

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
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Part I	Annual Report Identification Information
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>	
A This return/report is for:	☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) ____
B This return/report is:	☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here.	☐
D Check box if filing under:	☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)

Part II	Basic Plan Information —enter all requested information				
1a Name of plan <u>BUYERS PRODUCTS COMPANY EMPLOYEES PROFIT SHARING PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>05/27/1966</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>05/27/1966</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>05/27/1966</u>					
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>BUYERS PRODUCTS COMPANY</u> <u>9049 TYLER BOULEVARD</u> <u>MENTOR, OH 44060</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>34-1000414</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>440-974-8888</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>423100</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>34-1000414</u>	2c Plan Sponsor's telephone number <u>440-974-8888</u>	2d Business code (see instructions) <u>423100</u>	
2b Employer Identification Number (EIN) <u>34-1000414</u>					
2c Plan Sponsor's telephone number <u>440-974-8888</u>					
2d Business code (see instructions) <u>423100</u>					

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/05/2021	MARK SALTZMAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2020)
v. 200204

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 555
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 482 6a(2) 515 6b 0 6c 81 6d 596 6e 0 6f 596 6g 596 6h 63
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 3D 3H b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:	
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)	
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (4) ☒ C (Service Provider Information) (5) ☐ D (DFE/Participating Plan Information) (6) ☐ G (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 BUYERS PRODUCTS COMPANY EMPLOYEES PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BUYERS PRODUCTS COMPANY	D Employer Identification Number (EIN) 34-1000414	

Part I	Service Provider Information (see instructions)
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You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. ☐ Yes ☒ No
- b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

CHARLES SCHWAB

34-1000414

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	173831	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MCCREADY & KEENE(ONEAMERICA CO.)

35-0500670

(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?
14 64	NONE	28298	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MALONEY + NOVOTNY LLC

34-0677006

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	NONE	13962	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 BUYERS PRODUCTS COMPANY EMPLOYEES PROFIT SHARING PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 BUYERS PRODUCTS COMPANY	D Employer Identification Number (EIN) 34-1000414	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	4704626	5265486
(2) Participant contributions.....	1b(2)		
(3) Other	1b(3)	180972	185502
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	864538	365936
(2) U.S. Government securities	1c(2)	3995830	5188535
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	16633334	17159829
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	33903442	39262329
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	2538785	1538221
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	1694249	2223691

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	64515776 71189529
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	103550 96538
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	103550 96538
Net Assets			
l	Net assets (subtract line 1k from line 1f).....	1l	64412226 71092991

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	5265486
	(B) Participants	2a(1)(B)	
	(C) Others (including rollovers).....	2a(1)(C)	
(2)	Noncash contributions	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	5265486
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	7450
	(B) U.S. Government securities	2b(1)(B)	105636
	(C) Corporate debt instruments	2b(1)(C)	394641
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	
	(F) Other	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	507727
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	799365
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	31318
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	830683
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	19663119
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	19720509
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	-57390
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	4487649
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	4487649

		(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)		-1269
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		11032886

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	4136030	
(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)		4136030
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)	42260	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	173831	
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		216091
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		4352121

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		6680765
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

(1) ☐ 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: MALONEY & NOVOTNY LLC

(2) EIN: 34-0677006

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

(1) ☐ This form is filed for a CCT, PSA, or MTIA. (2) ☐ It will be attached to the next Form 5500 pursuant to 29 CFR 2520.104-50.

Part IV Compliance Questions

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

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)

	Yes	No	Amount
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?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
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.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
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)

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

A Name of plan BUYERS PRODUCTS COMPANY EMPLOYEES PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 BUYERS PRODUCTS COMPANY	D Employer Identification Number (EIN) 34-1000414

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): 34-1000414		
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
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
---------	--

10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2020
v. 200204

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).....

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).....

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).....

14a	
14b	
14c	

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

a The corresponding number for the plan year immediately preceding the current plan year.....

b The corresponding number for the second preceding plan year.....

15a	
15b	

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

a Enter the number of employers who withdrew during the preceding plan year.....

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

16a	
16b	

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

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

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

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

a Enter the percentage of plan assets held as:
 Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
☐ Yes.
☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
☐ No. Other. Provide explanation _____

**BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN**

FINANCIAL REPORT

DECEMBER 31, 2020 and 2019

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

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* Refers to sections of Form 5500 (Annual Return/Report of Employee Benefit Plan) for Plan year ended December 31, 2020, which material is incorporated herein by reference.

Independent Auditors' Report

The Plan Administrator
Buyers Products Company
Employees' Profit Sharing Plan
Mentor, Ohio

We have audited the accompanying financial statements of the Buyers Products Company Employees' Profit Sharing Plan (the "Plan"), which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits. We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditors consider internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2020 and 2019, and the changes in its net assets available for benefits for the years then ended in accordance with accounting principles generally accepted in the United States of America.

Report on Supplementary Information

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2020 is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Maloney + Novotny LLC

Cleveland, Ohio
July 28, 2021

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
ASSETS		
Investments, at fair value	\$65,738,541	\$59,630,178
Receivables		
Employer contributions	5,265,486	4,704,626
Accrued investment income	<u>185,502</u>	<u>180,972</u>
Total receivables	<u>5,450,988</u>	<u>4,885,598</u>
Total assets	71,189,529	64,515,776
LIABILITIES		
Operating payables	<u>96,538</u>	<u>103,550</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$71,092,991</u>	<u>\$64,412,226</u>

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

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Years Ended December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
ADDITIONS		
Investment income:		
Net appreciation in fair value of investments	\$ 4,428,990	\$ 11,483,900
Interest and dividends	<u>1,338,410</u>	<u>1,540,261</u>
Total investment income	5,767,400	13,024,161
Employer contributions	<u>5,265,486</u>	<u>4,704,626</u>
Total additions	11,032,886	17,728,787
DEDUCTIONS		
Benefits paid directly to participants	4,136,030	9,406,378
Administrative fees	<u>216,091</u>	<u>222,961</u>
Total deductions	<u>4,352,121</u>	<u>9,629,339</u>
NET INCREASE	6,680,765	8,099,448
NET ASSETS AVAILABLE FOR BENEFITS		
BEGINNING OF YEAR	<u>64,412,226</u>	<u>56,312,778</u>
END OF YEAR	<u>\$ 71,092,991</u>	<u>\$ 64,412,226</u>

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

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

Note 1. Description of Plan

The following is a summary of certain provisions of the Buyers Products Company Employees' Profit Sharing Plan (the "Plan"). Participants should refer to the Plan document for more complete information.

