

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). <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	OMB Nos. 1210-0110 1210-0089 <div style="text-align: center; font-size: 1.5em; font-weight: bold;">2019</div> 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: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☐ a multiemployer plan </div> <div> ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☒ a single-employer plan </div> <div> ☐ a DFE (specify) ____ </div> </div>	
B This return/report is: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☐ the first return/report </div> <div> ☐ the final return/report </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☐ an amended return/report </div> <div> ☐ a short plan year return/report (less than 12 months) </div> </div>	
C If the plan is a collectively-bargained plan, check here. ▶ ☐	
D Check box if filing under: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☒ Form 5558 </div> <div> ☐ automatic extension </div> <div> ☐ the DFVC program </div> </div> <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div> ☐ special extension (enter description) </div> </div>	

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>SCHWAN'S COMPANY RETIREMENT SAVINGS 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>09/30/1964</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>09/30/1964</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>09/30/1964</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>SCHWANS SHARED SERVICES, LLC</u> <u>115 WEST COLLEGE DRIVE</u> <u>MARSHALL, MN 56258</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>81-0572771</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>507-532-3274</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541990</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>81-0572771</u>	2c Plan Sponsor's telephone number <u>507-532-3274</u>	2d Business code (see instructions) <u>541990</u>	
2b Employer Identification Number (EIN) <u>81-0572771</u>					
2c Plan Sponsor's telephone number <u>507-532-3274</u>					
2d Business code (see instructions) <u>541990</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.	09/24/2020	JEROME KIVEL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2019)
v. 190130

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number <div style="background-color: #cccccc; height: 40px; width: 100%;"></div>
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 14288
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	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> 6a(1) 11773 6a(2) 7424 6b 56 6c 2277 6d 9757 6e 7 6f 9764 6g 9384 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 3F 3H 2K 2T 2R b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor

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

a Pension Schedules

- (1)** ☒ **R** (Retirement Plan Information)
- (2)** ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3)** ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

b General Schedules

- (1)** ☒ **H** (Financial Information)
- (2)** ☐ **I** (Financial Information – Small Plan)
- (3)** ☒ 4 **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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier KNIGHTS OF COLUMBUS

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
06-0416470	58033	NOT PROVIDED	2	01/01/2019	12/31/2019

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶ [ON FILE WITH INSURANCE COMMISSIONER](#)

b Premiums paid to carrier.....	6b	2230
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☒ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year.....	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account.....	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions.....	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions.....	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☒ Yes ☐ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

THE CONTRACT NUMBER FOR THIS INSURANCE CONTRACT WAS NOT PROVIDED.

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier MODERN WOODMEN OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
36-1493430	57541	7189345	1	01/01/2019	12/31/2019

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.	
(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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

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

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

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

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	(c) Amount	(d) Purpose	

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	(c) Amount	(d) Purpose	

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶ [ON FILE WITH INSURANCE COMMISSIONER](#)

b Premiums paid to carrier.....	6b	924
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☒ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year.....	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account.....	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions.....	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions.....	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier NORTHWESTERN MUTUAL

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
39-0509570	67091	75941	3	01/01/2019	12/31/2019

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	8

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
--

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid MITCHELL B. GLOVER 55 CAMPAU AVE NW STE 400 GRAND RAPIDS, MI 49503
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	8	PERSISTENCY FEES AND OTHER COMPENSATION	3

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶ [ON FILE WITH INSURANCE COMMISSIONER](#)

b Premiums paid to carrier.....	6b	987
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☒ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year.....	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account.....	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions.....	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions.....	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
---------------	---

1 Coverage Information:

(a) Name of insurance carrier PRUDENTIAL INSURANCE COMPANY
--

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	09108N	10	01/01/2019	12/31/2019

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid 38	(b) Total amount of fees paid 0
---	---

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).
--

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid JIM KONTZ 214 WEST COLLEGE DRIVE MARSHALL, MN 56258
--

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
38			3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end	5	

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶ [ON FILE WITH INSURANCE COMMISSIONER](#)

b Premiums paid to carrier.....	6b	7321
c Premiums due but unpaid at the end of the year.....	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☒ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year.....	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
(2) Dividends and credits	7c(2)	
(3) Interest credited during the year	7c(3)	
(4) Transferred from separate account.....	7c(4)	
(5) Other (specify below)	7c(5)	
▶		
(6) Total additions.....	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account.....	7e(3)	
(4) Other (specify below)	7e(4)	
▶		
(5) Total deductions.....	7e(5)	0
f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received.....	9a(1)		
(2) Increase (decrease) in amount due but unpaid.....	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3)).....		9a(4)	0
b Benefit charges (1) Claims paid.....	9b(1)		
(2) Increase (decrease) in claim reserves.....	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees.....	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses.....	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies.....	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention.....		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves.....		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.....	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

<div>SCHEDULE C</div> <div>(Form 5500)</div> <div>Department of the Treasury Internal Revenue Service</div> <div>Department of Labor Employee Benefits Security Administration</div> <div>Pension Benefit Guaranty Corporation</div>	<div>Service Provider Information</div> <div>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</div> <div>▶ File as an attachment to Form 5500.</div>	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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771	

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
VANGUARD
23-1945930

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
PZENA INVESTMENT MANAGEMENT
320 PARK AVENUE 8TH FLOOR NEW YORK, NY 10022

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
STATE STREET GLOBAL ADVISORS
81-4017137

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
COMMINGLED PENSION TRUST OF JPMORGA
45-5590883

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165037

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165154

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165198

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165348

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165392

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165449

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1165477

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

COMMINGLED PENSION TRUST OF JPMORGA

26-1164871

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

GALLIARD CAPITAL MANAGEMENT, INC.

41-1813702

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

SEI TRUST COMPANY

06-1271230

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

BLACKROCK INSTITUTIONAL TRUST COMPA

94-3112180

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

RELIANCE TRUST

58-1428634

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

PRUDENTIAL TRUST COMPANY

23-6994310

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

WELLS FARGO BANK, N.A.

47-6524425

(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

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)

FIDELITY TRUST COMPANY

04-2647786

(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?
64 65 71 28 37 68	NONE	671233	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

STRATEGIC ADVISORS, INC.

04-2654524

(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 51	NONE	440167	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TOWERS WATSON INVESTMENTS SERVICES

52-1868818

(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 51 28 17 31 50	NONE	276236	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

ARROWMARK PARTNERS

39-2068140

(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	215089	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

INTECH

01-0614895

(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	36843	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CLIFTONLARSONALLEN LLP

41-0746749

(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	20200	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

4 Provide, to the extent possible, the following information for each service provider who failed or refused to provide the information necessary to complete this Schedule.

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

Part III Termination Information on Accountants and Enrolled Actuaries (see instructions)
(complete as many entries as needed)

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

a Name:	b EIN:
c Position:	
d Address:	e Telephone:

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	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 <div style="border: 1px solid black; text-align: center; padding: 10px; font-weight: bold; font-size: 1.2em;">2019</div> 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>SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>SCHWANS SHARED SERVICES, LLC</u>	D Employer Identification Number (EIN) <u>81-0572771</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: SSGA S&P 500 FLAGSHIP NON-LENDING S

b Name of sponsor of entity listed in (a): STATE STREET BANK & TRUST COMPANY

c EIN-PN <u>04-0025081-085</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>10980694</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: WELLS FARGO STABLE RETURN FUND W

b Name of sponsor of entity listed in (a): GALLIARD CAPITAL MANAGEMENT

c EIN-PN <u>41-1813702-001</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>74230504</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PZENA INTERNATIONAL EXP VALUE ACWI

b Name of sponsor of entity listed in (a): RELIANCE TRUST COMPANY

c EIN-PN <u>90-6169542-007</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>11167461</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PGIM CORE PLUS BOND

b Name of sponsor of entity listed in (a): PRUDENTIAL TRUST CO.

c EIN-PN <u>23-6994310-165</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>27069975</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2020

b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY

c EIN-PN <u>26-1165037-001</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>16974777</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2025

b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY

c EIN-PN <u>26-1165154-001</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>10975389</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2030

b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY

c EIN-PN <u>26-1165198-001</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>38579609</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2035		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 26-1165348-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10507441
a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2040		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 26-1165392-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 28831778
a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE 2050		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 26-1165477-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6992934
a Name of MTIA, CCT, PSA, or 103-12 IE: JPM SMART RETIREMENT PASSIVE BLEND		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 26-1164781-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5341205
a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB SMART RETIREMENT PASSIVE 2045		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 26-1165449-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5823165
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK MSCI ACWI		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 94-3358161-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 35352855
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK US TIPS		
b Name of sponsor of entity listed in (a): BLACKROCK INSTITUTIONAL TRUST COMPANY, N.A.		
c EIN-PN 27-0535692-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5764873
a Name of MTIA, CCT, PSA, or 103-12 IE: JPMCB SMART RETIREMENT PASSIVE 2055		
b Name of sponsor of entity listed in (a): MORGAN GUARANTY TRUST COMPANY OF NY		
c EIN-PN 45-5590883-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5368806
a Name of MTIA, CCT, PSA, or 103-12 IE: EPOCH US ALL CAP EQUITY		
b Name of sponsor of entity listed in (a): EPOCH INVESTMENT PARTNERS, INC.		
c EIN-PN 81-4667969-002	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 36561286
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

(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 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 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 SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC	D Employer Identification Number (EIN) 81-0572771	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	3751586	6565502
(2) Participant contributions.....	1b(2)	32168	0
(3) Other.....	1b(3)	2942973	808501
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)	2138886	3801441
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other.....	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)	61611673	58663645
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property).....	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans.....	1c(8)	12787491	9474452
(9) Value of interest in common/collective trusts	1c(9)	367507870	330522752
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds).....	1c(13)	133418057	125068914
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	773003	523254

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	584963707	535428461

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	379347	191877
i Acquisition indebtedness	1i		
j Other liabilities	1j	163151	713929
k Total liabilities (add all amounts in lines 1g through 1j)	1k	542498	905806

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	584421209	534522655
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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 Contributions:**

		(a) Amount	(b) Total
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	13895300	
(B) Participants	2a(1)(B)	19437252	
(C) Others (including rollovers)	2a(1)(C)	2969324	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		36301876

b Earnings on investments:**(1) Interest:**

(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	59971	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	559535	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		619506

(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	696925	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	3427578	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		4124503

(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	65145493	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	55839190	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		9306303
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	7132320	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		7132320

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		52161699
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		29998919
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		139645126

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	79699568	
(2) To insurance carriers for the provision of benefits	2e(2)	11462	
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		79711030
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)	633983	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	1025785	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		1659768
j Total expenses. Add all expense amounts in column (b) and enter total	2j		81370798

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		58274328
l Transfers of assets:			
(1) To this plan	2l(1)		14645707
(2) From this plan	2l(2)		122818589

Part III Accountant's Opinion

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

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

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

b 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: CLIFTONLARSONALLEN LLP

(2) EIN: 41-0746749

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 lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

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.)

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.)

	Yes	No	Amount
4a		X	
4b		X	

	Yes	No	Amount
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		10000000
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 have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked, and see instructions for format requirements.)		X	
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		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.			
4n			

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
CYGNUS HOME SERVICE RETIREMENT SAVINGS PLAN	41-0879087	001

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.)

<div>SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation</div>	<div>Retirement Plan Information</div> <div>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).</div> <div>▶ File as an attachment to Form 5500.</div>	<div>OMB No. 1210-0110</div> <div>2019</div> <div>This Form is Open to Public Inspection.</div>
For calendar plan year 2019 or fiscal plan year beginning 01/01/2019 and ending 12/31/2019		
A Name of plan SCHWAN'S COMPANY RETIREMENT SAVINGS PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SCHWANS SHARED SERVICES, LLC		D Employer Identification Number (EIN) 81-0572771
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions		1 0
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): 04-6568107		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month Day Year If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
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 _____

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN**

**FINANCIAL STATEMENTS AND
SUPPLEMENTAL INFORMATION**

YEARS ENDED DECEMBER 31, 2019 AND 2018

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
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YEARS ENDED DECEMBER 31, 2019 AND 2018**

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INDEPENDENT AUDITORS' REPORT

Plan Administrator
Schwan's Company Retirement Savings Plan
Marshall, Minnesota

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of Schwan's Company Retirement Savings 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.

Auditors' 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 3, which was certified by Fidelity Management Trust Company, the trustee of the Plan, except for comparing such 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

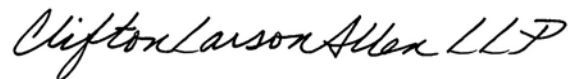
Because of the significance of the matter described in the *Basis for Disclaimer of Opinion* paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedule of assets (held at end of year) as of December 31, 2019 is required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and is presented for the purpose of additional analysis and is 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 schedule.

Report on Form and Content in Compliance with Department of Labor Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedule, 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.

A handwritten signature in cursive script that reads "CliftonLarsonAllen LLP".

