

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>JAY CASHMAN 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>01/01/1995</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1995</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/1995</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>JAY CASHMAN, INC.</u> <u>549 SOUTH STREET</u> <u>QUINCY, MA 02169</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>04-3242954</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>617-890-0600</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>237310</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>04-3242954</u>	2c Plan Sponsor's telephone number <u>617-890-0600</u>	2d Business code (see instructions) <u>237310</u>	
2b Employer Identification Number (EIN) <u>04-3242954</u>					
2c Plan Sponsor's telephone number <u>617-890-0600</u>					
2d Business code (see instructions) <u>237310</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.	10/13/2022	MARTY MAHONEY
	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 JAY CASHMAN, INC. 549 SOUTH STREET QUINCY, MA 02169		3b Administrator's EIN 04-3242954
		3c Administrator's telephone number 617-890-0600
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		5 226
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) 146
a(2) Total number of active participants at the end of the plan year		6a(2) 127
b Retired or separated participants receiving benefits.....		6b 3
c Other retired or separated participants entitled to future benefits		6c 121
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 251
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 251
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 246
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 20
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 2S 2T 3D 3H 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>1</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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 JAY CASHMAN 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 JAY CASHMAN, INC.	D Employer Identification Number (EIN) 04-3242954

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

(a) Name of insurance carrier
GREAT WESTLIFE & ANNUITY INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
84-0467907	68322	332927-01	33	01/01/2021	12/31/2021

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4	Current value of plan's interest under this contract in the general account at year end	4	2598632
5	Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

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

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

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

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

b	Balance at the end of the previous year	7b	890404
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c	Additions: (1) Contributions deposited during the year	7c(1)	156311	
	(2) Dividends and credits.....	7c(2)	0	
	(3) Interest credited during the year.....	7c(3)	13321	
	(4) Transferred from separate account.....	7c(4)	2453429	
	(5) Other (specify below)	7c(5)	25453	

▶ **LOAN PAYMENTS, FORFEITURES**

(6) Total additions	7c(6)	2648514
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	3538918
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e	Deductions:			
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	849218	
	(2) Administration charge made by carrier.....	7e(2)	-2030	
	(3) Transferred to separate account.....	7e(3)	93098	
	(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	940286
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	2598632
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Part IV Provision of Information

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

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

SCHEDULE 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 JAY CASHMAN 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 JAY CASHMAN, INC.	D Employer Identification Number (EIN) 04-3242954	

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
GREAT-WEST LIFE & ANNUITY INS.
84-0467907

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

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

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

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

GREAT WEST LIFE & ANNUITY INS

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64 50	RECORDKEEPER	34361	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

COMMONWEALTH FINANCIAL NETWORK

20 SAWYER ROAD
WALTHAM, MA 02154

(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?
55 27 50	BROKER/ADVISOR/INVEST ADV	20000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

DARMODY MERLINO & CO., LLP

75 FEDERAL ST
BOSTON, MA 02110-1997

(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	AUDITOR	17500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

ADVISED ASSETS GROUP

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28 50	INVESTMENT MANAGER	7953	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SENTINEL BENEFITS GROUP, LLC

100 QUANNAPOWITT PARKWAY
SUITE 300
WAKEFIELD, MA 01880

04-3015875

(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?
13 50	TPA	7500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TD AMERITRADE, INC.

200 SOUTH 108TH AVENUE
OMAHA, NE 68154

(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?
33	BROKERAGE SERVICES	149	Yes ☒ No ☐	Yes ☐ No ☒	0	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
TD AMERITRADE, INC.	33	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.	
GREAT WEST LIFE & ANNUITY INSURANCE 8515 EAST ORCHARD ROAD GREENWOOD VILLAGE, CO 80111	INCOMER FROM MAKE PER QUALIFIED TRADE	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(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>JAY CASHMAN 401(K) PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>JAY CASHMAN, INC.</u>	D Employer Identification Number (EIN) <u>04-3242954</u>
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Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2050 I

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

c EIN-PN <u>26-0787670-258</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>873993</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2035 I

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

c EIN-PN <u>26-0787945-261</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>677495</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2040 I

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

c EIN-PN <u>26-1384398-260</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>344392</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2030 I

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

c EIN-PN <u>26-0788040-262</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>787717</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2055 I

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

c EIN-PN <u>27-3616920-275</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>688272</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT TRST 2045 I

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

c EIN-PN <u>26-1208510-259</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>855656</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2025 I

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

c EIN-PN <u>26-1384344-263</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>280576</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST MAT I

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

c EIN-PN 26-0788428-268	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 367452
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM RETIREMENT ADV TRST 2060 I

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

c EIN-PN 27-3616920-273	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 93219
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a Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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Part II Information on Participating Plans (to be completed by DFEs)

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

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
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
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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 JAY CASHMAN 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 JAY CASHMAN, INC.	D Employer Identification Number (EIN) 04-3242954	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	1147	-4176
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	439758	453403
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	567255	1553797
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	2648785	1694952
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	273952	395932
(9) Value of interest in common/collective trusts.....	1c(9)	3729907	4968771
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts.....	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	22849103	23720875
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	890404	2598632
(15) Other.....	1c(15)		

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(1)	Employer securities.....	1d(1)	
(2)	Employer real property.....	1d(2)	
e	Buildings and other property used in plan operation	1e	
f	Total assets (add all amounts in lines 1a through 1e)	1f	31400311 35382186
Liabilities			
g	Benefit claims payable	1g	
h	Operating payables	1h	
i	Acquisition indebtedness.....	1i	
j	Other liabilities.....	1j	0 0
k	Total liabilities (add all amounts in lines 1g through 1j)	1k	0 0
Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	31400311 35382186

Part II Income and Expense Statement

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

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	453403
	(B) Participants	2a(1)(B)	1232337
	(C) Others (including rollovers).....	2a(1)(C)	108834
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	1794574
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	112
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	14639
	(F) Other	2b(1)(F)	13321
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	28072
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	38281
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1780482
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	1818763
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	-254383
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	-254383
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	25061
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	25061

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		592044
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		1783306
c Other income.....	2c		1930
d Total income. Add all income amounts in column (b) and enter total.....	2d		5789367
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1757720	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		1757720
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		17190
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Investment advisory and management fees.....	2i(3)	32582	
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		32582
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1807492
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		3981875
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan.....	2l(2)		

Part III Accountant's Opinion

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

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

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

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

(1) ☒ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☐ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: DARMODY, MERLINO & CO., LLP

(2) EIN: 04-2273266

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		404133

	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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n			

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

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

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

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 JAY CASHMAN 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 JAY CASHMAN, INC.	D Employer Identification Number (EIN) 04-3242954

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	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 84-0467907		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	☐ Increase ☐ Decrease ☐ Both ☐ No
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes ☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes ☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes ☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes ☐ No

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

Schedule R (Form 5500) 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 _____

JAY CASHMAN 401(K) PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION

DECEMBER 31, 2021 AND 2020

JAY CASHMAN 401(K) PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL INFORMATION
DECEMBER 31, 2021 AND 2020

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* Other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.