General – The Plan is a defined contribution plan that covers substantially all employees of Buyers Products Company; Progressive Powder Coating, Inc.; Trailer Component Manufacturing, Inc.; BPC Realty Holdings, LLC; and effective January 1, 2019, Bigfoot Landscape Supply, LLC (collectively, the "Company") who have attained age 19 and one year of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions – The Company's contribution for each plan year is determined at the discretion of the Company's officers. Participants are eligible for such contributions provided they work at least 1,000 hours and are employed on the last day of the plan year. For the plan years 2020 and 2019, the Company's contributions to the Plan amounted to 15% of each eligible employee's defined compensation, subject to Internal Revenue Service ("IRS") limitations. Allocation of the contributions is based on relative plan compensation. There is no provision in the Plan for participant contributions.

Participant Accounts – A separate account is maintained for each participant. Each participant's account is credited with an allocation of (a) the Company's contributions and (b) Plan earnings and forfeitures, and is charged with an allocation of administrative expenses. Allocations are based on participant compensation or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

All of the Plan's investments are nonparticipant-directed. Consequently, all balances in the statements of net assets available for benefits as of December 31, 2020 and 2019 and all activity in the statements of changes in net assets available for benefits for the years ended December 31, 2020 and 2019 were attributable to nonparticipant-directed investments.

Vesting – Participants vest in the Company contributions as follows: 10% after each of the first two years and 20% per year thereafter until fully vested after six years of vesting service. Any non-vested Company contributions are reallocated to participants in the same manner as Company contributions. Reallocated forfeitures were \$375,661 and \$362,676 in 2020 and 2019, respectively. There were no unallocated forfeitures at December 31, 2020 or 2019.

Participant Loans – Loans to participants are not permitted under the Plan.

Payment of Benefits – Upon termination of service due to death, disability, or a retirement, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in either a lump-sum amount, or in installments designated by the participant's beneficiary. The Plan also provides for the immediate payout of a participant's separate account upon retirement, death, or other termination if the balance of the account does not exceed \$1,000.

Plan Termination – Although it has not expressed any intent to do so, the Company has the right, by action of the Board of Directors, to terminate the Plan at any time subject to the provisions of ERISA. In the event of termination of the Plan, all participants shall be fully vested and shall receive a full distribution of the balances in their respective accounts.

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 2. Summary of Significant Accounting Policies

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

Adoption of New Accounting Standard – In August 2018, the Financial Accounting Standards Board issued Accounting Standards Update ("ASU") No. 2018-13, *Fair Value Measurement (Topic 820): Disclosure Framework – Changes to the Disclosure Requirements for Fair Value Measurement* ("ASU 2018-13"). ASU 2018-13 eliminates, amends, and adds disclosure requirements and is applicable to all entities that are required under accounting principles generally accepted in the United States of America to disclose recurring and nonrecurring fair value measurements. ASU 2018-13 is effective for all entities for fiscal years beginning after December 15, 2019, though early adoption is permitted for any eliminated or modified disclosure requirements. The Plan has adopted ASU 2018-13 as of January 1, 2020. The adoption did not have a material impact on the financial statements.

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. The Company's Board of Directors determines the Plan's valuation policies utilizing information provided by the investment advisers and Charles Schwab ("Schwab"). See Note 3 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year. The Plan's investments are valued at the end of each calendar quarter and at other dates as may be determined by the Company's Board of Directors.

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

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

Benefit Payments – Benefit payments are recorded when paid.

Administrative Fees – All administrative fees are paid by the Company or the Plan at the option of the Company.

Subsequent Events – The Company has evaluated subsequent events through July 28, 2021, which is the date the financial statements were available to be issued.

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 3. Fair Value Measurements

The Plan estimates the fair value of financial instruments using available market information and other generally accepted valuation methodologies. The inputs used to measure fair value are classified into three levels:

- Level 1 – Quoted market prices in active markets for identical assets and liabilities
- Level 2 – Observable market-based inputs or unobservable inputs that are corroborated by market data
- Level 3 – Unobservable inputs in which little or no market data exists

The following is a description of the valuation methodologies used for assets of the Plan measured at fair value:

- Mutual funds and money market funds: Valued at the quoted net asset value of shares held by the Plan at year end, and are classified as Level 1.
- Common stocks: Valued at the closing price reported in the active market in which the individual securities are traded, and are classified as Level 1.
- Corporate bonds, certificates of deposit, asset-backed securities, and other asset: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar ratings. These are classified as Level 2.
- U.S. government agency funds, U.S. Treasury bonds, and municipal bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. These are classified as Level 2.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. There have been no changes in the methodologies used from 2019 to 2020. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020 and 2019:

	Assets at Fair Value as of December 31, 2020			
	Level 1	Level 2	Level 3	Total
Common stocks	\$39,262,329			\$39,262,329
Corporate bonds		\$11,261,459		11,261,459
Certificates of deposit		271,773		271,773
Money market funds	94,163			94,163
Asset-backed securities		3,069,336		3,069,336
Municipal bonds		1,260,359		1,260,359
Mutual funds	1,538,221			1,538,221
U.S. government agency funds		1,568,675		1,568,675
U.S. Treasury bonds		5,188,535		5,188,535
Other assets		2,223,691		2,223,691
Total	<u>\$40,894,713</u>	<u>\$24,843,828</u>	<u>\$ -</u>	<u>\$65,738,541</u>

BUYERS PRODUCTS COMPANY
EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS (CONTINUED)

Note 3. Fair Value Measurements (Continued)

	Assets at Fair Value as of December 31, 2019			
	Level 1	Level 2	Level 3	Total
Common stocks	\$ 33,903,442			\$ 33,903,442
Corporate bonds		\$ 11,524,960		11,524,960
Certificates of deposit		263,110		263,110
Money market funds	601,428			601,428
Asset-backed securities		3,272,691		3,272,691
Municipal bonds		1,199,756		1,199,756
Mutual funds	2,538,785			2,538,785
U.S. government agency funds		635,927		635,927
U.S. Treasury bonds		3,995,830		3,995,830
Other assets		1,694,249		1,694,249
Total	<u>\$ 37,043,655</u>	<u>\$ 22,586,523</u>	<u>\$ -</u>	<u>\$ 59,630,178</u>

Note 4. Party-in-Interest Transactions

Certain Plan investments are units of funds managed by Schwab. Schwab is the Plan Custodian as defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Johnson Trust Company is Trustee as defined by the Plan. Included in administrative expenses is \$182,853 and \$187,754 in Trustee fees for the years ended December 31, 2020 and 2019, respectively. Certain Plan investments are in shares of Automatic Data Processing ("ADP"). ADP is the Company's payroll provider and, therefore, qualifies as a party-in-interest.

