST		498,072,050.29		551,409,234.91	53,337,184.62
<u>103-12 INVESTMENT ENTITIES</u>					
79,171.3680	WA FLTG RATE HI INCOME FD	868,189.52	16.4880	1,305,377.52	437,188.00
105,282.5150	WAMCO OPPORTUNISTIC US\$ HIGH YIELD SEC PORT LLC	1,726,377.78	24.0450	2,531,518.07	805,140.29
41,467.1830	WAMCO OPPORTUNISTIC INTL INVESTMENT GRADE SEC LLC	1,057,856.42	24.5680	1,018,765.75	39,090.67-
TOTAL 103-12 INVESTMENT ENTITIES		3,652,423.72		4,855,661.34	1,203,237.62

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<u>REGISTERED INVESTMENT COMPANIES</u>					
1,204.9790	VANGUARD 500 INDEX FUND INVESTOR	130,928.09	129.7800	156,382.17	25,454.08
2,106,396.6930	ARTISAN FDS INC INTL FD INSTL	42,189,540.15	23.0300	48,510,315.84	6,320,775.69
2,477,316.5650	GMO STRATEGIC OPPORTUNITIES ALLOCATION FUND III	53,403,286.80	21.6000	53,510,037.80	106,751.00
5,056,529.0910	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	55,563,869.10	11.6400	58,857,998.62	3,294,129.52
263,484.5170	PAYDEN CORPORATE BOND FUND	2,690,132.63	10.9300	2,879,885.77	189,753.14
2,561,347.9930	PAYDEN CORE BOND FUND	26,518,886.76	10.6200	27,201,515.69	682,628.93
264,751.1720	PAYDEN EMERGING MARKETS BOND FUND	3,543,746.70	14.4700	3,830,949.46	287,202.76
704,156.8570	PAYDEN HIGH INCOME FUND	5,543,344.52	7.1000	4,999,513.68	543,830.84-
4,497,311.7850	PIMCO ALL ASSET FUND INSTITUTIO	52,729,269.89	12.1400	54,597,365.07	1,868,095.18
TOTAL REGISTERED INVESTMENT COMPANIES		242,313,004.64		254,543,964.10	12,230,959.46
GRAND TOTAL		1,318,952,953.24		1,391,808,635.60	8,802.30 C <u>72,846,880.06</u> I 72,855,682.36

SCHEDULE OF REPORTABLE TRANSACTIONS
Schedule H, Part IV, 4 (j)

		5% VALUE:		71,608,107.77			
TRAN CODE	SHARES/ PAR VALUE	SECURITY DESCRIPTION	TRANSACTION EXPENSE	COST OF PURCHASES	PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
B	173,002,508.00	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	173,002,508.00	.00	.00	.00
S	144,412,000.67	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	.00	144,412,000.67	144,412,000.67	.00

5% VALUE: 71,608,107.77						
TRAN COUNT	SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST OF PURCHASES	PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
16	1,869,928.26	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	21,502,235.06	.00	.00	.00
6	4,428,579.88	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	.00	50,236,520.00	48,608,682.02	1,627,837.98
137	186,656,768.43	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	186,656,768.43	.00	.00	.00
137	14,710,699.32	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	14,710,699.32	14,710,699.32	.00
754	271,895,645.33	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	271,895,645.33	.00	.00	.00
804	446,479,535.92	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	446,479,535.92	446,479,535.92	.00
5	21,436.41	EB DV STOCK INDEX FUND	34,123,994.39	.00	.00	.00
68	56,207.89	EB DV STOCK INDEX FUND	.00	89,764,081.60	73,732,759.60	16,031,322.00

SCHEDULE OF LOANS AND FIXED INCOME SECURITIES IN DEFAULT
Schedule G, Part I

NFL GCALL10
BERT BELL/PETE ROZELLE NFL Player Retirement Plan
EIN/PN 13-0043636/001
OVERALL COMPOSITE

<u>CUSIP</u>	<u>SECURITY DESCRIPTION</u>	<u>PRINCIPAL RECEIVED</u>	<u>INTEREST RECEIVED</u>	<u>UNPAID BALANCE</u>	<u>OVERDUE INTEREST</u>
524908XA3	LEHMAN BROS HLDGS INC DTD	0.00	0.00	130,000.0000	0.00
5249087M6	LEHMAN BROS HLDGS INC MEDIUM	0.00	0.00	270,000.0000	0.00
525161AF2	LEHMAN XS 2006 GP4 3-A1A	0.00	0.00	348,246.4500	0.00
52520YAB3	LEHMAN BROTHERS E-CAP TRUST I	0.00	0.00	70,000.0000	0.00
525221EN3	LEHMAN XS TR 2005-7N CL 1A1B	0.00	0.00	195,720.3700	0.00

SCHEDULE OF REPORTABLE TRANSACTIONS
Schedule H, Part IV, 4 (j)

		5% VALUE:		71,608,107.77			
TRAN CODE	SHARES/ PAR VALUE	SECURITY DESCRIPTION	TRANSACTION EXPENSE	COST OF PURCHASES	PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
B	173,002,508.00	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	173,002,508.00	.00	.00	.00
S	144,412,000.67	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	.00	144,412,000.67	144,412,000.67	.00

			5% VALUE:		71,608,107.77	
TRAN COUNT	SHARES/ PAR VALUE	SECURITY DESCRIPTION	COST OF PURCHASES	PROCEEDS FROM SALES	COST OF ASSETS DISPOSED	GAIN/LOSS
16	1,869,928.26	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	21,502,235.06	.00	.00	.00
6	4,428,579.88	PIMCO DIVERSIFIED INCOME FUND INSTITUTIO	.00	50,236,520.00	48,608,682.02	1,627,837.98
137	186,656,768.43	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	186,656,768.43	.00	.00	.00
137	14,710,699.32	BNY MELLON CASH RESERVE 0.010% 12/31/2049 DD 06/26/97	.00	14,710,699.32	14,710,699.32	.00
754	271,895,645.33	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	271,895,645.33	.00	.00	.00
804	446,479,535.92	EB TEMPORARY INVESTMENT FD II 0.105% 12/31/2040 DD 11/01/01	.00	446,479,535.92	446,479,535.92	.00
5	21,436.41	EB DV STOCK INDEX FUND	34,123,994.39	.00	.00	.00
68	56,207.89	EB DV STOCK INDEX FUND	.00	89,764,081.60	73,732,759.60	16,031,322.00