Darmody, Merlino & Co., LLP

CERTIFIED PUBLIC ACCOUNTANTS AND CONSULTANTS

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Independent Auditor's Report

To the Participants and Retirement Committee of the
Jay Cashman 401(K) Plan
Quincy, Massachusetts

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 Jay Cashman, Inc. 401(k) Retirement 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 ended December 31, 2021, 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 Jay Cashman, Inc. 401(k) Retirement Plan's 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)(2)(C), our audit need not extend to any statements of information related to assets held for investment of the plan (investment information) by Great-West Life & Annuity Insurance Company and Great-West Trust Company, LLC, the trustees of the Plan 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 to by the trustee 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 the trustee of the Plan, as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note D 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 Auditor's responsibilities for the Audit of the 2021 financial statements section —

- The amounts and disclosures in the 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 2021 financial statements related to assets held by and certified to by a qualified financial 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).

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 Auditor's Responsibilities for the Audit of the financial statements section of our report. We are required to be independent of Jay Cashman, Inc 401(k) Retirement 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.

Responsibility of Management for the 2021 Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, 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 Jay Cashman, Inc. 401(k) Retirement 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.

Auditor's 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 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 auditor's 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.

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 Jay Cashman, Inc. 401(k) Retirement 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 Jay Cashman, Inc. 401(k) Retirement 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 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.

2021 Supplemental Schedules Required by ERISA

The supplemental schedules of Assets Held for Investment Purposes at End of Year and Delinquent Participant Contributions December 31, 2021 are presented for purposes of additional analysis and are 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 schedules, 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 schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their 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 schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, is 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 schedules related to assets held by and certified to 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).

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of Jay Cashman, Inc. 401(k) Retirement 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.

Darmody, Merlino + Co., LLP

October 12, 2022

JAY CASHMAN 401(K) PLANSTATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
DECEMBER 31, 2021 AND 2020

	<u>2021</u>	<u>2020</u>
ASSETS :		
Investments, at fair value - Note H:		
Cash	\$ 1,549,621	\$ 568,402
Shares of registered investment companies	23,720,875	22,849,104
Units of collective trust funds	4,968,771	3,729,907
Shares of corporate common stock	<u>1,694,952</u>	<u>2,648,785</u>
Total investments, at fair value	31,934,219	29,796,198
Investment, at contract value - Note C	<u>2,598,632</u>	<u>890,404</u>
Total investments	<u>34,532,851</u>	<u>30,686,602</u>
Receivables:		
Notes receivable from Plan participants	395,932	290,625
Employer contributions	<u>453,403</u>	<u>439,758</u>
Total receivables	<u>849,335</u>	<u>730,383</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS -		
EXHIBIT B	<u>\$ 35,382,186</u>	<u>\$ 31,416,985</u>

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

JAY CASHMAN 401(K) PLANSTATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR PLAN BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2021

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income:

Net appreciation in fair value of investments	\$	2,146,028	
Dividend income		1,818,763	
Interest income		<u>13,433</u>	
Total investment income	\$		3,978,224

Interest income on notes receivable from participants			14,639
---	--	--	--------

Contributions:

Participant		1,232,337	
Employer		453,403	
Rollover		<u>108,834</u>	
Total contributions			<u>1,794,574</u>
Total additions			5,787,437

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Benefits paid, including deemed distributions		(1,790,066)	
Administrative expenses		<u>(32,170)</u>	
Total deductions			<u>(1,822,236)</u>

NET INCREASE			3,965,201
--------------	--	--	-----------

NET ASSETS AVAILABLE FOR PLAN BENEFITS:

Beginning of year		<u>31,416,985</u>	
End of year - EXHIBIT A	\$		<u>35,382,186</u>

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

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS

DECEMBER 31, 2021 AND 2020

Note A: PLAN DESCRIPTION

The following description of the Jay Cashman 401(K) Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

- 1) General: The Plan, originated in January, 1995, is a defined contribution plan covering all full-time, non-union employees of Jay Cashman, Inc., Cashman Dredging and Marine Contracting Co., LLC, and Sterling Equipment, Inc. (collectively the "Employer" or "Sponsor"). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

The Coronavirus Aid, Relief and Economic Security Act ("CARES Act") was signed into law on March 27, 2020. In April, 2020 the Plan adopted certain changes to participant distributions and loans as permitted by the CARES Act as discussed further in the *Notes Receivable from Participants and Payment of Benefits*.

- 2) Contributions: Each year, participants may elect to defer pretax annual compensation, as defined by the Plan, up to the maximum allowed by the Internal Revenue Service. Participants may also contribute amounts representing distribution from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Sponsor can also make matching and discretionary contributions to participant's accounts. Matching amounts and discretionary contributions are determined annually by the Sponsor at their sole discretion. The Plan includes an automatic deferral feature unless the participant elects otherwise.
- 3) Participant Accounts: Each participant's account is credited with the participant's contribution and allocations of the Sponsor's contributions and Plan earnings, and charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note A: PLAN DESCRIPTION – CONTINUED

- 4) Vesting: Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Sponsor's matching and discretionary portion of their accounts plus actual earnings thereon is based on years of continuous service. Participants are 20% vested after two years of service and 20% each subsequent year until 100% vested after six years.
- 5) Forfeitures: At December 31, 2021 and 2020, forfeited non-vested accounts totaled \$25,087 and \$18,261, respectively. These forfeitures will be used to reduce the Sponsor's matching contributions or pay Plan expenses.
- 6) Notes Receivable from Participants: Eligible participants are allowed to apply for loans against a portion of their vested interest in the Plan. Loans are limited to the lesser of \$50,000 or 50% of the participant's vested balance. A participant may not request a loan for less than \$1,000. The loans are secured by the balance in the participant's account and bear interest at the prime rate plus 1% per annum. The interest rate is fixed for the duration of the loan. The Plan was amended in 2013 to limit participants to two outstanding loans.

In accordance with the CARES Act, the Plan permitted qualifying participants to delay loan payments that were due between March 27, 2020 and December 31, 2020 and allow for participants to borrow up to the lesser of \$100,000 or 100% of their vested account balance between March 27, 2020 and September 23, 2020.

