Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

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

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

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan
GREEN MOUNTAIN CORP 401 (K) PROFIT SHARING PLAN AND TRUST

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/1996

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)
GREEN MOUNTAIN CORPORATION

2901 W OAKLAND PARK BLVD STE B12
OAKLAND PARK, FL 33311-1243

2b Employer Identification Number (EIN) 59-1565932

2c Plan Sponsor's telephone number 954-484-7800

2d Business code (see instructions) 451110

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/01/2021	WHITNEY STORICK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address [X] Same as Plan Sponsor

3b Administrator's EIN

3c Administrator's telephone number

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:
a Sponsor's name
c Plan Name

4b EIN

4d PN

5 Total number of participants at the beginning of the plan year	**5**	137
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines **6a(1), 6a(2), 6b, 6c,** and **6d**).		
a(1) Total number of active participants at the beginning of the plan year	**6a(1)**	137
a(2) Total number of active participants at the end of the plan year	**6a(2)**	86
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	23
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	109
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	0
f Total. Add lines **6d** and **6e**	**6f**	109
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	80
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	13
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 2J 2K 2F 2G 3D

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)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[ ]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

(1)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[ ]	0	**A** (Insurance Information)
(4)	[X]		**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 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ **File as an attachment to Form 5500.**	**2020** **This Form is Open to Public Inspection.**

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
GREEN MOUNTAIN CORP 401 (K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
GREEN MOUNTAIN CORPORATION

D Employer Identification Number (EIN)
59-1565932

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).. . . . . [X] 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

THE STORICK GROUP
2901 CLINT MOORE ROAD
SUITE 415
BOCA RATON, FL 33496

46-2772806

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

MESIROW FINANCIAL INVEST. MGMT
600 BRICKELL AVE
SUITE 2525
MIAMI, FL 33131

36-3429599

(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

(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

(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

(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

(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)

MASSACHUSETTS MUTUAL LIFE INSURANCE

1295 STATE STREET
SPRINGFIELD, MA 01111

04-1590850

(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	INVESTMENT MGMT	10670	Yes [ ] No [X]	Yes [ ] No [ ]		Yes [ ] No [ ]

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

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

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

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

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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
GREEN MOUNTAIN CORP 401 (K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
GREEN MOUNTAIN CORPORATION

D Employer Identification Number (EIN)
59-1565932

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	211518	230501
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	45407	24604
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	1822898	2164098
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)	0	0
	(2) Employer real property	1d(2)	0	0
e	Buildings and other property used in plan operation	1e	0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f	2079823	2419203
	Liabilities			
g	Benefit claims payable	1g	0	0
h	Operating payables	1h	0	0
i	Acquisition indebtedness	1i	0	0
j	Other liabilities	1j	0	0
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	2079823	2419203

Part II Income and Expense Statement

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

	Income		**(a)** Amount	**(b)** Total
a	**Contributions:**			
	(1) Received or receivable in cash from: **(A)** Employers	2a(1)(A)	17793	
	(B) Participants	2a(1)(B)	149145	
	(C) Others (including rollovers)	2a(1)(C)	203	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		167141
b	**Earnings on investments:**			
	(1) Interest:			
	(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
	(B) U.S. Government securities	2b(1)(B)		
	(C) Corporate debt instruments	2b(1)(C)		
	(D) Loans (other than to participants)	2b(1)(D)		
	(E) Participant loans	2b(1)(E)	1564	
	(F) Other	2b(1)(F)		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		1564
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)		
	(B) Common stock	2b(2)(B)		
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	46493	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		46493
	(3) Rents	2b(3)		
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)		
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)		
	(B) Other	2b(5)(B)		
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		286870
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		502068
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	92102	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		92102
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)		
(2) Contract administrator fees	2i(2)	10632	
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		10632
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		102734
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		399334
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		59954

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)** [X] Disclaimer **(4)** [ ] Adverse

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

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

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

(1) Name: STEPHEN J. BELLEME JR CPA PA **(2)** EIN: 46-1269288

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:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a		X	

			Yes	No	Amount
b	Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)	4b		X	
c	Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)	4c		X	
d	Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)	4d		X	
e	Was this plan covered by a fidelity bond?	4e	X		270000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	4f		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	4g		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	4h		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	4i	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l	Has the plan failed to provide any benefit when due under the plan?	4l		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	4n			

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)
GREEN MOUNTAIN CORP 401(K) PROFIT SHARING PLAN AND TRUST	59-1565932	002

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

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

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

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

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

OMB No. 1210-0110

2020

This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan
GREEN MOUNTAIN CORP 401 (K) PROFIT SHARING PLAN AND TRUST

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
GREEN MOUNTAIN CORPORATION

D Employer Identification Number (EIN)
59-1565932

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): 16-1470238

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

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

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

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

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

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

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

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

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

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

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

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

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

Part III Amendments

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that 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 deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

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

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

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

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

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

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

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

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

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

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE
AS OF DECEMBER 31, 2020 AND 2019 AND FOR THE YEAR ENDED DECEMBER 31, 2020

TOGETHER WITH REPORT OF INDEPENDENT AUDITOR

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
TABLE OF CONTENTS
DECEMBER 31, 2020 AND 2019

	PAGE NUMBER
Report of Independent Auditor	2-3
Financial Statements	
Statements of Net Assets Available for Benefits – Modified Cash Basis	4
Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis	5
Notes to Financial Statements – Modified Cash Basis	6-12
Supplemental Schedule –	
Form 5500, Schedule H, Part IV, Line 4i – Schedule of Assets (Held at End of Year)	13

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

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

SB CPA

REPORT OF INDEPENDENT AUDITOR

To the Plan Administrator and Trustee of
The Green Mountain Corporation 401(k) Profit Sharing Plan and Trust 001

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Green Mountain Corporation 401(k) Profit Sharing Plan & Trust 001 ("the Plan"), which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits – modified cash basis for the years then ended, and the related notes to the financial statements – modified cash basis.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note1; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits 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 2, which was certified by Massachusetts Mutual Life Insurance Company ("MassMutual"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2020 and 2019, 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.

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

Basis of Accounting

We draw attention to Note 1 to the financial statements, which describes the method of accounting. The financial statements have been prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Other Matter

The supplemental schedules of Assets (Held at End of Year) as of December 31, 2020, 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 referred to above.

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

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

Stephen J Belleme Jr., C.P.A., P.A.

