

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2019 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2019 or fiscal plan year beginning <u>01/01/2019</u> and ending <u>12/31/2019</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>GREATER CLEVELAND PARTNERSHIP 401(K) 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>002</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1999</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>002</u>	1c Effective date of plan <u>01/01/1999</u>	
1b Three-digit plan number (PN) ▶	<u>002</u>				
1c Effective date of plan <u>01/01/1999</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>GREATER CLEVELAND PARTNERSHIP</u> <u>1240 HURON ROAD E.</u> <u>SUITE 300</u> <u>CLEVELAND, OH 44115</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>34-0149250</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>216-592-2247</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>813000</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-0149250</u>	2c Plan Sponsor's telephone number <u>216-592-2247</u>	2d Business code (see instructions) <u>813000</u>	
2b Employer Identification Number (EIN) <u>34-0149250</u>					
2c Plan Sponsor's telephone number <u>216-592-2247</u>					
2d Business code (see instructions) <u>813000</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.	08/05/2020	DEBBIE GUTZKY
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	08/04/2020	JOHN LUTERAN
	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

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3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 97
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 62 6a(2) 64 6b 1 6c 39 6d 104 6e 0 6f 104 6g 104 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2K 2T 3D 2F 2E 2G 2J b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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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)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2019 Form M-1 annual report. If the plan was not required to file the 2019 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan <u>GREATER CLEVELAND PARTNERSHIP 401(K) PLAN</u>	B Three-digit plan number (PN) ►	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GREATER CLEVELAND PARTNERSHIP</u>	D Employer Identification Number (EIN) <u>34-0149250</u>	

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)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+AGR 2055 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-3170652-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>15432</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+MOD 2055 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-3188067-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>438581</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+CON 2055 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-3216409-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>1871</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+AGR 2025 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-2935740-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3519</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+AGR 2045 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-3026996-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>14389</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>FLEXPATH+CON 2045 R1</u>		
b Name of sponsor of entity listed in (a): <u>WILMINGTON TRUST FIDUCIARY SERVICES</u>		
c EIN-PN <u>47-3144367-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>179</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WF STABLE FUND C</u>		
b Name of sponsor of entity listed in (a): <u>WELLS FARGO BANK, N.A.</u>		
c EIN-PN <u>52-2250946-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>423756</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+CON 2035 R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-3018134-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7678
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a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+AGR 2035 R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-2987118-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1192545
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a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+MOD 2045 R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-3071639-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2264575
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a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+MOD 2025 R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-2950747-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1761602
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a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+MOD 2035 R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-3002484-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3545440
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a Name of MTIA, CCT, PSA, or 103-12 IE: **FLEXPATH+MOD RET R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST FIDUCIARY SERVICES**

c EIN-PN 47-2851418-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 108928
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a Name of MTIA, CCT, PSA, or 103-12 IE: **CB LARGE CAP GR R1**

b Name of sponsor of entity listed in (a): **WILMINGTON TRUST, N.A.**

c EIN-PN 82-4435820-375	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 386100
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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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
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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 I (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information—Small Plan 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
		2019
		This Form is Open to Public Inspection

For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019	
A Name of plan GREATER CLEVELAND PARTNERSHIP 401(K) PLAN	B Three-digit plan number (PN) ► 002
C Plan sponsor's name as shown on line 2a of Form 5500 GREATER CLEVELAND PARTNERSHIP	D Employer Identification Number (EIN) 34-0149250

Complete Schedule I if the plan covered fewer than 100 participants as of the beginning of the plan year. You may also complete Schedule I if you are filing as a small plan under the 80-120 participant rule (see instructions). Complete Schedule H if reporting as a large plan or DFE.