Note 5. Income Tax Status

The prototype document on which the Plan is based obtained a determination letter, dated March 31, 2014, in which the IRS stated that the prototype, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The Plan has been amended since adopting the prototype. However, the plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The plan administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2020, there are no uncertain positions taken or expected to be taken that would require such recognition or disclosure in the financial statements.

Note 6. COVID-19 Global Pandemic

On January 30, 2020, the World Health Organization declared the outbreak of the coronavirus disease 2019 ("COVID-19") a global health emergency and subsequently declared the COVID-19 outbreak a global pandemic in March 2020. The pandemic has adversely affected domestic and global economic activity and the full impact continues to evolve as of the date of this report. Accordingly, the effects of the pandemic on the Plan's current and future operations are unknown at this time.

SUPPLEMENTAL SCHEDULE

BUYERS PRODUCTS COMPANY
 EMPLOYEES' PROFIT SHARING PLAN
 SCHEDULE OF ASSETS (HELD AT END OF YEAR)
 Schedule H, Line 4i
 Employer No. 34-1000414
 Plan No. 001

December 31, 2020

(a) (b) (c)

(d) (e)

Investment Detail - Bank Sweep

Bank Sweep	Starting Balance	Ending Balance	% of Account Assets
* CHARLES SCHWAB BANK	249,000.00	94,163.29	<1%
* CHARLES SCHWAB TRUST BANK	80,076.33	0.00	
Total Bank Sweep ^{A,B}	329,076.33	94,163.29	<1%
Total Bank Sweep		94,163.29	<1%



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December 1-31, 2020

Investment Detail - Fixed Income

	Par	Market Price	Market Value <i>Cost Basis</i>	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income Yield to Maturity
U.S. Treasuries							
US TREASU NT 2.875%11/21	600,000.0000	102.37500	614,250.00	607,604.60	<1%	6,645.40^b	17,250.00
UST NOTE DUE 11/15/21 CUSIP: 9128285L0			613,794.80				1.59% Accrued Interest: 2,239.64
US TREASUR NT 2.75%11/23	1,100,000.0000	107.43750	1,181,812.50	1,137,989.74	2%	43,822.76^b	30,250.00
UST NOTE DUE 11/15/23 CUSIP: 912828WE6			1,139,323.23				N/A ^y Accrued Interest: 3,927.49
US TREASU NT 2.125%11/23	1,125,000.0000	105.71875	1,189,335.94	1,104,423.31	2%	84,912.63	23,906.25
UST NOTE DUE 11/30/23 CUSIP: 912828U57			1,104,423.31				N/A ^y Accrued Interest: 2,101.65
US TREASURY 2.25%08/27	450,000.0000	110.82812	498,726.54	483,764.86	<1%	14,961.68^b	10,125.00
UST BOND DUE 08/15/27 CUSIP: 9128282R0			484,483.44				N/A ^y Accrued Interest: 3,824.39
US TREASUR NT 2.75%02/28	1,095,000.0000	114.60937	1,254,972.60	1,081,100.33	2%	173,872.27^b	30,112.50
UST NOTE DUE 02/15/28 CUSIP: 9128283W8			1,081,671.88				N/A ^y Accrued Interest: 11,374.01



