

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>10/01/2021</u> and ending <u>09/30/2022</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>LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN</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>LIFE-SCIENCE INNOVATIONS, LLC</u> <u>1800 TECHNOLOGY DRIVE NE</u> <u>WILLMAR, MN 56201</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>09/26/1960</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>27-0123014</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>320-222-9783</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>112300</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>09/26/1960</u>		2b Employer Identification Number (EIN) <u>27-0123014</u>		2c Plan Sponsor's telephone number <u>320-222-9783</u>		2d Business code (see instructions) <u>112300</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>										
1c Effective date of plan <u>09/26/1960</u>											
2b Employer Identification Number (EIN) <u>27-0123014</u>											
2c Plan Sponsor's telephone number <u>320-222-9783</u>											
2d Business code (see instructions) <u>112300</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.	07/05/2023	BETH WOSMEK
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN	
		3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN	
5 Total number of participants at the beginning of the plan year		5	3039
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)	2801
a(2) Total number of active participants at the end of the plan year		6a(2)	2087
b Retired or separated participants receiving benefits.....		6b	17
c Other retired or separated participants entitled to future benefits		6c	247
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	2351
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	2351
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	1987
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	40
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2J 2K 2F 2G 2R 3D 2S 2T 3H			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor		9b Plan benefit arrangement (check all that apply) (1) ☒ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	
10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)			
a Pension Schedules (1) ☒ R (Retirement Plan Information) (2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☒ <u>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 10/01/2021 and ending 09/30/2022	
A Name of plan LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 LIFE-SCIENCE INNOVATIONS, LLC	D Employer Identification Number (EIN) 27-0123014

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
EMPOWER ANNUITY INSURANCE COMPANY OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
84-0467907	68322	385038-01	1	10/01/2021	09/30/2022

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

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

4 Current value of plan's interest under this contract in the general account at year end **4** 0**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. **6d**
Specify nature of costs ▶**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** 0**c** Additions: (1) Contributions deposited during the year **7c(1)**
(2) Dividends and credits..... **7c(2)** 0
(3) Interest credited during the year..... **7c(3)**
(4) Transferred from separate account..... **7c(4)**
(5) Other (specify below) **7c(5)**
▶(6) Total additions **7c(6)** 0**d** Total of balance and additions (add lines **7b** and **7c(6)**). **7d** 0**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)**
(2) Administration charge made by carrier..... **7e(2)**
(3) Transferred to separate account..... **7e(3)**
(4) Other (specify below) **7e(4)**
▶(5) Total deductions **7e(5)** 0**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**)..... **7f** 0

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. 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 10/01/2021 and ending 09/30/2022		
A Name of plan LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 LIFE-SCIENCE INNOVATIONS, LLC	D Employer Identification Number (EIN) 27-0123014	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

EMPOWER ANNUITY INSURANCE COMPANY

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, MN 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	RECORDKEEPER	100992	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

MMA SECURITIES LLC

PO BOX 9497
NEW YORK, NY 10087

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	INVESTMENT ADVISOR	69151	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

ASCENSUS HOLDINGS, INC.

200 DRYDEN ROAD
DRESHER, PA 19025

82-3719843

(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	CONTRACT ADMIN	56969	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)

LATHAM & PARKER, LLP

P.O. BOX 656
WILLMAR, MN 56201

(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	7525	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

TD AMERITRADE

200 S. 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	0	Yes ☒ No ☐	Yes ☐ No ☒	0	Yes ☒ No ☐

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

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

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
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.	
EMPOWER ANNUITY INSURANCE COMP 84-0467907	INCOME FROM MARKET PER QUALIFIED TRADE, BPS ON SWEEP FUNDS, AND MUTUTAL FUND FEES DISCLOSED IN TD AMERITRADES 408(B)(2).	
(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 10/01/2021 and ending 09/30/2022

A Name of plan <u>LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>LIFE-SCIENCE INNOVATIONS, LLC</u>	D Employer Identification Number (EIN) <u>27-0123014</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: PUTNAM STABLE VALUE FUND

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

c EIN-PN <u>04-3159710-202</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>9326183</u>
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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)
-----------------	----------------------	---

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:

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning 10/01/2021 and ending 09/30/2022		
A Name of plan LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 LIFE-SCIENCE INNOVATIONS, LLC	D Employer Identification Number (EIN) 27-0123014	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	311676	379557
(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)		
(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)		
(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)	951071	1030172
(9) Value of interest in common/collective trusts	1c(9)	9441413	9251414
(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)	64256405	53800553
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	53880	74769
(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	75014445	64536465