Part I	Small Plan Financial Information
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Report below the current value of assets and liabilities, income, expenses, transfers and changes in net assets during the plan year. Combine the value of plan assets held in more than one trust. Do not enter the value of the portion of an insurance contract that guarantees during this plan year to pay a specific dollar benefit at a future date. 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.**

1 Plan Assets and Liabilities:		(a) Beginning of Year	(b) End of Year
a Total plan assets	1a	10441979	13296933
b Total plan liabilities	1b	0	0
c Net plan assets (subtract line 1b from line 1a)	1c	10441979	13296933
2 Income, Expenses, and Transfers for this Plan Year:		(a) Amount	(b) Total
a Contributions received or receivable:			
(1) Employers.....	2a(1)	298260	
(2) Participants.....	2a(2)	626645	
(3) Others (including rollovers)	2a(3)	9306	
b Noncash contributions	2b	0	
c Other income.....	2c	2389490	
d Total income (add lines 2a(1), 2a(2), 2a(3), 2b, and 2c)	2d		3323701
e Benefits paid (including direct rollovers)	2e	406572	
f Corrective distributions (see instructions)	2f	0	
g Certain deemed distributions of participant loans (see instructions).....	2g	0	
h Administrative service providers (salaries, fees, and commissions)	2h	62175	
i Other expenses	2i	0	
j Total expenses (add lines 2e, 2f, 2g, 2h, and 2i).....	2j		468747
k Net income (loss) (subtract line 2j from line 2d)	2k		2854954
l Transfers to (from) the plan (see instructions)	2l		0

3 Specific Assets: If the plan held assets at any time during the plan year in any of the following categories, check "Yes" and enter the current value of any assets remaining in the plan as of the end of the plan year. Allocate the value of the plan's interest in a commingled trust containing the assets of more than one plan on a line-by-line basis unless the trust meets one of the specific exceptions described in the instructions.		Yes	No	Amount
a Partnership/joint venture interests	3a		X	
b Employer real property	3b		X	
c Real estate (other than employer real property).....	3c		X	
d Employer securities	3d		X	
e Participant loans	3e	X		196973
f Loans (other than to participants)	3f		X	
g Tangible personal property.....	3g		X	

Part II Compliance Questions

4 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	
4a			X	
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of plan year or classified during the year as uncollectible? Disregard participant loans secured by the participant's account balance.		X	
4b			X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible?		X	
4c			X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a.)		X	
4d			X	
e	Was the plan covered by a fidelity bond?	X		1000000
4e		X		
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	
4f			X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4g			X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h			X	
i	Did the plan at any time hold 20% or more of its assets in any single security, debt, mortgage, parcel of real estate, or partnership/joint venture interest?		X	
4i			X	
j	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4j			X	
k	Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? If "No," attach an IQPA's report or 2520.104-50 statement. (See instructions on waiver eligibility and conditions.)	X		
4k		X		
l	Has the plan failed to provide any benefit when due under the plan?		X	
4l			X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m			X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3		X	
4n			X	

5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No
If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)

5c If the plan is a defined benefit plan, is it covered under the PBGC insurance program (See ERISA section 4021.)? ☐ Yes ☐ No ☐ Not determined.
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____. (See instructions.)

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2019 This Form is Open to Public Inspection.
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For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019

A Name of plan <u>GREATER CLEVELAND PARTNERSHIP 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GREATER CLEVELAND PARTNERSHIP</u>	D Employer Identification Number (EIN) <u>34-0149250</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	
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>04-6568107</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	

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)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

Part III	Amendments
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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.....	☐ Increase	☐ Decrease	☐ Both	☐ 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?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Schedule R (Form 5500) 2019
v. 190130

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 lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

e Contribution rate information (If more than one rate applies, check this box ☐ and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) _____

(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

- 14** Enter the number of participants on whose behalf no contributions were made by an employer as an employer of the participant for:

a The current year

b The plan year immediately preceding the current plan year

c The second preceding plan year

14a**14b****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

b The corresponding number for the second preceding plan year

15a**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

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers

16a**16b**

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

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

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

- 19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

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

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

- 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 line 19(b)?

