

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</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)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information—enter all requested information				
1a Name of plan <u>BWIGROUP 401(K) PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>11/13/2009</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>11/13/2009</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>11/13/2009</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>BWI NORTH AMERICA, INC.</u> <u>3100 RESEARCH BLVD.</u> <u>SUITE 240</u> <u>KETTERING, OH 45420</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>27-0540888</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>937-608-5804</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>336300</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>27-0540888</u>	2c Plan Sponsor's telephone number <u>937-608-5804</u>	2d Business code (see instructions) <u>336300</u>	
2b Employer Identification Number (EIN) <u>27-0540888</u>					
2c Plan Sponsor's telephone number <u>937-608-5804</u>					
2d Business code (see instructions) <u>336300</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.	10/05/2022	MARIA LUCAS
	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 (2021)
v. 210624

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	756
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).			
a(1) Total number of active participants at the beginning of the plan year.....		6a(1)	587
a(2) Total number of active participants at the end of the plan year		6a(2)	508
b Retired or separated participants receiving benefits.....		6b	5
c Other retired or separated participants entitled to future benefits		6c	200
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	713
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	713
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	690
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	100
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2J 2K 2T 3F 3H 3D 2R			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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
		2021
		This Form is Open to Public Inspection.
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan BWIGROUP 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 BWI NORTH AMERICA, INC.	D Employer Identification Number (EIN) 27-0540888	

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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(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)

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	13093	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BRADY, WARE & SCHOENFELD, INC

35-1476702

(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	ACCOUNTANT/AUDITOR	9350	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
60 64 65 71	RECORDKEEPER	-904	Yes ☒ No ☐	Yes ☒ No ☐	0	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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
ARTISAN INTL - DST ASSET MANAGER S 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMANA MUTUAL FUND TRUST INCOME 1300 NORTH STATE STREET BELLINGHAM, WA 98225	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMANA MUTUAL FUND TRUST GROWTH 1300 NORTH STATE STREET BELLINGHAM, WA 98225	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMANA DEVELOPING WORLD FUND 1300 NORTH STATE STREET BELLINGHAM, WA 98225	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AMANA PARTICIPATION FD INVESTOR CL 1300 NORTH STATE STREET BELLINGHAM, WA 98225	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BARON GLOBAL ADVANTAGE FD RETAIL 767 5TH AVENUE 49TH FLOOR NEW YORK, NY 10153	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BERKSHIRE FOCUS FUND 475 MILAN DRIVE SUITE 103 SAN JOSE, CA 95134	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BLACKROCK TECHNOLOGY OPPORTUNITIES 40 EAST 52ND STREET NEW YORK, NY 10022	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
BUFFALO GROWTH FUND 615 E. MICHIGAN STREET MILWAUKEE, WI 53202	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
HARTFORD STRATEGIC INCOME FUND CL 100 MATSONFORD RD STE 300 RADNOR, PA 19087	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
HENNESSY FOCUS FUND INVESTOR CLASS 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JANUS HENDERSON CONTRARIAN T 151 DETROIT ST. DENVER, CO 80206	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
LOOMIS SAYLES BOND RETAIL SHARES 399 BOYLSTON STREET 8TH FL BOSTON, MA 02116	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
NEEDHAM SMALL CAP GROWTH 445 PARK AVE. 15TH FLOOR NEW YORK, NY 10022	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PERMANENT PORTFOLIO 600 MONTGOMERY ST. SUITE 4100 SAN FRANCISCO, CA 94111-2702	0.38%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
PRINCIPAL DIVERSIFIED REAL ASSET F 620 COOLIDGE DRIVE SUITE 300 FOLSOM, CA 95630	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
T ROWE PRICE U.S. EQUITY RESEARCH F 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
VICTORY GLOBAL ENERGY TRANSITION A 4900 TIEDEMAN RD 4TH FLOOR BROOKLYN, OH 44114	0.40%	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan <u>BWIGROUP 401(K) PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>BWI NORTH AMERICA, INC.</u>	D Employer Identification Number (EIN) <u>27-0540888</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE: <u>MIP CL 1</u>		
b Name of sponsor of entity listed in (a): <u>FIDELITY MANAGEMENT TRUST COMPANY</u>		
c EIN-PN <u>04-3022712-024</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>8476021</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) 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 2021 This Form is Open to Public Inspection
For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan BWIGROUP 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 BWI NORTH AMERICA, INC.	D Employer Identification Number (EIN) 27-0540888	

Part I	Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.				
Assets		(a) Beginning of Year	(b) End of Year	
a Total noninterest-bearing cash.....		1a	5123	5316
b Receivables (less allowance for doubtful accounts):				
(1) Employer contributions		1b(1)	0	0
(2) Participant contributions.....		1b(2)	0	0
(3) Other		1b(3)	0	0
c General investments:				
(1) Interest-bearing cash (include money market accounts & certificates of deposit)		1c(1)	1821989	2660392
(2) U.S. Government securities		1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):				
(A) Preferred		1c(3)(A)	0	0
(B) All other.....		1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):				
(A) Preferred		1c(4)(A)	15176	21940
(B) Common		1c(4)(B)	1756121	3936725
(5) Partnership/joint venture interests		1c(5)	0	0
(6) Real estate (other than employer real property)		1c(6)	0	0
(7) Loans (other than to participants).....		1c(7)	0	0
(8) Participant loans		1c(8)	897885	794240
(9) Value of interest in common/collective trusts		1c(9)	9728333	8476021
(10) Value of interest in pooled separate accounts		1c(10)	0	0
(11) Value of interest in master trust investment accounts		1c(11)	0	0
(12) Value of interest in 103-12 investment entities		1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)		1c(13)	117077443	128013548
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	0	0
(15) Other.....		1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1) 0	0
(2)	Employer real property.....	1d(2) 0	0
e	Buildings and other property used in plan operation	1e 0	0
f	Total assets (add all amounts in lines 1a through 1e)	1f 131302070	143908182
Liabilities			
g	Benefit claims payable	1g 0	0
h	Operating payables	1h 0	0
i	Acquisition indebtedness.....	1i 0	0
j	Other liabilities.....	1j 0	33
k	Total liabilities (add all amounts in lines 1g through 1j)	1k 0	33
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l 131302070	143908149