Stephen J Belleme Jr CPA

Pembroke Pines, FL
September 30, 2021

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
DECEMBER 31, 2020 AND 2019

	2020	2019
Investments, at fair value	$ 2,395,417	$ 2,034,417
Notes Receivable from participants	24,606	45,407
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022	$ 2,079,824

The accompanying notes to financial statements – modified cash basis are an integral part of these statements.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
YEAR END DECEMBER 31, 2020

ADDITIONS (DECREASES) IN NET ASSETS ATTRIBUTED TO:

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	334,284
Interest income on notes receivable from participants	1,664
Contributions:	
Participants'	149,145
Employer's	17,793
Total contributions	166,938
Total additions	502,887
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	92,102
Administrative expenses	10,632
Total deductions	102,734
INCREASE IN NET ASSETS BEFORE MERGERS AND TRANSFERS	400,153
TRANSFERS	
Transfer of Assets to Plan 002, Net	(59,954)
NET INCREASE IN NET ASSETS	340,199
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	2,079,824
End of year	$ 2,420,022

The accompanying notes to financial statements – modified cash basis are an integral part of this statement.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
NOTES TO FINANCIAL STATEMENTS – MODIFIED CASH BASIS
DECEMBER 31, 2020 AND 2019

NOTE 1 – DESCRIPTION OF THE PLAN AND SIGNIFICANT ACCOUNTING POLICIES

The following description of The Green Mountain Corporation ("Company") 401(k) Profit Sharing Plan and Trust, Plan 001, ("the Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

GENERAL – For the 2020 year and going forward, the Plan is a defined contribution plan, covering all full-time employees of the Plan Sponsor aged twenty-one or older, who have completed one year of service and 900 service hours. An amendment was adopted during 2019 only which allowed eligibility for all employees of the Plan Sponsor who provided at least 250 hours of service during the plan year. The 2019 amendment is no longer applicable for the 2020 year and going forward. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan was restated January 1, 2014; there were no changes to the Plan.

PLAN TRANSFER – Effective October 31, 2020, the Plan Sponsor established Plan 002 and transferred $59,954 in December 2020 from Plan 001 to the new plan. Splitting the Plan allowed for both seasonal and part-time employees the ability to become eligible to participate in a similar version of the Plan if they are age twenty-one or older and complete one year of eligibility service, during which 200 hours of service are completed.

BASIS OF ACCOUNTING – The financial statements of the Plan are prepared on a modified cash basis of accounting for receipts and disbursements, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). This basis of presentation differs from GAAP in that employee and employer contributions are recorded when transferred to the Plan. Benefit payments to participants are recorded upon distribution. Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are recorded monthly as received. The accompanying financial statements are not intended to present the financial position and results of operations in conformity with accounting principles generally accepted in the United States of America.

CONTRIBUTIONS – Participants may contribute up to 96% of their annual compensation, as defined in the Plan. Participants self-direct the investment of their contributions into various investment options offered by the Plan. The Company contributes a matching contribution of 20% of the elective deferrals, not to exceed 4%, to the Plan.

PARTICIPANT ACCOUNTS – Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and (c) administrative expenses, if applicable.

VESTING – Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. On termination of service for death or permanent disability, a participant becomes vested 100%.

NOTES RECEIVABLE FROM PARTICIPANT – Notes receivable from participants are measured at their unpaid principal balance. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2020, no allowance for credit losses has been recorded. If a participant does not make loan repayments and management considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the Plan document. In 2020, a participant received back unpaid principal of $902 by way of a liquidating distribution. As of December 31, 2020, five loans were outstanding with interest rates ranging from 4.25% to 6.5%. The related maturity dates range from May 19, 2021 to February 25, 2024.

PAYMENT OF BENEFITS – On termination of service due to death, disability or retirement, a participant receives a lump-sum amount equal to the value of the participant's vested interest in his or her account. For termination of service due to other reasons, a participant receives the value of the vested interest in his or her account as a lump-sum distribution.

INVESTMENT OF CONTRIBUTIONS – The Plan provides participants with a sufficient number of reputable investment vehicles to allow for the participants to save for retirement with a diversified portfolio that is in accordance with their risk tolerance. As of December 31, 2020, contributions to the Plan may be invested at the participants' discretion in the following investment accounts:

AB Global Bond Fund Class Z
American Funds American High-Income Trust Class R-6
American Funds American Mutual Fund Class R-6
American Funds EuroPacific Growth Fund Class R-6
American Funds Mortgage Fund Class R-6
American Funds New Perspective Fund Class R-6
American Funds New World Class R-6
BlackRock Health Sciences Opportunities Port Class K
Columbia Contrarian Core Fund Class I-3
Columbia Seligman Communications and Information Fund Inst3
Columbia Seligman Global Technology Fund Class I-3
Columbia Small-Cap Growth Class I Inst3

DFA International Value Portfolio Institutional Class I
DFA Real Estate Securities Class I
Fixed Account
Franklin Small-Cap Value Fund Class R-6
IndexSelect Aggressive Retirement Fund Class I
IndexSelect Aggressive 2025 Fund Class I
IndexSelect Aggressive 2035 Fund Class I
IndexSelect Aggressive 2045 Fund Class I
IndexSelect Aggressive 2055 Fund Class I
IndexSelect Conservative Retirement Fund Class I
IndexSelect Conservative 2025 Fund Class I
IndexSelect Conservative 2035 Fund Class I
IndexSelect Conservative 2045 Fund Class I
IndexSelect Conservative 2055 Fund Class I
IndexSelect Moderate Retirement Fund Class I
IndexSelect Moderate 2025 Fund Class I
IndexSelect Moderate 2035 Fund Class I
IndexSelect Moderate 2045 Fund Class I
IndexSelect Moderate 2055 Fund Class I
Invesco Oppenheimer Global Opportunities Fund Class R-6
Lord Abbett Floating Rate Fund Class R-6
Lord Abbett Short Duration Income Fund Class R-6
MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6
PIMCO Income Fund Institutional Class
PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class
Vanguard Growth Index Fund Admiral Shares
Vanguard Mid-Cap Index Fund Admiral Shares
Vanguard Small-Cap Growth Index Fund Admiral Shares
Vanguard Small-Cap Index Fund Admiral Shares
Vanguard Total Bond Market Index Fund Admiral Shares
Vanguard Total International Stock Index Admiral Shares
Vanguard 500 Index Fund Admiral Shares

FORFEITED ACCOUNTS – As of December 31, 2019, forfeited accounts were $20. In 2020, benefit payments totaling $789 were forfeited to the Plan. Net investment appreciation attributable to forfeitures amounted to $8. As a result, the ending forfeiture balance as of December 31, 2020 was $817. The account will be used to reduce future employer contributions or pay administrative expenses.

ADMINISTRATIVE EXPENSES – Administrative costs paid by the Plan in 2020 totaled $10,632. These were limited to paper enrollment fees, program and administration fees, rapid delivery fees, distribution fees, and loan administration fees.

INVESTMENT VALUATION AND INCOME RECOGNITION – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are reported when received. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

NOTE 2 – INFORMATION CERTIFIED BY THE PLAN TRUSTEE (UNAUDITED)

The following information included in the accompanying financial statements as of December 31, 2020 and for the year ended December 31, 2020 and the supplemental schedule as of December 31, 2020 was obtained from data that has been prepared and certified to as complete and accurate by MassMutual, the Plan Trustee, as permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

	2020
Investments, at fair value	$ 2,395,417
Notes Receivable from participants	24,606
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	$ 334,284
Interest income on notes receivable from participants	$ 1,664

NOTE 3 – FAIR VALUE MEASUREMENT ANALYSIS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest prior to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under FASB Topic 820 are described as follows:

Level 1 – The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund.