- 7) Payment of Benefits: On termination of service due to death, disability, retirement, or any other reason, a participant or beneficiary is eligible to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account. Partial withdrawals or installments are distribution options, but only to satisfy the required minimum distribution over the participant's life expectancy. Hardship distributions and in-service withdrawals are permitted, if certain criteria are met.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note A: PLAN DESCRIPTION – CONTINUED

- 7) Payment of Benefits – Continued: Pursuant to the CARES Act, participants who were currently receiving required minimum distributions were offered the option to waive their 2020 distribution and participants who were due to receive the first required distribution in 2020 had their distribution automatically waived.

Additionally, the CARES Act permitted plan participants to request penalty-free distributions up to \$100,000 for qualifying Coronavirus related reasons. These reasons include adverse financial consequences due to being quarantined, furloughed, laid off, having work hours reduced or being unable to work due to lack of childcare due to COVID-19.

The ability to waive a required minimum distribution, delay note repayments, and take coronavirus-related distributions under the CARES Act ceased as of December 31, 2020.

- 8) Investment Options: Upon enrollment in the Plan, a participant may direct employee contributions in any of the various diversified investment options chosen by the committee. Participants also have the option to put contributions into a self-directed brokerage account.
- 9) Plan Termination: In the event of a partial or complete termination of the Plan, the right of each participant to the amounts credited to the participant's account will be non-forfeitable and the value of the participants' accounts will be paid in accordance with the provisions of the Plan and ERISA.

Note B: SUMMARY OF SIGNIFICANT POLICIES

Use of Estimates: The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of income and expenses during the reporting period. Actual results could differ from those estimates.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note B: SUMMARY OF SIGNIFICANT POLICIES - CONTINUED

Basis of Accounting: The financial statements of the Plan are prepared under the accrual method of accounting.

Net Change in Fair Value of Investments: The Plan presents in the statement of changes in net assets available for Plan benefits, the net change in the fair value of the investments, which consists of the realized gains or losses and the net unrealized increase (decrease) on those investments.

Investment Valuation and Income Recognition: The Plan investments are stated at fair value, except for the group annuity contract disclosed in Note C. 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.

Purchases and sales of investments are recorded on the trade-date basis. The net appreciation (depreciation) in fair value of investments consists of the net change in unrealized appreciation (depreciation) and realized gains (losses) upon sale of investments. The net change in unrealized appreciation (depreciation) and realized gains (losses) upon sale are determined using the fair values as of the beginning of the year or the purchase price, if acquired since that date. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date.

Payment of Benefits: Benefits are recorded when paid.

Expenses of the Plan: Expenses incurred in the administration of the Plan are paid either by the Sponsor or from Plan assets.

Reclassification: Certain amounts in the plan year 2020 financial statements have been reclassified to conform to the plan year 2021 presentation, with no effect on the net assets available for Plan benefits.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note B: SUMMARY OF SIGNIFICANT POLICIES – CONTINUED

Risk and Uncertainties: The Plan invests in a variety of investments. Investments in general are exposed to various risks, such as interest rate, credit, and overall volatility risk. Market values of investments could decline for several reasons including changes in prevailing markets and interest rates, increases in defaults, and credit rating downgrades. In addition, the coronavirus disease ("COVID-19") pandemic has negatively impacted, and may continue to negatively impact, the macroeconomic environment in the United States and globally. The magnitude of the impact will depend on numerous evolving factors, including the duration and extent of the pandemic, the impact of the federal, state, local and foreign governmental actions, consumer behavior in response to the pandemic and such governmental actions, and the economic and operating conditions in the aftermath of COVID-19. Due to the evolving and uncertain nature of the pandemic, as well as the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of such securities, it is at least reasonably possible that changes in investment values in the near term could materially affect participants' account balances and the amounts reported in the statements of net assets available for Plan benefits and the related statement of changes in net assets available for Plan benefits.

Subsequent Events: The Plan has evaluated subsequent events through October 12, 2022, the date the financial statements were available to be issued.

New Accounting Pronouncements: The Plan has considered all new accounting pronouncements issued by the Financial Accounting Standards Board or other standard setting bodies that do not require adoption until a future date and concluded that such pronouncements are not expected to have a material impact on the Plan's financial statements.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED

DECEMBER 31, 2021 AND 2020

Note C: GROUP ANNUITY CONTRACT

The Plan has traditional fully benefit-responsive group annuity contracts with Great-West Life & Annuity Insurance Company. The insurance company maintains the contributions in general accounts which are credited with earnings and charged for participant withdrawals and administrative expenses. The issuer of the group annuity contracts is contractually obligated to repay the principal and a specified interest rate that is guaranteed for each contract to the Plan. The crediting rate of each contract is based on a formula established by the issuer. The crediting rates are reviewed on a quarterly basis for resetting.

The average interest rate for the GWI Fixed Account – Series Class III credited to participant accounts was 1.40% for 2021 and 1.54% for 2020. The contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

The contract meets the fully benefit-responsive investment contract criteria and, therefore, is reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the terms of the Plan. Contract value, as reported to the Plan by the insurance company, represents contributions made under the contract, plus earnings, less participant withdrawals, and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The Plan's ability to receive amounts due is dependent on the issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments.

Certain events might limit the ability of the Plan to transact at contract value with the issuer. Such events include Plan termination and certain other Sponsor-initiated events. No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that also would limit the ability of the Plan to transact at contract value with the participants.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note C: GROUP ANNUITY CONTRACT – CONTINUED

In addition, certain events allow the issuer to terminate the contract with the Plan and settle at an amount different from contract value. Such events include if the issuer or the Plan declare a contribution cessation date upon written request to the other. The contribution cessation date should be specified in the request and must be at least 60 days from the date of the request. If a contribution cessation date is not specified in the request, the contribution cessation date shall be the next business day on or after the 60th day after the date the request is received by the Plan or the issuer. After a contribution cessation date is declared: (a) no further contributions will be made to the group annuity contract and (b) no new participant annuity accounts will be established. The participant annuity account value will be maintained until the payment commencement date.