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
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A) 3101985	
	(B) Participants	2a(1)(B) 4945356	
	(C) Others (including rollovers).....	2a(1)(C) 283675	
(2)	Noncash contributions.....	2a(2) 0	
(3)	Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2)	2a(3)	8331016
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A) 202	
	(B) U.S. Government securities	2b(1)(B) 0	
	(C) Corporate debt instruments	2b(1)(C) 0	
	(D) Loans (other than to participants)	2b(1)(D) 0	
	(E) Participant loans.....	2b(1)(E) 47260	
	(F) Other	2b(1)(F) 0	
	(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)	47462
(2)	Dividends: (A) Preferred stock.....	2b(2)(A) 515	
	(B) Common stock	2b(2)(B) 19440	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C) 10176643	
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)	10196598
(3)	Rents	2b(3)	0
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A) 13745910	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B) 13526595	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	219315
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A) 0	
	(B) Other	2b(5)(B) 2291200	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		-177074
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		6347225
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		27255742
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	14626706	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		14626706
f Corrective distributions (see instructions).....	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	13093	
(4) Other.....	2i(4)	9864	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		22957
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		14649663
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		12606079
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

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: **BRADY, WARE & SCHOENFELD, INC.**

(2) EIN: **35-1476702**

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		X	
5a Has a resolution to terminate the plan been adopted during the plan year or any prior plan year?..... ☐ Yes ☒ No If "Yes," enter the amount of any plan assets that reverted to the employer this year _____.			
5b If, during this plan year, any assets or liabilities were transferred from this plan to another plan(s), identify the plan(s) to which assets or liabilities were transferred. (See instructions.)			
5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)	
5c 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 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan BWIGROUP 401(K) PLAN	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 BWI NORTH AMERICA, INC.	D Employer Identification Number (EIN) 27-0540888

Part I	Distributions
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All references to distributions relate only to payments of benefits during the plan year.

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 04-6568107	
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.	
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes ☐ No ☐ N/A
If the plan is a defined benefit plan, go to line 8.	
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.	
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a
b Enter the amount contributed by the employer to the plan for this plan year	6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c
If you completed line 6c, skip lines 8 and 9.	
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes ☐ No ☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes ☐ No ☐ N/A

Part III	Amendments
----------	------------

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

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

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

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

Schedule R (Form 5500) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

- 14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

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

15a

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

15b

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

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

16a

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

16b

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

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

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

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

a Enter the percentage of plan assets held as:

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

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

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

c What duration measure was used to calculate line 19(b)?

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____

BWI GROUP 401(K) PLAN

**FINANCIAL STATEMENTS
AND SUPPLEMENTARY INFORMATION**

Years Ended December 31, 2021 and 2020

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BRADY WARE
& SCHOENFELD

INDEPENDENT AUDITORS' REPORT

Plan Administrator
BWI Group 401(k) Plan
Kettering, Ohio

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements

We have performed an audit of the financial statements of **BWI Group 401(k) Plan**, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements (2021 Financial Statements).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2021 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion on the 2021 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the 2021 Financial Statements section:

- The amounts and disclosures in the accompanying 2021 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying 2021 financial statements related to assets held by and certified by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

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INDEPENDENT AUDITORS' REPORT - CONTINUED

Basis for Opinion on the 2021 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the 2021 Financial Statements section of our report. We are required to be independent of **BWI Group 401(k) Plan** and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about **BWI Group 401(k) Plan's** ability to continue as a going concern for one year after the date the financial statements are available to be issued.

Management is also responsible for maintaining a current plan instrument, including all Plan amendments, administering the Plan, and determining that the Plan's transactions that are presented and disclosed in the financial statements are in conformity with the Plan's provisions, including maintaining sufficient records with respect to each of the participants, to determine the benefits due or which may become due to such participants.

Auditors' Responsibilities for the Audit of the 2021 Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2021 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.



INDEPENDENT AUDITORS' REPORT - CONTINUED

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit 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 **BWI Group 401(k) Plan's** internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about **BWI Group 401(k) Plan's** ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2021 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

INDEPENDENT AUDITORS' REPORT - CONTINUED

Other Matters

2021 Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2021 is presented for purposes 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 ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit 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 GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).



INDEPENDENT AUDITORS' REPORT - CONTINUED

Auditors' Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of **BWI Group 401(k) Plan**. As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, the Plan Administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated October 12, 2021, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements, and (b) the form and content of the information included in the 2020 financial statements other than that derived from the certified information were presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Brady, Ware & Schoenfeld, Inc.

Dayton, Ohio
October 3, 2022

BWI GROUP 401(K) PLAN**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS****December 31, 2021 and 2020**

	<u>2021</u>	<u>2020</u>
ASSETS		
Investments at fair value	\$ 134,632,605	\$120,670,729
Fully benefit-responsive investment contract at contract value	8,401,254	9,399,135
Receivables		
Notes receivable from participants	794,240	897,885
Cash	5,283	5,123
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 143,833,382</u>	<u>\$130,972,872</u>

BWI GROUP 401(K) PLAN**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS****Years Ended December 31, 2021 and 2020**

	<u>2021</u>	<u>2020</u>
ADDITIONS TO NET ASSETS ATTRIBUTED TO		
Investment income		
Net appreciation in fair value of investments	\$ 8,918,185	\$ 10,573,460
Interest and dividends	10,213,713	6,076,394
Other income	10,000	75,000
Total investment income	<u>19,141,898</u>	<u>16,724,854</u>
Interest income on notes receivable from participants	<u>47,260</u>	<u>51,376</u>
Contributions		
Employer - matching	1,569,509	1,601,982
Employer - discretionary	1,532,476	1,531,479
Participants - pre-tax	4,072,349	4,178,566
Participants - post-tax	139,533	128,706
Participants - Roth	733,474	696,268
Rollovers	283,675	258,401
Total contributions	<u>8,331,016</u>	<u>8,395,402</u>
Total additions	<u>27,520,174</u>	<u>25,171,632</u>
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO		
Benefits paid to participants	14,626,706	7,583,460
Administrative expenses	32,958	28,816
Total deductions	<u>14,659,664</u>	<u>7,612,276</u>
NET INCREASE	12,860,510	17,559,356
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of year	<u>130,972,872</u>	<u>113,413,516</u>
End of year	<u>\$ 143,833,382</u>	<u>\$ 130,972,872</u>