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: a. Quoted prices for similar assets or liabilities in active markets b. Quoted prices for identical or similar assets or liabilities in inactive markets c. Inputs other than quoted prices that are observable for the asset or liability d. 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 that are unobservable inputs for the asset or liability.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2020 and December 31, 2019.

Pooled Separate Investment Accounts (SIAs) are valued at fair value based upon the net asset value of the underlying mutual fund or common collective trust investment. Fixed Income Account is valued based upon an actuarial formula of liquidation value as defined under the terms of the contract. This relates to the investment asset values as of December 31, 2020 and December 31, 2019.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2020:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$2,164,915	$ -	$2,164,915	$ -
Fixed Income Account	230,501	-	230,501	-
Total	$2,395,417	$ -	$2,395,417	$ -

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2019:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$1,822,899	$ -	$1,822,899	$ -
Fixed Income Account	211,518	-	211,518	-
Total	$2,034,417	$ -	$2,034,417	$ -

NOTE 4 – PLAN TERMINATION

Although it has not expressed any interest 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 ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 5 – RISKS AND UNCERTAINTIES

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

NOTE 6 – RELATED-PARTY AND PARTIES IN INTEREST TRANSACTIONS

Throughout the 2020 Plan year, the investments remained with trustee and custodian, MassMutual, and the Storick Group acted as the recordkeeping and administrative services provider. On January 4, 2021, Empower announced the completion of the previously announced acquisition of MassMutual's retirement plan business, following the receipt of regulatory approval required by the agreement.

Notes receivable from participants are considered party-in-interest transactions. In addition, MassMutual either manages or comanages the following funds and as such are also considered party-in-interest transactions.

MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6

NOTE 7 – TAX STATUS

The underlying volume submitter plan has received an opinion letter from the Internal Revenue Service dated March 31, 2014, stating that the written form of the relevant prototype document is qualified under Section 401(a) of the IRC, and that any employer adopting this form of the plan will be considered to have a plan qualified under Section 401(a) of the IRC. Further, volume submitter plans must submit applications once every six years and are subject to the needs to make interim amendments. Once qualified, the Plan is required to operate in conformity with the IRS to maintain its qualification. The Plan administrator believes that the Plan is still designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified; and the related trust is exempt from taxation.

NOTE 8 – SUBSEQUENT EVENTS

The Plan's management has evaluated events and transactions occurring subsequent to December 31, 2020 through September 30, 2021, which is the date the financial statements were issued. Subsequent events occurring after this date have not been evaluated by the Plan.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FORM 5500, SCHEDULE H, PART IV, LINE 4i –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EIN 59-1565932 PLAN NUMBER 001
DECEMBER 31, 2020

(a)	(b) Identity of issuer	(c) Description of investment	(d) Cost	(e) Current Value
	American Funds American High-Income Trust Class R-6	Pooled SIA	**	$ 70,110
	American Funds American Mutual Fund Class R-6	Pooled SIA	**	217,956
	American Funds EuroPacific Growth Fund Class R-6	Pooled SIA	**	25,535
	American Funds Mortgage Fund Class R-6	Pooled SIA	**	18,857
	American Funds New Perspective Fund Class R-6	Pooled SIA	**	250,393
	American Funds New World Fund Class R-6	Pooled SIA	**	26,232
	Blackrock Health Sciences Opportunities Portfolio Class K	Pooled SIA	**	4,105
	DFA International Value Portfolio Institutional Class	Pooled SIA	**	11,684
	Fixed Account	Fixed Income Account	**	231,318
	IndexSelect Aggressive 2055 Fund Class I	Pooled SIA	**	93
	IndexSelect Aggressive Retirement Fund Class I	Pooled SIA	**	21,156
	IndexSelect Conservative 2025 Fund Class I	Pooled SIA	**	60,084
	IndexSelect Conservative Retirement Fund Class I	Pooled SIA	**	1,581
	IndexSelect Moderate 2025 Fund Class I	Pooled SIA	**	55,520
	IndexSelect Moderate 2035 Fund Class I	Pooled SIA	**	92,402
	IndexSelect Moderate 2045 Fund Class I	Pooled SIA	**	81,116
	IndexSelect Moderate 2055 Fund Class I	Pooled SIA	**	27,822
	IndexSelect Moderate Retirement Fund Class I	Pooled SIA	**	50,060
	Lord Abbett Floating Rate Fund Class R-6	Pooled SIA	**	8,990
	Lord Abbett Short Duration Income Fund Class R-6	Pooled SIA	**	106,662
*	MassMutual Blue Chip Growth Fund Class I	Pooled SIA	**	197,231
*	MassMutual Core Bond Fund Class I	Pooled SIA	**	57,099
*	MassMutual Diversified Value Fund Class I	Pooled SIA	**	26,964
*	MassMutual Mid Cap Growth Fund Class I	Pooled SIA	**	45,205
*	MFS Mid Cap Value Fund Class R-6	Pooled SIA	**	11,460
*	MFS Technology Fund Class R-6	Pooled SIA	**	4,698
	PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class	Pooled SIA	**	28,391
	Vanguard 500 Index Fund Admiral Shares	Pooled SIA	**	103,673
	Vanguard Growth Index Fund Admiral Shares	Pooled SIA	**	83,383
	Vanguard Mid-Cap Index Fund Admiral Shares	Pooled SIA	**	10,388
	Vanguard Small-Cap Growth Index Fund Admiral Shares	Pooled SIA	**	278,769
	Vanguard Small-Cap Index Fund Admiral Shares	Pooled SIA	**	6,100
	Vanguard Total Bond Market Index Fund Admiral Shares	Pooled SIA	**	153,492
	Vanguard Total International Stock Index Admiral Shares	Pooled SIA	**	26,884
				2,395,417

*	Participant Loans	Interest rates between 4.25% and 6.50% Maturing no later than February 2024	0	24,606

	$ 2,420,022

* Represents a party-in-interest
** Column (d) cost information is not presented as these are participant directed investments.