CliftonLarsonAllen LLP

Minneapolis, Minnesota
September 17, 2020

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2019 AND 2018**

	<u>2019</u>	<u>2018</u>
ASSETS		
INVESTMENTS (at Fair Value)	\$ 518,056,752	\$ 564,676,486
RECEIVABLES		
Interest and Dividends	57,013	49,979
Employer Contributions	6,565,502	3,751,586
Employee Contributions	-	32,168
Notes Receivable from Participants	9,713,961	13,175,318
Schwan's Mama Rosa's, LLC 401(k) Plan Transfer In	-	2,892,994
Equity Fund Receivable	751,488	-
Total Receivables	<u>17,087,964</u>	<u>19,902,045</u>
Total Assets	535,144,716	584,578,531
LIABILITIES		
ACCOUNTS PAYABLE	191,877	379,347
AMOUNTS DUE TO BROKERS FOR SECURITIES PURCHASED	<u>713,929</u>	<u>163,151</u>
Total Liabilities	<u>905,806</u>	<u>542,498</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 534,238,910</u></u>	<u><u>\$ 584,036,033</u></u>

See accompanying Notes to Financial Statements.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2019 AND 2018**

	<u>2019</u>	<u>2018</u>
ADDITIONS TO (DEDUCTIONS FROM) NET ASSETS AVAILABLE FOR BENEFITS ATTRIBUTED TO:		
INVESTMENT INCOME (LOSS)		
Net Appreciation (Depreciation) in Fair Value of Investments	\$ 98,848,990	\$ (37,818,606)
Interest and Dividends	4,184,474	4,364,634
Total Investment Income (Loss)	103,033,464	(33,453,972)
Less: Investment Management Fees	(1,025,785)	(1,322,332)
Net Investment Income (Loss)	102,007,679	(34,776,304)
INTEREST INCOME ON NOTES RECEIVABLE FROM PARTICIPANTS	559,535	637,147
CONTRIBUTIONS		
Employee 401(k) Deferrals	19,437,252	22,124,168
Employer Match	7,403,725	8,754,447
Employer Profit Sharing	6,491,575	3,784,743
Rollovers	2,969,324	2,757,356
Total Contributions	36,301,876	37,420,714
BENEFITS PAID TO PARTICIPANTS	(79,847,886)	(67,301,872)
INSURANCE PREMIUMS	(11,462)	(17,624)
ADMINISTRATIVE EXPENSES	(633,983)	(805,110)
NET INCREASE (DECREASE) PRIOR TO PLAN TRANSFERS	58,375,759	(64,843,049)
PLAN TO PLAN TRANSFER OUT	(122,818,589)	-
PLAN TO PLAN TRANSFER IN	14,645,707	2,892,994
NET INCREASE (DECREASE) AFTER PLAN TRANSFER	(49,797,123)	(61,950,055)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of Year	584,036,033	645,986,088
End of Year	<u>\$ 534,238,910</u>	<u>\$ 584,036,033</u>

See accompanying Notes to Financial Statements.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 1 DESCRIPTION OF PLAN

The following description of Schwan's Company Retirement Savings Plan (the Plan) provides general information only. The Plan is for eligible employees of Schwan's Company subsidiaries (the Company). 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 established in 1964 and most recently restated effective January 31, 2017. The Plan generally covers all employees of Schwan's Home Service, Inc., Schwan's Consumer Brands, Inc., Schwan's Food Service, Inc., SFC Global Supply Chain, Inc., and Schwan's Shared Services, LLC, except those covered by certain collective bargaining agreements.

Effective January 1, 2018, the Plan was amended to include Schwan's Strategic Partner Solutions and Schwan's Culinary Initiatives, LLC as employers.

Effective January 1, 2019, the Plan amended to include an additional excluded item when determining a participant's certified earnings. The additional excluded item is any payment to a participant who is classified as an exempt employee for the purpose of temporarily subsidizing such participant's employee benefits following an acquisition.

Effective January 1, 2019, the Plan was amended to remove the six-month suspension of deferrals for those who receive a hardship distribution and also removed the requirement to secure a loan prior to obtaining a hardship distribution.

Effective January 1, 2019, the Plan was amended to remove Schwan's Strategic Partner Solutions as an employer.

Effective December 31, 2018, the Plan merged in assets from the Schwan's Mama Rosa's LLC H 401(k) Plan. Effective January 1, 2019 the Plan was amended to include the transfer the accounts of current or former noncollectively bargained employees of the Better Baked Foods, LLC 401(k) Plan.

Effective February 24, 2019, the Plan was amended to establish a new plan for employees who work for Schwan's Home Service, Inc.

Effective May 31, 2019, the Plan was amended to exclude from qualified employment, employment as a foreign national who is temporarily working on assignment in the United States.

Effective September 9, 2019, the Plan was amended to include an individual retirement account described in section 408(a) of the Code as an eligible contribution.

Effective December 17, 2019, the Plan was amended to include Beneficiary to have the right to designate one or more primary Beneficiaries to receive all or a portion of the individual's Vested Total Account upon death of the individual.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Eligibility

Employees are eligible to immediately participate in the deferral and match components of the Plan upon hire. Employees are eligible for the discretionary annual contribution if they complete 500 hours of service during the year and are employed on the last day of the Plan year. Wages paid to employees while eligible for an annual bonus plan are not eligible for the employer discretionary annual contribution.

Contributions

Each year, participants may contribute up to 75% of pretax and/or after-tax (Roth) annual compensation as defined, by the Plan, subject to certain limitations. The Plan includes an auto-enrollment feature whereby all newly eligible participants are enrolled at 1%. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans. Participants age 50 or older may contribute additional amounts known as "catch-up" contributions. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan currently offers several investment options with varying investment objectives. Participants may invest in self-directed funds that are not affiliated with the investment options of the Plan.

The Plan provides for discretionary annual contributions as determined by the Company's Board of Directors. Employer contributions are not to exceed the maximum allowable amounts deductible by the Company under the provisions of the Internal Revenue Code (IRC). Profit sharing amounts are contributed at the option of the Company's Board of Directors and are invested in a portfolio of investments as directed by each participant. Discretionary contributions of \$6,491,575 and \$3,784,743 were made for the years ended December 31, 2019 and 2018, respectively. Contributions are subject to certain limitations.

The Plan provides matching contributions. The Company's matching contribution is 50% of the first 6% of employee deferrals.

Participant Accounts

Each participant's account may be credited with the participant's contribution, matching contributions and/or allocations of the Company's contributions, Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are vested immediately in their 401(k), rollover, voluntary matching, merger accounts and discretionary contributions plus actual earnings thereon.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 1 DESCRIPTION OF PLAN (CONTINUED)

Notes Receivable from Participants

The Plan allows participants to borrow from their 401(k), matching, discretionary, rollover, and merger accounts. Participants may apply for a loan of up to 50% of the total vested value of their balance or \$50,000 minus the highest outstanding loan balance in the last 12-month period. The minimum loan is \$1,000 with no more than one loan outstanding at one time. Loans are repayable in equal periodic installments over the life of the loan which is required to be no more than five years. Interest rates on loans shall be equal to 1% over the prime rate of interest charged by large United States money center commercial banks.

Forfeitures

Forfeitures are used to reduce the Company's contributions or for other purposes as allowed by the Plan document. There were \$112,441 and \$549 of forfeited nonvested accounts as of December 31, 2019 and 2018, respectively. Forfeitures of \$37,769 and \$625 were used to restore participant accounts as of December 31, 2019 and 2018, respectively. Forfeitures of \$45,636 and \$57,550 were used to pay Plan expenses for the years ended December 31, 2019 and 2018, respectively. Forfeitures of \$-0- were used to reduce Company contributions for the years ended December 31, 2019 and 2018.

Payment of Benefits

On termination of service, including due to death, disability, or retirement, a participant is eligible to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. If a participant terminates employment and the participant's vested account balance is less than \$1,000, the Plan administrator will authorize the benefit payment without the participant's consent (automatic distribution). Automatic distributions between \$1,000 and \$5,000 without the participants consent will be paid in a direct rollover to an Individual Retirement Account (IRA). The Plan allows for in-service distributions from participants' 401(k), matching, discretionary, rollover and merger accounts in the case of attainment of age 59½. The Plan also allows for financial hardship withdrawals from participant's 401(k) (excluding earnings), discretionary, rollover and merger accounts subject to certain restrictions.

Life Insurance Contracts

In previous years, participants were able to invest in allocated insurance contracts. New contracts are no longer permitted. These contracts have been excluded from Plan assets in accordance with accounting principles generally accepted in the United States of America.

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Expenses

Recordkeeping, trustee, administrative and investment related expenses are paid by the Plan. Expenses not paid by the Plan are paid by the Company.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 2 SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Investment Valuation and Income Recognition

The Plan's investments are valued at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for a discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation or depreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year. For certain investments held in the Plan, investment fees are reported as part of the net appreciation or depreciation.

Payment of Benefits

Benefits are recorded when paid.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Actual results could differ from those estimates.

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

NOTE 3 INVESTMENTS AND CERTIFICATION OF INVESTMENT INFORMATION

Fidelity Management Trust Company, the trustee, has supplied the Plan administrator with a certification as to the completeness and accuracy of notes receivable from participants and investment information presented in the accompany statements of net assets available for benefits as of December 31, 2019 and 2018, and the statements of changes in net assets available for benefits for the years then ended and the supplemental schedule of assets (held at end of year) as of December 31, 2019.

NOTE 4 FAIR VALUE OF INVESTMENTS

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the 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).

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

The three levels of the fair value hierarchy are described as follows:

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 other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

The asset 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 valuation methodologies used at December 31, 2019 and 2018.

The investments in interest-bearing cash are valued at amortized cost which approximates fair value.

Common stocks are valued at the closing price reported in the active market in which the individual security is traded.

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

Common collective trusts are valued at the NAV of units of the bank collective trust. The NAV is determined and published daily and is the basis for current transactions.

Self-directed brokerage accounts consist of mutual funds, common stocks, exchange traded funds, and cash that are valued on the basis of readily determinable market prices.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 4 FAIR VALUE OF INVESTMENTS (CONTINUED)

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31:

	2019			
	Level 1	Level 2	Level 3	Total
Assets:				
Interest Bearing Cash	\$ -	\$ 2,864,342	\$ -	\$ 2,864,342
Common Stocks	54,772,687	-	-	54,772,687
Common Collective Trusts	-	330,522,752	-	330,522,752
Self-Directed Brokerage	9,332,047	-	-	9,332,047
Mutual Funds	120,564,924	-	-	120,564,924
Total Investments at Fair Value	<u>\$ 184,669,658</u>	<u>\$ 333,387,094</u>	<u>\$ -</u>	<u>\$ 518,056,752</u>

	2018			
	Level 1	Level 2	Level 3	Total
Assets:				
Interest Bearing Cash	\$ -	\$ 930,944	\$ -	\$ 930,944
Common Stocks	58,840,614	-	-	58,840,614
Common Collective Trusts	-	367,507,870	-	367,507,870
Self-Directed Brokerage	6,405,678	-	-	6,405,678
Mutual Funds	130,991,380	-	-	130,991,380
Total Investments at Fair Value	<u>\$ 196,237,672</u>	<u>\$ 368,438,814</u>	<u>\$ -</u>	<u>\$ 564,676,486</u>

NOTE 5 PLAN TAX STATUS

The Company has received a favorable determination letter dated February 2, 2018, from the Internal Revenue Service (IRS) indicating that the Plan is qualified under Section 401(a) of the IRC and that the related trust is exempt from federal income taxation under Code Section 501(a). The Plan has been amended since receiving the determination letter; however, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

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 IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 6 PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). Benefits will be distributed to the participant in accordance with the benefit distribution rules.

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 7 PARTY-IN-INTEREST TRANSACTIONS

Transactions resulting in Plan assets being transferred to or used by a related party are prohibited by ERISA unless a specific exemption applies. Fidelity Management Trust Company is a party-in-interest as defined by ERISA as a result of investing Plan assets in the investment funds and payment of fees. However, such transactions are exempt under Section 408(b)(8) and are not prohibited by ERISA. Total fees paid to Fidelity for trustee and recordkeeping fees were \$785,510 and \$834,808 for the years ended December 31, 2019 and 2018, respectively. Total fees paid to Willis Towers Watson for fiduciary services were \$291,189 and \$291,270 for the years ended December 31, 2019 and 2018, respectively. Plan management has evaluated and concluded that these transactions are considered arms-length transactions.

NOTE 8 RISKS AND UNCERTAINTIES

The Plan provides for investment in a variety of investment funds. In general, investments are exposed to various risks, such as interest rate, credit, and overall market volatility risk. Due to the level of risk associated with certain investments, it is reasonably possible that changes in the values of the investments will occur in the near term and that such changes could materially affect participants' account balance and the amounts reported in the statements of net assets available for benefits.