BWI GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF PLAN

The following description of the **BWI Group 401(k) Plan** (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General - On November 13, 2009, BWI North America, Inc. (the "Company") adopted a Section 401(k) profit-sharing plan. The Plan allows all salaried employees of the Company that are not leased employees, non-resident aliens, or employees covered by a collective bargaining agreement to participate. Effective August 13, 2018, the Plan was amended to allow full-time, hourly production and maintenance employees at the Company's Greenfield location to participate in the Plan. Employees may enter the Plan immediately upon their date of hire. The Plan contains an automatic enrollment feature. Employees that do not make an election to participate or decline within 30 days of employment are automatically enrolled into the Plan at a 3% pre-tax contribution rate. Effective August 25, 2017, a related employer, BWI Indiana, Inc., became a participating employer in the Plan. Effective October 1, 2018, another related employer, BWI Chassis Dynamics (NA), Inc., became a participating employer in the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Participant Contributions - The Plan provides for employee salary deferrals up to the lesser of 60% of eligible compensation for pre-tax and after-tax contributions or the statutory limits. Roth contributions are also allowed. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants who have attained age 50 by the end of the Plan year are eligible to make catch-up contributions.

Employer Contributions - Employer matching contributions are non-discretionary and participants become eligible for these contributions subsequent to completion of six months of service. The Plan matches 50% of the first 9% of eligible participant deferrals contributed to the Plan.

Additionally, the Plan provides for employer discretionary contributions. Participants become eligible for these contributions on the first day of the first month subsequent to completion of six months of service. For the years 2021 and 2020, the Company elected to contribute an amount equal to 4.0% of each eligible participant's compensation. No contributions shall be made on behalf of a participant to the extent that, when added to the participant's salary deferral contributions, it would cause the amounts allocated to exceed the limitations allowed by the Internal Revenue Service.

Participant Accounts - Fidelity Management Trust Company (the "Trustee") is Trustee and Custodian of Plan investments. Each participant's account is credited with the participant's contributions, Company contributions, net earnings or losses, forfeitures, distributions, and withdrawals. Company contributions are allocated based on participants' compensation as defined by the Plan Agreement. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Each participant directs both separately, and distinctly, into which investment the participant contribution, employer match, and discretionary contribution are to be invested.

BWI GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 - DESCRIPTION OF PLAN - CONTINUED

Vesting - Participants are immediately vested in their voluntary contributions, rollovers, and corresponding earnings. The following schedule will be used to determine vesting in the employer match, discretionary contributions and their earnings:

<u>Completed Years of Service</u>	<u>Vesting Percentages</u>
Fewer than 3	0%
3 or more	100%

Notes Receivable From Participants - Participants may borrow from their account balance in any amount between \$1,000 and \$50,000, but not to exceed 50% of their vested account balance. Loans bear interest at an agreed-upon percentage based on prevailing market rates, subject to applicable usury limits. Loan terms are for a period not exceeding five years. A term up to ten years may be approved by the Plan if proceeds are to be used for the purchase of a primary residence. Loans are secured by the balance in the participants' accounts. Principal and interest are paid ratably through payroll deductions. A participant may have up to three loans outstanding at any one time.

Benefits Paid - Upon termination of service by reason of retirement, death, permanent disability, or otherwise, participants, or designated beneficiaries, may elect to receive their vested balance either in a lump-sum amount, or payments over a period of time in cash installments, or in a form agreeable to the Plan Administrator. If the participant's account balance is \$1,000 or less, the Plan Administrator may elect to automatically distribute the balance to the participant in a single-sum payment. The Plan also allows for withdrawals of all or a portion of a participant's vested employer or employee contributions. These withdrawals are allowed after the contributions have been held in the Plan for at least 24 months. Participants may elect to withdraw all or a portion of their rollover contributions at any time. In addition, participants may receive distributions of all vested amounts for qualified financial hardships. Effective, April 8, 2020, the Plan adopted the CARES Act provision for distributions. This provision allowed participants to take qualified COVID related distributions up to \$100,000 through December 31, 2020.

Forfeitures - Forfeited balances of terminated participants' non-vested accounts are used to reduce future Company contributions and pay Plan expenses. Forfeitures in the amount of \$33,787 and \$71,061 were used during 2021 and 2020. Unallocated forfeitures at December 31, 2021 and 2020 were \$124,313 and \$42,460.

Investment Options - Upon enrollment in the Plan, a participant may direct contributions into investment options in increments of one percent. In addition, a self-directed brokerage account (BrokerageLink) is available to qualifying participants. Participants are eligible for BrokerageLink based on the balance in their individual accounts. BrokerageLink participants can elect to invest their Plan assets in individual securities. Participants may change their investment options and deferral percentages at any time via telephone or the Internet.

NOTES TO FINANCIAL STATEMENTS

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The financial statements of the Plan are prepared using the accrual method of accounting.

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measurement for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants would receive if they were to initiate permitted transactions under the terms of the Plan.

Financial Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan's Administrator to make estimates and assumptions that affect the reported amounts of net assets, and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition - Investments are reported at fair value, except for the fully benefit-responsive investment contract, which is reported at contract value. Fair value is the price that would be received to sell an asset, or paid to transfer a liability, in an orderly transaction between market participants at the measurement date. See Note 4 for 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 (depreciation) includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Notes Receivable From Participants - Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses is deemed necessary as of December 31, 2021 and 2020. If a participant ceases to make loan repayments and the Plan Administrator deems the participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded.