This schedule was prepared from data obtained and certified by MassMutual.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE
AS OF DECEMBER 31, 2020 AND 2019 AND FOR THE YEAR ENDED DECEMBER 31, 2020

TOGETHER WITH REPORT OF INDEPENDENT AUDITOR

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
TABLE OF CONTENTS
DECEMBER 31, 2020 AND 2019

	PAGE NUMBER
Report of Independent Auditor	2-3
Financial Statements	
Statements of Net Assets Available for Benefits – Modified Cash Basis	4
Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis	5
Notes to Financial Statements – Modified Cash Basis	6-12
Supplemental Schedule –	
Form 5500, Schedule H, Part IV, Line 4i – Schedule of Assets (Held at End of Year)	13

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

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

SB CPA

REPORT OF INDEPENDENT AUDITOR

To the Plan Administrator and Trustee of
The Green Mountain Corporation 401(k) Profit Sharing Plan and Trust 001

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Green Mountain Corporation 401(k) Profit Sharing Plan & Trust 001 ("the Plan"), which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits – modified cash basis for the years then ended, and the related notes to the financial statements – modified cash basis.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note1; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits 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 2, which was certified by Massachusetts Mutual Life Insurance Company ("MassMutual"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2020 and 2019, 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.

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

Basis of Accounting

We draw attention to Note 1 to the financial statements, which describes the method of accounting. The financial statements have been prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Other Matter

The supplemental schedules of Assets (Held at End of Year) as of December 31, 2020, 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 referred to above.

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

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

Stephen J Belleme Jr., C.P.A., P.A.

Stephen J Belleme Jr CPA

Pembroke Pines, FL
September 30, 2021

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
DECEMBER 31, 2020 AND 2019

	2020	2019
Investments, at fair value	$ 2,395,417	$ 2,034,417
Notes Receivable from participants	24,606	45,407
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022	$ 2,079,824

The accompanying notes to financial statements – modified cash basis are an integral part of these statements.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
YEAR END DECEMBER 31, 2020

ADDITIONS (DECREASES) IN NET ASSETS ATTRIBUTED TO:

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	334,284
Interest income on notes receivable from participants	1,664
Contributions:	
Participants'	149,145
Employer's	17,793
Total contributions	166,938
Total additions	502,887
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	92,102
Administrative expenses	10,632
Total deductions	102,734
INCREASE IN NET ASSETS BEFORE MERGERS AND TRANSFERS	400,153
TRANSFERS	
Transfer of Assets to Plan 002, Net	(59,954)
NET INCREASE IN NET ASSETS	340,199
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	2,079,824
End of year	$ 2,420,022

The accompanying notes to financial statements – modified cash basis are an integral part of this statement.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
NOTES TO FINANCIAL STATEMENTS – MODIFIED CASH BASIS
DECEMBER 31, 2020 AND 2019

NOTE 1 – DESCRIPTION OF THE PLAN AND SIGNIFICANT ACCOUNTING POLICIES

The following description of The Green Mountain Corporation ("Company") 401(k) Profit Sharing Plan and Trust, Plan 001, ("the Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

GENERAL – For the 2020 year and going forward, the Plan is a defined contribution plan, covering all full-time employees of the Plan Sponsor aged twenty-one or older, who have completed one year of service and 900 service hours. An amendment was adopted during 2019 only which allowed eligibility for all employees of the Plan Sponsor who provided at least 250 hours of service during the plan year. The 2019 amendment is no longer applicable for the 2020 year and going forward. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan was restated January 1, 2014; there were no changes to the Plan.

PLAN TRANSFER – Effective October 31, 2020, the Plan Sponsor established Plan 002 and transferred $59,954 in December 2020 from Plan 001 to the new plan. Splitting the Plan allowed for both seasonal and part-time employees the ability to become eligible to participate in a similar version of the Plan if they are age twenty-one or older and complete one year of eligibility service, during which 200 hours of service are completed.

BASIS OF ACCOUNTING – The financial statements of the Plan are prepared on a modified cash basis of accounting for receipts and disbursements, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). This basis of presentation differs from GAAP in that employee and employer contributions are recorded when transferred to the Plan. Benefit payments to participants are recorded upon distribution. Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are recorded monthly as received. The accompanying financial statements are not intended to present the financial position and results of operations in conformity with accounting principles generally accepted in the United States of America.

CONTRIBUTIONS – Participants may contribute up to 96% of their annual compensation, as defined in the Plan. Participants self-direct the investment of their contributions into various investment options offered by the Plan. The Company contributes a matching contribution of 20% of the elective deferrals, not to exceed 4%, to the Plan.

PARTICIPANT ACCOUNTS – Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and (c) administrative expenses, if applicable.

VESTING – Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. On termination of service for death or permanent disability, a participant becomes vested 100%.

NOTES RECEIVABLE FROM PARTICIPANT – Notes receivable from participants are measured at their unpaid principal balance. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2020, no allowance for credit losses has been recorded. If a participant does not make loan repayments and management considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the Plan document. In 2020, a participant received back unpaid principal of $902 by way of a liquidating distribution. As of December 31, 2020, five loans were outstanding with interest rates ranging from 4.25% to 6.5%. The related maturity dates range from May 19, 2021 to February 25, 2024.

PAYMENT OF BENEFITS – On termination of service due to death, disability or retirement, a participant receives a lump-sum amount equal to the value of the participant's vested interest in his or her account. For termination of service due to other reasons, a participant receives the value of the vested interest in his or her account as a lump-sum distribution.

INVESTMENT OF CONTRIBUTIONS – The Plan provides participants with a sufficient number of reputable investment vehicles to allow for the participants to save for retirement with a diversified portfolio that is in accordance with their risk tolerance. As of December 31, 2020, contributions to the Plan may be invested at the participants' discretion in the following investment accounts:

AB Global Bond Fund Class Z
American Funds American High-Income Trust Class R-6
American Funds American Mutual Fund Class R-6
American Funds EuroPacific Growth Fund Class R-6
American Funds Mortgage Fund Class R-6
American Funds New Perspective Fund Class R-6
American Funds New World Class R-6
BlackRock Health Sciences Opportunities Port Class K
Columbia Contrarian Core Fund Class I-3
Columbia Seligman Communications and Information Fund Inst3
Columbia Seligman Global Technology Fund Class I-3
Columbia Small-Cap Growth Class I Inst3

DFA International Value Portfolio Institutional Class I
DFA Real Estate Securities Class I
Fixed Account
Franklin Small-Cap Value Fund Class R-6
IndexSelect Aggressive Retirement Fund Class I
IndexSelect Aggressive 2025 Fund Class I
IndexSelect Aggressive 2035 Fund Class I
IndexSelect Aggressive 2045 Fund Class I
IndexSelect Aggressive 2055 Fund Class I
IndexSelect Conservative Retirement Fund Class I
IndexSelect Conservative 2025 Fund Class I
IndexSelect Conservative 2035 Fund Class I
IndexSelect Conservative 2045 Fund Class I
IndexSelect Conservative 2055 Fund Class I
IndexSelect Moderate Retirement Fund Class I
IndexSelect Moderate 2025 Fund Class I
IndexSelect Moderate 2035 Fund Class I
IndexSelect Moderate 2045 Fund Class I
IndexSelect Moderate 2055 Fund Class I
Invesco Oppenheimer Global Opportunities Fund Class R-6
Lord Abbett Floating Rate Fund Class R-6
Lord Abbett Short Duration Income Fund Class R-6
MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6
PIMCO Income Fund Institutional Class
PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class
Vanguard Growth Index Fund Admiral Shares
Vanguard Mid-Cap Index Fund Admiral Shares
Vanguard Small-Cap Growth Index Fund Admiral Shares
Vanguard Small-Cap Index Fund Admiral Shares
Vanguard Total Bond Market Index Fund Admiral Shares
Vanguard Total International Stock Index Admiral Shares
Vanguard 500 Index Fund Admiral Shares

FORFEITED ACCOUNTS – As of December 31, 2019, forfeited accounts were $20. In 2020, benefit payments totaling $789 were forfeited to the Plan. Net investment appreciation attributable to forfeitures amounted to $8. As a result, the ending forfeiture balance as of December 31, 2020 was $817. The account will be used to reduce future employer contributions or pay administrative expenses.