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
U.S. Treasuries (continued)			<i>Cost Basis</i>				Yield to Maturity
US TREASUR NT 1.5%02/30	425,000.0000	105.75000	449,437.50	448,006.93	<1%	1,430.57	6,375.00
UST NOTE DUE 02/15/30 CUSIP: 912828Z94			448,006.93				0.88%
						Accrued Interest: 2,407.95	
Total U.S. Treasuries	4,795,000.0000		5,188,535.08	4,862,889.77	8%	325,645.31^b	118,018.75
		Total Cost Basis:	4,871,703.59				
						Total Accrued Interest for U.S. Treasuries: 25,875.13	
Agency Securities			<i>Cost Basis</i>				Yield to Maturity
FEDERAL FARM CR B 1.6%24	450,000.0000	104.96360	472,336.20	448,179.35	<1%	24,156.85	7,200.00
DUE 09/17/24 CUSIP: 3133EKP75 MOODY'S: Aaa S&P: AA+			448,179.35				1.68%
						Accrued Interest: 2,080.00	
FEDERAL HOME LN 2.125%29	1,000,000.0000	109.63390	1,096,339.00	1,004,671.77	2%	91,667.23^b	21,250.00
DUE 12/14/29 CUSIP: 3130AHKT9 MOODY'S: Aaa S&P: AA+			1,005,074.00				2.06%
						Accrued Interest: 1,003.47	
Total Agency Securities	1,450,000.0000		1,568,675.20	1,452,851.12	2%	115,824.08^b	28,450.00
		Total Cost Basis:	1,453,253.35				
						Total Accrued Interest for Agency Securities: 3,083.47	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
			<i>Cost Basis</i>				Yield to Maturity
Corporate Bonds							
MARSH & MCLENNAN	150,000.0000	101.24890	151,873.35	152,314.40	<1%	(441.05)^b	7,200.00
4.8%21							
DUE 07/15/21			167,371.50				3.21%
CALLABLE 04/15/21 AT							
100.00000							
CUSIP: 571748AR3							
MOODY'S: Baa1 S&P: A-							
						Accrued Interest: 3,320.00	
THE PROGRESSIVE	230,000.0000	102.24740	235,169.02	231,120.11	<1%	4,048.91^b	8,625.00
3.75%21							
DUE 08/23/21			237,740.70				3.25%
CUSIP: 743315AN3							
MOODY'S: A2 S&P: A							
						Accrued Interest: 3,066.67	
DUKE ENERGY CORP	330,000.0000	101.39060	334,588.98	332,045.41	<1%	2,543.57^b	11,715.00
3.55%21							
DUE 09/15/21			338,887.80				N/A ^y
CALLABLE 06/15/21 AT							
100.00000							
CUSIP: 26441CAF2							
MOODY'S: Baa1 S&P:							
BBB+						Accrued Interest: 3,449.42	
MORGAN STANLEY	285,000.0000	101.93800	290,523.30	281,136.80	<1%	9,386.50	7,481.25
2.625%21							
DUE 11/17/21			281,136.80				N/A ^y
CUSIP: 61746BED4							
MOODY'S: A2 S&P: BBB+						Accrued Interest: 914.38	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Corporate Bonds (continued)			<i>Cost Basis</i>				Yield to Maturity
TRUIST FINL CORP 3.95%22	250,000.0000	104.00190	260,004.75	249,121.37	<1%	10,883.38 ^b	9,875.00
DUE 03/22/22			249,556.00				N/A ^y
CALLABLE 02/22/22 AT 100.00000							
CUSIP: 05531GAA9							
MOODY'S: A3 S&P: BBB+						Accrued Interest: 2,715.63	
VIRGINIA ELECTRI 3.45%22	330,000.0000	104.10520	343,547.16	337,010.19	<1%	6,536.97 ^b	11,385.00
DUE 09/01/22			340,933.70				2.35%
CALLABLE 06/01/22 AT 100.00000							
CUSIP: 927804FJ8							
MOODY'S: A2 S&P: BBB+						Accrued Interest: 3,795.00	
NTNL RURAL UTILIT 3.4%23	340,000.0000	107.85990	366,723.66	353,156.71	<1%	13,566.95 ^b	11,560.00
DUE 11/15/23			358,166.60				2.06%
CALLABLE 08/15/23 AT 100.00000							
CUSIP: 637432MV4							
MOODY'S: A1 S&P: A						Accrued Interest: 1,477.11	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value <i>Cost Basis</i>	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income Yield to Maturity
Corporate Bonds (continued)							
PNC FINL SVCS GRO 3.9%24	210,000.0000	110.60080	232,261.68	210,685.90	<1%	21,575.78^b	8,190.00
DUE 04/29/24			211,344.00				N/A ^y
CALLABLE 03/29/24 AT							
100.00000							
CUSIP: 693475AP0							
MOODY'S: A3 S&P: BBB+						Accrued Interest: 1,410.50	
CHUBB INA HOLDIN 3.35%24	245,000.0000	109.11120	267,322.44	244,215.30	<1%	23,107.14	8,207.50
DUE 05/15/24			244,215.30				3.41%
CUSIP: 00440EAR8							
MOODY'S: A3 S&P: A						Accrued Interest: 1,048.74	
A O N PLC 3.5% 24F	325,000.0000	108.94750	354,079.38	329,656.62	<1%	24,422.76^b	11,375.00
DUE 06/14/24			332,089.45				N/A ^y
CALLABLE 03/14/24 AT							
100.00000							
CUSIP: 00185AAF1							
MOODY'S: Baa2 S&P: A-						Accrued Interest: 537.15	
HUNTINGTON BANC 2.625%24	340,000.0000	106.37040	361,659.36	359,739.84	<1%	1,919.52^b	8,925.00
DUE 08/06/24			360,206.60				1.13%
CALLABLE 07/06/24 AT							
100.00000							
CUSIP: 446150AQ7							
MOODY'S: Baa1 S&P: BBB+						Accrued Interest: 3,594.79	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
			<i>Cost Basis</i>				<i>Yield to Maturity</i>
Corporate Bonds							
(continued)							
JPMORGAN CHASE	350,000.0000	111.64100	390,743.50	348,786.59	<1%	41,956.91^b	13,562.50
3.875%24							
DUE 09/10/24			350,138.00				N/A ^y
CUSIP: 46625HJY7							
MOODY'S: A3 S&P: BBB+						Accrued Interest: 4,181.77	
U.S. BANCORP	370,000.0000	110.07340	407,271.58	372,143.05	<1%	35,128.53^b	13,320.00
3.6%24							
DUE 09/11/24			376,742.50				N/A ^y
CALLABLE 08/11/24 AT							
100.00000							
CUSIP: 91159HHK9							
MOODY'S: A1 S&P: A-						Accrued Interest: 4,070.00	
AMERICAN EXPRESS CO	325,000.0000	109.12430	354,653.98	319,618.80	<1%	35,035.18	9,750.00
3%24							
DUE 10/30/24			319,618.80				N/A ^y
CALLABLE 09/29/24 AT							
100.00000							
CUSIP: 025816BR9							
MOODY'S: A3 S&P: BBB+						Accrued Interest: 1,652.08	
BECTON, DICKINS	200,000.0000	110.74010	221,480.20	204,073.71	<1%	17,406.49^b	7,468.00
3.734%24							
DUE 12/15/24			207,716.00				3.18%
CALLABLE 09/15/24 AT							
100.00000							