Payment of Benefits - Benefits are recorded when paid.

Administrative Expenses - The Company pays certain administrative expenses of the Plan, and the Plan participants will bear the responsibility of the remaining expenses. Investment related expenses are included in net appreciation (depreciation) in fair value of investments.

The Plan entered into a revenue credit agreement with the Trustee, in which the Trustee will pay the Plan \$75,000 per year, paid on a quarterly basis. Effective December 1, 2020, this amount was decreased to \$10,000 per year. These funds can be used to pay future Plan expenses or be allocated to eligible Plan participants on a pro rata basis based on eligible participant account balances, exclusive of outstanding loan balances. During 2021 and 2020, the Plan used \$10,819 and \$8,900 to pay eligible Plan expenses. The Plan allocated \$0 and \$75,548 back to participants during 2021 and 2020. The balance is maintained in a separate account with the other investments of the Plan, and the current year credits have been recorded as other income in the financial statements. Unallocated funds at December 31, 2021 and 2020 were \$18,058 and \$19,904.

NOTES TO FINANCIAL STATEMENTS

NOTE 2 - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Subsequent Events - In preparing these financial statements, the Plan has evaluated events and transactions for potential recognition or disclosure through October 3, 2022, the date the financial statements were available to be issued.

NOTE 3 - CERTIFIED INVESTMENTS

Certain information related to investments and cash disclosed in the accompanying financial statements and supplemental schedule, including investments and cash held at December 31, 2021 and 2020, net appreciation (depreciation) in fair value of investments, and interest and dividends for the years 2021 and 2020, was obtained by management and agreed to or derived from information certified as complete and accurate by Fidelity Management Trust Company (the Trustee of the Plan).

NOTE 4 - FAIR VALUE MEASUREMENTS

Accounting standards provide a framework for measuring fair value. This framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements), and the lowest priority to unobservable inputs (Level 3 measurements).

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

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

BWI GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 4 - FAIR VALUE MEASUREMENTS - CONTINUED

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021.

Money market funds: Valued at the net asset value (NAV) of shares held by the Plan at year-end.

Registered investment companies: Valued at the quoted market prices of shares held by the Plan at year-end.

Common stocks: Valued at the daily closing price of the stock.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>
Money market funds	\$ 2,660,392	\$ -	\$ -	\$ 2,660,392
Common stocks	3,958,665	-	-	3,958,665
Registered investment companies	128,013,548	-	-	128,013,548
	<u>\$ 134,632,605</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 134,632,605</u>

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

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Fair Value</u>
Money market funds	\$ 1,821,989	\$ -	\$ -	\$ 1,821,989
Common stocks	1,771,297	-	-	1,771,297
Registered investment companies	117,077,443	-	-	117,077,443
	<u>\$ 120,670,729</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 120,670,729</u>

BWI GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 5 - FULLY BENEFIT-RESPONSIVE INVESTMENT CONTRACT

The Fidelity Managed Income Portfolio Fund is a collective fund of investment contracts held in trust by Fidelity Management Trust Company. Investments included in the fund are contracts issued by insurance companies and other financial institutions, fixed income securities, and money market funds. The contract is included in the statements of net assets available for benefits as a fully benefit-responsive investment at its contract value.

Certain events, such as premature termination of the contract by the Plan or the termination of the Plan, would limit the Plan's ability to transact at contract value with Fidelity Management Trust Company. The Plan Administrator believes the occurrence of such events, which would also limit the Plan's ability to transact at contract value with Plan participants, is not probable.

NOTE 6 - RELATED PARTY TRANSACTIONS

Certain Plan assets are invested with Fidelity Management Trust Company. Thus, Fidelity Management Trust Company, as Trustee defined by the Plan, qualifies as a party-in-interest. Fees paid to the Trustee during 2021 and 2020 were \$9,046 and \$4,681.

Thompson Hine LLP, as attorney, qualifies as a party-in-interest. Legal fees paid by the Plan for the years 2021 and 2020 totaled \$1,469 and \$0.

Brady, Ware & Schoenfeld, Inc., as auditor, qualifies as a party-in-interest. Audit fees paid by the Plan for the years 2021 and 2020 totaled \$9,350 and \$8,900.

Strategic Advisors, Inc., as advisor, qualifies as a party-in-interest. Advisory fees paid by the Plan for the years 2021 and 2020 totaled \$13,093 and \$15,235.

The Plan Sponsor provides certain accounting, recordkeeping, and administrative services to the Plan, for which it receives no compensation.

NOTE 7 - PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right to terminate the Plan subject to the provisions of ERISA and its related regulations. In the event of Plan termination, participants will become 100% vested in the employer portion of contributions.

NOTE 8 - TAX STATUS

The Plan adopted a Volume Submitter Profit Sharing and 401(k) Plan with a cash or deferral arrangement which received a favorable opinion letter from the Internal Revenue Service on June 30, 2020, which stated that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code. The Plan has been amended since receiving the opinion letter; however, the Plan Administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

BWI GROUP 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 8 - TAX STATUS - CONTINUED

U.S. generally accepted accounting principles require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more-likely-than-not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE 9 - RISKS AND UNCERTAINTIES

The Plan invests in 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 Statements of Net Assets Available for Benefits.

NOTE 10 - BENEFITS ALLOCATED TO WITHDRAWN PARTICIPANTS

At December 31, 2021 and 2020, there were no amounts due to participants who have withdrawn from the Plan and requested benefit payment prior to year-end.