ADMINISTRATIVE EXPENSES – Administrative costs paid by the Plan in 2020 totaled $10,632. These were limited to paper enrollment fees, program and administration fees, rapid delivery fees, distribution fees, and loan administration fees.

INVESTMENT VALUATION AND INCOME RECOGNITION – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are reported when received. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

NOTE 2 – INFORMATION CERTIFIED BY THE PLAN TRUSTEE (UNAUDITED)

The following information included in the accompanying financial statements as of December 31, 2020 and for the year ended December 31, 2020 and the supplemental schedule as of December 31, 2020 was obtained from data that has been prepared and certified to as complete and accurate by MassMutual, the Plan Trustee, as permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

	2020
Investments, at fair value	$ 2,395,417
Notes Receivable from participants	24,606
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	$ 334,284
Interest income on notes receivable from participants	$ 1,664

NOTE 3 – FAIR VALUE MEASUREMENT ANALYSIS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest prior to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under FASB Topic 820 are described as follows:

Level 1 – The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund.

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: a. Quoted prices for similar assets or liabilities in active markets b. Quoted prices for identical or similar assets or liabilities in inactive markets c. Inputs other than quoted prices that are observable for the asset or liability d. 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 that are unobservable inputs for the asset or liability.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2020 and December 31, 2019.

Pooled Separate Investment Accounts (SIAs) are valued at fair value based upon the net asset value of the underlying mutual fund or common collective trust investment. Fixed Income Account is valued based upon an actuarial formula of liquidation value as defined under the terms of the contract. This relates to the investment asset values as of December 31, 2020 and December 31, 2019.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2020:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$2,164,915	$ -	$2,164,915	$ -
Fixed Income Account	230,501	-	230,501	-
Total	$2,395,417	$ -	$2,395,417	$ -

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2019:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$1,822,899	$ -	$1,822,899	$ -
Fixed Income Account	211,518	-	211,518	-
Total	$2,034,417	$ -	$2,034,417	$ -

NOTE 4 – PLAN TERMINATION

Although it has not expressed any interest 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 ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 5 – RISKS AND UNCERTAINTIES

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

NOTE 6 – RELATED-PARTY AND PARTIES IN INTEREST TRANSACTIONS

Throughout the 2020 Plan year, the investments remained with trustee and custodian, MassMutual, and the Storick Group acted as the recordkeeping and administrative services provider. On January 4, 2021, Empower announced the completion of the previously announced acquisition of MassMutual's retirement plan business, following the receipt of regulatory approval required by the agreement.

Notes receivable from participants are considered party-in-interest transactions. In addition, MassMutual either manages or comanages the following funds and as such are also considered party-in-interest transactions.

MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6

NOTE 7 – TAX STATUS

The underlying volume submitter plan has received an opinion letter from the Internal Revenue Service dated March 31, 2014, stating that the written form of the relevant prototype document is qualified under Section 401(a) of the IRC, and that any employer adopting this form of the plan will be considered to have a plan qualified under Section 401(a) of the IRC. Further, volume submitter plans must submit applications once every six years and are subject to the needs to make interim amendments. Once qualified, the Plan is required to operate in conformity with the IRS to maintain its qualification. The Plan administrator believes that the Plan is still designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified; and the related trust is exempt from taxation.

NOTE 8 – SUBSEQUENT EVENTS

The Plan's management has evaluated events and transactions occurring subsequent to December 31, 2020 through September 30, 2021, which is the date the financial statements were issued. Subsequent events occurring after this date have not been evaluated by the Plan.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FORM 5500, SCHEDULE H, PART IV, LINE 4i –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EIN 59-1565932 PLAN NUMBER 001
DECEMBER 31, 2020

(a)	(b) Identity of issuer	(c) Description of investment	(d) Cost	(e) Current Value
	American Funds American High-Income Trust Class R-6	Pooled SIA	**	$ 70,110
	American Funds American Mutual Fund Class R-6	Pooled SIA	**	217,956
	American Funds EuroPacific Growth Fund Class R-6	Pooled SIA	**	25,535
	American Funds Mortgage Fund Class R-6	Pooled SIA	**	18,857
	American Funds New Perspective Fund Class R-6	Pooled SIA	**	250,393
	American Funds New World Fund Class R-6	Pooled SIA	**	26,232
	Blackrock Health Sciences Opportunities Portfolio Class K	Pooled SIA	**	4,105
	DFA International Value Portfolio Institutional Class	Pooled SIA	**	11,684
	Fixed Account	Fixed Income Account	**	231,318
	IndexSelect Aggressive 2055 Fund Class I	Pooled SIA	**	93
	IndexSelect Aggressive Retirement Fund Class I	Pooled SIA	**	21,156
	IndexSelect Conservative 2025 Fund Class I	Pooled SIA	**	60,084
	IndexSelect Conservative Retirement Fund Class I	Pooled SIA	**	1,581
	IndexSelect Moderate 2025 Fund Class I	Pooled SIA	**	55,520
	IndexSelect Moderate 2035 Fund Class I	Pooled SIA	**	92,402
	IndexSelect Moderate 2045 Fund Class I	Pooled SIA	**	81,116
	IndexSelect Moderate 2055 Fund Class I	Pooled SIA	**	27,822
	IndexSelect Moderate Retirement Fund Class I	Pooled SIA	**	50,060
	Lord Abbett Floating Rate Fund Class R-6	Pooled SIA	**	8,990
	Lord Abbett Short Duration Income Fund Class R-6	Pooled SIA	**	106,662
*	MassMutual Blue Chip Growth Fund Class I	Pooled SIA	**	197,231
*	MassMutual Core Bond Fund Class I	Pooled SIA	**	57,099
*	MassMutual Diversified Value Fund Class I	Pooled SIA	**	26,964
*	MassMutual Mid Cap Growth Fund Class I	Pooled SIA	**	45,205
*	MFS Mid Cap Value Fund Class R-6	Pooled SIA	**	11,460
*	MFS Technology Fund Class R-6	Pooled SIA	**	4,698
	PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class	Pooled SIA	**	28,391
	Vanguard 500 Index Fund Admiral Shares	Pooled SIA	**	103,673
	Vanguard Growth Index Fund Admiral Shares	Pooled SIA	**	83,383
	Vanguard Mid-Cap Index Fund Admiral Shares	Pooled SIA	**	10,388
	Vanguard Small-Cap Growth Index Fund Admiral Shares	Pooled SIA	**	278,769
	Vanguard Small-Cap Index Fund Admiral Shares	Pooled SIA	**	6,100
	Vanguard Total Bond Market Index Fund Admiral Shares	Pooled SIA	**	153,492
	Vanguard Total International Stock Index Admiral Shares	Pooled SIA	**	26,884
				2,395,417

*	Participant Loans	Interest rates between 4.25% and 6.50% Maturing no later than February 2024	0	24,606

	$ 2,420,022

* Represents a party-in-interest
** Column (d) cost information is not presented as these are participant directed investments.