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN

EMPLOYER NUMBER: 34-0149250

PLAN NO. 002

Form 5500 Schedule H, line 4i - Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of Issue, Borrower or Similar Party	(c) Description of Issue	(e) Current Value
	Registered Investment Companies		
	MassMutual	Premier Small Cap Opps I	\$ 379,359
	Janus Henderson	Enterprise N	369,640
	Wilmington Trust	Large Cap Value R1 Putnam Equity Income R6	349,132
*	Fidelity Advisor	Fidelity 500 Index Fund	333,934
	Wells Fargo	Special Mid Cap Value R6	319,583
	Hartford	Core Equity R6	269,553
	Goldman Sachs	International Equity Insights Fund Class R6	219,175
	American Funds	American Funds New Perspective R6	213,577
	Wilmington Trust	PGIM Total Return Bond R6	158,395
*	Fidelity Advisor	Fidelity Small Cap Index Fund	145,019
*	Fidelity Advisor	Fidelity Mid Cap Index Fund	75,254
	PIMCO	PIMCO Income Fund, Institutional	65,880
*	Fidelity Advisor	Fidelity International Index Fund	22,182
	Prudential	High Yield Fund- Class R6	14,682
	Total Registered Companies		<u>2,935,365</u>
	Common Collective Trusts		
	Wilmington Trust	FlexPath Index+Moderate 2035 Fund R1	3,545,440
	Wilmington Trust	FlexPath Index+Moderate 2045 Fund R1	2,264,575
	Wilmington Trust	FlexPath Index+Moderate 2025 Fund R1	1,761,602
	Wilmington Trust	FlexPath Index+Aggressive 2035 Fund R1	1,192,545
	Wilmington Trust	FlexPath Index+Moderate 2055 Fund R1	438,581
	Wells Fargo	Wellsfargo Stable Value Fund C	423,756
	Wilmington Trust	Large Cap Growth Fund	386,100
	Wilmington Trust	FlexPath Index+Moderate Retirement Fund R1	108,928
	Wilmington Trust	FlexPath Index+Aggressive 2055 Fund R1	15,432
	Wilmington Trust	FlexPath Index+Aggressive 2045 Fund R1	14,389
	Wilmington Trust	FlexPath Index+Conservative 2035 Fund R1	7,678
	Wilmington Trust	FlexPath Index+Aggressive 2025 Fund R1	3,519
	Wilmington Trust	FlexPath Index+Conservative 2055 Fund R1	1,871
	Wilmington Trust	FlexPath Index+Conservative 2045 Fund R1	179
	Total Common Collective Trusts		<u>10,164,595</u>
	Participants loan receivable	Participant loan bearing interest @4.25%-9.25%	196,973
Total Assets (Held at End of Year)			<u><u>\$ 13,296,933</u></u>

* Represents party-in-interest. See Note 8

GREATER CLEVELAND PARTNERSHIP 401(k) PLAN
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE
WITH INDEPENDENT AUDITOR'S REPORT
December 31, 2019 and 2018

GREATER CLEVELAND PARTNERSHIP 401(k) PLAN

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INDEPENDENT AUDITOR'S REPORT

To the Board of Directors of
Greater Cleveland Partnership
Cleveland, Ohio

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Greater Cleveland Partnership 401(k) Plan, which comprise the statements of net assets available for benefits as of December 31, 2019 and 2018 and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 4, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2019 and 2018 that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.



The supplemental schedules of asset held at December 31, 2019 and 2018, are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules referred to above.

Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Hemphill Wright & Associates, Inc.

Independence, Ohio
July 15, 2020



GREATER CLEVELAND PARTNERSHIP 401(K) PLAN

Statement of Net Assets Available for Benefits

December 31, 2019 and 2018

	<u>2019</u>	<u>2018</u>
ASSETS		
Investments, at fair value:		
Registered Investment Companies	\$ 2,935,365	\$ 2,423,351
Fully benefit-responsive investment contracts at contract value:		
Common collective trusts	10,164,595	7,769,150
Total Investments	<u>13,099,960</u>	<u>10,192,501</u>
Receivables		
Notes Receivables from Participants	<u>196,973</u>	<u>249,478</u>
Total Receivables	196,973	249,478
TOTAL ASSETS	13,296,933	10,441,979
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 13,296,933</u></u>	<u><u>\$ 10,441,979</u></u>