NOTE 11 - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of the net assets available for benefits and the net increase in net assets available for benefits between the financial statements and the Form 5500 as of and for the years ended December 31, 2021 and 2020:

	<u>2021</u>	<u>2020</u>
Net assets available for benefits per Form 5500	\$ 143,908,149	\$ 131,302,070
Contract value adjustment for fully benefit-responsive investment	<u>(74,767)</u>	<u>(329,198)</u>
Net assets available for benefits per the financial statements	<u>\$ 143,833,382</u>	<u>\$ 130,972,872</u>
	<u>2021</u>	<u>2020</u>
Net increase in net assets available for benefits per Form 5500	\$ 12,606,079	\$ 17,821,124
Current year contract value adjustment for fully benefit-responsive investment	<u>(74,767)</u>	<u>(329,198)</u>
Prior year contract value adjustment for fully benefit-responsive investment	<u>329,198</u>	<u>67,430</u>
Net increase in net assets available for benefits per the financial statements	<u>\$ 12,860,510</u>	<u>\$ 17,559,356</u>

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
Identity of issuer or similar party	Description of investment	Cost	Current value	
<u>Money Market Funds</u>				
* FIDELITY CASH RESERVES FUND	Money Market	#	\$	2,569,523
* FIDELITY GOVERNMENT MONEY MARKET	Money Market	#		90,869
				<u>2,660,392</u>
<u>Common Stocks</u>				
180 LIFE SCIENCES CORP	Common Stock	#		1,950
3M COMPANY	Common Stock	#		18,497
ABBVIE INC.	Common Stock	#		133
ADVANCED MICRO DEVICES INC.	Common Stock	#		30,725
AFLAC INC	Common Stock	#		8,862
ALPHABET INC CAP STK CL C	Common Stock	#		5,506
ALPHABET INC CAP STK CL A	Common Stock	#		84,014
AMARIN CORPORATION	Common Stock	#		77,173
AMAZON.COM INC.	Common Stock	#		5,002
AMGEN INC.	Common Stock	#		31
ANALOG DEVICES INC	Common Stock	#		137
APPLE COMPUTER INC.	Common Stock	#		278,094
AT&T INC.	Common Stock	#		17,060
BCE INC.	Common Stock	#		3
BEST BUY INC.	Common Stock	#		56
BJS WHOLESALE CLUB HOLDINGS	Common Stock	#		2,411
BLACKROCK INC	Common Stock	#		8,559
BROADCOM INC.	Common Stock	#		399
CARDINAL HEALTH INC	Common Stock	#		10,404
CARNIVAL CORP	Common Stock	#		3,432
CATERPILLAR INC.	Common Stock	#		41,348
CISCO SYSTEMS INC.	Common Stock	#		58
CLOROX CO.	Common Stock	#		174
COSTCO WHOLESALE CORP	Common Stock	#		22,077
DANAHER CORPORATION 4.75 MND CV PFD	Common Stock	#		21,940
DARE BIOSCIENCE INC	Common Stock	#		10,000
DEERE & COMPANY	Common Stock	#		68,578
DELTA AIR LINES INC.	Common Stock	#		815
DIREXION SHARES ETF	Common Stock	#		3,108
EXXON MOBIL CORP	Common Stock	#		21,722
FACEBOOK INC	Common Stock	#		5,579
FISKER INC CLASS A	Common Stock	#		20,449
FORD MOTOR COMPANY	Common Stock	#		217,515
FRANKLIN RES INC	Common Stock	#		10,699
GAMESTOP CORP CLASS A	Common Stock	#		594
GENERAL ELECTRIC CO.	Common Stock	#		6,523
GENERAL MOTORS CO	Common Stock	#		49,835
HOME DEPOT INC.	Common Stock	#		5,384
INTEL CORP	Common Stock	#		6
ISHARES GOLD	Common Stock	#		22,626
JOHNSON & JOHNSON	Common Stock	#		21
JP MORGAN CHASE & CO.	Common Stock	#		1,759
LIPOCINE INC	Common Stock	#		3,964
LORDSTOWN MOTORS CORP CLASS A	Common Stock	#		35,995

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
Identity of issuer or similar party	Description of investment	Cost	Current value	
<u>Common Stocks - continued</u>				
LOUISIANA PACIFIC	Common Stock	#		27,266
LUCID GROUP INC	Common Stock	#		761
LUMEN TECHNOLOGIES INC	Common Stock	#		1,920
MANNKIND CORP	Common Stock	#		22,672
MARATHON OIL CORP	Common Stock	#		6,568
MICROSOFT CORP	Common Stock	#		19,570
NETLIST INC.	Common Stock	#		2,351,025
NIKOLA CORP COM	Common Stock	#		493
NOKIA CORP ADR NFS A SPECIALIST	Common Stock	#		622
NVIDIA CORP NFS IS A MARKET	Common Stock	#		30,652
NVR INC	Common Stock	#		29,544
OCUGEN INC	Common Stock	#		8,645
PAYPAL HOLDINGS INC	Common Stock	#		4,997
PFIZER INC NFS A SPECIALIST	Common Stock	#		5,905
PROCTER & GAMBLE CO.	Common Stock	#		33,818
PRUDENTIAL FINANCIAL INC.	Common Stock	#		1,307
QUANTUMSCAPE CORP CLASS A	Common Stock	#		22,190
RIVIAN AUTOMOTIVE INC CLASS A	Common Stock	#		11,406
ROBINHOOD MARKETS INC CLASS A	Common Stock	#		2,291
ROCKWELL INTERNATIONAL CORP	Common Stock	#		23
ROKU INC CLASS A	Common Stock	#		913
SHOPIFY INC.	Common Stock	#		4,132
SKYWORKS SOLUTIONS INC	Common Stock	#		157
SOUTHERN COPPER CORPORATION	Common Stock	#		28,016
SQUARE INC CLASS A	Common Stock	#		3,230
STARBUCKS CORP LLC	Common Stock	#		11,890
STELLANTIS	Common Stock	#		13,601
TELADOC INC	Common Stock	#		3,214
TELEFONICA S A ADR REPRSTG THREE SHRS	Common Stock	#		2,602
TESLA MOTORS INC	Common Stock	#		27,409
TOTAL FINA ELF	Common Stock	#		742
TOYOTA MOTORS CORPORATION	Common Stock	#		55,590
TRADEWEB MARKETS INC CLASS A	Common Stock	#		17,024
TREVENA INC.	Common Stock	#		1,748
TRUIST FINANCIAL CORP	Common Stock	#		1,274
TWILIO INC.	Common Stock	#		2,897
UNION PACIFIC CORP	Common Stock	#		119
UNITED CONTINENTAL HOLDINGS INC	Common Stock	#		3,796
UNITED PARCEL SERVICE INC.	Common Stock	#		2,418
UPSTART HOLDINGS INC	Common Stock	#		3,026
VANECK VECTORS DIGI ETF	Common Stock	#		6,383
VERIZON COMMUNICATIONS	Common Stock	#		11,705
WALGREENS BOOTS ALLIANCE INC	Common Stock	#		16,420
WEST PHARMACEUTICAL SERVICES	Common Stock	#		27,203
WESTROCK CO.	Common Stock	#		23
ZOOM VIDEO COMMUNICATIONS INC	Common Stock	#		1,841
ZYNGA INC	Common Stock	#		6,400
				<u>3,958,665</u>