This schedule was prepared from data obtained and certified by MassMutual.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE
AS OF DECEMBER 31, 2020 AND 2019 AND FOR THE YEAR ENDED DECEMBER 31, 2020

TOGETHER WITH REPORT OF INDEPENDENT AUDITOR

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
TABLE OF CONTENTS
DECEMBER 31, 2020 AND 2019

	PAGE NUMBER
Report of Independent Auditor	2-3
Financial Statements	
Statements of Net Assets Available for Benefits – Modified Cash Basis	4
Statement of Changes in Net Assets Available for Benefits – Modified Cash Basis	5
Notes to Financial Statements – Modified Cash Basis	6-12
Supplemental Schedule –	
Form 5500, Schedule H, Part IV, Line 4i – Schedule of Assets (Held at End of Year)	13

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

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

SB CPA

REPORT OF INDEPENDENT AUDITOR

To the Plan Administrator and Trustee of
The Green Mountain Corporation 401(k) Profit Sharing Plan and Trust 001

Report on the Financial Statements

We were engaged to audit the accompanying financial statements of the Green Mountain Corporation 401(k) Profit Sharing Plan & Trust 001 ("the Plan"), which comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits – modified cash basis for the years then ended, and the related notes to the financial statements – modified cash basis.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note1; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on conducting the audits 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 2, which was certified by Massachusetts Mutual Life Insurance Company ("MassMutual"), the trustee of the Plan, except for comparing the information with the related information included in the financial statements. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the years ended December 31, 2020 and 2019, 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.

Stephen J Belleme Jr CPA, PA
PO Box 29-8758 Pembroke Pines, FL 33029
Phone: 954-383-2005 - Fax: 754-217-4923
Email: info@bellemecpa.com
www.bellemecpa.com

Basis of Accounting

We draw attention to Note 1 to the financial statements, which describes the method of accounting. The financial statements have been prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Other Matter

The supplemental schedules of Assets (Held at End of Year) as of December 31, 2020, 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 referred to above.

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

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

Stephen J Belleme Jr., C.P.A., P.A.

Stephen J Belleme Jr CPA

Pembroke Pines, FL
September 30, 2021

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
DECEMBER 31, 2020 AND 2019

	2020	2019
Investments, at fair value	$ 2,395,417	$ 2,034,417
Notes Receivable from participants	24,606	45,407
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022	$ 2,079,824

The accompanying notes to financial statements – modified cash basis are an integral part of these statements.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)
YEAR END DECEMBER 31, 2020

ADDITIONS (DECREASES) IN NET ASSETS ATTRIBUTED TO:

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	334,284
Interest income on notes receivable from participants	1,664
Contributions:	
Participants'	149,145
Employer's	17,793
Total contributions	166,938
Total additions	502,887
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:	
Benefits paid to participants	92,102
Administrative expenses	10,632
Total deductions	102,734
INCREASE IN NET ASSETS BEFORE MERGERS AND TRANSFERS	400,153
TRANSFERS	
Transfer of Assets to Plan 002, Net	(59,954)
NET INCREASE IN NET ASSETS	340,199
NET ASSETS AVAILABLE FOR BENEFITS:	
Beginning of year	2,079,824
End of year	$ 2,420,022

The accompanying notes to financial statements – modified cash basis are an integral part of this statement.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
NOTES TO FINANCIAL STATEMENTS – MODIFIED CASH BASIS
DECEMBER 31, 2020 AND 2019

NOTE 1 – DESCRIPTION OF THE PLAN AND SIGNIFICANT ACCOUNTING POLICIES

The following description of The Green Mountain Corporation ("Company") 401(k) Profit Sharing Plan and Trust, Plan 001, ("the Plan") provides only general information. Participants should refer to the Plan Agreement for a more complete description of the Plan's provisions.

GENERAL – For the 2020 year and going forward, the Plan is a defined contribution plan, covering all full-time employees of the Plan Sponsor aged twenty-one or older, who have completed one year of service and 900 service hours. An amendment was adopted during 2019 only which allowed eligibility for all employees of the Plan Sponsor who provided at least 250 hours of service during the plan year. The 2019 amendment is no longer applicable for the 2020 year and going forward. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan was restated January 1, 2014; there were no changes to the Plan.

PLAN TRANSFER – Effective October 31, 2020, the Plan Sponsor established Plan 002 and transferred $59,954 in December 2020 from Plan 001 to the new plan. Splitting the Plan allowed for both seasonal and part-time employees the ability to become eligible to participate in a similar version of the Plan if they are age twenty-one or older and complete one year of eligibility service, during which 200 hours of service are completed.

BASIS OF ACCOUNTING – The financial statements of the Plan are prepared on a modified cash basis of accounting for receipts and disbursements, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America (GAAP). This basis of presentation differs from GAAP in that employee and employer contributions are recorded when transferred to the Plan. Benefit payments to participants are recorded upon distribution. Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are recorded monthly as received. The accompanying financial statements are not intended to present the financial position and results of operations in conformity with accounting principles generally accepted in the United States of America.

CONTRIBUTIONS – Participants may contribute up to 96% of their annual compensation, as defined in the Plan. Participants self-direct the investment of their contributions into various investment options offered by the Plan. The Company contributes a matching contribution of 20% of the elective deferrals, not to exceed 4%, to the Plan.

PARTICIPANT ACCOUNTS – Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and, (b) Plan earnings, and (c) administrative expenses, if applicable.

VESTING – Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company's contribution portion of their accounts plus actual earnings thereon is based on years of continuous service. On termination of service for death or permanent disability, a participant becomes vested 100%.

NOTES RECEIVABLE FROM PARTICIPANT – Notes receivable from participants are measured at their unpaid principal balance. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2019 and 2020, no allowance for credit losses has been recorded. If a participant does not make loan repayments and management considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the Plan document. In 2020, a participant received back unpaid principal of $902 by way of a liquidating distribution. As of December 31, 2020, five loans were outstanding with interest rates ranging from 4.25% to 6.5%. The related maturity dates range from May 19, 2021 to February 25, 2024.