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

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN

Statement of Changes in Net Assets Available for Benefits

December 31, 2019 and 2018

	2019	2018
Additions to net assets attributed to:		
Investment income:		
Net Appreciation (Depreciation) in Fair Value of Investments:		
Registered Investment Companies	\$ 573,181	\$ (381,022)
Common Collective Trusts	1,721,631	(541,591)
Dividends and Interest	84,757	163,030
Total Investment Income	2,379,569	(759,583)
Interest on Notes Receivable from Participants	9,921	15,225
Contributions:		
Employer Contribution	298,260	275,910
Participant	626,645	545,205
Rollovers	9,306	-
Total contributions	934,211	821,115
Total Additions	3,323,701	76,757
Deductions from net assets attributed to:		
Distributions to Participants	406,572	745,971
Administrative Expenses	62,175	58,225
Total Deductions	468,747	804,196
Net Change in Net Assets Available for Benefits	2,854,954	(727,439)
Net Assets Available for Benefits, beginning of year	10,441,979	11,169,418
Net Assets Available for Benefits, end of year	<u>\$ 13,296,933</u>	<u>\$ 10,441,979</u>

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

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 1 – DESCRIPTION OF PLAN

The following description of Greater Cleveland Partnership 401(k) Plan (“Plan”) is provided for general information. Participants should refer to the Plan document for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan covering all employees of Greater Cleveland Partnership (the “Company”). Employees may elect to participate in the Plan upon the completion of 90 days of eligible service as defined by the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended.

Contributions – Participants may elect to contribute to the Plan a percentage of compensation, subject to certain limits under the Plan and established by the Internal Revenue Service (“IRS”). The Plan also contains provisions to accept designated Roth Contributions. The Company makes a safe harbor contribution equal to 3% of eligible compensation to all participants. In addition, the Company also contributes up to an additional 1% in an amount equal to 25% of a participant’s contributions.

Participant Accounts – Participants direct the investment of their contributions and their share of Company contributions into various investment funds. Individual accounts are maintained for each Plan participant. Each separate account is increased or decreased with a pro rata allocation of each selected investment fund’s earnings or loss. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s account. In 2017, the Plan modified the investment line-up as approved by the Plan’s investment review committee. The majority of the new investment options are in a common collective trust versus the historical registered investment company options.

Vesting – Participants are vested immediately in all contributions plus earnings thereon. There are no forfeitures related to this Plan.

Notes Receivable from Participants – A participant may borrow from his or her account up to a maximum amount equal to the lesser of \$50,000 or 50% of the account balance. Loan terms range from one to five years or up to thirty years if the loan is to acquire a principal residence. The loans are collateralized by the balance in the participant’s account and provide for interest at a fixed rate of prime plus 1% at the time of the loan. Principal and interest are paid through payroll deductions in accordance with the payment schedule in the promissory note.

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 1 – DESCRIPTION OF PLAN (Cont'd)

Payment of Benefits – Plan benefits are based solely on the amount contributed to the participant's account by the Company and the participant and the cumulative share of any income and gains and losses. Payment of benefits upon retirement, disability, death, or other termination of employment may be made at the participant's option directly to the participant or in the form of a rollover. Withdrawals of a participant's interest in his or her account may be made prior to termination, subject to certain restrictions.

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting – The financial statements of the Plan are prepared using the accrual basis of accounting.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2018, no allowance for credit losses was recorded.

Valuation of Investments and Income Recognition – The Plan's investments are reported at fair value, except for fully benefit-responsive investment contracts, which are reported at net asset value per share, or contract value, as practical expedient under ASC 820, "Fair Value Measurement." Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 5 for discussion of fair value measurements. The change in the difference between current value and the cost of investments and the gain or loss on the sale of investments is reflected in the statements of changes in net assets available for benefits as net appreciation in fair value of investments. The cost of investments sold is based on the average cost of the investments. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

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 changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES (Cont'd)

Subsequent events – Subsequent events have been evaluated for potential recognition and/or disclosure through July 15, 2020, the date the financial statements were available to be used.

Expenses – Certain administrative expenses are paid by the Company and are therefore excluded from these financial statements. In 2017, the Plan moved to an institutionally priced investment line-up and direct compensation agreement with Plan service providers to enhance the transparency of fees in the plan.

Payment of Benefits – Benefits are recorded when paid.