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
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	75014445	64536465
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	2613404	
(B) Participants	2a(1)(B)	3624860	
(C) Others (including rollovers).....	2a(1)(C)	1097544	
(2) Noncash contributions.....	2a(2)		7335808
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	49932	
(F) Other	2b(1)(F)	1603	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		51535
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		3927963
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	3927963	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		3927963
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		0
(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)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		0
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		205575
(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)		-16353853
c Other income.....	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		-4832972
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	5430068	
(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)		5430068
f Corrective distributions (see instructions).....	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		12249
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)		
(2) Contract administrator fees.....	2i(2)	202691	
(3) Investment advisory and management fees.....	2i(3)		
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		202691
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		5645008
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		-10477980
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: LATHAM & PARKER, LLP

(2) EIN: 41-1596605

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		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 10/01/2021 and ending 09/30/2022

A Name of plan <u>LIFE-SCIENCE INNOVATIONS AND AFFILIATES RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶ <u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LIFE-SCIENCE INNOVATIONS, LLC</u>	D Employer Identification Number (EIN) <u>27-0123014</u>

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	<u>0</u>
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): <u>84-0467907</u>		
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 _____

LIFE-SCIENCE INNOVATIONS
AND AFFILIATES
RETIREMENT PLAN

FINANCIAL STATEMENTS

September 30, 2022 and 2021

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INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of the
Life-Science Innovations and Affiliates
Retirement Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statement of Life-Science Innovations and Affiliates Retirement Plan, which comprise the statement of net assets available for benefits as of September 30, 2021, and the related notes to the financial statement.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on the September 30, 2021 financial statement based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note I, which was certified by Great-West Trust Company, LLC, the trustee of the Plan, except for comparing the information with the related information included in the financial statement. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of and for the year ended September 30, 2021, that the information provided to the plan administrator by the trustee is complete and accurate.

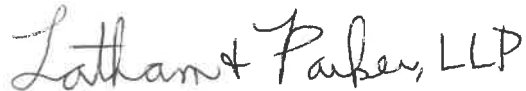
Disclaimer of Opinion

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

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

The form and content of the information included in the financial statement, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulation for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Latham & Parker, LLP

A handwritten signature in dark ink that reads "Latham & Parker, LLP". The signature is written in a cursive, flowing style.

Willmar, Minnesota
May 31, 2023

INDEPENDENT AUDITORS' REPORT

To the Administrative Committee of the
Life-Science Innovations and Affiliates Retirement Plan

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit

We have performed an audit of the accompanying financial statements of Life-Science Innovations and Affiliates Retirement Plan, an employee benefit plan subject to the Employee Retirement 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 September, 30, 2022, and the related statement of changes in net assets available for the year then ended, and the related notes to the financial statements.

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

Management has obtained a certification from a qualified institution as of and for the year ended September 30, 2022, stating that the certified investment information, as described in Note I to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section –

- the amounts and disclosures in the financial statements referred to above, 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 financial statements referred to above 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).

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibility under those standards are further described in the Auditor's Responsibility for the Audit of the Financial Statements section of our report. We are required to be independent of Life-Science Innovations and Affiliates 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.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation 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 Life-Science Innovations and Affiliates 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 Responsibility for the Audit of the 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 generally accepted auditing standards 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 omission, 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 generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risk 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 Life-Science Innovations and Affiliates 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 Life-Science Innovations and Affiliates 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 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 objectives 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.

Supplemental Schedule Required by ERISA

The supplemental schedule of assets held for investment purposes (held at year end) as of September 30, 2022 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of

management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including 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 schedule, other than the information in the supplemental schedule 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 schedule 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).