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED)

Great-West Life & Annuity Insurance Company and Great-West Trust Company, LLC are the trustees of the Plan. The following is a summary of Plan financial information and data certified by the trustees in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED

DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

Statement of net assets available for Plan benefits as of December 31:

Investments at fair value:

	<u>2021</u>	<u>2020</u>
Shares of registered investment companies:		
Fidelity 500 Index Inv	\$ 3,194,341	\$ 2,331,865
Fidelity Contrafund	3,073,450	2,927,017
American Funds Europacific GR R4	1,661,123	1,551,591
Fidelity Advisor Health Care A	1,623,155	1,776,699
Blackrock Equity Dividend Instl	1,547,288	1,056,111
Trowe Price Mid Cap Growth Adv	1,401,876	1,766,259
Fidelity US Bond Index	1,170,580	1,078,203
Fidelity Select Technology	1,147,488	1,715,033
Janus Henderson Research CLT	1,000,638	921,507
Janus Henderson Balanced CLT	840,999	1,167,831
Loomis Sayles Bond Institutional	819,267	474,307
Federated Hermes Kaufmann Small CPIS	764,666	684,413
Victory Integrity Small-Cap Value R6	698,380	578,667
Fidelity Advisor Total Bond I	638,305	718,367
Fidelity Total Market Index Investor	622,018	585,187
Vanguard Short Term Federal	610,640	617,315
Janus Henderson Enterprise CLT	532,123	389,412
Fidelity Select Leisure	359,224	680,942
Touchstone Mid Cap Z	355,459	328,547
MFS Growth Allocation A	348,307	313,459
Franklin Utilities CLA	347,052	375,989
Fidelity Real Estate Investment	336,670	240,103
MFS Mid Cap Value R3	236,108	214,984
Vanguard Intmd-Term Invmt Grade Inv	214,394	217,039
MFS Conservative Allocation A	149,467	138,257
Fidelity Investments SM Cap Value Retail	15,970	-
MFS Funds Value A	8,939	-
Vanguard International Growth Grade Inv	2,948	-

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	<u>2021</u>	<u>2020</u>
Units of collective trust funds:		
Putnam Retirement Advantage Trust 2025	\$ 280,576	\$ 284,993
Putnam Retirement Advantage Trust 2030	787,717	348,142
Putnam Retirement Advantage Trust 2035	677,495	484,708
Putnam Retirement Advantage Trust 2040	344,392	194,581
Putnam Retirement Advantage Trust 2045	855,656	823,514
Putnam Retirement Advantage Trust 2050	873,993	668,837
Putnam Retirement Advantage Trust 2055	688,272	471,943
Putnam Retirement Advantage Trust 2060	93,219	40,165
Putnam Retirement Advantage Trust MAT	367,451	413,024
Shares of corporate common stocks:		
NRX Pharmaceuticals Inc Com	205,827	-
Great Lakes Dredge & Dock Corp Com	157,200	131,700
Apple Inc	111,514	173,426
ISHARES Trust S&P 500 Grwt ETF	108,771	127,895
ISHARES Russell 1000 Growth ETF	106,957	130,216
ISHARES Russell Midcap Growth ETF	97,937	138,578
ISHARES Trust Core MSCI EAFE ETF	97,032	76,828
Microsoft Corp	76,008	72,065
ISHARES Tips Bond ETF	64,600	63,825
Ford Motor Company	58,364	10,846
The RMR Group Inc Com CL A	34,680	-
Linde PLC Com	34,643	-
BlackRock High Yield FD Inc	33,384	28,611
Nio Inc ADR	32,060	-
Glaxo Smithkline ADR Sponsored	30,455	33,626
Pfizer Inc Com	29,525	-
Blackrock Multi-Sector Income Com	21,178	-
Compangie Financier Richemont Unspn ADR	19,286	11,544
NVIDIA Corp Com	18,823	-
Barrick Gold Corporation	16,012	14,859
Berkshire Hathaway Inc Com CL B	14,950	-
Alphabet Inc Com CL A	14,485	-

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	<u>2021</u>	<u>2020</u>
Shares of corporate common stocks (continued):		
Amazon.com Inc	\$ 10,003	\$ 3,257
Meta Platforms Inc Com CL A	9,418	24,311
American Express Co	9,325	25,391
Visa Inc Class A	8,668	69,775
ASML Holding NV ADR Sponsored	7,961	28,775
Adobe Inc Com	7,939	44,511
Murata Manufacturing Co LTD ADR Un-sponsored	7,900	8,971
Salesforce.com Inc Com	7,878	-
Roche Holdings LTD ADR	7,702	16,703
Freeport-Mcmoran Inc Com	7,136	7,962
Astrazeneca ADR Sponsored	6,874	-
RIO Tinto PLC ADR Sponsored	6,694	7,522
Home Depot Inc	6,640	23,375
Netflix Inc	6,627	10,274
LAM Research Corp Com	6,472	10,862
PayPal Holdings Inc	6,412	22,952
Spirit Airlines Inc	5,747	3,032
ISHARES MSCI Euro FL ETF	5,634	13,173
ABB LT ADR Sponsored	5,573	13,617
Taiwan Semiconductor Manufactruing ADR Sponsored	5,173	-
JP Morgan Chase & Co	5,067	4,066
Advanced Micro Devices Inc	5,037	663,889
United Airlines Holdings Com	5,035	3,503
Mastercard Incorporated Com CL A	5,030	-
Morgan Stanley Com	5,006	-
Unilever N V ADR Sponsored	4,949	5,553
Anheuser-Busch Inbev SA/NV ADR Sponsored	4,541	5,243
Carnival Corp Units	4,366	4,700
Walt Disney Co	4,337	28,808
Intel Corp	4,120	25,059
UnitedHealth Group Inc	4,017	15,430
Costco Wholesale Corporation	3,974	17,709
SAP SE SPON ADR	3,923	19,298

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	<u>2021</u>	<u>2020</u>
Shares of corporate common stocks (continued):		
Danaher Corp Com	\$ 3,619	\$ -
Intuitive Surgical Inc Com	3,593	-
Nextera Energy Inc	3,548	17,282
Caterpillar Inc Com	3,515	-
Nike Inc Com CL B	3,500	16,693
Oracle Corp Com	3,488	-
Cisco Systems Inc	3,485	14,141
Norwegian Cruise Line Hldgs LT	3,381	4,145
Sanofi ADRSponsored	3,156	18,318
Toyota Motor Corp ADR Un-sponsored	3,150	-
Abbott Laboratories Com	3,096	-
Union Pacific Corp	3,023	7,704
CSX Corporation Com	2,858	-
Alibaba Group Holdings LTD	2,851	44,219
Cinemark Holdings Inc Com	2,708	-
Starbucks Corp Com	2,690	-
Total SE ADR Sponsored	2,671	-
3M Company Com	2,664	-
ING Groep NV ADR Sponsored	2,478	14,132
Novartis AG ADR Sposored	2,362	8,404
Micron Technology Inc Com	2,329	-
BHP Group LTD ADR Sponsored	2,293	-
Zim Integrated Shipping Service Com	2,129	
Royal Dutch Shell PLC ADR Sponsored	2,083	9,242
Thermo Fisher Scientific Inc Com	2,002	-
Merck & Co Inc	1,993	13,170
Build A Bear Workshop Inc Com	1,952	-
Devon Energy Corp Com	1,894	3,067
Chevron Corporation Com	1,878	8,276
Fortinet Inc Com	1,797	-
Marvell Technology Inc Com	1,750	-
Cushman And Wakefield PLC Com	1,668	-
Uber Technologies Inc Com	1,635	-