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The Plan is required to submit an annual Form 5500 to the Department of Labor. The following is a reconciliation of net assets available for benefits per the Plan's financial statements to Form 5500 as of December 31:

	<u>2019</u>	<u>2018</u>
Net Assets Available for Benefits Per the Financial Statements	\$ 534,238,910	\$ 584,036,033
Allocated Life Insurance Policies	523,254	773,003
Defaulted Loans	<u>(239,509)</u>	<u>(387,827)</u>
Net Assets Available for Benefits Per Form 5500	<u>\$ 534,522,655</u>	<u>\$ 584,421,209</u>

The following is a reconciliation of distributions to participants per the financial statements to Form 5500 for the year ended December 31:

	<u>2019</u>
Distributions to Participants Per the Financial Statements	\$ 79,847,886
Add: Loans in Default at End of Year	239,509
Less: Loans in Default at Beginning of Year	<u>(387,827)</u>
Benefits Paid to Participants Per Form 5500	<u>\$ 79,699,568</u>

**SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2019 AND 2018**

NOTE 9 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500 (CONTINUED)

The following is a reconciliation of investment income per the financial statements to Form 5500 for the year ended December 31:

	<u>2019</u>
Total Investment Income	
per the Financial Statements	\$ 103,033,464
Less: Change in Life Insurance Policies Value	(249,749)
Add: Participant Loan Interest	<u>559,535</u>
Total Investment Income per Form 5500	<u><u>\$ 103,343,250</u></u>

NOTE 10 PLAN MERGERS

Effective December 31, 2018, assets of \$2,892,994 from the Schwan's Mama Rosa's LLC H 401(k) Plan merged into the Plan. Assets of \$87,206 from Schwan's Mama Rosa's LLC H 401(k) Plan were transferred during the 2019 Plan year.

Effective January 1, 2019, current or former noncollectively bargained participants of Better Baked Foods, LLC 401(k) Plan were transferred into this Plan with participant balances in the amount of \$14,558,501 transferring into the Plan.

NOTE 11 PLAN TO PLAN TRANSFERS OUT

Effective February 24, 2019, participants who worked for Schwan's Home Service, Inc. were spun-out and separated from the Plan into a newly created plan. Participant balances of \$122,818,589 were transferred out of the Plan.

NOTE 12 SUBSEQUENT EVENTS

In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through September 17, 2020, the date the financial statements were available to be issued.

Effective April 8, 2020, the Plan was amended to suspend guaranteed Non-Safe Harbor Matching Contributions.

Effective April 9, 2020, certain provisions under the CARES Act relating to participant distributions and participant loans were enacted. The CARES Act allows for utilization of these provisions immediately, but requires formal adoption of the amendment no later than the last day of the plan year beginning on or after January 1, 2022. As of September 17, 2020, the Plan has not been formally amended to adopt these provisions.

SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
E.I.N. 81-0572771 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	JPMORGAN PRIME MONEY MARKET	Interest Bearing Cash	**	\$ 2,864,342
	2U INC	Corporate Stocks - Common	**	402,144
	ABBOTT LABORATORIES	Corporate Stocks - Common	**	70,617
	ABBVIE INC	Corporate Stocks - Common	**	320,426
	ABIOMED INC	Corporate Stocks - Common	**	200,614
	ABM INDUSTRIES INC	Corporate Stocks - Common	**	595,975
	ACCENTURE PLC CL A	Corporate Stocks - Common	**	14,529
	ACTIVISION BLIZZARD INC	Corporate Stocks - Common	**	55,855
	ADOBE INC	Corporate Stocks - Common	**	116,753
	AES CORP	Corporate Stocks - Common	**	190,045
	AGIOS PHARMACEUTICALS INC	Corporate Stocks - Common	**	211,724
	AIR PRODUCTS & CHEMICALS INC	Corporate Stocks - Common	**	425,542
	ALIGN TECHNOLOGY INC	Corporate Stocks - Common	**	126,684
	ALLSTATE CORPORATION	Corporate Stocks - Common	**	165,381
	ALLY FINANCIAL INC	Corporate Stocks - Common	**	7,884
	ALPHABET INC CL A	Corporate Stocks - Common	**	70,988
	ALPHABET INC CL C	Corporate Stocks - Common	**	33,426
	AMAZON.COM INC	Corporate Stocks - Common	**	545,113
	AMDOCS LTD	Corporate Stocks - Common	**	9,929
	AMERICAN EXPRESS CO	Corporate Stocks - Common	**	272,011
	AMERICAN FINL GROUP INC OHIO	Corporate Stocks - Common	**	80,702
	AMERICAN INTERNATIONAL GROUP	Corporate Stocks - Common	**	93,010
	AMERIPRISE FINANCIAL INC	Corporate Stocks - Common	**	84,123
	AMETEK INC NEW	Corporate Stocks - Common	**	26,830
	AMPHENOL CORPORATION CL A	Corporate Stocks - Common	**	25,927
	APACHE CORP	Corporate Stocks - Common	**	10,645
	APPLE INC	Corporate Stocks - Common	**	712,982
	APTARGROUP INC	Corporate Stocks - Common	**	46,479
	ARTHUR J GALLAGHER AND CO	Corporate Stocks - Common	**	27,807
	ASHLAND GLOBAL HOLDINGS INC	Corporate Stocks - Common	**	4,056
	ASPEN TECHNOLOGIES	Corporate Stocks - Common	**	22,977
	ASSOCIATED BANC CORP	Corporate Stocks - Common	**	28,057
	ASSURANT INC	Corporate Stocks - Common	**	29,886
	AT&T INC	Corporate Stocks - Common	**	201,145
	ATHENE HOLDING LTD	Corporate Stocks - Common	**	34,520
	AUTODESK INC	Corporate Stocks - Common	**	52,103
	AVERY DENNISON CORP	Corporate Stocks - Common	**	36,237
	AXALTA COATING SYSTEMS LTD	Corporate Stocks - Common	**	46,846
	AXIS CAPITAL HOLDINGS LTD	Corporate Stocks - Common	**	133,286
	AXOGEN INC	Corporate Stocks - Common	**	311,823
	BANK OF NEW YORK MELLON CORP	Corporate Stocks - Common	**	56,269
	BANK OZK	Corporate Stocks - Common	**	130,043
	BELDEN INC	Corporate Stocks - Common	**	428,845

SCHWAN'S COMPANY
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SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	BERKSHIRE HATHAWAY INC CL B	Corporate Stocks - Common	**	\$ 103,737
	BEST BUY CO INC	Corporate Stocks - Common	**	347,814
	BIOMARIN PHARMACEUTICAL INC	Corporate Stocks - Common	**	33,735
	BIOTELEMETRY INC	Corporate Stocks - Common	**	522,079
	BLOCK H & R INC	Corporate Stocks - Common	**	23,858
	BLUEBIRD BIO INC	Corporate Stocks - Common	**	33,433
	BOEING CO	Corporate Stocks - Common	**	28,993
	BROADCOM INC	Corporate Stocks - Common	**	243,335
	BROADRIDGE FINANCIAL SOL	Corporate Stocks - Common	**	15,758
	BROOKFIELD PROPERTY REIT INC CL A	Corporate Stocks - Common	**	23,093
	BROWN FORMAN CORP NON VTG CL B	Corporate Stocks - Common	**	135,616
	C N A FINANCIAL CORP	Corporate Stocks - Common	**	25,452
	CABOT CORP	Corporate Stocks - Common	**	34,975
	CADENCE DESIGN SYSTEMS INC	Corporate Stocks - Common	**	45,708
	CAMDEN PROPERTY TRUST - REIT	Corporate Stocks - Common	**	17,615
	CARGURUS INC CL A	Corporate Stocks - Common	**	189,937
	CARMAX INC	Corporate Stocks - Common	**	30,860
	CARTERS INC	Corporate Stocks - Common	**	430,253
	CATERPILLAR INC	Corporate Stocks - Common	**	31,604
	CERENCE INC	Corporate Stocks - Common	**	55,625
	CERNER CORP	Corporate Stocks - Common	**	3,237
	CF INDUSTRIES HOLDINGS INC	Corporate Stocks - Common	**	31,556
	CH ROBINSON WORLDWIDE INC	Corporate Stocks - Common	**	314,990
	CHANNELADVISOR CORP	Corporate Stocks - Common	**	90,897
	CHARTER COMMUNICATIONS INC A	Corporate Stocks - Common	**	170,263
	CHEWY INC	Corporate Stocks - Common	**	119,509
	CIMPRESS PLC	Corporate Stocks - Common	**	477,549
	CINEMARK HOLDINGS INC	Corporate Stocks - Common	**	564,686
	CISCO SYSTEMS INC	Corporate Stocks - Common	**	522,572
	CIT GROUP INC	Corporate Stocks - Common	**	22,724
	CLEAN HARBORS INC	Corporate Stocks - Common	**	717,385
	COLGATE-PALMOLIVE CO	Corporate Stocks - Common	**	44,333
	CONSOLIDATED EDISON INC	Corporate Stocks - Common	**	16,194
	COOPER COMPANIES INC	Corporate Stocks - Common	**	189,240
	CORNERSTONE ONDEMAND INC	Corporate Stocks - Common	**	370,387
	COSTAR GROUP INC	Corporate Stocks - Common	**	49,659
	COSTCO WHOLESALE CORP	Corporate Stocks - Common	**	241,602
	COUSINS PROPERTIES INC	Corporate Stocks - Common	**	31,971
	CREDIT ACCEPTANCE CORP	Corporate Stocks - Common	**	76,523
	CROWN CASTLE INTL CORP	Corporate Stocks - Common	**	224,455
	CSX CORP	Corporate Stocks - Common	**	31,404
	CVS HEALTH CORP	Corporate Stocks - Common	**	23,327
	DANAHER CORP	Corporate Stocks - Common	**	323,587
	DARDEN RESTAURANTS INC	Corporate Stocks - Common	**	76,634
	DBV TECHNOLOGIES SA SPON ADR	Corporate Stocks - Common	**	195,318
	DECIPHERA PHARMACEUTICALS INC	Corporate Stocks - Common	**	258,172
	DEERE & CO	Corporate Stocks - Common	**	281,564
	DELTA AIR INC	Corporate Stocks - Common	**	150,703
	DISH NETWORK CORP A	Corporate Stocks - Common	**	12,805

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	DOUGLAS EMMETT INC REIT	Corporate Stocks - Common	**	\$ 17,628
	DOW INC	Corporate Stocks - Common	**	10,235
	DUPONT DE NEMOURS INC	Corporate Stocks - Common	**	24,524
	DXC TECHNOLOGY CO	Corporate Stocks - Common	**	150
	EAGLE MATERIALS INC	Corporate Stocks - Common	**	25,867
	EATON CORP PLC	Corporate Stocks - Common	**	26,995
	EATON VANCE CORP NON VTG	Corporate Stocks - Common	**	136,008
	EDISON INTL	Corporate Stocks - Common	**	26,160
	EDWARDS LIFESCIENCES CORP	Corporate Stocks - Common	**	203,662
	EMERSON ELECTRIC CO	Corporate Stocks - Common	**	94,944
	ENDOLOGIX INC	Corporate Stocks - Common	**	21,919
	ENERGIZER HLDGS INC	Corporate Stocks - Common	**	32,241
	ESTEE LAUDER COS INC CL A	Corporate Stocks - Common	**	2,478
	ETSY INC	Corporate Stocks - Common	**	24,897
	EURONET WORLDWIDE INC	Corporate Stocks - Common	**	156,772
	EVERCORE INC A	Corporate Stocks - Common	**	25,942
	EVEREST REINSURANCE GROUP LTD	Corporate Stocks - Common	**	112,674
	EXACT SCIENCES CORP	Corporate Stocks - Common	**	52,344
	EXELIXIS INC	Corporate Stocks - Common	**	7,506
	FACEBOOK INC CL A	Corporate Stocks - Common	**	187,599
	FASTENAL CO	Corporate Stocks - Common	**	345,150
	FIDELITY NATIONAL FINL INC	Corporate Stocks - Common	**	142,444
	FIREEYE INC	Corporate Stocks - Common	**	290,482
	FIRSTENERGY CORP	Corporate Stocks - Common	**	61,285
	FIVE BELOW INC	Corporate Stocks - Common	**	28,641
	FLUOR CORP	Corporate Stocks - Common	**	61
	FMC CORP NEW	Corporate Stocks - Common	**	25,566
	FORD MOTOR CO	Corporate Stocks - Common	**	1,209
	FORWARD AIR CORP	Corporate Stocks - Common	**	235,662
	FOX FACTORY HOLDING CORP	Corporate Stocks - Common	**	138,862
	FREEPORT MCMORAN INC	Corporate Stocks - Common	**	9,407
	FRONTDOOR INC	Corporate Stocks - Common	**	466,281
	GARMIN LTD	Corporate Stocks - Common	**	9,756
	GARTNER INC	Corporate Stocks - Common	**	302,344
	GENERAL ELECTRIC CO	Corporate Stocks - Common	**	95,012
	GENERAL MOTORS CO	Corporate Stocks - Common	**	303,085
	GILEAD SCIENCES INC	Corporate Stocks - Common	**	129,115
	GLOBAL PAYMENTS INC	Corporate Stocks - Common	**	28,297
	GOLDMAN SACHS GROUP INC	Corporate Stocks - Common	**	25,982
	GRACE W R & CO	Corporate Stocks - Common	**	12,573
	GRAND CANYON EDUCATION INC	Corporate Stocks - Common	**	305,474
	GRAPHIC PACKAGING HOLDING CO	Corporate Stocks - Common	**	252,113
	GRAPHIC PACKAGING HOLDING CO	Corporate Stocks - Common	**	26,375
	HALLIBURTON CO	Corporate Stocks - Common	**	14,584
	HANESBRANDS INC	Corporate Stocks - Common	**	870,804
	HARTFORD FINL SVCS GROUP INC	Corporate Stocks - Common	**	113,957
	HASBRO INC	Corporate Stocks - Common	**	112,052
	HCA HEALTHCARE INC	Corporate Stocks - Common	**	90,755
	HEARTLAND EXPRESS INC	Corporate Stocks - Common	**	334,379