Latham & Parker, LLP
Willmar, Minnesota
May 31, 2023

**LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN**
Statements of Net Assets Available for Benefits

September 30, 2022 and 2021

	<u>2022</u>	<u>2021</u>
Investments at fair value:		
Mutual Funds	\$ 53,800,553	\$ 64,256,405
Common/Collective Trusts	9,251,414	9,441,413
Insurance Company Accounts		
Holding and Forfeitures	74,769	53,880
Total Investments	\$ <u>63,126,736</u>	\$ <u>73,751,698</u>
Receivables:		
Employer's Contribution	\$ 379,557	\$ 311,676
Notes Receivable from Participants	1,030,172	951,071
	\$ <u>1,409,729</u>	\$ <u>1,262,747</u>
 NET ASSETS AVAILABLE FOR BENEFITS	 \$ <u><u>64,536,465</u></u>	 \$ <u><u>75,014,445</u></u>

See notes to financial statements

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
Statement of Changes in Net Assets Available for Benefits

Year Ended September 30, 2022

Additions:

Additions to Net Assets Attributable to:

Investment Income	
Net Depreciation in Fair Value of Investments	\$ (16,353,853)
Interest	1,603
Dividends	4,133,538
	<u>\$ (12,218,712)</u>
Interest Income on Notes Receivable from Participants	<u>\$ 49,932</u>

Contributions:

Employer	\$ 2,613,404
Participants	3,624,860
Participants-rollovers	1,097,544
	<u>\$ 7,335,808</u>

Total Additions	<u>\$ (4,832,972)</u>
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Deductions:

Deductions from Net Assets Attributable to:

Benefits Paid to Participants	\$ 5,442,317
Administrative Expenses	202,691
Total Deductions	<u>\$ 5,645,008</u>

Net (Decrease) in Net Assets	\$ (10,477,980)
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Net Assets Available for Benefits

Beginning of Year	<u>75,014,445</u>
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Net Assets Available for Benefits	<u>\$ 64,536,465</u>
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End of Year

See notes to financial statements

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE A: DESCRIPTION OF PLAN

The following description of the Life-Science Innovations and Affiliates Retirement Plan provides only general information. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA) and Participants should refer to the Plan agreement for a complete description of the Plan's provisions.

GENERAL-The Plan is a defined contribution plan covering substantially all employees of the Company and affiliated participating companies. Affiliates are listed below under "Participating Companies". Affiliates Syntiron, LLC and PALS, Inc, were added as participating employers effective September 26, 2004. Affiliate Iowa Turkey Products, Inc. DBA Turkey Valley Farms was added as a participating employer subsequent to year end effective January 1, 2005 and affiliates of WLSI Holding, Inc. were added effective October 1, 2006. Affiliate Select Genetics, LLC was added September 30, 2016; Man Cave, LLC was added March 9, 2017. The plan covers employees who were employed at fiscal year end and are age eighteen or older.

Effective October 1, 2019 the Plan made the following material modification – Man Cave Foods, LLC and its employees were terminated from the Plan.

Effective January 1, 2020 the Plan made the following material modification – EpiTopix, LLC and Syntiron, LLC and its employees were terminated from the Plan.

Effective October 1, 2021 the Plan made the following material modification – the maximum deferral percentage was increased from 85% to 100% of compensation.

Contributions-The Company and affiliated participating companies may annually contribute to the Plan on a discretionary basis. Contributions are based upon an annually determined percentage of qualifying employee wages. Participants may contribute up to 100% of their compensation under a 401(K) feature of the Plan (effective October 1, 2021). The Company will match these contributions up to a maximum of 4% of compensation per year per employee (5% for employees of Nova-Tech Engineering, LLC; 125% of up to 6% for employees of Life-Science Innovations, LLC, Pals, Inc., and Willmar Poultry Farms, Inc. for the year ended September 30, 2021).

Forfeited Accounts-At September 30, 2022 and 2021, forfeited non-vested accounts totaled \$74,769 and \$53,880 respectively. These accounts will be used to pay administrative expenses.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE A: DESCRIPTION OF PLAN (Continued)

	Discretionary Contribution Rate	
	2022	2021
Participating Companies		
WP Holding, Inc. (parent company)	N/A	N/A
Subsidiaries:		
Willmar Poultry Farms, Inc.	0 %	0 %
Wilpro, Inc.	N/A	N/A
Epitopix, LLC (through December 31, 2019)	0 %	0 %
PALS Propane Inc.	0 %	0 %
PALS Inc.	0 %	0 %
Willmar Logistics, LLC	0 %	0 %
Select Genetics, LLC	0 %	0 %
WLSI Holding, Inc. (parent company)	N/A	N/A
Subsidiary:		
Life-Science Innovations, LLC	0 %	0 %
Nova-Tech Engineering, LLC	2.00 %	2.00 %
Minn-West Technology Campus Management, LLC	N/A	N/A
Syntiron, LLC (through December 31, 2019)	0 %	0 %
Turkey Valley Farms, Inc.	0 %	0 %
Stockholders Affiliates		
Norling Farms, Inc.	0 %	0 %
Nova Tech Leasing, Inc.	N/A	N/A

PARTICIPANT ACCOUNTS-Each participant's account is credited with the employee's contribution and allocations of the Company's contribution and plan earnings. 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 individual vested account balance.