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	<u>2021</u>	<u>2020</u>
Shares of corporate common stocks (continued):		
Banco Santander SA ADR Sponsored	\$ 1,516	\$ 9,921
Focus Financial Partners Inc Com CL A	1,493	-
BP PLC ADR Sponsored	1,411	6,135
Masco Corp Com	1,404	-
Exxon Mobile Corporation	1,346	7,090
Conocophillips Com	1,227	2,999
B2Gold Corp Com	1,179	-
The Azek Company Inc Com CL A	1,156	-
Medtronic PLC Com	1,138	6,911
Schlumberger LTD Com	1,138	4,126
Halliburton Co Com	1,121	3,799
Applied Materials Inc Com	946	-
Bitfarms LTD Com	758	-
General Electric Co	567	2,160
Penn National Gaming Inc Com	467	-
Janone Inc Com	409	-
SG Blocks Inc Com	376	3,050
Enbridge Inc Com	352	-
Qihuo LTD ADR	222	-
Polar Power Inc Com	179	-
Ageagle Aerial Systems Inc Com	157	-
Ocean Power Technologies Inc Com	148	-
Riot Blockchain Inc	134	3,398
Softbank Group ADR Unsponsored	-	33,170
AIM Immunotech Inc	-	31,325
Centogene NV Com	-	26,950
Checkpoint Therapeutics Inc	-	26,500
Roku Inc Com CL A	-	19,589
Siemens A.G. ADR	-	16,225
BNP Paribas ADR Sponsored	-	10,697
Nestle SA ADR Sponsored	-	8,128
Qualcomm Inc	-	7,617

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	2021	2020
Shares of corporate common stocks (continued):		
Cleantech Inc	\$ -	\$ 5,810
Novo-Nordisk A S ADR Sponsored	-	5,518
Groupon Inc	-	5,243
Intesa San Paolo SPA ADR Sponsored	-	4,627
Target Corp Com	-	4,413
BIT Digital Inc	-	4,382
Scotts Miracle-Gro Co Com CL A	-	4,381
Chiasma Inc	-	4,350
Palantir Tech Inc Com CL A	-	3,533
Flux Power Holdings Inc	-	3,448
MGM Resorts International Com	-	3,151
Natwest Group PLC ADR Sponsored	-	2,906
Carnival PLC ADR Sponsored	-	2,811
RBC Bearings Inc	-	2,686
Vanguard FTSE EMR Emerging Markets ETF	-	2,521
Wynn Resorts LTD Com	-	2,369
Delta Air Lines Inc	-	2,332
Societe Generale ADR Sponsored	-	2,288
Gevo Inc	-	2,125
Marriott International Inc	-	2,111
Avis Budget Group Inc	-	2,014
Lordstown Motors Corp	-	2,006
Bank of America Corp	-	2,000
Microstrategy Com CL A	-	1,943
Plug Power Inc Com	-	1,696
Workhorse Group Inc	-	1,484
Psychedics Corp	-	1,456
Las Vegas Sands Corp	-	1,430
Sorrento Therapeutics Inc Com	-	1,365
Rewalk Robotics LTD	-	1,320
Wells Fargo & Company Com	-	1,237
XL Fleet Corp Com CL A	-	1,187
Marathon Patent Group Inc	-	1,044

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note D: SUMMARY OF FINANCIAL DATA CERTIFIED BY THE TRUSTEES (UNAUDITED) –
CONTINUED

	<u>2021</u>	<u>2020</u>
Shares of corporate common stocks (continued):		
Zoom Video Communications Inc Com CL A	\$ -	\$ 1,012
Novavax Inc	-	1,004
Boston Beer Company Class A	-	994
GLU Mobile Inc Com	-	901
Inovio Pharmaceuticals Inc	-	885
Cronos Group Inc Com	-	694
Greenpower MTR Co Inc	-	582
Altria Group Inc Com	-	410
Chewy Inc Com CL A	-	360
JetBlue Airways Corporation	-	247
Southwest Airlines Co Com	-	186
Cash	1,549,621	568,402
Investments at contract value:		
Group annuity contract:		
GWI Fixed Account - Series Class III	<u>2,598,632</u>	<u>890,404</u>
	<u>\$ 34,532,851</u>	<u>\$ 30,686,602</u>

All investments are participant-directed.

In addition, the notes receivable from Plan participants in the statements of net assets available for Plan benefits at December 31, 2021 and 2020 were certified by the trustees.

The investment income, including the net appreciation in fair value of investments and interest income on participant notes receivable in the statement of changes in net assets available for Plan benefits was certified by the trustees.

During the year ended December 31, 2021, the Plan's investments (including gains and losses on investments sold and held during the year) appreciated in value by \$2,146,028.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note E: INCOME TAX STATUS

The Internal Revenue Service has ruled that the Plan qualifies under Section 401(a) of the Internal Revenue Code (IRC) and is, therefore, not subject to tax under present income tax law, and the trust, established by the Plan, is exempt from federal income taxes. Once qualified, the Plan is required to operate in conformity with the IRC to maintain its qualification. The trustee is not aware of any course of action or series of events that have occurred that might adversely affect the Plan's qualified status.

The Plan evaluates all significant tax positions as required by generally accepted accounting principles in the United States. As of December 31, 2021, the Plan does not believe that it has taken any tax positions that would require the recording of any additional tax liability nor does it believe that there are any unrealized tax benefits that would either increase or decrease within the next twelve months. The Plan is subject to routine audits by various regulatory authorities, however, there are currently no audits for any tax periods in progress.

Note F: ADMINISTRATIVE EXPENSES

Administrative expenses of \$32,170 for the plan year ended December 31, 2021 consist of investment advisory and consulting fees and loan origination fees. These expenses were incurred in connection with the administration of the Plan.