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	HEICO CORP	Corporate Stocks - Common	**	\$ 37,441
	HERON THERAPEUTICS INC	Corporate Stocks - Common	**	248,795
	HEWLETT PACKARD ENTERPRISE CO	Corporate Stocks - Common	**	101,153
	HONEYWELL INTL INC	Corporate Stocks - Common	**	64,605
	HOST HOTELS & RESORTS INC	Corporate Stocks - Common	**	24,948
	HP INC	Corporate Stocks - Common	**	319,370
	HUBBELL INC	Corporate Stocks - Common	**	79,084
	HUMANA INC	Corporate Stocks - Common	**	127,373
	IAC/INTERACTIVECORP	Corporate Stocks - Common	**	44,342
	ILLUMINA INC	Corporate Stocks - Common	**	30,188
	IMMUNOMEDICS INC	Corporate Stocks - Common	**	251,063
	INSULET CORP	Corporate Stocks - Common	**	124,805
	INTEGRA LIFESCIENCES HLDS CORP	Corporate Stocks - Common	**	282,833
	INTEL CORP	Corporate Stocks - Common	**	437,324
	INTERPUBLIC GROUP OF COS INC	Corporate Stocks - Common	**	5,336
	INTL BUS MACH CORP	Corporate Stocks - Common	**	195,564
	INTUIT INC	Corporate Stocks - Common	**	411,492
	INTUITIVE SURGICAL INC	Corporate Stocks - Common	**	195,080
	J2 GLOBAL INC	Corporate Stocks - Common	**	741,246
	JBG SMITH PROPERTIES	Corporate Stocks - Common	**	40,556
	JEFFERIES FINANCIAL GROUP INC	Corporate Stocks - Common	**	104,457
	JOHN BEAN TECHNOLOGIES CORP	Corporate Stocks - Common	**	514,518
	JOHNSON & JOHNSON	Corporate Stocks - Common	**	150,246
	JOHNSON CONTROLS INTERNATIONAL PLC	Corporate Stocks - Common	**	434,405
	JPMORGAN CHASE & CO	Corporate Stocks - Common	**	113,611
	JUNIPER NETWORKS INC	Corporate Stocks - Common	**	14,064
	KAR AUCTION SERVICES INC	Corporate Stocks - Common	**	25,519
	KENNAMETAL INC	Corporate Stocks - Common	**	150,622
	KEURIG DR PEPPER INC	Corporate Stocks - Common	**	27,416
	KINDER MORGAN INC	Corporate Stocks - Common	**	47,802
	KIRBY CORP	Corporate Stocks - Common	**	420,881
	KODIAK SCIENCES INC	Corporate Stocks - Common	**	196,136
	L BRANDS INC	Corporate Stocks - Common	**	36,439
	LAS VEGAS SANDS CORP	Corporate Stocks - Common	**	66,209
	LEIDOS HOLDINGS INC	Corporate Stocks - Common	**	44,834
	LENNAR CORP CL A	Corporate Stocks - Common	**	144,106
	LIBERTY FORMULA ONE-C	Corporate Stocks - Common	**	31,302
	LILLY (ELI) & CO	Corporate Stocks - Common	**	226,322
	LIONS GATE ENTERTAINMENT CORP B	Corporate Stocks - Common	**	21,935
	LOEWS CORP	Corporate Stocks - Common	**	18,214
	LOGMEIN INC	Corporate Stocks - Common	**	1,097,558
	LOWES COS INC	Corporate Stocks - Common	**	9,341
	LPL FINL HLDGS INC	Corporate Stocks - Common	**	225,551
	LPL FINL HLDGS INC	Corporate Stocks - Common	**	31,550
	LULULEMON ATHLETICA INC	Corporate Stocks - Common	**	65,331
	LYONDELLBASELL INDS CLASS A	Corporate Stocks - Common	**	25,226
	MACERICH COMPANY	Corporate Stocks - Common	**	51,202
	MACQUARIE INFRASTRUCTURE CORP	Corporate Stocks - Common	**	28,232
	MADISON SQUARE GARDEN CO/THE	Corporate Stocks - Common	**	110,910

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	MARATHON PETROLEUM CORP	Corporate Stocks - Common	**	\$ 21,088
	MARTIN MARIETTA MATERIALS INC	Corporate Stocks - Common	**	52,013
	MARVELL TECHNOLOGY GROUP LTD	Corporate Stocks - Common	**	77,145
	MASIMO CORP	Corporate Stocks - Common	**	149,051
	MATCH GROUP INC	Corporate Stocks - Common	**	87,365
	MATSON INC	Corporate Stocks - Common	**	292,373
	MAXIM INTEGRATED PRODUCTS INC	Corporate Stocks - Common	**	48,101
	MCDONALDS CORP	Corporate Stocks - Common	**	211,443
	MEDNAX INC	Corporate Stocks - Common	**	573,419
	MEDTRONIC PLC	Corporate Stocks - Common	**	5,586
	MERCK & CO INC NEW	Corporate Stocks - Common	**	610,888
	MERIT MEDICAL SYSTEMS INC	Corporate Stocks - Common	**	403,550
	METLIFE INC	Corporate Stocks - Common	**	128,699
	MICROSOFT CORP	Corporate Stocks - Common	**	1,298,186
	MIDDLEBY CORP	Corporate Stocks - Common	**	499,849
	MSC INDUSTRIAL DIRECT CO CL A	Corporate Stocks - Common	**	190,368
	NATIONAL CINEMEDIA INC	Corporate Stocks - Common	**	186,937
	NATIONAL INSTRUMENT CORP	Corporate Stocks - Common	**	8,934
	NAVIENT CORP	Corporate Stocks - Common	**	57,606
	NETAPP INC	Corporate Stocks - Common	**	19,982
	NETFLIX INC	Corporate Stocks - Common	**	129,752
	NEUROCRINE BIOSCIENCES INC	Corporate Stocks - Common	**	203,156
	NEUROCRINE BIOSCIENCES INC	Corporate Stocks - Common	**	10,534
	NEVRO CORPORATION	Corporate Stocks - Common	**	197,585
	NEW RELIC INC	Corporate Stocks - Common	**	256,006
	NEW RESIDENTIAL INVESTMENT CRP	Corporate Stocks - Common	**	78,931
	NEWMONT CORP	Corporate Stocks - Common	**	34,152
	NEWS CORP NEW CL A	Corporate Stocks - Common	**	92,433
	NEWS CORP NEW CL B	Corporate Stocks - Common	**	18,660
	NIKE INC CL B	Corporate Stocks - Common	**	268,743
	NORFOLK SOUTHERN CORP	Corporate Stocks - Common	**	36,691
	NORTHERN TRUST CORP	Corporate Stocks - Common	**	30,264
	NRG ENERGY INC	Corporate Stocks - Common	**	42,572
	NUANCE COMMUNICATIONS INC	Corporate Stocks - Common	**	350,716
	NUANCE COMMUNICATIONS INC	Corporate Stocks - Common	**	15,512
	NVENT ELECTRIC PLC	Corporate Stocks - Common	**	24,966
	NVIDIA CORP	Corporate Stocks - Common	**	54,119
	OKTA INC CL A	Corporate Stocks - Common	**	35,419
	OLD REPUBLIC INTL CORP	Corporate Stocks - Common	**	173,412
	OLIN CORP	Corporate Stocks - Common	**	22,356
	OMNICOM GROUP INC	Corporate Stocks - Common	**	152,968
	ON SEMICONDUCTOR CORP	Corporate Stocks - Common	**	503,203
	ONEMAIN HOLDINGS INC	Corporate Stocks - Common	**	47,630
	ONEOK INC	Corporate Stocks - Common	**	184,256
	ORACLE CORP	Corporate Stocks - Common	**	91,126
	OUTFRONT MEDIA INC	Corporate Stocks - Common	**	77,805
	PACKAGING CORP OF AMERICA	Corporate Stocks - Common	**	45,450
	PALO ALTO NETWORKS INC	Corporate Stocks - Common	**	3,700
	PARK HOTELS & RESORTS INC	Corporate Stocks - Common	**	12,734

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	PAYCOM SOFTWARE INC	Corporate Stocks - Common	**	\$ 61,160
	PBF ENERGY INC CL A	Corporate Stocks - Common	**	4,737
	PEGASYSTEMS INC	Corporate Stocks - Common	**	28,764
	PENSKE AUTOMOTIVE GROUP INC	Corporate Stocks - Common	**	18,682
	PHILLIPS 66	Corporate Stocks - Common	**	315,736
	PINTEREST INC CL A	Corporate Stocks - Common	**	238,928
	PLANET FITNESS INC CL A	Corporate Stocks - Common	**	47,721
	PLURALSIGHT INC	Corporate Stocks - Common	**	188,794
	POLARIS INC	Corporate Stocks - Common	**	524,569
	PRECISION BIOSCIENCES INC	Corporate Stocks - Common	**	46,907
	PRESTIGE CONSUMER HEALTHCARE INC	Corporate Stocks - Common	**	209,304
	PRICE (T ROWE)GROUP INC	Corporate Stocks - Common	**	78,830
	PROCTER & GAMBLE CO	Corporate Stocks - Common	**	200,465
	PROGRESSIVE CORP OHIO	Corporate Stocks - Common	**	209,497
	PROOFPOINT INC	Corporate Stocks - Common	**	191,568
	PROTO LABS INC	Corporate Stocks - Common	**	175,275
	PURE STORAGE INC CL A	Corporate Stocks - Common	**	26,555
	QUALCOMM INC	Corporate Stocks - Common	**	418,387
	QUEST DIAGNOSTICS INC	Corporate Stocks - Common	**	33,425
	QUIDEL CORP	Corporate Stocks - Common	**	249,625
	RALPH LAUREN CORP	Corporate Stocks - Common	**	47,399
	RAYTHEON TECHNOLOGIES CORP	Corporate Stocks - Common	**	503,942
	REALPAGE INC	Corporate Stocks - Common	**	118,304
	REINSURANCE GROUP OF AMERICA	Corporate Stocks - Common	**	21,687
	RESMED INC	Corporate Stocks - Common	**	9,763
	REVANCE THERAPEUTICS INC	Corporate Stocks - Common	**	200,473
	RIGNET INC	Corporate Stocks - Common	**	39,950
	RINGCENTRAL INC CL A	Corporate Stocks - Common	**	58,528
	RITCHIE BROS AUCTIONEERS	Corporate Stocks - Common	**	492,679
	ROKU INC CLASS A	Corporate Stocks - Common	**	30,663
	ROPER TECHNOLOGIES INC	Corporate Stocks - Common	**	63,761
	ROSS STORES INC	Corporate Stocks - Common	**	31,317
	ROYAL CARIBBEAN CRUISES LTD	Corporate Stocks - Common	**	98,760
	RPM INTERNATIONAL INC	Corporate Stocks - Common	**	135,021
	SABRE CORP	Corporate Stocks - Common	**	47,169
	SAGE THERAPEUTICS INC	Corporate Stocks - Common	**	14,943
	SALLY BEAUTY HLDGS INC	Corporate Stocks - Common	**	809,935
	SANTANDER CONSUMER USA HLDGS INC	Corporate Stocks - Common	**	36,621
	SAREPTA THERAPEUTICS INC	Corporate Stocks - Common	**	18,453
	SCHLUMBERGER LTD	Corporate Stocks - Common	**	46,613
	SEMPRA ENERGY	Corporate Stocks - Common	**	73,327
	SENSATA TECHNOLOGIES HOLDING PLC	Corporate Stocks - Common	**	775,566
	SHUTTERSTOCK INC	Corporate Stocks - Common	**	345,956
	SINCLAIR BROADCAST GROUP CL A	Corporate Stocks - Common	**	40,441
	SKECHERS USA INC CL A	Corporate Stocks - Common	**	840,909
	SMILEDIRECTCLUB INC	Corporate Stocks - Common	**	70,873
	SNAP-ON INCORPORATED	Corporate Stocks - Common	**	8,639
	SOLARWINDS CORP	Corporate Stocks - Common	**	555,016
	SONOCO PRODUCTS CO	Corporate Stocks - Common	**	71,101