NOTE 3 – INCOME TAX STATUS

The newly adopted prototype plan document sponsored by Fidelity Management & Research, Co. received an opinion letter from the Internal Revenue Service dated March 31, 2014, which states that the prototype document satisfies the applicable provisions of the Internal Revenue Code (“IRC”). The Plan itself has not received a determination letter from the IRS. However, the Plan’s management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income tax has been included in the Plan’s financial statements.

Accounting principles generally accepted in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2016.

NOTE 4 – UNAUDITED INFORMATION

The following is a summary of the unaudited information regarding the Plan as of December 31, 2019 and 2018, included in the Plan’s financial statements and supplemental schedules, that was prepared by or derived from information prepared by Fidelity Management Trust Company, the trustee of the Plan, and furnished to the plan administrator. The plan administrator has obtained certifications from the trustees that such information is complete and accurate:

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 4 – UNAUDITED INFORMATION (Cont'd)

	<u>12/31/2019</u>	<u>12/31/2018</u>
Cash and Investments:		
Registered Investment Companies	\$ 2,935,365	\$ 2,423,351
Common collective trusts	10,164,595	7,769,150
Total Investments	<u>\$ 13,099,960</u>	<u>\$ 10,192,501</u>
Notes Receivables from Participants	\$ 196,973	\$ 249,478
Changes in net assets not audited include the following:		
Investment income:		
Net Appreciation (Depreciation) in Fair Value of Investments:		
Registered Investment Companies	\$ 573,181	\$ (381,022)
Common Collective Trusts	1,721,631	(541,591)
Dividends and Interest	84,757	163,030
Interest on Notes Receivable from Participants	9,921	15,225
Total Investment Income	<u>\$ 2,389,490</u>	<u>\$ (744,358)</u>

NOTE 5 – FAIR VALUE OF FINANCIAL INSTRUMENTS

Accounting Standards Codification (ASC) 820 establishes a framework for measuring fair value. The framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The three levels of fair value hierarchy under ASC 820 are:

Level 1 – Unadjusted quoted prices in active markets for identical assets or liabilities. Level 1 yields the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities. A quoted price in an active market provides the most reliable evidence of fair value and shall be used to measure fair value whenever available.

Level 2 – Observable inputs other than quoted prices in Level 1. Inputs such as quoted prices for similar assets and liabilities in active markets, quoted prices for identical or similar liabilities that are not active, or other inputs that are observable or can be corroborated by observable market data.

Level 3 – Unobservable inputs that are significant to the valuation of assets or liabilities and are supported by little or no market data. This includes discounted cash flow methodologies, pricing models and similar techniques that use significant unobservable inputs.

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 5 – FAIR VALUE OF FINANCIAL INSTRUMENTS (Cont'd)

Quoted market prices are used when available to determine the fair value of investment securities and these are categorized as Level 1. The inputs used in fair value of Level 1 instruments are quoted.

The following table sets forth by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2019 and 2018. Common Collective Trust funds are fully benefit-responsive investment contracts. These investments are measured at fair value using the net asset value per share (NAV). Such investments are not categorized in the fair value hierarchy but are provided to permit reconciliation of the fair value hierarchy to the amounts presented in the Statement of Net Assets Available for Benefits. The NAV has been applied as a practical expedient for estimating fair value as these investments can be redeemed at the net asset value.

Investments at fair value:	2019	2018
Level 1:		
Registered Investment Companies:		
Large Cap	\$ 967,301	\$ 964,998
Mid Cap	764,477	530,127
International	454,934	347,366
Small Cap	524,378	393,353
Bond Fund	224,275	187,507
Total Registered Investment Companies	<u>\$ 2,935,365</u>	<u>\$ 2,423,351</u>
 Total Level 1 investments	 \$ 2,935,365	 \$ 2,423,351
Fully benefit-responsive investment contracts at contract value:		
Common collective trusts	10,164,595	7,769,150
Total Investments	<u><u>\$ 13,099,960</u></u>	<u><u>\$ 10,192,501</u></u>

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 6 – INVESTMENT IN COMMON COLLECTIVE TRUST FUND

The Plan maintains various investment options with the Wilmington Trust Collective Investment Trust. The funds are designed to provide long-term investors with an asset allocation strategy designed to maximize their retirement savings consistent with an acceptable level of risk tolerance, ranging from aggressive to conservative, and projected retirement date associated with each fund. To pursue its investment objectives, the funds are diversified across an international equity, global real estate, commodities, intermediate-term bonds and inflation-protected bonds.