Note G: DELINQUENT PARTICIPANT CONTRIBUTIONS

During the plan year ended December 31, 2021, the Sponsor inadvertently failed to remit participant contributions to the trustee on a timely basis as required by Department of Labor's Regulation paragraph 2510.3-102. The Sponsor is in the process of filing IRS Form 5330 to report and pay an excise tax with respect to the 2021 late remittances as required pursuant to Section 4975 of the Internal Revenue Code. In addition, the Plan sponsor will pay an additional amount to the trustee to reflect foregone earnings that would have been credited to participant accounts if the late remittances had been made on a timely basis. Such amounts are not material to the Plan's financial statements.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note H: FAIR VALUE MEASUREMENTS

FASB Accounting Standards Codification 820, *Fair Value Measurements and Disclosures*, establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs are based on quoted prices in markets that are not considered to be active for which all significant inputs are observable, either directly or indirectly. Level 3 valuations require inputs that are both significant and unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures the fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

Level 1 Fair Value Measurements:

The fair value of cash, shares in registered investment companies (mutual funds) and corporate common stocks at December 31, 2021 and 2020 are based on quoted net asset values and quoted prices of the shares held by the Plan at year end.

Level 2 and Level 3 Fair Value Measurements:

At December 31, 2021 and 2020, there were no investments valued using these methodologies.

Common Collective Trust Funds:

The common collective trust funds (CTF's) at December 31, 2021 consist of target date retirement funds and are valued at a net asset value (NAV) which is based on the market value of its underlying investments. NAV serves as a practical expedient to estimate the fair value of the CTF's. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note H: FAIR VALUE MEASUREMENTS – CONTINUED

Common Collective Trust Funds - Continued:

The Plan Sponsor is responsible for the determination of fair value. Accordingly, they perform periodic analysis on the prices received from the pricing services used to determine whether the prices are reasonable estimates of fair value. As a result of these reviews, the Plan Sponsor has not historically adjusted the prices obtained from the pricing services. The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflected in future fair values. Furthermore, although the Plan Sponsor believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The Plan has concluded that the NAV's reported by the investment company approximate the fair value of the investments.

The table below sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020:

Fair Value at December 31, 2021				
	Total	Level 1	Level 2	Level 3
Investments measured at fair value subject to fair value leveling:				
Cash	\$ 1,549,621	\$ 1,549,621	\$ -	\$ -
Mutual funds:				
Growth funds	\$7,962,059	7,962,059	-	-
Blended funds	4,321,285	4,321,285	-	-
Sector funds	3,813,589	3,813,589	-	-
Bond funds	3,453,186	3,453,186	-	-
Value funds	2,506,685	2,506,685	-	-
Foreign funds	1,664,071	1,664,071	-	-
Equities:				
U.S. corporate common stocks	1,530,519	1,530,519	-	-
Foreign corporate common stocks	164,433	164,433	-	-
	26,965,448	\$ 26,965,448	\$ -	\$ -
Investments measured at NAV (1):				
Collective trust funds	4,968,771			
Total investments measured at fair value	\$ 31,934,219			

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note H: FAIR VALUE MEASUREMENTS – CONTINUED

		Fair Value at December 31, 2020			
		Total	Level 1	Level 2	Level 3
Investments measured at fair value subject to fair value leveling:					
Cash	\$	568,402	\$	568,402	\$ - \$ -
Mutual funds:					
Growth funds		8,169,899	8,169,899	-	-
Sector funds		4,788,766	4,788,766	-	-
Blended funds		3,383,856	3,383,856	-	-
Bond funds		3,105,230	3,105,230	-	-
Value funds		1,849,762	1,849,762	-	-
Foreign funds		1,551,591	1,551,591	-	-
Equities:					
U.S. corporate common stocks		2,379,037	2,379,037	-	-
Foreign corporate common stocks		269,748	269,748	-	-
		26,066,291	\$ 26,066,291	\$ -	\$ -
Investments measured at NAV (1):					
Collective trust funds		3,729,907			
Total investments measured at fair value	\$	29,796,198			

(1) In accordance with ASC Subtopic 820-10, certain investments that are measured at NAV (or its equivalent) have not been included in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair market hierarchy to line items presented in the statements of net assets available for Plan benefits. Net asset value is the value of each unit of the collective trust funds that is invested in the underlying funds.

The investments measured at NAV include target date retirement funds. The objective of each target date retirement fund is to maximize returns while maintaining a level of risk appropriate for a person planning to retire on or about a specified retirement date.

Note I: RELATED PARTY TRANSACTIONS

The Plan Sponsor provides certain accounting, administrative and investment management services to the Plan for which no fees are charged. In addition, the Plan Sponsor pays certain expenses in administering the Plan.

JAY CASHMAN 401(K) PLAN

NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2021 AND 2020

Note I: RELATED PARTY TRANSACTIONS - CONTINUED

Certain Plan investments are group annuity contracts with Great-West Life & Annuity Insurance Company, a trustee of the Plan; therefore, transactions involving these investments qualify as party-in-interest transactions. During the 2021 plan year, transactions with the group annuity contract resulted in a net refund of fees. The net refund of \$2,030 is included in administrative expenses for the plan year ended December 31, 2021.

Note J: RECONCILIATION OF FINANCIAL STATEMENTS AND FORM 5500

The following is a reconciliation of net assets available for Plan benefits as reported in the financial statements to the Form 5500 at December 31:

	<u>2021</u>	<u>2020</u>
Net assets available for Plan benefits as reported in the financial statements	\$ 35,382,186	\$ 31,416,985
Loans deemed as distributed for Form 5500 purposes	<u>-</u>	<u>(16,674)</u>
Net assets available for Plan benefits as reported in the Form 5500	<u>\$ 35,382,186</u>	<u>\$ 31,400,311</u>

The following is a reconciliation of Plan benefits paid to participants as reported in the financial statements to the Form 5500:

Benefits paid to participants, including deemed distributions of participant loans as reported in the financial statements	\$ 1,790,066
Deemed distributions for the Form 5500 purposes for the year ended December 31, 2021	17,190
Deemed distributions for financial statement purposes for the year ended December 31, 2021	<u>(32,346)</u>
Benefits paid to participants, including deemed distributions of participant loans as reported in the Form 5500	<u>\$ 1,774,910</u>

SCHEDULE I

JAY CASHMAN 401(K) PLAN
#04-3242954 PLAN #001

SCHEDULE H, PART IV LINE 4(i)
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR
DECEMBER 31, 2021