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	SPECTRUM BRANDS HOLDINGS INC	Corporate Stocks - Common	**	\$ 32,466
	SPECTRUM PHARMACEUTICAL INC	Corporate Stocks - Common	**	14,262
	SPIRIT RLTY CAP INC	Corporate Stocks - Common	**	22,562
	SS&C TECHNOLOGIES HOLDINGS INC	Corporate Stocks - Common	**	511,953
	STERIS PLC	Corporate Stocks - Common	**	601,602
	STERIS PLC	Corporate Stocks - Common	**	5,792
	SWITCH INC CL A	Corporate Stocks - Common	**	224,138
	SYNCHRONY FINANCIAL	Corporate Stocks - Common	**	82,643
	SYNEOS HEALTH INC	Corporate Stocks - Common	**	383,733
	SYNOPSIS INC	Corporate Stocks - Common	**	66,120
	SYSCO CORP	Corporate Stocks - Common	**	361,834
	TAKE-TWO INTERACTV SOFTWR INC	Corporate Stocks - Common	**	76,274
	TAPESTRY INC	Corporate Stocks - Common	**	112,762
	TARGET CORP	Corporate Stocks - Common	**	274,626
	TAUBMAN CENTERS INC	Corporate Stocks - Common	**	20,861
	TENNANT CO	Corporate Stocks - Common	**	415,002
	TEXAS INSTRUMENTS INC	Corporate Stocks - Common	**	433,364
	THOR INDUSTRIES INC	Corporate Stocks - Common	**	35,403
	TJX COMPANIES INC NEW	Corporate Stocks - Common	**	11,296
	TRANE TECHNOLOGIES PLC	Corporate Stocks - Common	**	47,452
	TRANSDIGM GROUP INC	Corporate Stocks - Common	**	343,058
	TRAVELERS COMPANIES INC	Corporate Stocks - Common	**	33,690
	TRIMBLE INC	Corporate Stocks - Common	**	294,206
	TRINET GROUP INC	Corporate Stocks - Common	**	661,431
	TWILIO INC CLASS A	Corporate Stocks - Common	**	59,754
	TWITTER INC	Corporate Stocks - Common	**	81,663
	UNDER ARMOUR INC CL C	Corporate Stocks - Common	**	235,895
	UNITED PARCEL SERVICE INC CL B	Corporate Stocks - Common	**	332,333
	UNITEDHEALTH GROUP INC	Corporate Stocks - Common	**	25,282
	VAIL RESORTS INC	Corporate Stocks - Common	**	221,296
	VALERO ENERGY CORP	Corporate Stocks - Common	**	25,098
	VEEVA SYS INC CL A	Corporate Stocks - Common	**	84,115
	VERISIGN INC	Corporate Stocks - Common	**	26,590
	VERIZON COMMUNICATIONS INC	Corporate Stocks - Common	**	161,482
	VERTEX PHARMACEUTICALS INC	Corporate Stocks - Common	**	52,329
	VIACOMCBS INC CL B	Corporate Stocks - Common	**	82,214
	VICI PPTYS INC	Corporate Stocks - Common	**	68,677
	VIKING THERAPEUTICS INC	Corporate Stocks - Common	**	208,729
	VMWARE INC CL A	Corporate Stocks - Common	**	186,853
	VOYA FINANCIAL INC	Corporate Stocks - Common	**	63,175
	WALGREENS BOOTS ALLIANCE INC	Corporate Stocks - Common	**	254,471
	WALMART INC	Corporate Stocks - Common	**	499,022
	WELLCARE HEALTH PLANS INC	Corporate Stocks - Common	**	22,124
	WELLS FARGO & CO	Corporate Stocks - Common	**	99,530
	WENDYS CO	Corporate Stocks - Common	**	21,988
	WESTERN UNION CO	Corporate Stocks - Common	**	78,492
	WESTINGHOUSE AIR BRAKE TECH CORP	Corporate Stocks - Common	**	178,162
	WILEY (JOHN) & SONS INC CL A	Corporate Stocks - Common	**	23,746
	WILLIAMS COMPANIES INC	Corporate Stocks - Common	**	151,215

SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
E.I.N. 81-0572771 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	WISDOMTREE INVESTMENTS INC	Corporate Stocks - Common	**	\$ 198,087
	WOLVERINE WORLD WIDE INC	Corporate Stocks - Common	**	237,726
	WOODWARD INC	Corporate Stocks - Common	**	300,245
	WYNN RESORTS LTD	Corporate Stocks - Common	**	19,997
	XEROX HOLDINGS CORP	Corporate Stocks - Common	**	47,699
	ZOETIS INC CL A	Corporate Stocks - Common	**	38,249
	EPOCH US ALL CAP EQUITY CIT CI	Corporate Stocks - Common	**	36,561,286
	S&P 500 IND NON LENDING FND C	Corporate Stocks - Common	**	10,980,694
	JPMCB SmartRetirement Passive Blend 2020-C	Collective Funds	**	16,974,777
	JPMCB SmartRetirement Passive Blend 2025-C	Collective Funds	**	10,975,389
	JPMCB SmartRetirement Passive Blend 2030-C	Collective Funds	**	38,579,609
	JPMCB SmartRetirement Passive Blend 2035-C	Collective Funds	**	10,507,441
	JPMCB SmartRetirement Passive Blend 2040-C	Collective Funds	**	28,831,778
	JPMCB SmartRetirement Passive Blend 2045-C	Collective Funds	**	5,823,165
	JPMCB SmartRetirement Passive Blend 2050-C	Collective Funds	**	6,992,934
	JPMCB SmartRetirement Passive Blend 2055-C	Collective Funds	**	5,368,806
	JPMCB SR PB INC CF	Collective Funds	**	5,341,205
	BTC ACWI EX US NL M	Collective Funds	**	35,352,855
	BTC US TIPS NL IDX M	Collective Funds	**	5,764,873
	GALLIARD STABLE VAL	Collective Funds	**	74,230,504
	PZENA INTLEXPVL ACWI	Collective Funds	**	11,167,461
	PRU CORE PL BD CL 6	Collective Funds	**	27,069,974
	VANGUARD INSTITUTIONAL INDEX	Registered Investment Co.	**	69,798,487
	VANGUARD TOTAL BOND MARKET - IS	Registered Investment Co.	**	15,897,753
	VANGUARD EXTENDED MARKET	Registered Investment Co.	**	26,020,073
	VANGUARD REIT INDEX	Registered Investment Co.	**	8,848,611
	INSURANCE FUND	Insurance Contracts	**	523,254
*	FIDELITY BROKERAGE	Various	**	9,332,047
	PARTICIPANTS	Participant Loans		
		4.25% - 7% Interest	-	9,474,452
		Total Investments		<u>\$ 528,054,458</u>

* Indicates party-in-interest

**Cost omitted for participant-directed accounts

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	AMG YACKTMAN FUND I	600 STEAMBOAT ROAD SUITE 300 GREENWICH CT US 06830	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	AMERICAN CENTURY DIVERSIFD BOND CL	4400 MAIN ST 1ST FLOOR KANSAS CITY MO US 64111	0.05%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	BUFFALO MID CAP FUND	615 E. MICHIGAN STREET MILWAUKEE WI US 53202	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	BUFFALO GROWTH FUND	615 E. MICHIGAN STREET MILWAUKEE WI US 53202	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	CALAMOS GROWTH & INCOME CL A	2020 CALAMOS COURT NAPERVILLE IL US 60563	0.40%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	CAUSEWAY EMERGING MARKETS FUND IN	P. O. BOX 1100 OAKS PA US 19456	0.15%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	EATON VANCE GLOBAL MACRO ABSLTE RT	TWO INTERNATIONAL PLACE BOSTON MA US 02110	\$16.00
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	FEDERATED STRATEGIC VALUE DIVIDEND	4000 ERICSSON DRIVE WARRENDALE PA US 150867515	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	ALPS CORECOMM MNGMNT COMPT COMM SM	1290 BROADWAY SUITE 1100 DENVER CO US 80203	0.08%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	FIRST EAGLE OVERSEAS CLASS A	1345 AVENUE OF THE AMERICAS 48TH FL NEW YORK NY US 10105	0.40%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	FIRST EAGLE GLOBAL CLASS A	1345 AVENUE OF THE AMERICAS 48TH FL NEW YORK NY US 10105	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	GLENMEDE LARGE CAP GROWTH	1650 MARKET ST. SUITE 1200 PHILADELPHIA PA US 19103	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	JOHN HANCOCK REGIONAL BANK CL A	601 CONGRESS ST. 9TH FL. BOSTON MA US 02210	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	HARDING LOEVNER INTL EQUITY PORT IN	PO BOX 4766 CHICAGO IL US 60680	0.15%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	JOHN HANCOCK GLOBAL EQUITY FUND CLA	601 CONGRESS ST. 9TH FL. BOSTON MA US 02210	0.10%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	LAZARD DEVELOPING MRKTS EQ CL SHARE	30 ROCKEFELLER PLAZA 57TH FL. NEW YORK NY US 10112	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	METROPOLITAN WEST TOT RETURN BOND C	865 SOUTH FIGUEROA ST. #1400 LOS ANGELES CA US 90017	0.35%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	METROPOLITAN WEST TOTAL RETURN CLAS	865 SOUTH FIGUEROA ST. #1400 LOS ANGELES CA US 90017	0.10%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	MORGAN STANLEY GLOBAL OPPORTUNITY A	522 FIFTH AVENUE 4TH FLOOR NEW YORK NY US 10036	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	MORGAN STANLEY INSTLINTERNTL OPP CL	522 FIFTH AVENUE 4TH FLOOR NEW YORK NY US 10036	0.40%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO PFG AGGRESSIVE 30 FD R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO PFG 30 FUND CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO AGGRESSIVE 30 FUND CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO PFG EQUITY 30 FUND CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO PFG BALANCED 20 30 CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO DYNAMIC 20 30 FUND CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO DYNAMIC 15 25 FUND CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	RISKPRO PFG GLOBAL 30 FD CL R	777 108TH AVE NE STE 2100 BELLEVUE WA US 98004	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	PIMCO TOTAL RETURN CLASS A	1633 BROADWAY NEW YORK NY US 10019	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	PIMCO REAL RETURN CLASS A	1633 BROADWAY NEW YORK NY US 10019	0.40%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	PARNASSUS ENDEAVOR FUND	ONE MARKET STREET STEUART TOWER SUI SAN FRANCISCO CA US 94105	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	PIMCO INTL BOND FUND (UNHEDGED) A	1633 BROADWAY NEW YORK NY US 10019	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	SHELTON NASDAQ 100 INDEX	P.O. BOX 87 DENVER CO US 802010087	0.15%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	TCW EMERGING MARKETS INCOME CL N	865 SOUTH FIGUERA STREET 22ND FLOO LOS ANGELES CA US 90017	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	TOCQUEVILLE GOLD FUND	40 W 57TH STREET 19TH FL NEW YORK NY US 10019	\$16.00

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	PERFORMANCE TRUST STRATEGIC BOND FD	500 WEST MADISON SUITE 470 CHICAGO IL US 60661	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	VICTORY SYCAMORE ESTABLISHED VALUE	4900 TIEDEMAN RD 4TH FLOOR BROOKLYN OH US 44114	0.10%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WASATCH CORE GROWTH	505 WAKARA WAY SUITE 300 SALT LAKE CITY UT US 84108	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WASATCH MICRO CAP VALUE FUND	505 WAKARA WAY SUITE 300 SALT LAKE CITY UT US 84108	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WASATCH CORE GROWTH INSTITUTIONAL	505 WAKARA WAY SUITE 300 SALT LAKE CITY UT US 84108	0.10%

SCHEDULE C SUPPLEMENTAL REPORT

PART I, LINE 3 - INFORMATION ON SERVICE PROVIDERS RECEIVING INDIRECT FEES

SERVICE PROVIDER NAME <i>Part I, Line 3(a)</i>	SERVICE CODE <i>Part I, Line 3(b)</i> <i>Part I, Line 2(b)</i>	AMOUNT OF INDIRECT COMPENSATION <i>Part I, Line 3(c)</i>	NAME OF SOURCE OF INDIRECT COMPENSATION <i>Part I, Line 3(d)</i>	EIN/ADDRESS OF SOURCE OF INDIRECT COMPENSATION *1 <i>Part I, Line 3(d)</i>	DESCRIPTION OF INDIRECT COMPENSATION (ANNUALIZED FORMULA) <i>Part I, Line 3(e)</i>
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WASATCH GLOBAL VALUE FUND	505 WAKARA WAY SUITE 300 SALT LAKE CITY UT US 84108	0.40%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WCM ALTERNATIVES EVENT DRIVEN FD I	100 SUMMIT LAKE DRIVE #201 VALHALLA NY US 10595	0.12%
FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	60	\$0	WESTERN ASSET CORE BOND FUND CL I	620 8TH AVENUE 49TH FL. NEW YORK NY US 10018	0.15%

SCHEDULE C SUPPLEMENTAL REPORT

ELIGIBLE INDIRECT COMPENSATION DISCLOSURE FOR COMPLETION OF PART I, LINE 1(a) AND PART I, LINE 2(f)