PAYMENT OF BENEFITS – On termination of service due to death, disability or retirement, a participant receives a lump-sum amount equal to the value of the participant's vested interest in his or her account. For termination of service due to other reasons, a participant receives the value of the vested interest in his or her account as a lump-sum distribution.

INVESTMENT OF CONTRIBUTIONS – The Plan provides participants with a sufficient number of reputable investment vehicles to allow for the participants to save for retirement with a diversified portfolio that is in accordance with their risk tolerance. As of December 31, 2020, contributions to the Plan may be invested at the participants' discretion in the following investment accounts:

AB Global Bond Fund Class Z
American Funds American High-Income Trust Class R-6
American Funds American Mutual Fund Class R-6
American Funds EuroPacific Growth Fund Class R-6
American Funds Mortgage Fund Class R-6
American Funds New Perspective Fund Class R-6
American Funds New World Class R-6
BlackRock Health Sciences Opportunities Port Class K
Columbia Contrarian Core Fund Class I-3
Columbia Seligman Communications and Information Fund Inst3
Columbia Seligman Global Technology Fund Class I-3
Columbia Small-Cap Growth Class I Inst3

DFA International Value Portfolio Institutional Class I
DFA Real Estate Securities Class I
Fixed Account
Franklin Small-Cap Value Fund Class R-6
IndexSelect Aggressive Retirement Fund Class I
IndexSelect Aggressive 2025 Fund Class I
IndexSelect Aggressive 2035 Fund Class I
IndexSelect Aggressive 2045 Fund Class I
IndexSelect Aggressive 2055 Fund Class I
IndexSelect Conservative Retirement Fund Class I
IndexSelect Conservative 2025 Fund Class I
IndexSelect Conservative 2035 Fund Class I
IndexSelect Conservative 2045 Fund Class I
IndexSelect Conservative 2055 Fund Class I
IndexSelect Moderate Retirement Fund Class I
IndexSelect Moderate 2025 Fund Class I
IndexSelect Moderate 2035 Fund Class I
IndexSelect Moderate 2045 Fund Class I
IndexSelect Moderate 2055 Fund Class I
Invesco Oppenheimer Global Opportunities Fund Class R-6
Lord Abbett Floating Rate Fund Class R-6
Lord Abbett Short Duration Income Fund Class R-6
MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6
PIMCO Income Fund Institutional Class
PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class
Vanguard Growth Index Fund Admiral Shares
Vanguard Mid-Cap Index Fund Admiral Shares
Vanguard Small-Cap Growth Index Fund Admiral Shares
Vanguard Small-Cap Index Fund Admiral Shares
Vanguard Total Bond Market Index Fund Admiral Shares
Vanguard Total International Stock Index Admiral Shares
Vanguard 500 Index Fund Admiral Shares

FORFEITED ACCOUNTS – As of December 31, 2019, forfeited accounts were $20. In 2020, benefit payments totaling $789 were forfeited to the Plan. Net investment appreciation attributable to forfeitures amounted to $8. As a result, the ending forfeiture balance as of December 31, 2020 was $817. The account will be used to reduce future employer contributions or pay administrative expenses.

ADMINISTRATIVE EXPENSES – Administrative costs paid by the Plan in 2020 totaled $10,632. These were limited to paper enrollment fees, program and administration fees, rapid delivery fees, distribution fees, and loan administration fees.

INVESTMENT VALUATION AND INCOME RECOGNITION – Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade date basis. Dividends and interest are reported when received. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year.

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

NOTE 2 – INFORMATION CERTIFIED BY THE PLAN TRUSTEE (UNAUDITED)

The following information included in the accompanying financial statements as of December 31, 2020 and for the year ended December 31, 2020 and the supplemental schedule as of December 31, 2020 was obtained from data that has been prepared and certified to as complete and accurate by MassMutual, the Plan Trustee, as permitted by Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

	2020
Investments, at fair value	$ 2,395,417
Notes Receivable from participants	24,606
NET ASSETS AVAILABLE FOR BENEFITS	$ 2,420,022

	Year Ended December 31, 2020
Investments Income:	
Net investment appreciation	$ 287,791
Dividend income	46,493
Total investment income (loss)	$ 334,284
Interest income on notes receivable from participants	$ 1,664

NOTE 3 – FAIR VALUE MEASUREMENT ANALYSIS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest prior to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under FASB Topic 820 are described as follows:

Level 1 – The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund.

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: a. Quoted prices for similar assets or liabilities in active markets b. Quoted prices for identical or similar assets or liabilities in inactive markets c. Inputs other than quoted prices that are observable for the asset or liability d. 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 that are unobservable inputs for the asset or liability.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used as of December 31, 2020 and December 31, 2019.

Pooled Separate Investment Accounts (SIAs) are valued at fair value based upon the net asset value of the underlying mutual fund or common collective trust investment. Fixed Income Account is valued based upon an actuarial formula of liquidation value as defined under the terms of the contract. This relates to the investment asset values as of December 31, 2020 and December 31, 2019.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2020:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$2,164,915	$ -	$2,164,915	$ -
Fixed Income Account	230,501	-	230,501	-
Total	$2,395,417	$ -	$2,395,417	$ -

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair market values as of December 31, 2019:

	Total	Level 1	Level 2	Level 3
Pooled Separate Investment Accounts (SIAs)	$1,822,899	$ -	$1,822,899	$ -
Fixed Income Account	211,518	-	211,518	-
Total	$2,034,417	$ -	$2,034,417	$ -

NOTE 4 – PLAN TERMINATION

Although it has not expressed any interest 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 ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

NOTE 5 – RISKS AND UNCERTAINTIES

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

NOTE 6 – RELATED-PARTY AND PARTIES IN INTEREST TRANSACTIONS

Throughout the 2020 Plan year, the investments remained with trustee and custodian, MassMutual, and the Storick Group acted as the recordkeeping and administrative services provider. On January 4, 2021, Empower announced the completion of the previously announced acquisition of MassMutual's retirement plan business, following the receipt of regulatory approval required by the agreement.

Notes receivable from participants are considered party-in-interest transactions. In addition, MassMutual either manages or comanages the following funds and as such are also considered party-in-interest transactions.

MassMutual Blue Chip Growth Fund Class I
MassMutual Core Bond Fund Class I
MassMutual Diversified Value Fund Class I
MassMutual Mid Cap Growth Fund Class I
MFS Mid Cap Value Fund Class R-6
MFS Technology Fund Class R-6

NOTE 7 – TAX STATUS

The underlying volume submitter plan has received an opinion letter from the Internal Revenue Service dated March 31, 2014, stating that the written form of the relevant prototype document is qualified under Section 401(a) of the IRC, and that any employer adopting this form of the plan will be considered to have a plan qualified under Section 401(a) of the IRC. Further, volume submitter plans must submit applications once every six years and are subject to the needs to make interim amendments. Once qualified, the Plan is required to operate in conformity with the IRS to maintain its qualification. The Plan administrator believes that the Plan is still designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified; and the related trust is exempt from taxation.