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer	Description	Cost	Current Value
	Fidelity Investments	Fidelity 500 Index Inv	\$ -	\$ 3,194,341
	Fidelity Investments	Fidelity Contrafund	-	3,073,450
*	Great-West Life & Annuity Company	GWI Fixed Account - Series Class III	-	2,598,632
	American Funds	American Funds Europacific GR R4	-	1,661,123
	Fidelity Investments	Fidelity Advisor Health Care A	-	1,623,155
	Blackrock Investments	Blackrock Equity Dividend Instl	-	1,547,288
	T Rowe Price Investments	T Rowe Price Mid Cap Growth Adv	-	1,401,876
	Fidelity Investments	Fidelity US Bond Index	-	1,170,580
	Fidelity Investments	Fidelity Select Technology	-	1,147,488
	Janus Henderson Investors	Janus Henderson Research CL T	-	1,000,638
	Putnam Investments	Putnam Retirement Advantage Trust 2050	-	873,993
	Putnam Investments	Putnam Retirement Advantage Trust 2045	-	855,656
	Janus Henderson Investors	Janus Henderson Balanced CL T	-	840,999
	Loomis Sayles Investments	Loomis Sayles Bond Institutional	-	819,267
	Putnam Investments	Putnam Retirement Advantage Trust 2030	-	787,717
	Federated Investments	Federated Hermes Kaufmann Small CP IS	-	764,666
	Victory Capital Management	Victory Integrity Small-Cap Value R6	-	698,380
	Putnam Investments	Putnam Retirement Advantage Trust 2055	-	688,272
	Putnam Investments	Putnam Retirement Advantage Trust 2035	-	677,495
	Fidelity Investments	Fidelity Advisor Total Bond I	-	638,305
	Fidelity Investments	Fidelity Total Market Index Investor	-	622,018
	Vanguard Investments	Vanguard Short Term Federal	-	610,640
	Janus Henderson Investors	Janus Henderson Enterprise CL T	-	532,123
	Putnam Investments	Putnam Retirement Advantage Trust MAT	-	367,451
	Fidelity Investments	Fidelity Select Leisure	-	359,224
	Touchstone Advisors Inc	Touchstone Mid Cap Z	-	355,459
	MFS Investments	MFS Growth Allocation A	-	348,307
	Franklin Funds	Franklin Utilities CL A	-	347,052
	Putnam Investments	Putnam Retirement Advantage Trust 2040	-	344,392
	Fidelity Investments	Fidelity Real Estate Investment	-	336,670
	Putnam Investments	Putnam Retirement Advantage Trust 2025	-	280,576
	MFS Investments	MFS Mid Cap Value R3	-	236,108
	Vanguard Investments	Vanguard Intmd-Term Invmt Grade Inv	-	214,394
	NRX Pharmaceuticals Inc	NRX Pharmaceuticals Inc Com	-	205,827
	Great Lakes Dredge & Dock Corp	Great Lakes Dredge & Dock Corp Com	-	157,200
	MFS Investments	MFS Conservative Allocation A	-	149,467
	Apple Inc	Apple Inc	-	111,514
	BlackRock Investments	ISHARES Trust S&P 500 GrwI ETF	-	108,771
	BlackRock Investments	ISHARES Russell 1000 Growth ETF	-	106,957
	BlackRock Investments	ISHARES Russell Midcap Growth ETF	-	97,937

SCHEDULE I - CONTINUED

JAY CASHMAN 401(K) PLAN
#04-3242954 PLAN #001

SCHEDULE H, PART IV LINE 4(i)
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR - CONTINUED
DECEMBER 31, 2021

(a)	(b)	(c)	**	
			(d)	(e)
	Identity of Issuer	Description	Cost	Current Value
	BlackRock Investments	ISHARES Trust Core MSCI EAFE ETF	\$ -	\$ 97,032
	Putnam Investments	Putnam Retirement Advantage Trust 2060	-	93,219
	Microsoft	Microsoft Corp	-	76,008
	BlackRock Investments	ISHARES Tips Bond ETF	-	64,600
	Ford Motors	Ford Motor Company	-	58,364
	The RMR Group Inc	The RMR Group Inc Com CL A	-	34,680
	Linde PLC	Linde PLC Com	-	34,643
	Blackrock Investments	BlackRock High Yield FD Inc	-	33,384
	NIO Inc	NIO Inc ADR	-	32,060
	Glaxo Smithkline	Glaxo Smithkline PLC	-	30,455
	Pfizer Inc	Pfizer Inc Com	-	29,525
	Blackrock Investments	Blackrock Multi-Sector Income Com	-	21,178
	Compangie Financier Richemont	Compangie Financier Richemont Unspn ADR	-	19,286
	NVIDIA Corporation	NVIDIA Corp Com	-	18,823
	Barick Gold Corporation	Barick Gold Corporation	-	16,012
	Fidelity Investments	Fidelity Investments SM Cap Value Retail	-	15,970
	Berkshire Hathaway Inc	Berkshire Hathaway Inc Com CL B	-	14,950
	Alphabet Inc	Alphabet Inc Com CL A	-	14,485
	Amazon.com	Amazon.com Inc	-	10,003
	Meta Platforms, Inc.	Meta Platforms Inc Com CL A	-	9,418
	American Express	American Express Co	-	9,325
	MFS Investments	MFS Funds Value A	-	8,939
	Visa Inc	Visa Inc Class A	-	8,668
	ASML Holdings	ASML Holding NV ADR Sponsored	-	7,961
	Adobe Inc	Adobe Inc Com	-	7,939
	Murata Manufacturing	Murata Manufacturing Co LTD ADR Un-sponsored	-	7,900
	Salesforce.com Inc	Salesforce.com Inc Com	-	7,878
	Roche Holdings LTD	Roche Holdings LTD ADR	-	7,702
	Freeport-Mcmoran Inc	Freeport-Mcmoran Inc Com	-	7,136
	AstraZeneca PLC	Astrazeneca ADR Sponsored	-	6,874
	RIO Tinto	RIO Tinto PLC ADR Sponsored	-	6,694
	Home Depot Inc	Home Depot Inc	-	6,640
	Netflix	Netflix Inc	-	6,627
	LAM Research Corp	LAM Research Corp Com	-	6,472
	PayPal Holdings Inc	PayPal Holdings Inc	-	6,412
	Spirit Airlines Inc	Spirit Airlines Inc	-	5,747
	BlackRock Investments	ISHARES MSCI Euro FL ETF	-	5,634
	ABB LT	ABB LT ADR Sponsored	-	5,573
	Taiwan Semiconductor Mfg, Ltd	Taiwan Semiconductor Mfg ADR Sponsored	-	5,173
	JP Morgan Chase &	JP Morgan Chase & Co	-	5,067

SCHEDULE I - CONTINUED

JAY CASHMAN 401(K) PLAN
#04-3242954 PLAN #001

SCHEDULE H, PART IV LINE 4(i)
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR - CONTINUED
DECEMBER 31, 2021