CUSIP: 075887BF5							
MOODY'S: Ba1 S&P: BBB						Accrued Interest: 331.91	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value <i>Cost Basis</i>	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income Yield to Maturity
Corporate Bonds (continued)							
BERKSHIRE HATHAWA 3.5%25	430,000.0000	109.97000	472,871.00	435,030.28	<1%	37,840.72 ^b	15,050.00
DUE 02/01/25			437,272.40				N/A ^y
CALLABLE 11/01/24 AT 100.00000							
CUSIP: 084659AD3							
MOODY'S: A3 S&P: A-							
						Accrued Interest: 6,270.83	
MUFG AMERICAS HOLDI 3%25	452,000.0000	108.25000	489,290.00	460,740.20	<1%	28,549.80 ^b	13,560.00
DUE 02/10/25			462,089.28				N/A ^y
CALLABLE 01/10/25 AT 100.00000							
CUSIP: 553794AC2							
MOODY'S: A3 S&P: A-							
						Accrued Interest: 5,311.00	
ENTERPRISE PRODU 3.75%25	265,000.0000	111.90440	296,546.66	271,547.51	<1%	24,999.15 ^b	9,937.50
DUE 02/15/25			275,521.15				N/A ^y
CALLABLE 11/15/24 AT 100.00000							
CUSIP: 29379VBE2							
MOODY'S: Baa1 S&P: BBB+							
						Accrued Interest: 3,754.17	
THE WALT DISNEY 3.35%25	300,000.0000	110.75170	332,255.10	323,518.26	<1%	8,736.84 ^b	10,050.00
DUE 03/24/25			325,556.00				1.54%
CUSIP: 254687FN1							
MOODY'S: A2 S&P: BBB+							
						Accrued Interest: 2,707.92	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Corporate Bonds (continued)			<i>Cost Basis</i>				Yield to Maturity
SHELL INTERNTNL3.25% 25F	550,000.0000	110.73030	609,016.65	538,869.00	<1%	70,147.65	17,875.00
DUE 05/11/25			538,869.00				N/A ^y
CUSIP: 822582BD3							
MOODY'S: Aa2 S&P: AA-							
						Accrued Interest: 2,482.64	
CVS HEALTH CORP 3.875%25	225,000.0000	113.11430	254,507.18	231,818.44	<1%	22,688.74^b	8,718.75
TENDER OFFER			235,330.25				3.21%
EXP: 12/18.01/06/2021							
CALLABLE 04/20/25 AT 100.00000							
CUSIP: 126650CL2							
MOODY'S: Baa2 S&P: BBB							
						Accrued Interest: 3,899.22	
DOVER CORP 3.15%25	250,000.0000	110.24240	275,606.00	275,806.50	<1%	(200.50)	7,875.00
DUE 11/15/25			275,806.50				1.01%
CALLABLE 08/15/25 AT 100.00000							
CUSIP: 260003AM0							
MOODY'S: Baa1 S&P: BBB+							
						Accrued Interest: 1,006.25	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value <i>Cost Basis</i>	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income Yield to Maturity
Corporate Bonds (continued)							
JOHNSON CONTROLS3.9% 26F	200,000.0000	113.92120	227,842.40	210,612.14	<1%	17,230.26 ^b	7,800.00
DUE 02/14/26			212,016.00				N/A ^y
CALLABLE 11/14/25 AT 100.00000							
CUSIP: 478375AR9							
MOODY'S: Baa2 S&P: BBB+						Accrued Interest: 2,968.33	
CINCINNATI CHIL 2.853%26	400,000.0000	109.01750	436,070.00	400,012.13	<1%	36,057.87 ^b	11,412.00
DUE 11/15/26			400,014.00				2.85%
CALLABLE 08/15/26 AT 100.00000							
CUSIP: 16876AAB0							
MOODY'S: Aa2 S&P: AA						Accrued Interest: 1,458.20	
THE HOME DEPOT, I 2.5%27	300,000.0000	109.31900	327,957.00	315,671.62	<1%	12,285.38 ^b	7,500.00
DUE 04/15/27			316,724.00				1.64%
CALLABLE 02/15/27 AT 100.00000							
CUSIP: 437076CA8							
MOODY'S: A2 S&P: A						Accrued Interest: 1,583.33	
WELLS FARGO & CO 4.3%27	330,000.0000	116.83530	385,556.49	337,871.14	<1%	47,685.35 ^b	14,190.00
DUE 07/22/27			341,032.20				N/A ^y
CUSIP: 94974BGL8							
MOODY'S: A3 S&P: BBB						Accrued Interest: 6,267.25	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value <i>Cost Basis</i>	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income Yield to Maturity
Corporate Bonds (continued)							
BANK OF AMERICA 3.248%27	445,000.0000	111.87340	497,836.63	437,299.94	<1%	60,536.69^b	14,453.60
DUE 10/21/27			437,439.75				N/A ^y
CALLABLE 10/21/26 AT 100.00000							
CUSIP: 06051GGA1							
MOODY'S: A2 S&P: A-						Accrued Interest: 2,810.42	
KEYCORP 4.1%28	200,000.0000	118.57420	237,148.40	199,672.00	<1%	37,476.40	8,200.00
DUE 04/30/28			199,672.00				4.12%
CUSIP: 49326EEG4							
MOODY'S: Baa1 S&P: BBB+						Accrued Interest: 1,389.44	
XCEL ENERGY INC. 4%28	318,000.0000	118.89140	378,074.65	373,915.01	<1%	4,159.64^b	12,720.00
DUE 06/15/28			375,413.00				1.51%
CALLABLE 12/15/27 AT 100.00000							
CUSIP: 98389BAV2							
MOODY'S: Baa1 S&P: BBB+						Accrued Interest: 565.33	
INTERST PWR LIGHT 4.1%28	330,000.0000	119.08520	392,981.16	362,219.76	<1%	30,761.40^b	13,530.00
DUE 09/26/28			365,288.10				N/A ^y
CALLABLE 06/26/28 AT 100.00000							
CUSIP: 461070AP9							
MOODY'S: Baa1 S&P: A-						Accrued Interest: 3,570.42	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
			<i>Cost Basis</i>				<i>Yield to Maturity</i>
Corporate Bonds (continued)							
THE KROGER CO. 4.5%29	105,000.0000	122.56490	128,693.15	108,098.84	<1%	20,594.31^b	4,725.00
DUE 01/15/29			<i>108,464.30</i>				<i>4.08%</i>
CALLABLE 10/15/28 AT 100.00000							
CUSIP: 501044DL2							
MOODY'S: Baa1 S&P: BBB						<i>Accrued Interest: 2,178.75</i>	
EVERSOURCE ENERG 4.25%29	280,000.0000	119.56710	334,787.88	338,234.59	<1%	(3,446.71)^b	11,900.00
DUE 04/01/29			<i>338,940.00</i>				<i>1.62%</i>
CALLABLE 01/01/29 AT 100.00000							
CUSIP: 30040WAF5							
MOODY'S: Baa1 S&P: BBB+						<i>Accrued Interest: 2,975.00</i>	
STARBUCKS CORP 2.25%30	370,000.0000	105.44960	390,163.52	384,425.50	<1%	5,738.02	8,325.00
DUE 03/12/30			<i>384,425.50</i>				<i>1.79%</i>
CALLABLE 12/12/29 AT 100.00000							
CUSIP: 855244AW9							
MOODY'S: Baa1 S&P: BBB+						<i>Accrued Interest: 2,520.62</i>	