The plan also maintains an investment in the Wells Fargo Stable Value Fund M (the Fund), a common collective trust fund. The Fund's objective is to provide investors with a moderate level of stable income without principal volatility. The Fund achieves this objective by investing all of its assets in Wells Fargo Stable Return Fund G (Fund G), a collective trust fund sponsored by Wells Fargo. Fund G invests in a variety of investment contracts, including traditional guaranteed investment contracts (GICs), security backed investment contracts, and separate account GICs.

Common collective trust funds have been valued using the net asset value per share which is the contract for these investments.

NOTE 7 – PLAN TERMINATION

Although it has not expressed any intention to do so, the Company has the right under the Plan to alter, suspend, or terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, the Plan assets will be distributed to the participants under federal law.

NOTE 8 – RELATED PARTY TRANSACTIONS

Certain Plan investments (Fidelity Advisors) are managed by organizations related to the Trustees and is considered to be a party-in-interest as define in ERISA. In 2017, the Plan moved to an institutionally priced investment line-up and direct compensation agreement with Plan service providers to enhance the transparency of fees in the Plan. In 2019, the majority of the fees were reflected in the statements as a reduction of investment market value. Fees paid by the Plan for the recordkeeping services amounted to \$62,175 and \$58,220 for the year ended December 31, 2019 and 2018 respectively.

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN
Notes to Financial Statements
Year Ended December 31, 2019 and 2018

NOTE 9 – RISKS AND UNCERTAINTIES

The Plan holds various investment securities. Investment securities as defined in ERISA, are exposed to various risks such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of the investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statement of net assets available for benefits.

NOTE 10 – PLAN AMENDMENTS

There were no plan amendments during 2019 and 2018.

NOTE 11 – SUBSEQUENT EVENTS

Effective January 1, 2020, Vantage Financial Group will serve the Plan in a 3(38) capacity meaning the fiduciary burden for investment monitoring and changes, plan implementation and plan management shifts to Vantage Financial Group while the Plan still maintains fiduciary responsibility for plan design, investment/governance/cost structures, and monitoring the 3(38) investment manager's performance.

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN

EMPLOYER NUMBER: 34-0149250

PLAN NO. 002

Form 5500 Schedule H, line 4i - Schedule of Assets (Held at End of Year)

December 31, 2019

(a)	(b) Identity of Issue, Borrower or Similar Party	(c) Description of Issue	(e) Current Value
	Registered Investment Companies		
	MassMutual	Premier Small Cap Opps I	\$ 379,359
	Janus Henderson	Enterprise N	369,640
	Wilmington Trust	Large Cap Value R1 Putnam Equity Income R6	349,132
*	Fidelity Advisor	Fidelity 500 Index Fund	333,934
	Wells Fargo	Special Mid Cap Value R6	319,583
	Hartford	Core Equity R6	269,553
	Goldman Sachs	International Equity Insights Fund Class R6	219,175
	American Funds	American Funds New Perspective R6	213,577
	Wilmington Trust	PGIM Total Return Bond R6	158,395
*	Fidelity Advisor	Fidelity Small Cap Index Fund	145,019
*	Fidelity Advisor	Fidelity Mid Cap Index Fund	75,254
	PIMCO	PIMCO Income Fund, Institutional	65,880
*	Fidelity Advisor	Fidelity International Index Fund	22,182
	Prudential	High Yield Fund- Class R6	14,682
	Total Registered Companies		<u>2,935,365</u>
	Common Collective Trusts		
	Wilmington Trust	FlexPath Index+Moderate 2035 Fund R1	3,545,440
	Wilmington Trust	FlexPath Index+Moderate 2045 Fund R1	2,264,575
	Wilmington Trust	FlexPath Index+Moderate 2025 Fund R1	1,761,602
	Wilmington Trust	FlexPath Index+Aggressive 2035 Fund R1	1,192,545
	Wilmington Trust	FlexPath Index+Moderate 2055 Fund R1	438,581
	Wells Fargo	Wellsfargo Stable Value Fund C	423,756
	Wilmington Trust	Large Cap Growth Fund	386,100
	Wilmington Trust	FlexPath Index+Moderate Retirement Fund R1	108,928
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	Wilmington Trust	FlexPath Index+Conservative 2035 Fund R1	7,678
	Wilmington Trust	FlexPath Index+Aggressive 2025 Fund R1	3,519
	Wilmington Trust	FlexPath Index+Conservative 2055 Fund R1	1,871
	Wilmington Trust	FlexPath Index+Conservative 2045 Fund R1	179
	Total Common Collective Trusts		<u>10,164,595</u>
	Participants loan receivable	Participant loan bearing interest @4.25%-9.25%	196,973
Total Assets (Held at End of Year)			<u><u>\$ 13,296,933</u></u>