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
Identity of issuer or similar party	Description of investment	Cost	Current value	
<u>Fully Benefit-Responsive Investment Contract</u>				
<u>at Contract Value</u>				
* FIDELITY MANAGED INCOME PORTFOLIO FUND	Benefit responsive contract fund	#		8,401,254
<u>Registered Investment Companies</u>				
ABERDEEN STD PRECIOUS METALS	Exchange traded fund	#		17,891
ADVISORSHARES PURE CANNABIS	Exchange traded fund	#		270
AGNC INVESTMENT CORP	REIT	#		4,914
AMANA DEVELOPING WORLD FUND	Growth fund	#		6,535
AMANA MUTUAL FUND TRUST GROWTH	Growth fund	#		109,218
AMANA MUTUAL FUND TRUST INCOME	Blended fund	#		18,692
AMANA PARTICIPATION FUND	Bond fund	#		21,398
AMPLIFY ADVANCED BATTERY ETF	Exchange traded fund	#		887
ARK ETF TR FINTECH INNOVA	Exchange traded fund	#		82
ARK ETF TR GENOMIC REVOLUTION MULTI	Exchange traded fund	#		61
ARK ETF TR INDL INNOVATION	Exchange traded fund	#		77
ARK INDUSTRIAL INNOVATION ETF	Growth fund	#		52,396
ARTISAN INTERNATIONAL INSTITUTIONAL FUND	International fund	#		3,007,545
AS EMERGING MARKETS EQUITY R6	Growth fund	#		1,891,018
BARCLAYS BANK PLC IPATH INDEX	Balanced fund	#		7,748
BARON GLOBAL ADVANTAGE FD RETAIL	Growth fund	#		7,007
BERKSHIRE FOCUS FUND	Growth fund	#		7,648
BLACKROCK GLOBAL SCIENCE & TECHNOLOGY	Growth fund	#		1,461
BUFFALO USA GLOBAL	International fund	#		12,074
CAMBRIA ETF TR TAIL RISK	Exchange traded fund	#		24,109
COLUMBIA DIVIDEND INCOME FUND	Large-cap fund	#		4,851,529
CUBESMART	REIT	#		17,358
DNP SELECT INCOME FUND	Balanced fund	#		4,495
* FIDELITY 500 INDEX	Blended fund	#		16,298,840
* FIDELITY CONTRA FUND	Growth fund	#		21,766,191
* FIDELITY EXTENDED MARKET INDEX	Mid-cap fund	#		4,346,802
* FIDELITY FREEDOM 2005 FUND K6	Target retirement fund	#		662,105
* FIDELITY FREEDOM 2010 FUND K6	Target retirement fund	#		539,954
* FIDELITY FREEDOM 2015 FUND K6	Target retirement fund	#		2,716,661
* FIDELITY FREEDOM 2020 FUND K6	Target retirement fund	#		4,383,357
* FIDELITY FREEDOM 2025 FUND K6	Target retirement fund	#		14,098,257
* FIDELITY FREEDOM 2030 FUND K6	Target retirement fund	#		10,053,627
* FIDELITY FREEDOM 2035 FUND K6	Target retirement fund	#		5,453,542
* FIDELITY FREEDOM 2040 FUND K6	Target retirement fund	#		4,574,276
* FIDELITY FREEDOM 2045 FUND K6	Target retirement fund	#		1,243,286
* FIDELITY FREEDOM 2050 FUND K6	Target retirement fund	#		1,733,816
* FIDELITY FREEDOM 2055 FUND K6	Target retirement fund	#		2,619,439
* FIDELITY FREEDOM 2060 FUND K6	Target retirement fund	#		1,236,636
* FIDELITY FREEDOM 2065 FUND K6	Target retirement fund	#		54,141
* FIDELITY FREEDOM INCOME FUND K6	Target retirement fund	#		1,169,487
* FIDELITY GOVERNMENT INCOME FUND	Balanced fund	#		2,781,991
* FIDELITY HIGH INCOME FUND	Bond fund	#		3,383,171
* FIDELITY INTERNATIONAL INDEX	International fund	#		1,879,955
* FIDELITY LOW-PRICED STOCK FUND	Mid-cap fund	#		5,930,071
* FIDELITY MSCI CONSUMER	Exchange traded fund	#		7,849
* FIDELITY MSCI ENERGY INDEX ETF	Exchange traded fund	#		21,651