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
			<i>Cost Basis</i>				Yield to Maturity
Corporate Bonds							
(continued)							
MCDONALD'S CORP	190,000.0000	117.02780	222,352.82	221,468.50	<1%	884.32	6,840.00
3.6%30							
DUE 07/01/30			221,468.50				1.76%
CALLABLE 04/01/30 AT							
100.00000							
CUSIP: 58013MFQ2							
MOODY'S: Baa1 S&P:							
BBB+							
						Accrued Interest: 3,420.00	
Total Corporate Bonds	10,220,000.0000		11,261,459.03	10,551,656.16	17%	709,802.87 ^b	353,301.10
		Total Cost Basis:	10,627,205.68				
						Total Accrued Interest for Corporate Bonds: 92,704.27	
	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
			<i>Cost Basis</i>				Yield to Maturity
Municipal Bonds							
OH ST HGR ED FAC CO	225,000.0000	106.34500	239,276.25	225,002.02	<1%	14,274.23 ^b	9,000.00
4%23							
SYST HLTH DUE 01/01/23			225,015.00				3.99%
TAXBL							
CUSIP: 67756A2Q4							
MOODY'S: Aa2 S&P: AA							
						Accrued Interest: 4,500.00	



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	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Municipal Bonds (continued)			Cost Basis				Yield to Maturity
KY ST PPTY & BL 5.373%25	260,000.0000	114.27700	297,120.20	276,529.13	<1%	20,591.07 ^b	13,969.80
LEAS BLDG DUE 11/01/25 TAXBL CUSIP: 49151E7C1 MOODY'S: A1 S&P: A-			289,958.20				3.95%
						Accrued Interest: 2,328.30	
KS ST DEV FA RE 4.091%27	370,000.0000	118.38200	438,013.40	379,870.91	<1%	58,142.49 ^b	15,136.70
DEV AUTH DUE 04/15/27 XTRO TAXBL CUSIP: 485429Z23 MOODY'S: Aa3 S&P: A+			384,192.40				3.62%
						Accrued Interest: 3,195.53	
UNIV CINCINNATI 2.383%27	270,000.0000	105.90700	285,948.90	270,011.37	<1%	15,937.53 ^b	6,434.10
PUB EDUC DUE 06/01/27 TAXBL CUSIP: 914119U75 MOODY'S: Aa3 S&P: AA-			270,014.00				2.38%
						Accrued Interest: 536.18	
Total Municipal Bonds	1,125,000.0000		1,260,358.75	1,151,413.43	2%	108,945.32 ^b	44,540.60
	Total Cost Basis:		1,169,179.60				
Total Accrued Interest for Municipal Bonds: 10,560.01							



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		Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Mortgage Pools				<i>Cost Basis</i>				Yield to Maturity
GNMA PL 676681	4%25	350,000.0000	106.01313	25,480.88	N/A	<1%	(507.61)	N/A
DUE 06/15/25				25,988.49				N/A
CUSIP: 36295PXJ6								
FACTOR= .068673120								
REMAIN PRIN=\$24,035.59								
FNMA PL BL0359	3.7%28	450,000.0000	116.46432	506,511.51	N/A	<1%	54,874.22	N/A
DUE 11/01/28				451,637.29				N/A
CUSIP: 3140HRMH3								
FACTOR= .966460050								
REMAIN PRIN=\$434,907.02								
FNMA PL BL0752	3.65%29	600,000.0000	116.78928	700,735.68	N/A	1%	77,846.68	N/A
DUE 01/01/29				622,889.00				N/A
CUSIP: 3140HRZS5								
FACTOR=1.000000000								
REMAIN PRIN=\$600,000.00								
FNMA PL AL9309	3.5%31	400,000.0000	107.59771	169,976.72	N/A	<1%	4,900.70	N/A
DUE 10/01/31				165,076.02				N/A
CUSIP: 3138ERKX7								
FACTOR= .394935730								
REMAIN PRIN=\$157,974.29								
FHLMC G18642	3.5%32	550,000.0000	106.98544	240,771.56	N/A	<1%	5,253.24	N/A
DUE 04/01/32				235,518.32				N/A
CUSIP: 3128MMWC3								
MOODY'S: NR S&P: NR								
FACTOR= .409183230								
REMAIN PRIN=\$225,050.78								



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		Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Mortgage Pools (continued)				Cost Basis				Yield to Maturity
FNMA PL AL7077	4%35	760,000.0000	109.02784	395,318.21	N/A	<1%	(16,682.11)	N/A
DUE 07/01/35				412,000.32				N/A
CUSIP: 3138EP2K9								
FACTOR= .477085060								
REMAIN PRIN=\$362,584.65								
FNMA PL 995112	5.5%36	1,000,000.0000	116.41243	45,339.30	N/A	<1%	2,400.09	N/A
DUE 07/01/36				42,939.21				N/A
CUSIP: 31416BN53								
MOODY'S: NR S&P: NR								
FACTOR= .038947130								
REMAIN PRIN=\$38,947.13								
FNMA PL MA2773	3%36	765,000.0000	105.81068	383,266.18	N/A	<1%	10,963.94	N/A
DUE 10/01/36				372,302.24				N/A
CUSIP: 31418CCK8								
FACTOR= .473488630								
REMAIN PRIN=\$362,218.80								
FNMA PL MA3337	4%38	550,000.0000	107.24129	272,292.80	N/A	<1%	9,551.79	N/A
DUE 04/01/38				262,741.01				N/A
CUSIP: 31418CV76								
FACTOR= .461648510								
REMAIN PRIN=\$253,906.68								
FHLMC G31087	4%38	260,000.0000	108.42408	145,184.97	N/A	<1%	6,857.99	N/A
DUE 07/01/38				138,326.98				N/A
CUSIP: 3132J4ND7								
FACTOR= .515018190								
REMAIN PRIN=\$133,904.73								



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
Mortgage Pools (continued)			<i>Cost Basis</i>				Yield to Maturity
FNMA PL AJ7509 3.302%41	175,000.0000	103.51320	22,291.40	N/A	<1%	(444.67)	N/A
DUE 12/01/41			22,736.07				N/A
CUSIP: 3138E0KX6							
FACTOR= .123056190							
REMAIN PRIN=\$21,534.83							
Total Mortgage Pools	5,860,000.0000		2,907,169.21	N/A	4%	155,014.26	N/A
Total Cost Basis:			2,752,154.95				

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
CMO & Asset Backed Securities			<i>Cost Basis</i>				Yield to Maturity
FEDERAL NTNL MORTGA 3%28	250,000.0000	101.00633	87,053.63	N/A	<1%	(3,395.99)	N/A
MBS-CMO DUE 07/25/28			90,449.62				N/A
-1321D-							
CUSIP: 3136ACQX2							
FACTOR= .344745260							
REMAIN PRIN=\$86,186.32							



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Investment Detail - Fixed Income (continued)

		Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
				Cost Basis				Yield to Maturity
CMO & Asset Backed Securities (continued)								
FREDDIE MAC	5.5%35	2,280,000.0000	113.16075	54,746.53	N/A	<1%	627.91	N/A
MBS-CMO	DUE 02/15/35			54,118.62				N/A
-2933A-								
CUSIP: 31395MSH3								
FACTOR= .021219050								
REMAIN PRIN=\$48,379.43								
FREDDIE MAC	3.5%42	100,000.0000	100.75211	20,366.36	N/A	<1%	173.55	N/A
MBS-CMO	DUE 01/15/42			20,192.81				N/A
-4646A-								
CUSIP: 3137BUDF2								
FACTOR= .202143270								
REMAIN PRIN=\$20,214.33								
Total CMO & Asset Backed Securities		2,630,000.0000		162,166.52	N/A	<1%	(2,594.53)	N/A
Total Cost Basis:				164,761.05				



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Investment Detail - Fixed Income (continued)

	Par	Market Price	Market Value	Adjusted Cost Basis	% of Account Assets	Unrealized Gain or (Loss)	Estimated Annual Income
CDs & BAs			<i>Cost Basis</i>				<i>Yield to Maturity</i>
GOLDMAN SACHS BAN	250,000.0000	108.70900	271,772.50	248,874.00	<1%	22,898.50	8,500.00
3.4%23							
CD FDIC INS DUE 10/17/23			248,874.00				3.50%
US							
CUSIP: 38148PY27							
MOODY'S: NR S&P: NR							
						Accrued Interest: 1,769.86	
Total CDs & BAs	250,000.0000		271,772.50	248,874.00	<1%	22,898.50	8,500.00
		Total Cost Basis:	248,874.00				
						Total Accrued Interest for CDs & BAs: 1,769.86	
Total Fixed Income	26,330,000.0000		22,620,136.29	18,267,684.48	34%	1,435,535.81 ^b	552,810.45
		Total Cost Basis:	21,287,132.22				

Accrued Interest represents the interest that would be received if the fixed income investment was sold prior to the coupon payment.