* Represents party-in-interest. See Note 8

GREATER CLEVELAND PARTNERSHIP 401(K) PLAN

EMPLOYER NUMBER: 34-0149250

PLAN NO. 002

Form 5500 Schedule H, line 4i - Schedule of Assets (Held at End of Year)

December 31, 2018

(a)	(b) Identity of Issue, Borrower or Similar Party	(c) Description of Issue	(e) Current Value
	Registered Investment Companies		
	American Funds	AMCAP Fund Class R6	\$ 291,354
	Mass Mutual	Premier Small Cap Opportunities Fund;I	288,532
	Janus Adviser	JH Enterprise	251,056
	American Beacon	Bridgeway Large Cap Val Fund Institutional Class	243,023
*	Fidelity Advisor	Fidelity 500 Index Fund	221,703
	Wellsfargo	Special Mid Cap Value Fund - Class R6	221,420
	JPMorgan	Discipline Equity Fund Class R6	196,821
	Goldman Sachs	Intl Equity INS R6	172,545
	American Funds	New Perspective Fund Class R6	159,021
	Prudential	Total Return Bond Fund	127,414
*	Fidelity Advisor	Fidelity Small Cap Index Fund	104,821
	PIMCO	PIMCO Income Fund, Institutional	60,093
*	Fidelity Advisor	Fidelity Mid Cap Index Fund	57,651
*	Fidelity Advisor	Fidelity International Index Fund	15,800
	Prudential	High Yield Fund Class Q	12,097
	Total Registered Companies		<u>2,423,351</u>
	Common Collective Trusts		
	Wilmington Trust	FlexPath Index+Moderate 2035 Fund R1	2,767,381
	Wilmington Trust	FlexPath Index+Moderate 2045 Fund R1	1,650,389
	Wilmington Trust	FlexPath Index+Moderate 2025 Fund R1	1,522,724
	Wilmington Trust	FlexPath Index+Aggressive 2035 Fund R1	784,337
	Wells Fargo	Wellsfargo Stable Value Fund C	546,348
	Wilmington Trust	FlexPath Index+Moderate 2055 Fund R1	278,314
	Wilmington Trust	FlexPath Index+Moderate Retirement Fund R1	211,934
	Wilmington Trust	FlexPath Index+AGR 2045 Fund R1	4,862
	Wilmington Trust	FlexPath Index+Aggressive 2055 Fund R1	2,861
	Total Common Collective Trusts		<u>7,769,150</u>
	Participants loan receivable	Participant loan bearing interest @4.25%-9.25%	249,478
Total Assets (Held at End of Year)			<u><u>\$ 10,441,979</u></u>

* Represents party-in-interest. See Note 8

GREATER CLEVELAND PARTNERSHIP 401 (K) PLAN
EMPLOYER NUMBER: 34-0149250
PLAN NO. 002

Form 5500 Schedule H, Line 4j, Schedule of Reportable Transactions

Year Ended December 31, 2019

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
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NO REPORTABLE TRANSACTIONS

GREATER CLEVELAND PARTNERSHIP 401 (K) PLAN
EMPLOYER NUMBER: 34-0149250
PLAN NO. 002

Form 5500 Schedule H, Line 4j, Schedule of Reportable Transactions

Year Ended December 31, 2018

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain (Loss)
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NO REPORTABLE TRANSACTIONS