FUND CODE	NAME OF SOURCE OF INDIRECT COMPENSATION	TICKER	PARTY OR PARTIES RECEIVING INDIRECT COMPENSATION	SERVICES PROVIDED OR PURPOSE OF PAYMENT FOR INDIRECT COMPENSATION	AMOUNT, ESTIMATE OF FORMULA USED TO CALCULATE INDIRECT COMPENSATION (ANNUALIZED FORMULA)
0415	FID TREASURY ONLY MM - FIDELITY MANAGEMENT & RESEARCH COMPANY	FDLXX	FIDELITY INVESTMENTS INSTITUTIONAL OPERATIONS COMPANY, INC.	FUND MANAGEMENT	0.42%
GDJJ	BLENDDED INCOME FUND		GREAT-WEST FUNDS	SEE NOTE *2	0.18%*5
OAWS	BTC ACWI EX US NL M		BLACKROCK	SEE NOTE *2	0.09%*5
OAWT	BTC US TIPS NL IDX M		BLACKROCK INSTITUTIONAL TRUST COMPANY NA	SEE NOTE *2	0.04%*5
OAWU	GALLIARD STABLE VAL		GALLIARD CAPITAL MANAGEMENT	SEE NOTE *2	0.41%*4

SCHEDULE C SUPPLEMENTAL REPORT

ELIGIBLE INDIRECT COMPENSATION DISCLOSURE FOR COMPLETION OF PART I, LINE 1(a) AND PART I, LINE 2(f)

FUND CODE	NAME OF SOURCE OF INDIRECT COMPENSATION	TICKER	PARTY OR PARTIES RECEIVING INDIRECT COMPENSATION	SERVICES PROVIDED OR PURPOSE OF PAYMENT FOR INDIRECT COMPENSATION	AMOUNT, ESTIMATE OF FORMULA USED TO CALCULATE INDIRECT COMPENSATION (ANNUALIZED FORMULA)
OAWV	PZENA INTLEXPVL ACWI		RELIANCE TRUST COMPANY	SEE NOTE *2	0.75%*4
OFVH	VANGUARD INST INDEX - VANGUARD GROUP INC	VINIX	VANGUARD	FUND MANAGEMENT	0.02%
OH6J	JPMCB SR PB INC CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.26%*4
OH6L	JPMCB SR PB 2020 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4
OH6M	JPMCB SR PB 2025 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4

SCHEDULE C SUPPLEMENTAL REPORT

ELIGIBLE INDIRECT COMPENSATION DISCLOSURE FOR COMPLETION OF PART I, LINE 1(a) AND PART I, LINE 2(f)

FUND CODE	NAME OF SOURCE OF INDIRECT COMPENSATION	TICKER	PARTY OR PARTIES RECEIVING INDIRECT COMPENSATION	SERVICES PROVIDED OR PURPOSE OF PAYMENT FOR INDIRECT COMPENSATION	AMOUNT, ESTIMATE OF FORMULA USED TO CALCULATE INDIRECT COMPENSATION (ANNUALIZED FORMULA)
OH6N	JPMCB SR PB 2030 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4
OH6O	JPMCB SR PB 2035 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4
OH6P	JPMCB SR PB 2040 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4
OH6Q	JPMCB SR PB 2045 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4
OH6R	JPMCB SR PB 2050 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.25%*4

SCHEDULE C SUPPLEMENTAL REPORT

ELIGIBLE INDIRECT COMPENSATION DISCLOSURE FOR COMPLETION OF PART I, LINE 1(a) AND PART I, LINE 2(f)

FUND CODE	NAME OF SOURCE OF INDIRECT COMPENSATION	TICKER	PARTY OR PARTIES RECEIVING INDIRECT COMPENSATION	SERVICES PROVIDED OR PURPOSE OF PAYMENT FOR INDIRECT COMPENSATION	AMOUNT, ESTIMATE OF FORMULA USED TO CALCULATE INDIRECT COMPENSATION (ANNUALIZED FORMULA)
OH6S	JPMCB SR PB 2055 CF		JPMORGAN CHASE BANK, N.A.	SEE NOTE *2	0.26%*4
OJ0T	PRU CORE PL BD CL 6		PGIM, INC	SEE NOTE *2	0.17%*5
OKBH	VAN REAL EST IDX IS - VANGUARD GROUP INC	VGSNX	VANGUARD	FUND MANAGEMENT	0.09%
OQFC	VANG TOT BD MKT INST - VANGUARD GROUP INC	VBPIX	VANGUARD	FUND MANAGEMENT	0.02%
OSID	VANG EXT MKT IDX INS - VANGUARD GROUP INC	VIEIX	VANGUARD	FUND MANAGEMENT	0.06%

Plan: 09690

The Schwan Food Company Retirement Savings Plan

Run Date: 04/20/2020

SCHEDULE C SUPPLEMENTAL REPORT

ELIGIBLE INDIRECT COMPENSATION DISCLOSURE FOR COMPLETION OF PART I, LINE 1(a) AND PART I, LINE 2(f)

FUND CODE	NAME OF SOURCE OF INDIRECT COMPENSATION	TICKER	PARTY OR PARTIES RECEIVING INDIRECT COMPENSATION	SERVICES PROVIDED OR PURPOSE OF PAYMENT FOR INDIRECT COMPENSATION	AMOUNT, ESTIMATE OF FORMULA USED TO CALCULATE INDIRECT COMPENSATION (ANNUALIZED FORMULA)
TD4H	EQUITY FUND		MULTI-MANAGER	SEE NOTE *2	0.5%*5

SCHEDULE C SUPPLEMENTAL REPORT

*1 If EIN is provided, Address will not be provided. If EIN is not available and Address is available, the Address will be displayed. If neither EIN nor Address is available "See Note *2" will be displayed.

*2 Disclosures in this report are intended to satisfy the alternative reporting option. If complete information for non-Fidelity funds and/or other third party service providers related to compensation is not available, more information for the annual operating expenses of the fund may be found in the Fee Table of the Fund Summary section of each prospectus and/or statement of additional information. In addition, information about the services provided and the identity of the entities performing services with respect to each fund may be found in the Fund Services section of each prospectus. If the compensation being reported relates to a Fidelity fund, more information for the annual operating expenses of the fund may be found in the Fee section of one or more of the following sources: investment management agreement, trust agreement, collective trust participation agreement, commingled pool participation agreement, mutual fund prospectus, statement of additional information, the fund's investment manager or annuity provider.

*3 For Self-Directed Brokerage Investments, each fund family may offer an indirect support fee paid to Fidelity Investments. Each indirect support fee paid by a fund may differ depending on the form of investment. Please contact your Fidelity representative to receive information on indirect support fees for your Self-Directed Brokerage Investments.

*4 Net Expense Ratio is displayed.

*5 Gross Expense Ratio is displayed.

*6 Disclosures in this report are intended to satisfy the alternative reporting option. If complete information for this Fund is not available, the fee information for the annual operating expenses and/or information about the services provided and identity of the entities performing the services can be found in the Fee section of one or more of the following sources: investment management agreement, trust agreement, collective trust participation agreement, commingled pool participation agreement, mutual fund prospectus, the fund's investment manager or annuity provider.

Additional Information:

Fidelity may have provided non-monetary compensation, such as meals or business entertainment, to associates or service providers during the plan year for which this data is being reported. If you believe there are associates or plan service providers who have received total non-monetary compensation, from all sources of \$5,000 or more, that are not reflected on this report, you may contact your Fidelity representative and ask for a detailed summary of non-monetary compensation provided during the plan year. For additional information, please refer to the Auditor's Guide.

Fidelity utilizes omnibus accounts at unaffiliated banks to facilitate transactions for the defined contribution plans it services as set forth in your trust or service agreement or letter of authorization. If markets permit, omnibus account balances are invested in short-term investments that generally earn a rate approximating the Target Federal Funds Rate and/or money market rates. These earnings are called "float" and are considered eligible indirect compensation for purposes of Schedule C. Fidelity uses these earnings to pay bank fees and make other required adjustments and generally retains any float earnings that exceed such fees and adjustments. Fidelity is responsible for paying bank fees to the extent they exceed float earnings.

Since the amount of float generated depends on the length of time that assets are held in the omnibus accounts, Fidelity adheres to the following specific time frames within which cash pending investment or distribution is held:

SCHEDULE C SUPPLEMENTAL REPORT

- If contributions are received by Fidelity in good order before the close of trading, Fidelity executes transactions in the investment options as of that day's closing price (the "transaction date" or "T"). Settlement of trades for most investment options occurs on the following business day ("T+1") or, in the case of certain securities including company stock, on T+2 (prior to September 5, 2017 the settlement period for certain securities including company stock was T+3).
- Exchange requests received by Fidelity in good order before the close of trading are processed in that day's nightly cycle. If investment options have identical settlement rules, exchanges between them generate no overnight balances, as money is received from one investment option and conveyed to another investment option on the same business day. If investment options have different settlement rules, balances attributable to exchanges may remain in the omnibus account for a few days if FMTC serves as trustee of the plan.
- Disbursement requests received in good order before the close of trading are processed in that day's nightly cycle, and reflected as debits from participant accounts as of that date ("T"). Proceeds attributable to disbursements are received from investment options or from the unaffiliated Plan trustee based on the settlement period for the investment options. Disbursements are made to participants on T+2 either through electronic funds transfers or by mailing a check. Disbursement proceeds distributed by check remain in the omnibus account until the check is presented for payment.

SCHWAN'S COMPANY
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SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	JPMORGAN PRIME MONEY MARKET	Interest Bearing Cash	**	\$ 2,864,342
	2U INC	Corporate Stocks - Common	**	402,144
	ABBOTT LABORATORIES	Corporate Stocks - Common	**	70,617
	ABBVIE INC	Corporate Stocks - Common	**	320,426
	ABIOMED INC	Corporate Stocks - Common	**	200,614
	ABM INDUSTRIES INC	Corporate Stocks - Common	**	595,975
	ACCENTURE PLC CL A	Corporate Stocks - Common	**	14,529
	ACTIVISION BLIZZARD INC	Corporate Stocks - Common	**	55,855
	ADOBE INC	Corporate Stocks - Common	**	116,753
	AES CORP	Corporate Stocks - Common	**	190,045
	AGIOS PHARMACEUTICALS INC	Corporate Stocks - Common	**	211,724
	AIR PRODUCTS & CHEMICALS INC	Corporate Stocks - Common	**	425,542
	ALIGN TECHNOLOGY INC	Corporate Stocks - Common	**	126,684
	ALLSTATE CORPORATION	Corporate Stocks - Common	**	165,381
	ALLY FINANCIAL INC	Corporate Stocks - Common	**	7,884
	ALPHABET INC CL A	Corporate Stocks - Common	**	70,988
	ALPHABET INC CL C	Corporate Stocks - Common	**	33,426
	AMAZON.COM INC	Corporate Stocks - Common	**	545,113
	AMDOCS LTD	Corporate Stocks - Common	**	9,929
	AMERICAN EXPRESS CO	Corporate Stocks - Common	**	272,011
	AMERICAN FINL GROUP INC OHIO	Corporate Stocks - Common	**	80,702
	AMERICAN INTERNATIONAL GROUP	Corporate Stocks - Common	**	93,010
	AMERIPRISE FINANCIAL INC	Corporate Stocks - Common	**	84,123
	AMETEK INC NEW	Corporate Stocks - Common	**	26,830
	AMPHENOL CORPORATION CL A	Corporate Stocks - Common	**	25,927
	APACHE CORP	Corporate Stocks - Common	**	10,645
	APPLE INC	Corporate Stocks - Common	**	712,982
	APTARGROUP INC	Corporate Stocks - Common	**	46,479
	ARTHUR J GALLAGHER AND CO	Corporate Stocks - Common	**	27,807
	ASHLAND GLOBAL HOLDINGS INC	Corporate Stocks - Common	**	4,056
	ASPEN TECHNOLOGIES	Corporate Stocks - Common	**	22,977
	ASSOCIATED BANC CORP	Corporate Stocks - Common	**	28,057
	ASSURANT INC	Corporate Stocks - Common	**	29,886
	AT&T INC	Corporate Stocks - Common	**	201,145
	ATHENE HOLDING LTD	Corporate Stocks - Common	**	34,520
	AUTODESK INC	Corporate Stocks - Common	**	52,103
	AVERY DENNISON CORP	Corporate Stocks - Common	**	36,237
	AXALTA COATING SYSTEMS LTD	Corporate Stocks - Common	**	46,846
	AXIS CAPITAL HOLDINGS LTD	Corporate Stocks - Common	**	133,286
	AXOGEN INC	Corporate Stocks - Common	**	311,823
	BANK OF NEW YORK MELLON CORP	Corporate Stocks - Common	**	56,269
	BANK OZK	Corporate Stocks - Common	**	130,043
	BELDEN INC	Corporate Stocks - Common	**	428,845