Estimated Annual Income ("EAI") and Estimated Yield ("EY") calculations are for informational purposes only. The actual income and yield might be lower or higher than the estimated amounts. EY is based upon EAI and the current price of the security and will fluctuate. For certain types of securities, the calculations could include a return of principal or capital gains in which case EAI and EY would be overstated. EY and EAI are not promptly updated to reflect when an issuer has missed a regular payment or announced changes to future payments, in which case EAI and EY will continue to display at a prior rate.

Investment Detail - Equities

	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities			<i>Cost Basis</i>				
ABBOTT LABORATORIES	12,000.0000	109.49000	1,313,880.00	2%	995,275.67	1.31%	17,280.00
SYMBOL: ABT			318,604.33				



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Investment Detail - Equities (continued)

		Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities (continued)				<i>Cost Basis</i>				
ACCENTURE PLC	F	5,255.0000	261.21000	1,372,658.55	2%	748,614.18	1.34%	18,497.60
CLASS	A			624,044.37				
SYMBOL:	ACN							
ALCON INC	F	6,405.0000	65.98000	422,601.90	<1%	46,379.89	N/A	N/A
SYMBOL:	ALC			376,222.01				
ALLIANT ENERGY CORP		22,200.0000	51.53000	1,143,966.00	2%	177,396.12	2.94%	33,744.00
SYMBOL:	LNT			966,569.88				
ALPHABET INC.		1,065.0000	1,752.64000	1,866,561.60	3%	934,388.82	N/A	N/A
CLASS	A			932,172.78				
SYMBOL:	GOOGL							
AMERICAN EXPRESS CO		5,925.0000	120.91000	716,391.75	1%	329,095.70	1.42%	10,191.00
SYMBOL:	AXP			387,296.05				
AMPHENOL CORP		6,820.0000	130.77000	891,851.40	1%	234,330.06	0.76%	6,820.00
CLASS	A			657,521.34				
SYMBOL:	APH							
							<i>Accrued Dividend: 1,977.80</i>	
ANALOG DEVICES INC		6,735.0000	147.73000	994,961.55	2%	212,909.50	1.67%	16,702.80
SYMBOL:	ADI			782,052.05				
APPLE INC		7,640.0000	132.69000	1,013,751.60	2%	922,350.84	2.47%	25,059.20
SYMBOL:	AAPL			91,400.76				
* AUTO DATA PROCESSING		4,575.0000	176.20000	806,115.00	1%	283,962.57	2.06%	16,653.00
SYMBOL:	ADP			522,152.43				
							<i>Accrued Dividend: 6,268.20</i>	



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Investment Detail - Equities (continued)

	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities (continued)			<i>Cost Basis</i>				
AXIS CAPITAL HLDG LT F SYMBOL: AXS	13,000.0000	50.39000	655,070.00 610,484.00	<1%	44,586.00	3.25%	21,320.00
BANK OF AMERICA CORP SYMBOL: BAC	34,628.0000	30.31000	1,049,574.68 829,493.30	2%	220,081.38	2.37%	24,932.16
CARLISLE CO SYMBOL: CSL	6,125.0000	156.18000	956,602.50 693,808.18	1%	262,794.32	1.34%	12,862.50
CHEVRON CORP SYMBOL: CVX	5,715.0000	84.45000	482,631.75 570,524.33	<1%	(87,892.58)	6.11%	29,489.40
COLGATE-PALMOLIVE CO SYMBOL: CL	9,495.0000	85.51000	811,917.45 594,649.64	1%	217,267.81	2.05%	16,711.20
COMCAST CORP CLASS A SYMBOL: CMCSA	7,965.0000	52.40000	417,366.00 225,285.73	<1%	192,080.27	1.75%	7,327.80
CVS HEALTH CORP SYMBOL: CVS	8,000.0000	68.30000	546,400.00 760,414.48	<1%	(214,014.48)	2.92%	16,000.00
DANAHER CORP SYMBOL: DHR	4,200.0000	222.14000	932,988.00 167,522.75	1%	765,465.25	0.32%	3,024.00
						<i>Accrued Dividend: 756.00</i>	
FIDELITY NATL INFO SYMBOL: FIS	5,800.0000	141.46000	820,468.00 618,098.96	1%	202,369.04	0.98%	8,120.00
FIRST HORIZON CORP SYMBOL: FHN	72,283.0000	12.76000	922,331.08 881,448.43	1%	40,882.65	4.70%	43,369.80
						<i>Accrued Dividend: 10,842.45</i>	



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Investment Detail - Equities (continued)

	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities (continued)			<i>Cost Basis</i>				
HOME DEPOT INC	4,400.0000	265.62000	1,168,728.00	2%	237,058.54	2.25%	26,400.00
SYMBOL: HD			931,669.46				
HONEYWELL INTL INC	1,500.0000	212.70000	319,050.00	<1%	100,758.00	1.74%	5,580.00
SYMBOL: HON			218,292.00				
HUBBELL INC	5,150.0000	156.79000	807,468.50	1%	199,659.58	2.50%	20,188.00
SYMBOL: HUBB			607,808.92				
MARSH & MC LENNAN CO	6,370.0000	117.00000	745,290.00	1%	513,108.65	1.58%	11,848.20
SYMBOL: MMC			232,181.35				
MASTERCARD INC	2,345.0000	356.94000	837,024.30	1%	625,599.73	0.44%	3,752.00
CLASS A			211,424.57				
SYMBOL: MA							
MEDTRONIC PLC F	7,915.0000	117.14000	927,163.10	1%	297,985.59	1.98%	18,362.80
SYMBOL: MDT			629,177.51				
						Accrued Dividend: 4,590.70	
MICROSOFT CORP	5,700.0000	222.42000	1,267,794.00	2%	1,115,223.77	1.00%	12,768.00
SYMBOL: MSFT			152,570.23				
NASDAQ INC	6,500.0000	132.74000	862,810.00	1%	175,375.85	1.47%	12,740.00
SYMBOL: NDAQ			687,434.15				
NIKE INC	3,500.0000	141.47000	495,145.00	<1%	440,484.75	0.77%	3,850.00
CLASS B			54,660.25				
SYMBOL: NKE							