NOTE 8 – SUBSEQUENT EVENTS

The Plan's management has evaluated events and transactions occurring subsequent to December 31, 2020 through September 30, 2021, which is the date the financial statements were issued. Subsequent events occurring after this date have not been evaluated by the Plan.

THE GREEN MOUNTAIN CORPORATION
401(K) PROFIT SHARING PLAN & TRUST 001
FORM 5500, SCHEDULE H, PART IV, LINE 4i –
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
EIN 59-1565932 PLAN NUMBER 001
DECEMBER 31, 2020

(a)	(b) Identity of issuer	(c) Description of investment	(d) Cost	(e) Current Value
	American Funds American High-Income Trust Class R-6	Pooled SIA	**	$ 70,110
	American Funds American Mutual Fund Class R-6	Pooled SIA	**	217,956
	American Funds EuroPacific Growth Fund Class R-6	Pooled SIA	**	25,535
	American Funds Mortgage Fund Class R-6	Pooled SIA	**	18,857
	American Funds New Perspective Fund Class R-6	Pooled SIA	**	250,393
	American Funds New World Fund Class R-6	Pooled SIA	**	26,232
	Blackrock Health Sciences Opportunities Portfolio Class K	Pooled SIA	**	4,105
	DFA International Value Portfolio Institutional Class	Pooled SIA	**	11,684
	Fixed Account	Fixed Income Account	**	231,318
	IndexSelect Aggressive 2055 Fund Class I	Pooled SIA	**	93
	IndexSelect Aggressive Retirement Fund Class I	Pooled SIA	**	21,156
	IndexSelect Conservative 2025 Fund Class I	Pooled SIA	**	60,084
	IndexSelect Conservative Retirement Fund Class I	Pooled SIA	**	1,581
	IndexSelect Moderate 2025 Fund Class I	Pooled SIA	**	55,520
	IndexSelect Moderate 2035 Fund Class I	Pooled SIA	**	92,402
	IndexSelect Moderate 2045 Fund Class I	Pooled SIA	**	81,116
	IndexSelect Moderate 2055 Fund Class I	Pooled SIA	**	27,822
	IndexSelect Moderate Retirement Fund Class I	Pooled SIA	**	50,060
	Lord Abbett Floating Rate Fund Class R-6	Pooled SIA	**	8,990
	Lord Abbett Short Duration Income Fund Class R-6	Pooled SIA	**	106,662
*	MassMutual Blue Chip Growth Fund Class I	Pooled SIA	**	197,231
*	MassMutual Core Bond Fund Class I	Pooled SIA	**	57,099
*	MassMutual Diversified Value Fund Class I	Pooled SIA	**	26,964
*	MassMutual Mid Cap Growth Fund Class I	Pooled SIA	**	45,205
*	MFS Mid Cap Value Fund Class R-6	Pooled SIA	**	11,460
*	MFS Technology Fund Class R-6	Pooled SIA	**	4,698
	PIMCO StocksPLUS International Fund (U.S. Dollar-Hedged) Institutional Class	Pooled SIA	**	28,391
	Vanguard 500 Index Fund Admiral Shares	Pooled SIA	**	103,673
	Vanguard Growth Index Fund Admiral Shares	Pooled SIA	**	83,383
	Vanguard Mid-Cap Index Fund Admiral Shares	Pooled SIA	**	10,388
	Vanguard Small-Cap Growth Index Fund Admiral Shares	Pooled SIA	**	278,769
	Vanguard Small-Cap Index Fund Admiral Shares	Pooled SIA	**	6,100
	Vanguard Total Bond Market Index Fund Admiral Shares	Pooled SIA	**	153,492
	Vanguard Total International Stock Index Admiral Shares	Pooled SIA	**	26,884
				2,395,417

*	Participant Loans	Interest rates between 4.25% and 6.50% Maturing no later than February 2024	0	24,606

	$ 2,420,022

* Represents a party-in-interest
** Column (d) cost information is not presented as these are participant directed investments.

This schedule was prepared from data obtained and certified by MassMutual.

Green Mountain Corp 401(k) Profit Sharing Plan & Trust

Employer Identification Number: 59-1565932

For Plan year (beginning/ending) 01/01/2020 to 12/31/2020 Plan number: 001

(a)	(b) Identity of issue, borrower, lessor , or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(e) Current Value
	American Funds Europacific	Pooled SIA	25,535
	Premier Barings Core Bnd I	Pooled SIA	57,099
	Sel. T. Row PR/Brndywn Div Val I	Pooled SIA	197,231
	Select Tr Price Blue Chip Gr I	Pooled SIA	26,964
	Select TRP/Frontier Mc Grth I	Pooled SIA	45,205
	MFS Mid Cap Value R6	Pooled SIA	11,460
	Vanguard Growth Index ADMRL	Pooled SIA	83,383
	Vanguard Mid-Cap Index Adm	Pooled SIA	10,388
	Vanguard SC GR Index Admrl	Pooled SIA	278,769
	Vanguard Small-Cap Index Adm	Pooled SIA	6,100
	Vanguard Total Bond Mkt Ind Adm	Pooled SIA	153,492
	Vanguard Total Intl Stock Adm	Pooled SIA	26,884
	Vanguard 500 Index Adm	Pooled SIA	103,673
	American Funds Amer HI Rl	Pooled SIA	26,232
	Indexselect Aggr Retirement I	Pooled SIA	21,156
	Indexselect Aggressive 2055 I	Pooled SIA	93
	Indexselect Cons Retirement I	Pooled SIA	50,060
	Indexselect Conservative 2025 I	Pooled SIA	55,559
	Indexselect Mod Retirement I	Pooled SIA	92,402
	Indexselect Moderate 2025 I	Pooled SIA	81,146
	Indexselect Moderate 2035 I	Pooled SIA	27,859
	Indexselect Moderate 2045 I	Pooled SIA	1,581
	Indexselect Moderate 2055 I	Pooled SIA	60,084
	Blackrock Health Sciences Opps K	Pooled SIA	4,105
	DFA International Value I	Pooled SIA	11,684
	MFS Technology R6	Pooled SIA	4,698
	American Funds Amer Mutual R6	Pooled SIA	69,782
	American Funds Mortgage R6	Pooled SIA	217,956
	American Funds New Prspctv R6	Pooled SIA	18,857
	American Funds New World R6	Pooled SIA	250,393
	Lord Abbett Floating Rate R6	Pooled SIA	8,990
	Lord Abbett Short Dur Income R6	Pooled SIA	106,662
	Pimco Stckspls Int	Pooled SIA	28,391
	Fixed Account	Pooled SIA	231,344
	Participant Loans (Various Rates &	Pooled SIA	24,604
	Maturity Dates)		