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SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	BERKSHIRE HATHAWAY INC CL B	Corporate Stocks - Common	**	\$ 103,737
	BEST BUY CO INC	Corporate Stocks - Common	**	347,814
	BIOMARIN PHARMACEUTICAL INC	Corporate Stocks - Common	**	33,735
	BIOTELEMETRY INC	Corporate Stocks - Common	**	522,079
	BLOCK H & R INC	Corporate Stocks - Common	**	23,858
	BLUEBIRD BIO INC	Corporate Stocks - Common	**	33,433
	BOEING CO	Corporate Stocks - Common	**	28,993
	BROADCOM INC	Corporate Stocks - Common	**	243,335
	BROADRIDGE FINANCIAL SOL	Corporate Stocks - Common	**	15,758
	BROOKFIELD PROPERTY REIT INC CL A	Corporate Stocks - Common	**	23,093
	BROWN FORMAN CORP NON VTG CL B	Corporate Stocks - Common	**	135,616
	C N A FINANCIAL CORP	Corporate Stocks - Common	**	25,452
	CABOT CORP	Corporate Stocks - Common	**	34,975
	CADENCE DESIGN SYSTEMS INC	Corporate Stocks - Common	**	45,708
	CAMDEN PROPERTY TRUST - REIT	Corporate Stocks - Common	**	17,615
	CARGURUS INC CL A	Corporate Stocks - Common	**	189,937
	CARMAX INC	Corporate Stocks - Common	**	30,860
	CARTERS INC	Corporate Stocks - Common	**	430,253
	CATERPILLAR INC	Corporate Stocks - Common	**	31,604
	CERENCE INC	Corporate Stocks - Common	**	55,625
	CERNER CORP	Corporate Stocks - Common	**	3,237
	CF INDUSTRIES HOLDINGS INC	Corporate Stocks - Common	**	31,556
	CH ROBINSON WORLDWIDE INC	Corporate Stocks - Common	**	314,990
	CHANNELADVISOR CORP	Corporate Stocks - Common	**	90,897
	CHARTER COMMUNICATIONS INC A	Corporate Stocks - Common	**	170,263
	CHEWY INC	Corporate Stocks - Common	**	119,509
	CIMPRESS PLC	Corporate Stocks - Common	**	477,549
	CINEMARK HOLDINGS INC	Corporate Stocks - Common	**	564,686
	CISCO SYSTEMS INC	Corporate Stocks - Common	**	522,572
	CIT GROUP INC	Corporate Stocks - Common	**	22,724
	CLEAN HARBORS INC	Corporate Stocks - Common	**	717,385
	COLGATE-PALMOLIVE CO	Corporate Stocks - Common	**	44,333
	CONSOLIDATED EDISON INC	Corporate Stocks - Common	**	16,194
	COOPER COMPANIES INC	Corporate Stocks - Common	**	189,240
	CORNERSTONE ONDEMAND INC	Corporate Stocks - Common	**	370,387
	COSTAR GROUP INC	Corporate Stocks - Common	**	49,659
	COSTCO WHOLESALE CORP	Corporate Stocks - Common	**	241,602
	COUSINS PROPERTIES INC	Corporate Stocks - Common	**	31,971
	CREDIT ACCEPTANCE CORP	Corporate Stocks - Common	**	76,523
	CROWN CASTLE INTL CORP	Corporate Stocks - Common	**	224,455
	CSX CORP	Corporate Stocks - Common	**	31,404
	CVS HEALTH CORP	Corporate Stocks - Common	**	23,327
	DANAHER CORP	Corporate Stocks - Common	**	323,587
	DARDEN RESTAURANTS INC	Corporate Stocks - Common	**	76,634
	DBV TECHNOLOGIES SA SPON ADR	Corporate Stocks - Common	**	195,318
	DECIPHERA PHARMACEUTICALS INC	Corporate Stocks - Common	**	258,172
	DEERE & CO	Corporate Stocks - Common	**	281,564
	DELTA AIR INC	Corporate Stocks - Common	**	150,703
	DISH NETWORK CORP A	Corporate Stocks - Common	**	12,805

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SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	DOUGLAS EMMETT INC REIT	Corporate Stocks - Common	**	\$ 17,628
	DOW INC	Corporate Stocks - Common	**	10,235
	DUPONT DE NEMOURS INC	Corporate Stocks - Common	**	24,524
	DXC TECHNOLOGY CO	Corporate Stocks - Common	**	150
	EAGLE MATERIALS INC	Corporate Stocks - Common	**	25,867
	EATON CORP PLC	Corporate Stocks - Common	**	26,995
	EATON VANCE CORP NON VTG	Corporate Stocks - Common	**	136,008
	EDISON INTL	Corporate Stocks - Common	**	26,160
	EDWARDS LIFESCIENCES CORP	Corporate Stocks - Common	**	203,662
	EMERSON ELECTRIC CO	Corporate Stocks - Common	**	94,944
	ENDOLOGIX INC	Corporate Stocks - Common	**	21,919
	ENERGIZER HLDGS INC	Corporate Stocks - Common	**	32,241
	ESTEE LAUDER COS INC CL A	Corporate Stocks - Common	**	2,478
	ETSY INC	Corporate Stocks - Common	**	24,897
	EURONET WORLDWIDE INC	Corporate Stocks - Common	**	156,772
	EVERCORE INC A	Corporate Stocks - Common	**	25,942
	EVEREST REINSURANCE GROUP LTD	Corporate Stocks - Common	**	112,674
	EXACT SCIENCES CORP	Corporate Stocks - Common	**	52,344
	EXELIXIS INC	Corporate Stocks - Common	**	7,506
	FACEBOOK INC CL A	Corporate Stocks - Common	**	187,599
	FASTENAL CO	Corporate Stocks - Common	**	345,150
	FIDELITY NATIONAL FINL INC	Corporate Stocks - Common	**	142,444
	FIREEYE INC	Corporate Stocks - Common	**	290,482
	FIRSTENERGY CORP	Corporate Stocks - Common	**	61,285
	FIVE BELOW INC	Corporate Stocks - Common	**	28,641
	FLUOR CORP	Corporate Stocks - Common	**	61
	FMC CORP NEW	Corporate Stocks - Common	**	25,566
	FORD MOTOR CO	Corporate Stocks - Common	**	1,209
	FORWARD AIR CORP	Corporate Stocks - Common	**	235,662
	FOX FACTORY HOLDING CORP	Corporate Stocks - Common	**	138,862
	FREEPORT MCMORAN INC	Corporate Stocks - Common	**	9,407
	FRONTDOOR INC	Corporate Stocks - Common	**	466,281
	GARMIN LTD	Corporate Stocks - Common	**	9,756
	GARTNER INC	Corporate Stocks - Common	**	302,344
	GENERAL ELECTRIC CO	Corporate Stocks - Common	**	95,012
	GENERAL MOTORS CO	Corporate Stocks - Common	**	303,085
	GILEAD SCIENCES INC	Corporate Stocks - Common	**	129,115
	GLOBAL PAYMENTS INC	Corporate Stocks - Common	**	28,297
	GOLDMAN SACHS GROUP INC	Corporate Stocks - Common	**	25,982
	GRACE W R & CO	Corporate Stocks - Common	**	12,573
	GRAND CANYON EDUCATION INC	Corporate Stocks - Common	**	305,474
	GRAPHIC PACKAGING HOLDING CO	Corporate Stocks - Common	**	252,113
	GRAPHIC PACKAGING HOLDING CO	Corporate Stocks - Common	**	26,375
	HALLIBURTON CO	Corporate Stocks - Common	**	14,584
	HANESBRANDS INC	Corporate Stocks - Common	**	870,804
	HARTFORD FINL SVCS GROUP INC	Corporate Stocks - Common	**	113,957
	HASBRO INC	Corporate Stocks - Common	**	112,052
	HCA HEALTHCARE INC	Corporate Stocks - Common	**	90,755
	HEARTLAND EXPRESS INC	Corporate Stocks - Common	**	334,379

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DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	HEICO CORP	Corporate Stocks - Common	**	\$ 37,441
	HERON THERAPEUTICS INC	Corporate Stocks - Common	**	248,795
	HEWLETT PACKARD ENTERPRISE CO	Corporate Stocks - Common	**	101,153
	HONEYWELL INTL INC	Corporate Stocks - Common	**	64,605
	HOST HOTELS & RESORTS INC	Corporate Stocks - Common	**	24,948
	HP INC	Corporate Stocks - Common	**	319,370
	HUBBELL INC	Corporate Stocks - Common	**	79,084
	HUMANA INC	Corporate Stocks - Common	**	127,373
	IAC/INTERACTIVECORP	Corporate Stocks - Common	**	44,342
	ILLUMINA INC	Corporate Stocks - Common	**	30,188
	IMMUNOMEDICS INC	Corporate Stocks - Common	**	251,063
	INSULET CORP	Corporate Stocks - Common	**	124,805
	INTEGRA LIFESCIENCES HLDS CORP	Corporate Stocks - Common	**	282,833
	INTEL CORP	Corporate Stocks - Common	**	437,324
	INTERPUBLIC GROUP OF COS INC	Corporate Stocks - Common	**	5,336
	INTL BUS MACH CORP	Corporate Stocks - Common	**	195,564
	INTUIT INC	Corporate Stocks - Common	**	411,492
	INTUITIVE SURGICAL INC	Corporate Stocks - Common	**	195,080
	J2 GLOBAL INC	Corporate Stocks - Common	**	741,246
	JBG SMITH PROPERTIES	Corporate Stocks - Common	**	40,556
	JEFFERIES FINANCIAL GROUP INC	Corporate Stocks - Common	**	104,457
	JOHN BEAN TECHNOLOGIES CORP	Corporate Stocks - Common	**	514,518
	JOHNSON & JOHNSON	Corporate Stocks - Common	**	150,246
	JOHNSON CONTROLS INTERNATIONAL PLC	Corporate Stocks - Common	**	434,405
	JPMORGAN CHASE & CO	Corporate Stocks - Common	**	113,611
	JUNIPER NETWORKS INC	Corporate Stocks - Common	**	14,064
	KAR AUCTION SERVICES INC	Corporate Stocks - Common	**	25,519
	KENNAMETAL INC	Corporate Stocks - Common	**	150,622
	KEURIG DR PEPPER INC	Corporate Stocks - Common	**	27,416
	KINDER MORGAN INC	Corporate Stocks - Common	**	47,802
	KIRBY CORP	Corporate Stocks - Common	**	420,881
	KODIAK SCIENCES INC	Corporate Stocks - Common	**	196,136
	L BRANDS INC	Corporate Stocks - Common	**	36,439
	LAS VEGAS SANDS CORP	Corporate Stocks - Common	**	66,209
	LEIDOS HOLDINGS INC	Corporate Stocks - Common	**	44,834
	LENNAR CORP CL A	Corporate Stocks - Common	**	144,106
	LIBERTY FORMULA ONE-C	Corporate Stocks - Common	**	31,302
	LILLY (ELI) & CO	Corporate Stocks - Common	**	226,322
	LIONS GATE ENTERTAINMENT CORP B	Corporate Stocks - Common	**	21,935
	LOEWS CORP	Corporate Stocks - Common	**	18,214
	LOGMEIN INC	Corporate Stocks - Common	**	1,097,558
	LOWES COS INC	Corporate Stocks - Common	**	9,341
	LPL FINL HLDGS INC	Corporate Stocks - Common	**	225,551
	LPL FINL HLDGS INC	Corporate Stocks - Common	**	31,550
	LULULEMON ATHLETICA INC	Corporate Stocks - Common	**	65,331
	LYONDELLBASELL INDS CLASS A	Corporate Stocks - Common	**	25,226
	MACERICH COMPANY	Corporate Stocks - Common	**	51,202
	MACQUARIE INFRASTRUCTURE CORP	Corporate Stocks - Common	**	28,232
	MADISON SQUARE GARDEN CO/THE	Corporate Stocks - Common	**	110,910