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
	Identity of issuer or similar party	Description of investment	Cost	Current value
	<u>Registered Investment Companies - continued</u>			
*	FIDELITY MSCI FINANCIALS INDEX ETF	Large-cap fund	#	38,074
*	FIDELITY MSCI HEALTH CARE INDEX	Blended fund	#	12,075
*	FIDELITY MSCI MATLS INDEX	Exchange traded fund	#	32,609
*	FIDELITY MSCI TELECOMMUNICATIONS	Blended fund	#	9,700
*	FIDELITY MSCI UTILS INDEX ETF	Exchange traded fund	#	19,486
*	FIDELITY SELECT ELECTRONICS	Growth fund	#	5,265
	FIRST TRUST FD II NASDAQ	Growth fund	#	8,134
	HARTFORD STRATEGIC INCOME FUND	Bond fund	#	5,016
	HENNESSY FOCUS FUND	Growth fund	#	7,361
	INVESCO QQQ TR UNIT SER 1	Exchange traded fund	#	81,017
	ISHARES 20+ YEAR TREASURY INDEX	Bond fund	#	4,629
	ISHARES DOW JONES MEDICAL DEVICES	Growth fund	#	9,877
	ISHARES DOW JONES US AEROSPACE AND DEFENSE	Growth fund	#	5,335
	ISHARES S&P GLOBAL CLEAN ENERGY	Exchange traded fund	#	8,564
	ISHARES SILVER	Balanced fund	#	16,348
	ISHARES TR CORE INTL AGGR	Exchange traded fund	#	16,627
	ISHARES TR YLD OPTIM BD	Exchange traded fund	#	49,378
	ISHARES TRUST GOLDMAN SACHS CORP	Blended fund	#	53,808
	ISHARES TRUST LEHMAN US AGGREGATE BOND	Bond fund	#	60,462
	ISHARES TRUST S&P SMALL CAP 600 INDEX	Small-cap fund	#	19,869
	JANUS STRATEGIC VALUE FUND	Bond fund	#	6,942
	LOOMIS SAYLES BOND RETAIL SHARES	Bond fund	#	8,114
	NEEDHAM SMALL CAP GROWTH	Small-cap fund	#	6,869
	PERMANENT PORTFOLIO FD INC	Blended fund	#	4,798
	PIMCO REAL RETURN INSTITUTIONAL FUND	Bond fund	#	2,369,046
	PIMCO TOTAL RETURN INSTITUTIONAL FUND	Bond fund	#	4,992,959
	PRINCIPAL DIVERSIFIED REAL ASSET CLASS A	International fund	#	5,411
	PROSHARES ULTRAPRO QQQ	Exchange traded fund	#	665
	REALTY INCOME CORP	Mid-cap fund	#	14,417
	S&P 500 DEPOSITORY RECEIPT	Exchange traded fund	#	83,429
	SCHWAB STRATEGIC TR US TIPS ETF	Exchange traded fund	#	19,938
	SCHWAB STRATEGIC SHORT-TERM US	Bond fund	#	19,857
	SECTOR SPDR INSTITUTIONAL TECHNOLOGY	Growth fund	#	52,587
	SELECT SECTOR SPDR	Exchange traded fund	#	54,868
	SPDR DOW JONES INDUSTRIAL AVERAGE EFT	Large-cap fund	#	23,647
	SPDR INDEX S&P WORLD EX US ETF	Exchange traded fund	#	8,158
	SPDR SER TR BARCLAYS CAP TIPS	Balanced fund	#	40,107
	SPDR SER TR DJ WILSHIRE LARGE	Large-cap fund	#	23,828
	T ROWE PRICE CAP OPPORTUNITY	Bond fund	#	12,098
	VANECK VECTORS ETF TR GOLD MINERS ETF	Blended fund	#	13,258
	VANECK VECTORS SEMICONDUCTOR ETF	Exchange traded fund	#	1,552
	VANGUARD INDEX FDS SMALL CAP	Small-cap fund	#	229
	VANGUARD INDEX TOTAL STOCK	Blended fund	#	527
	VANGUARD TAX MANAGED FUND EUROPE PACIFIC	International fund	#	98,719
	VICTORY GLOBAL NATURAL RESOURCES A	Blended fund	#	5,693
	VICTORY RS SMALL CAP GROWTH	Growth fund	#	2,662,680
				128,013,548

BWI GROUP 401(K) PLAN
EIN: #27-0540888 PN: #001 PYE: December 31, 2021
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
	Identity of issuer or similar party	Description of investment	Cost	Current value
	<u>Non-interest Bearing Cash</u>			<u>5,283</u>
	<u>Notes Receivable From Participants</u>	Interest from 4.25% to 6.50%, maximum five-year term (except if for purchase of primary residence), collateralized by 50% of participants' vested account balance, maturing through October 2031.	-0-	<u>794,240</u>
				<u>\$ 143,833,382</u>

* Represents a party-in-interest to the Plan

Cost not readily determinable

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
Identity of issuer or similar party	Description of investment	Cost	Current value	
<u>Money Market Funds</u>				
* FIDELITY CASH RESERVES FUND	Money Market	#	\$	2,569,523
* FIDELITY GOVERNMENT MONEY MARKET	Money Market	#		90,869
				<u>2,660,392</u>
<u>Common Stocks</u>				
180 LIFE SCIENCES CORP	Common Stock	#		1,950
3M COMPANY	Common Stock	#		18,497
ABBVIE INC.	Common Stock	#		133
ADVANCED MICRO DEVICES INC.	Common Stock	#		30,725
AFLAC INC	Common Stock	#		8,862
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AMGEN INC.	Common Stock	#		31
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AT&T INC.	Common Stock	#		17,060
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CISCO SYSTEMS INC.	Common Stock	#		58
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LORDSTOWN MOTORS CORP CLASS A	Common Stock	#		35,995

BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
Identity of issuer or similar party	Description of investment	Cost	Current value	
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LOUISIANA PACIFIC	Common Stock	#		27,266
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WALGREENS BOOTS ALLIANCE INC	Common Stock	#		16,420
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BWI GROUP 401(K) PLAN