VESTING-Each participant is immediately vested in their contributions and Safe Harbor Match contributions plus actual earnings thereon. Vesting in the Company's discretionary contribution portion of the accounts plus actual earnings thereon is based on the number of years of service accumulated with the participating Companies. Years of service completed prior to the date the participant reaches age eighteen (18) are excluded for vesting purposes. A year of service is defined as 1,000 hours or more in any plan year.

Vesting accumulates at the rate of 20% for each of the first five years of service. Five (5) years of service is considered 100% fully vested. Also considered 100% vested are the following situations: attaining retirement age of 62, death, and total disability (defined as unable to continue in the service of the employer in any capacity), while employed by any of the participating companies.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE A: DESCRIPTION OF PLAN (Continued)

NOTES RECEIVABLE FROM PARTICIPANTS-Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of the vested portion of the participant's account balance. Loan transactions are treated as a transfer from the investment fund to the Participant Notes fund. Loan terms range from 1-5 years or up to 15 years for the purchase of a primary residence. The loans are secured by the balance in the participant's account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through payroll deductions. Delinquent loans are written off when deemed uncollectible by the plan sponsor.

PAYMENT OF BENEFITS-On termination of service, the vested portion is distributed in a lump sum if a participant's vested account balance does not exceed \$5,000. If the participant's vested account balance exceeds \$5,000; the participant has a choice of a lump sum, or equal periodic installments over a period of time or the purchase of an annuity to be paid out in installments. Benefits are recorded when paid.

NOTE B: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

BASIS OF ACCOUNTING-The Plan uses the accrual method of accounting in accordance with generally accepted accounting principles. The accrual method records income when earned and expenses when incurred.

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

USE OF ESTIMATES-The preparation of financial statements in accordance with generally accepted accounting principles in the United States of America requires the plan administrator to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

INVESTMENT VALUATION AND INCOME RECOGNITION-Investments are reported at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Investment Committee determines the Plan's valuation policies. See Note K for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. Net appreciation includes the plan's gains and losses on the investments bought and sold as well as held during the year.

NOTES RECEIVABLE FROM PARTICIPANTS-Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. At September 30, 2022 and 2021, no allowance for credit losses has been recorded. If a participant does not make loan payments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the Plan document.

PAYMENT OF BENEFITS-Benefits are recorded when paid.

EXPENSES-Investment-related expenses are included in the net appreciation in fair value of investments. Fees for the administration of notes receivable from participants are included in administrative expenses and charged directly to the participant's account. All other administrative expenses of the plan are paid from forfeited accounts.

DATE OF MANAGEMENT'S REVIEW-Subsequent events were evaluated through May 31, 2023, which is the date the financial statements were available to be issued.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE C: INVESTMENTS

Investments at Estimated Fair Value:	2022	2021
Mutual Funds and Pooled Separate Accounts:		
Amana Trust Income	\$ 93,752	\$ 96,167
American Century Equity Income	1,638,984	1,857,730
American Century Growth	2,190,381	2,909,034
American Century Infl-Adj Bd Instl	69,553	68,939
American Century Mid Cap Value R6	1,079,421	1,141,971
American Funds Europacific Growth	927,740	1,183,293
American Funds Fundamental Investors	1,550,221	1,962,961
American Funds New Perspectives	883,054	1,206,821
Carillon Eagle Mid Cap Growth A	1,857,962	2,465,379
Fidelity 500 Index	1,874,986	2,288,351
Fidelity Small Cap Index	2,584,426	3,511,065
Fidelity Mid Cap Index	1,046,731	1,331,847
Loomis Sayles Small Cap Growth	997,118	1,314,408
Metropolitan West Total Return Bond	2,385,119	2,704,740
Oppenheimer Developing Markets Y	841,487	1,059,629
Pimco International Bond	386,271	
Principal Diversified Real Asset Inst	687,100	779,523
Putnam Stable Value	9,326,183	9,495,293
TD Ameritrade SDB	241,708	248,251
T Rowe Price Blue Chip Growth	1,781,730	2,522,383
T Rowe Price Equity Income Fund	2,491,522	2,746,163
Templeton Global Bond Adv		413,759
Vanguard Target Retirement 2020	4,385,443	5,418,284
Vanguard Target Retirement 2025	1,264	
Vanguard Target Retirement 2030	8,118,296	9,455,852
Vanguard Target Retirement 2035	34,219	
Vanguard Target Retirement 2040	4,819,488	5,504,209
Vanguard Target Retirement 2045	17,741	
Vanguard Target Retirement 2050	4,436,056	4,741,699
Vanguard Target Retirement 2055	6,035	
Vanguard Target Retirement 2060	1,246,843	1,262,387
Vanguard Target Retirement 2065	247,573	
Vanguard Target Retirement Income	1,298,151	1,844,346
Vanguard Total Intl Stock Index Admiral	172,585	226,304
Vanguard Wellington ADM	1,770,828	2,202,172
Victory Integrity Small Cap Value	836,338	939,165
Virtus/Ridgeworth Seix High Income	800,427	849,573
	<u>\$ 63,126,736</u>	<u>\$ 73,751,698</u>