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	Quantity	Market Price	Market Value <i>Cost Basis</i>	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities (continued)							
PACCAR INC SYMBOL: PCAR	9,000.0000	86.28000	776,520.00 511,075.59	1%	265,444.41	1.48%	11,520.00
					<i>Accrued Dividend: 6,300.00</i>		
PEPSICO INC SYMBOL: PEP	5,565.0000	148.30000	825,289.50 740,246.84	1%	85,042.66	2.75%	22,760.85
					<i>Accrued Dividend: 5,690.21</i>		
PPG INDUSTRIES INC SYMBOL: PPG	8,500.0000	144.22000	1,225,870.00 1,052,564.83	2%	173,305.17	1.49%	18,360.00
PROCTER & GAMBLE SYMBOL: PG	5,000.0000	139.14000	695,700.00 293,581.53	1%	402,118.47	2.27%	15,814.00
S&P GLOBAL INC SYMBOL: SPGI	1,300.0000	328.73000	427,349.00 170,314.36	<1%	257,034.64	0.81%	3,484.00
STARBUCKS CORP SYMBOL: SBUX	4,500.0000	106.98000	481,410.00 241,618.52	<1%	239,791.48	1.68%	8,100.00
THE COCA-COLA CO SYMBOL: KO	13,600.0000	54.84000	745,824.00 442,810.07	1%	303,013.93	2.99%	22,304.00
TJX COMPANIES INC SYMBOL: TJX	8,137.0000	68.29000	555,675.73 219,026.86	<1%	336,648.87	N/A	N/A
UNILEVER PLC F SPONSORED ADR 1 ADR REPS 1 ORD SHS SYMBOL: UL	13,300.0000	60.36000	802,788.00 778,604.69	1%	24,183.31	3.21%	25,775.40



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Investment Detail - Equities (continued)

	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Equities (continued)			<i>Cost Basis</i>				
VF CORP	6,500.0000	85.41000	555,165.00	<1%	146,385.45	2.29%	12,740.00
SYMBOL: VFC			408,779.55				
VISA INC	5,700.0000	218.73000	1,246,761.00	2%	82,452.78	0.58%	7,296.00
CLASS A			1,164,308.22				
SYMBOL: V							
WALT DISNEY CO	8,020.0000	181.18000	1,453,063.60	2%	479,037.65	0.97%	14,115.20
SYMBOL: DIS			974,025.95				
WASTE MANAGEMENT INC	7,500.0000	117.93000	884,475.00	1%	269,360.97	1.84%	16,350.00
SYMBOL: WM			615,114.03				
WILLIS TOWERS WATSON P F	3,760.0000	210.68000	792,156.80	1%	92,186.93	1.29%	10,227.20
SYMBOL: WLTW			699,969.87				
ZIMMER BIOMET HLDGS	8,000.0000	154.09000	1,232,720.00	2%	392,610.83	0.62%	7,680.00
SYMBOL: ZBH			840,109.17				
						<i>Accrued Dividend: 1,920.00</i>	
ZOETIS INC	6,000.0000	165.50000	993,000.00	2%	688,150.71	0.48%	4,800.00
CLASS A			304,849.29				
SYMBOL: ZTS							
Total Equities	403,593.0000		39,262,329.34	60%	14,470,345.73		644,920.11
		<i>Total Cost Basis:</i>	24,791,983.61				
						<i>Total Accrued Dividend for Equities:</i>	38,345.36



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Investment Detail - Equities (continued)

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Investment Detail - Mutual Funds

Equity Funds	Quantity	Market Price	Market Value	Cost Basis	Unrealized Gain or (Loss)	% of Account Assets
AMERICAN CENTURY SMALL C AP VALUE I SYMBOL: ACVIX	176,401.5450	8.72000	1,538,221.47	818,512.34	719,709.13	2%
Total Equity Funds	176,401.5450		1,538,221.47	818,512.34	719,709.13	2%
Total Mutual Funds	176,401.5450		1,538,221.47	818,512.34	719,709.13	2%

Investment Detail - Other Assets

Other Assets	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
			<i>Cost Basis</i>				
AMERN TOWER CORP REIT SYMBOL: AMT	5,049.0000	224.46000	1,133,298.54	2%	33,978.44	2.03%	23,023.44
			1,099,320.10				<i>Accrued Dividend: 6,109.29</i>
CAMDEN PROPERTY TR REIT SYMBOL: CPT	8,500.0000	99.92000	849,320.00	1%	73,013.30	3.32%	28,220.00
			776,306.70				<i>Accrued Dividend: 7,055.00</i>



Schwab One® Trust Account of
JOHNSON TRUST COMPANY TTEE
BUYERS PRODUCTS CO EMP PSP & T
U/A DTD 05/27/1966

Brokerage Account Statement and Trust Report

Account Number
9116-4986

Statement Period
December 1-31, 2020

Investment Detail - Other Assets (continued)

	Quantity	Market Price	Market Value	% of Account Assets	Unrealized Gain or (Loss)	Estimated Yield	Estimated Annual Income
Other Assets (continued)			<i>Cost Basis</i>				
THE ALLSTATE COR 5.1%PFD	8,744.0000	27.57000	241,072.08	<1%	26,558.04	N/A	N/A
DUE 01/15/53			214,514.04				
SUBJ TO XTRO REDEMPTION							
SYMBOL: ALL+B							
Total Other Assets	22,293.0000		2,223,690.62	3%	133,549.78		51,243.44
		Total Cost Basis:	2,090,140.84				

Total Accrued Dividend for Other Assets: 13,164.29

Estimated Annual Income ("EAI") and Estimated Yield ("EY") calculations are for informational purposes only. The actual income and yield might be lower or higher than the estimated amounts. EY is based upon EAI and the current price of the security and will fluctuate. For certain types of securities, the calculations could include a return of principal or capital gains in which case EAI and EY would be overstated. EY and EAI are not promptly updated to reflect when an issuer has missed a regular payment or announced changes to future payments, in which case EAI and EY will continue to display at a prior rate.

Total Investment Detail 65,738,541.01

Total Account Value 65,738,541.01

Total Cost Basis 48,987,769.01

*** REPRESENTS A PARTY-IN-INTEREST**