(a)	(b) Identity of Issuer	(c) Description	**	
			(d) Cost	(e) Current Value
	Advanced Micro Devices Inc	Advanced Micro Devices Inc	\$ -	\$ 5,037
	United Airlines Holdings	United Airlines Holdings Com	-	5,035
	Mastercard Inc	Mastercard Incorporated Com CL A	-	5,030
	Morgan Stanley	Morgan Stanley Com	-	5,006
	Unilever	Unilever N V ADR Sponsored	-	4,949
	Anheuser-Busch Inbev	Anheuser-Busch Inbev SA/NV ADR Sponsored	-	4,541
	Carnival Corp	Carnival Corp Units	-	4,366
	Walt Disney Company	Walt Disney Co	-	4,337
	Intel	Intel Corp	-	4,120
	UnitedHealth Group	UnitedHealth Group Inc	-	4,017
	Costco Wholesale Corporation	Costco Wholesale Corporation	-	3,974
	SAP SE	SAP SE SPON ADR	-	3,923
	Danaher Corporation	Danaher Corp Com	-	3,619
	Intuitive Surgical Inc	Intuitive Surgical Inc Com	-	3,593
	Nextera Energy Inc	Nextera Energy Inc	-	3,548
	Caterpillar Inc	Caterpillar Inc Com	-	3,515
	Nike Inc	Nike Inc Com CL B	-	3,500
	Oracle Corporation	Oracle Corp Com	-	3,488
	Cisco Systems Inc	Cisco Systems Inc	-	3,485
	Norwegian Cruise Line Hldgs	Norwegian Cruise Line Hldgs LT	-	3,381
	Sanofi	Sanofi ADR	-	3,156
	Toyota Motor Corporation	Toyota Motor Corp ADR Unsponsored	-	3,150
	Abbott Laboratories	Abbott Laboratories Com	-	3,096
	Union Pacific Corp	Union Pacific Corp	-	3,023
	Vanguard Investments	Vanguard International Growth Grade Inv	-	2,948
	CSX Corporation	CSX Corporation Com	-	2,858
	Alibaba Group Holdings LTD	Alibaba Group Holdings LTD	-	2,851
	Cinemark Holdings Inc	Cinemark Holdings Inc Com	-	2,708
	Starbucks Corporation	Starbucks Corp Com	-	2,690
	TotalEnergies SE	Total SE ADR Sponsored	-	2,671
	3M Company	3M Company Com	-	2,664
	ING Groep NV	ING Groep NV ADR Sponsored	-	2,478
	Novartis AG	Novartis AG ADR Sposored	-	2,362
	Micron Technology Inc	Micron Technology Inc Com	-	2,329
	BHP Group LTD	BHP Group LTD ADR Sponsored	-	2,293
	Zim Integrated Shipping Srvs Ltd	Zim Integrated Shipping Service Com	-	2,129
	Royal Dutch Shell PLC	Royal Dutch Shell PLC ADR Sponsored	-	2,083
	Thermo Fisher Scientific Inc	Thermo Fisher Scientific Inc Com	-	2,002
	Merck & Co Inc	Merck & Co Inc	-	1,993
	Build A Bear Workshop Inc	Build A Bear Workshop Inc Com	-	1,952

SCHEDULE I - CONTINUED

JAY CASHMAN 401(K) PLAN
#04-3242954 PLAN #001

SCHEDULE H, PART IV LINE 4(i)
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES AT END OF YEAR - CONTINUED
DECEMBER 31, 2021

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer	Description	Cost	Current Value
	Devon Energy	Devon Energy Corp Com	\$ -	\$ 1,894
	Chevron Corp	Chevron Corp	-	1,878
	Fortinet	Fortinet Inc Com	-	1,797
	Marvell Technology Inc	Marvell Technology Inc Com	-	1,750
	Cushman and Wakefield PLC	Cushman and Wakefield PLC Com	-	1,668
	Uber Technologies Inc	Uber Technologies Inc Com	-	1,635
	Santander Bank	Banco Santander SA ADR Sponsored	-	1,516
	Focus Financial Partners LLC	Focus Financial Partners Inc Com CL A	-	1,493
	BP PLC	BP PLC ADR Sponsored	-	1,411
	Masco Corporation	Masco Corp Com	-	1,404
	Exxon Mobile	Exxon Mobile Corporation	-	1,346
	ConocoPhillips	Conocophillips Com	-	1,227
	B2Gold Corporation	B2Gold Corp Com	-	1,179
	The Azek Company Inc	The Azek Company Inc Com CL A	-	1,156
	Medtronic PLC	Medtronic PLC Com	-	1,138
	Schlumberger LTD	Schlumberger LTD Com	-	1,138
	Halliburton Co	Halliburton Co Com	-	1,121
	Applied Materials Inc	Applied Materials Inc Com	-	946
	Bitfarms LTD	Bitfarms LTD Com	-	758
	General Electric	General Electric Co	-	567
	Penn National Gaming Inc	Penn National Gaming Inc Com	-	467
	Janone Inc	Janone Inc Com	-	409
	SG Blocks Inc	SG Blocks Inc Com	-	376
	Enbridge Inc	Enbridge Inc Com	-	352
	Qihuo LTD	Qihuo LTD ADR	-	222
	Polar Power Inc	Polar Power Inc Com	-	179
	AgEagle Aerial Systems Inc.	Ageagle Aerial Systems Inc Com	-	157
	Ocean Power Technologies Inc	Ocean Power Technologies Inc Com	-	148
	Riot Blockchain Inc	Riot Blockchain Inc	-	134
	TD Ameritrade	Cash	-	1,549,621
	* Notes receivable from Plan participants	Interest rates range from 4.25% - 6.50% per annum with maturities ranging from 2022 - 2031	-	395,932

* Represents a party-in-interest to the Plan.

** Cost information is being omitted for this Plan since it is a participant-directed individual account plan.

Schedule derived from information certified by Great-West Life &
Annuity Insurance Company and Great-West Trust Company, LLC.

SCHEDULE IIJAY CASHMAN 401(K) PLAN
#04-3242954 PLAN #001SCHEDULE H, PART IV LINE 4(a)
SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS
DECEMBER 31, 2021

Participant Contributions Transferred Late to the Plan*	Total that Constitutes Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP	Contributions Pending Correction in VFCP	
<u>\$ 814,125</u>	<u>\$ 404,133</u>	<u>\$ 409,992</u>	<u>\$ -</u>	<u>\$ -</u>

*Includes late participant loan repayments.

Name of Plan:	
▶ Jay Cashman 401(k) Plan	
Employer Identification Number:▶	04-3242954
For plan year (beginning/ending):▶	01/01/2021 - 12/31/2021
Plan number:▶	001

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