During the year ended September 30, 2022 the Plan's investments (including investments bought, sold, and held during the year) earned interest and dividends of \$4,135,141 and decreased in value by \$16,353,853.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE D: PARTICIPANT-DIRECTED INVESTMENTS

The Statement of Net Assets Available for Plan Benefits reflects a summary of the forfeiture account and the various investments funds a member may choose from for investment of their entire Retirement Plan balance.

Upon enrollment in the Plan, a participant may direct their investment in 1% increments, with a minimum of 1% in any of thirty two investment options. The investment selection may be changed daily.

American Funds Euro Pacific Growth -The investment seeks to provide long-term growth of capital. The fund invests primarily in common stocks of issuers in Europe and the Pacific Basin that the investment adviser believes have the potential for growth. Growth stocks are stocks that the investment adviser believes have the potential for above-average capital appreciation. It normally invests at least 80% of net assets in securities of issuers in Europe and the Pacific Basin. The fund may invest a portion of its assets in common stocks and other securities of companies in countries with developing economies and/or markets.

American Century Mid Cap Value Fund R6 - The investment seeks long-term capital growth; income is a secondary consideration. Under normal market conditions, the portfolio managers will invest at least 80% of the fund's net assets in medium size companies. The portfolio managers consider medium size companies to include those whose market capitalization at the time of purchase are within the capitalization rate of the Russell 3000(R) Index, excluding the largest 100 such companies.

Carillon Eagle Mid Cap Growth Fund A -The investment seeks long-term capital appreciation. The fund normally invests at least 80% of its net assets (plus the amount of any borrowings for investment purposes) in the equity securities of mid-capitalization companies. The fund will invest primarily in the equity securities of companies that the portfolio managers believe have the potential for above-average earnings or sales growth, reasonable valuations and acceptable debt levels.

Fidelity 500 Index Fund -The investment seeks to provide investment results that correspond to the total return performance of common stocks publicly traded in the United States. The fund normally invests at least 80% of assets in common stocks included in the S&P 500 Index, which broadly represents the performance of common stocks publicly traded in the United States. It lends securities to earn income.

Fidelity Mid Cap Index Fund -The investment seeks to provide investment results that correspond to the total return performance of stocks of mid-capitalization United States companies. The fund normally invests at least 80% of assets in securities included in the Russell Midcap 2000 Index. It lends securities to earn income.

Fidelity Small Cap Index Fund -The investment seeks to provide investment results that correspond to the total return performance of stocks of small-capitalization United States companies. The fund normally invests at least 80% of assets in securities included in the Russell 2000 Index. It lends securities to earn income.

Oppenheimer Developing Markets Y-The investment aggressively seeks capital appreciation. The fund mainly invests in common stocks of issuers in emerging and developing markets throughout the world and may invest up to 100% of total assets in foreign securities. It normally invests at least 80% of net assets, plus borrowings for investment purposes, in equity securities of issuers whose principal activities are in at least three developing markets. The fund primarily invests in companies with high growth potential.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE D: PARTICIPANT-DIRECTED INVESTMENTS (Continued)

Metropolitan West Total Return Bond I - The investment seeks to maximize long-term total return. The fund pursues its objective by investing, under normal circumstances, at least 80% of its net assets in investment grade fixed income securities or unrated securities that are determined by the Adviser to be of similar quality. Up to 20% of the fund's net assets may be invested in securities rated below investment grade. The fund also invests at least 80% of its net assets plus borrowings for investment purposes in fixed income securities it regards as bonds.