EIN: #27-0540888 PN: #001 PYE: December 31, 2021

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

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BUFFALO USA GLOBAL	International fund	#		12,074
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* FIDELITY FREEDOM 2025 FUND K6	Target retirement fund	#		14,098,257
* FIDELITY FREEDOM 2030 FUND K6	Target retirement fund	#		10,053,627
* FIDELITY FREEDOM 2035 FUND K6	Target retirement fund	#		5,453,542
* FIDELITY FREEDOM 2040 FUND K6	Target retirement fund	#		4,574,276
* FIDELITY FREEDOM 2045 FUND K6	Target retirement fund	#		1,243,286
* FIDELITY FREEDOM 2050 FUND K6	Target retirement fund	#		1,733,816
* FIDELITY FREEDOM 2055 FUND K6	Target retirement fund	#		2,619,439
* FIDELITY FREEDOM 2060 FUND K6	Target retirement fund	#		1,236,636
* FIDELITY FREEDOM 2065 FUND K6	Target retirement fund	#		54,141
* FIDELITY FREEDOM INCOME FUND K6	Target retirement fund	#		1,169,487
* FIDELITY GOVERNMENT INCOME FUND	Balanced fund	#		2,781,991
* FIDELITY HIGH INCOME FUND	Bond fund	#		3,383,171
* FIDELITY INTERNATIONAL INDEX	International fund	#		1,879,955
* FIDELITY LOW-PRICED STOCK FUND	Mid-cap fund	#		5,930,071
* FIDELITY MSCI CONSUMER	Exchange traded fund	#		7,849
* FIDELITY MSCI ENERGY INDEX ETF	Exchange traded fund	#		21,651

BWI GROUP 401(K) PLAN

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SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
	Identity of issuer or similar party	Description of investment	Cost	Current value
	<u>Registered Investment Companies - continued</u>			
*	FIDELITY MSCI FINANCIALS INDEX ETF	Large-cap fund	#	38,074
*	FIDELITY MSCI HEALTH CARE INDEX	Blended fund	#	12,075
*	FIDELITY MSCI MATLS INDEX	Exchange traded fund	#	32,609
*	FIDELITY MSCI TELECOMMUNICATIONS	Blended fund	#	9,700
*	FIDELITY MSCI UTILS INDEX ETF	Exchange traded fund	#	19,486
*	FIDELITY SELECT ELECTRONICS	Growth fund	#	5,265
	FIRST TRUST FD II NASDAQ	Growth fund	#	8,134
	HARTFORD STRATEGIC INCOME FUND	Bond fund	#	5,016
	HENNESSY FOCUS FUND	Growth fund	#	7,361
	INVESCO QQQ TR UNIT SER 1	Exchange traded fund	#	81,017
	ISHARES 20+ YEAR TREASURY INDEX	Bond fund	#	4,629
	ISHARES DOW JONES MEDICAL DEVICES	Growth fund	#	9,877
	ISHARES DOW JONES US AEROSPACE AND DEFENSE	Growth fund	#	5,335
	ISHARES S&P GLOBAL CLEAN ENERGY	Exchange traded fund	#	8,564
	ISHARES SILVER	Balanced fund	#	16,348
	ISHARES TR CORE INTL AGGR	Exchange traded fund	#	16,627
	ISHARES TR YLD OPTIM BD	Exchange traded fund	#	49,378
	ISHARES TRUST GOLDMAN SACHS CORP	Blended fund	#	53,808
	ISHARES TRUST LEHMAN US AGGREGATE BOND	Bond fund	#	60,462
	ISHARES TRUST S&P SMALL CAP 600 INDEX	Small-cap fund	#	19,869
	JANUS STRATEGIC VALUE FUND	Bond fund	#	6,942
	LOOMIS SAYLES BOND RETAIL SHARES	Bond fund	#	8,114
	NEEDHAM SMALL CAP GROWTH	Small-cap fund	#	6,869
	PERMANENT PORTFOLIO FD INC	Blended fund	#	4,798
	PIMCO REAL RETURN INSTITUTIONAL FUND	Bond fund	#	2,369,046
	PIMCO TOTAL RETURN INSTITUTIONAL FUND	Bond fund	#	4,992,959
	PRINCIPAL DIVERSIFIED REAL ASSET CLASS A	International fund	#	5,411
	PROSHARES ULTRAPRO QQQ	Exchange traded fund	#	665
	REALTY INCOME CORP	Mid-cap fund	#	14,417
	S&P 500 DEPOSITORY RECEIPT	Exchange traded fund	#	83,429
	SCHWAB STRATEGIC TR US TIPS ETF	Exchange traded fund	#	19,938
	SCHWAB STRATEGIC SHORT-TERM US	Bond fund	#	19,857
	SECTOR SPDR INSTITUTIONAL TECHNOLOGY	Growth fund	#	52,587
	SELECT SECTOR SPDR	Exchange traded fund	#	54,868
	SPDR DOW JONES INDUSTRIAL AVERAGE EFT	Large-cap fund	#	23,647
	SPDR INDEX S&P WORLD EX US ETF	Exchange traded fund	#	8,158
	SPDR SER TR BARCLAYS CAP TIPS	Balanced fund	#	40,107
	SPDR SER TR DJ WILSHIRE LARGE	Large-cap fund	#	23,828
	T ROWE PRICE CAP OPPORTUNITY	Bond fund	#	12,098
	VANECK VECTORS ETF TR GOLD MINERS ETF	Blended fund	#	13,258
	VANECK VECTORS SEMICONDUCTOR ETF	Exchange traded fund	#	1,552
	VANGUARD INDEX FDS SMALL CAP	Small-cap fund	#	229
	VANGUARD INDEX TOTAL STOCK	Blended fund	#	527
	VANGUARD TAX MANAGED FUND EUROPE PACIFIC	International fund	#	98,719
	VICTORY GLOBAL NATURAL RESOURCES A	Blended fund	#	5,693
	VICTORY RS SMALL CAP GROWTH	Growth fund	#	2,662,680
				128,013,548

BWI GROUP 401(K) PLAN
EIN: #27-0540888 PN: #001 PYE: December 31, 2021
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

(a)	(b)	(c)	(d)	(e)
	Identity of issuer or similar party	Description of investment	Cost	Current value
	<u>Non-interest Bearing Cash</u>			5,283
	<u>Notes Receivable From Participants</u>	Interest from 4.25% to 6.50%, maximum five-year term (except if for purchase of primary residence), collateralized by 50% of participants' vested account balance, maturing through October 2031.	-0-	794,240
				<u>\$ 143,833,382</u>

* Represents a party-in-interest to the Plan

Cost not readily determinable