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	MARATHON PETROLEUM CORP	Corporate Stocks - Common	**	\$ 21,088
	MARTIN MARIETTA MATERIALS INC	Corporate Stocks - Common	**	52,013
	MARVELL TECHNOLOGY GROUP LTD	Corporate Stocks - Common	**	77,145
	MASIMO CORP	Corporate Stocks - Common	**	149,051
	MATCH GROUP INC	Corporate Stocks - Common	**	87,365
	MATSON INC	Corporate Stocks - Common	**	292,373
	MAXIM INTEGRATED PRODUCTS INC	Corporate Stocks - Common	**	48,101
	MCDONALDS CORP	Corporate Stocks - Common	**	211,443
	MEDNAX INC	Corporate Stocks - Common	**	573,419
	MEDTRONIC PLC	Corporate Stocks - Common	**	5,586
	MERCK & CO INC NEW	Corporate Stocks - Common	**	610,888
	MERIT MEDICAL SYSTEMS INC	Corporate Stocks - Common	**	403,550
	METLIFE INC	Corporate Stocks - Common	**	128,699
	MICROSOFT CORP	Corporate Stocks - Common	**	1,298,186
	MIDDLEBY CORP	Corporate Stocks - Common	**	499,849
	MSC INDUSTRIAL DIRECT CO CL A	Corporate Stocks - Common	**	190,368
	NATIONAL CINEMEDIA INC	Corporate Stocks - Common	**	186,937
	NATIONAL INSTRUMENT CORP	Corporate Stocks - Common	**	8,934
	NAVIENT CORP	Corporate Stocks - Common	**	57,606
	NETAPP INC	Corporate Stocks - Common	**	19,982
	NETFLIX INC	Corporate Stocks - Common	**	129,752
	NEUROCRINE BIOSCIENCES INC	Corporate Stocks - Common	**	203,156
	NEUROCRINE BIOSCIENCES INC	Corporate Stocks - Common	**	10,534
	NEVRO CORPORATION	Corporate Stocks - Common	**	197,585
	NEW RELIC INC	Corporate Stocks - Common	**	256,006
	NEW RESIDENTIAL INVESTMENT CRP	Corporate Stocks - Common	**	78,931
	NEWMONT CORP	Corporate Stocks - Common	**	34,152
	NEWS CORP NEW CL A	Corporate Stocks - Common	**	92,433
	NEWS CORP NEW CL B	Corporate Stocks - Common	**	18,660
	NIKE INC CL B	Corporate Stocks - Common	**	268,743
	NORFOLK SOUTHERN CORP	Corporate Stocks - Common	**	36,691
	NORTHERN TRUST CORP	Corporate Stocks - Common	**	30,264
	NRG ENERGY INC	Corporate Stocks - Common	**	42,572
	NUANCE COMMUNICATIONS INC	Corporate Stocks - Common	**	350,716
	NUANCE COMMUNICATIONS INC	Corporate Stocks - Common	**	15,512
	NVENT ELECTRIC PLC	Corporate Stocks - Common	**	24,966
	NVIDIA CORP	Corporate Stocks - Common	**	54,119
	OKTA INC CL A	Corporate Stocks - Common	**	35,419
	OLD REPUBLIC INTL CORP	Corporate Stocks - Common	**	173,412
	OLIN CORP	Corporate Stocks - Common	**	22,356
	OMNICOM GROUP INC	Corporate Stocks - Common	**	152,968
	ON SEMICONDUCTOR CORP	Corporate Stocks - Common	**	503,203
	ONEMAIN HOLDINGS INC	Corporate Stocks - Common	**	47,630
	ONEOK INC	Corporate Stocks - Common	**	184,256
	ORACLE CORP	Corporate Stocks - Common	**	91,126
	OUTFRONT MEDIA INC	Corporate Stocks - Common	**	77,805
	PACKAGING CORP OF AMERICA	Corporate Stocks - Common	**	45,450
	PALO ALTO NETWORKS INC	Corporate Stocks - Common	**	3,700
	PARK HOTELS & RESORTS INC	Corporate Stocks - Common	**	12,734

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SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	PAYCOM SOFTWARE INC	Corporate Stocks - Common	**	\$ 61,160
	PBF ENERGY INC CL A	Corporate Stocks - Common	**	4,737
	PEGASYSTEMS INC	Corporate Stocks - Common	**	28,764
	PENSKE AUTOMOTIVE GROUP INC	Corporate Stocks - Common	**	18,682
	PHILLIPS 66	Corporate Stocks - Common	**	315,736
	PINTEREST INC CL A	Corporate Stocks - Common	**	238,928
	PLANET FITNESS INC CL A	Corporate Stocks - Common	**	47,721
	PLURALSIGHT INC	Corporate Stocks - Common	**	188,794
	POLARIS INC	Corporate Stocks - Common	**	524,569
	PRECISION BIOSCIENCES INC	Corporate Stocks - Common	**	46,907
	PRESTIGE CONSUMER HEALTHCARE INC	Corporate Stocks - Common	**	209,304
	PRICE (T ROWE)GROUP INC	Corporate Stocks - Common	**	78,830
	PROCTER & GAMBLE CO	Corporate Stocks - Common	**	200,465
	PROGRESSIVE CORP OHIO	Corporate Stocks - Common	**	209,497
	PROOFPOINT INC	Corporate Stocks - Common	**	191,568
	PROTO LABS INC	Corporate Stocks - Common	**	175,275
	PURE STORAGE INC CL A	Corporate Stocks - Common	**	26,555
	QUALCOMM INC	Corporate Stocks - Common	**	418,387
	QUEST DIAGNOSTICS INC	Corporate Stocks - Common	**	33,425
	QUIDEL CORP	Corporate Stocks - Common	**	249,625
	RALPH LAUREN CORP	Corporate Stocks - Common	**	47,399
	RAYTHEON TECHNOLOGIES CORP	Corporate Stocks - Common	**	503,942
	REALPAGE INC	Corporate Stocks - Common	**	118,304
	REINSURANCE GROUP OF AMERICA	Corporate Stocks - Common	**	21,687
	RESMED INC	Corporate Stocks - Common	**	9,763
	REVANCE THERAPEUTICS INC	Corporate Stocks - Common	**	200,473
	RIGNET INC	Corporate Stocks - Common	**	39,950
	RINGCENTRAL INC CL A	Corporate Stocks - Common	**	58,528
	RITCHIE BROS AUCTIONEERS	Corporate Stocks - Common	**	492,679
	ROKU INC CLASS A	Corporate Stocks - Common	**	30,663
	ROPER TECHNOLOGIES INC	Corporate Stocks - Common	**	63,761
	ROSS STORES INC	Corporate Stocks - Common	**	31,317
	ROYAL CARIBBEAN CRUISES LTD	Corporate Stocks - Common	**	98,760
	RPM INTERNATIONAL INC	Corporate Stocks - Common	**	135,021
	SABRE CORP	Corporate Stocks - Common	**	47,169
	SAGE THERAPEUTICS INC	Corporate Stocks - Common	**	14,943
	SALLY BEAUTY HLDGS INC	Corporate Stocks - Common	**	809,935
	SANTANDER CONSUMER USA HLDGS INC	Corporate Stocks - Common	**	36,621
	SAREPTA THERAPEUTICS INC	Corporate Stocks - Common	**	18,453
	SCHLUMBERGER LTD	Corporate Stocks - Common	**	46,613
	SEMPRA ENERGY	Corporate Stocks - Common	**	73,327
	SENSATA TECHNOLOGIES HOLDING PLC	Corporate Stocks - Common	**	775,566
	SHUTTERSTOCK INC	Corporate Stocks - Common	**	345,956
	SINCLAIR BROADCAST GROUP CL A	Corporate Stocks - Common	**	40,441
	SKECHERS USA INC CL A	Corporate Stocks - Common	**	840,909
	SMILEDIRECTCLUB INC	Corporate Stocks - Common	**	70,873
	SNAP-ON INCORPORATED	Corporate Stocks - Common	**	8,639
	SOLARWINDS CORP	Corporate Stocks - Common	**	555,016
	SONOCO PRODUCTS CO	Corporate Stocks - Common	**	71,101

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(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	SPECTRUM BRANDS HOLDINGS INC	Corporate Stocks - Common	**	\$ 32,466
	SPECTRUM PHARMACEUTICAL INC	Corporate Stocks - Common	**	14,262
	SPIRIT RLTY CAP INC	Corporate Stocks - Common	**	22,562
	SS&C TECHNOLOGIES HOLDINGS INC	Corporate Stocks - Common	**	511,953
	STERIS PLC	Corporate Stocks - Common	**	601,602
	STERIS PLC	Corporate Stocks - Common	**	5,792
	SWITCH INC CL A	Corporate Stocks - Common	**	224,138
	SYNCHRONY FINANCIAL	Corporate Stocks - Common	**	82,643
	SYNEOS HEALTH INC	Corporate Stocks - Common	**	383,733
	SYNOPSIS INC	Corporate Stocks - Common	**	66,120
	SYSCO CORP	Corporate Stocks - Common	**	361,834
	TAKE-TWO INTERACTV SOFTWR INC	Corporate Stocks - Common	**	76,274
	TAPESTRY INC	Corporate Stocks - Common	**	112,762
	TARGET CORP	Corporate Stocks - Common	**	274,626
	TAUBMAN CENTERS INC	Corporate Stocks - Common	**	20,861
	TENNANT CO	Corporate Stocks - Common	**	415,002
	TEXAS INSTRUMENTS INC	Corporate Stocks - Common	**	433,364
	THOR INDUSTRIES INC	Corporate Stocks - Common	**	35,403
	TJX COMPANIES INC NEW	Corporate Stocks - Common	**	11,296
	TRANE TECHNOLOGIES PLC	Corporate Stocks - Common	**	47,452
	TRANSDIGM GROUP INC	Corporate Stocks - Common	**	343,058
	TRAVELERS COMPANIES INC	Corporate Stocks - Common	**	33,690
	TRIMBLE INC	Corporate Stocks - Common	**	294,206
	TRINET GROUP INC	Corporate Stocks - Common	**	661,431
	TWILIO INC CLASS A	Corporate Stocks - Common	**	59,754
	TWITTER INC	Corporate Stocks - Common	**	81,663
	UNDER ARMOUR INC CL C	Corporate Stocks - Common	**	235,895
	UNITED PARCEL SERVICE INC CL B	Corporate Stocks - Common	**	332,333
	UNITEDHEALTH GROUP INC	Corporate Stocks - Common	**	25,282
	VAIL RESORTS INC	Corporate Stocks - Common	**	221,296
	VALERO ENERGY CORP	Corporate Stocks - Common	**	25,098
	VEEVA SYS INC CL A	Corporate Stocks - Common	**	84,115
	VERISIGN INC	Corporate Stocks - Common	**	26,590
	VERIZON COMMUNICATIONS INC	Corporate Stocks - Common	**	161,482
	VERTEX PHARMACEUTICALS INC	Corporate Stocks - Common	**	52,329
	VIACOMCBS INC CL B	Corporate Stocks - Common	**	82,214
	VICI PPTYS INC	Corporate Stocks - Common	**	68,677
	VIKING THERAPEUTICS INC	Corporate Stocks - Common	**	208,729
	VMWARE INC CL A	Corporate Stocks - Common	**	186,853
	VOYA FINANCIAL INC	Corporate Stocks - Common	**	63,175
	WALGREENS BOOTS ALLIANCE INC	Corporate Stocks - Common	**	254,471
	WALMART INC	Corporate Stocks - Common	**	499,022
	WELLCARE HEALTH PLANS INC	Corporate Stocks - Common	**	22,124
	WELLS FARGO & CO	Corporate Stocks - Common	**	99,530
	WENDYS CO	Corporate Stocks - Common	**	21,988
	WESTERN UNION CO	Corporate Stocks - Common	**	78,492
	WESTINGHOUSE AIR BRAKE TECH CORP	Corporate Stocks - Common	**	178,162
	WILEY (JOHN) & SONS INC CL A	Corporate Stocks - Common	**	23,746
	WILLIAMS COMPANIES INC	Corporate Stocks - Common	**	151,215

SCHWAN'S COMPANY
RETIREMENT SAVINGS PLAN
E.I.N. 81-0572771 PLAN NO. 001
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS (HELD AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2019

(a)	(b)	(c)	(d)	(e)
	Identity of Issue, Borrower, Lessor, or Similar Party	Description of Investment	Cost	Current Value
	WISDOMTREE INVESTMENTS INC	Corporate Stocks - Common	**	\$ 198,087
	WOLVERINE WORLD WIDE INC	Corporate Stocks - Common	**	237,726
	WOODWARD INC	Corporate Stocks - Common	**	300,245
	WYNN RESORTS LTD	Corporate Stocks - Common	**	19,997
	XEROX HOLDINGS CORP	Corporate Stocks - Common	**	47,699
	ZOETIS INC CL A	Corporate Stocks - Common	**	38,249
	EPOCH US ALL CAP EQUITY CIT CI	Corporate Stocks - Common	**	36,561,286
	S&P 500 IND NON LENDING FND C	Corporate Stocks - Common	**	10,980,694
	JPMCB SmartRetirement Passive Blend 2020-C	Collective Funds	**	16,974,777
	JPMCB SmartRetirement Passive Blend 2025-C	Collective Funds	**	10,975,389
	JPMCB SmartRetirement Passive Blend 2030-C	Collective Funds	**	38,579,609
	JPMCB SmartRetirement Passive Blend 2035-C	Collective Funds	**	10,507,441
	JPMCB SmartRetirement Passive Blend 2040-C	Collective Funds	**	28,831,778
	JPMCB SmartRetirement Passive Blend 2045-C	Collective Funds	**	5,823,165
	JPMCB SmartRetirement Passive Blend 2050-C	Collective Funds	**	6,992,934
	JPMCB SmartRetirement Passive Blend 2055-C	Collective Funds	**	5,368,806
	JPMCB SR PB INC CF	Collective Funds	**	5,341,205
	BTC ACWI EX US NL M	Collective Funds	**	35,352,855
	BTC US TIPS NL IDX M	Collective Funds	**	5,764,873
	GALLIARD STABLE VAL	Collective Funds	**	74,230,504
	PZENA INTLEXPVL ACWI	Collective Funds	**	11,167,461
	PRU CORE PL BD CL 6	Collective Funds	**	27,069,974
	VANGUARD INSTITUTIONAL INDEX	Registered Investment Co.	**	69,798,487
	VANGUARD TOTAL BOND MARKET - IS	Registered Investment Co.	**	15,897,753
	VANGUARD EXTENDED MARKET	Registered Investment Co.	**	26,020,073
	VANGUARD REIT INDEX	Registered Investment Co.	**	8,848,611
	INSURANCE FUND	Insurance Contracts	**	523,254
*	FIDELITY BROKERAGE	Various	**	9,332,047
	PARTICIPANTS	Participant Loans		
		4.25% - 7% Interest	-	9,474,452
		Total Investments		<u>\$ 528,054,458</u>

* Indicates party-in-interest

**Cost omitted for participant-directed accounts