Putnam Stable Value Fund – The fund invests in traditional GIC and similar contracts issued by insurance companies, bank and other financial institutions. The fund invests up to 75% of its assets in synthetic wrap contracts, including insurance separate accounts. The fund invests at least 5% of its assets in high-quality money market instruments and cash equivalents. To earn additional income (net of fees), the fund may invest in other stable value funds and may lend securities to other financial institutions on a collateralized basis; neither is currently occurring. Securities lending is subject to certain risks.

American Century Infl-Adj Bd Instl- The investment seeks total return and inflation protection consistent with investment in inflation-indexed securities. The fund invests at least 80% of its net assets in inflation-adjusted bonds. It also may invest in derivative instruments such as futures contracts and swap agreements, or mortgage- or asset-backed securities. The fund may invest in U.S. Treasury futures, inflation swap agreements and credit default swap agreements to manage duration, inflation and credit exposure.

Principal Diversified Real Asset Inst- The investment seeks return from investments related to real assets and real asset companies. The fund concentrates its investments in securities in the real estate and energy/natural resources industries.

T. Rowe Price Blue Chip Growth Fund- The investment seeks long-term capital appreciation from common stocks of large and medium-sized blue chip companies that have the potential for above-average earnings growth and are well established in their respective industries.

American Century Equity Income Inv- The investment seeks current income; capital appreciation is a secondary consideration. The fund invests in equity securities of companies with a favorable income-paying history that have prospects for income payments to continue or increase. The fund also invests in equity securities of companies that the advisor believes are undervalued and have the potential for an increase in price.

American Century Growth Instl- The investment seeks long-term capital growth. The fund invests in stocks of larger-sized companies that the manager believes will increase in value over time, using an investment strategy developed by American Century.

American Funds New Perspective- The investment seeks capital appreciation and income. The fund normally invests in stocks of companies located around the world to take advantage of investment opportunities generated by changes in international trade patterns and economic and political relationships. In pursuing its primary investment objective, it invests primarily in common stocks that the investment adviser believes have the potential for growth. In pursuing its secondary objective, the fund invests in common stocks of companies with the potential to pay dividends in the future.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE D: PARTICIPANT-DIRECTED INVESTMENTS (Continued)

American Funds Fundamental Investors-The investment seeks long-term growth of capital and income. The fund invests primarily in common stocks of companies that appear to offer superior opportunities for capital growth and most of which have a history of paying dividends. It may invest significantly in securities of issuers domiciled outside the United States.

Victory Integrity Small-Cap Value-The investment seeks to provide long-term capital appreciation. The fund normally invests in equity securities of small capitalization companies. Small-capitalization companies means those companies with market capitalizations within the range of companies included in the Russell 2000 Index.

PIMCO International Bond Fund-The investment seeks maximum total return, consistent with preservation of capital and prudent investment management. The fund seeks to achieve its investment objective by investing under normal circumstances at least 80% of its assets in Fixed Income Instruments. It will invest in normal circumstances in Fixed Income Instruments that are economically tied to at least three non-U.S. countries. The fund invests primarily in investment grade securities but may invest up to 10% of its total assets in junk bonds as rated by Moody's, SW&P or Fitch, or, if unrated, as determined by PIMCO. It is non-diversified.

Prudential Jennison Small Company Z-The investment seeks capital growth. The fund normally invests at least 80% of investable assets in equity and equity-related securities of small, less well-known companies that the investment subadvisor believes are relatively undervalued. In deciding which stocks to buy, it uses a blend of both value and growth styles. The investment subadvisor currently considers small companies to be those with a market capitalization less than the largest market capitalization of the Russell 2500 Index at the time of investment.

Virtus/RidgeWorth Seix High Income -The investment seeks high current income and, secondarily, total return. The fund invests primarily in a diversified portfolio of higher yielding, lower rated income producing securities of U.S. and non-U.S. issuers. It will invest at least 65%, and may invest up to 100%, of assets in securities rated as below investment grade by the Merrill Composite Rating or in unrated securities that the fund's Subadvisor, Seix Investment Advisors LLC believes are of comparable quality.

Templeton Global Bond Adv-The investment seeks current income with capital appreciation and growth of income. The fund normally invests at least 80% of net assets in "bonds" including debt securities of any maturity, such as bonds, notes, bills and debentures. It may invest up to 25% of total assets in bonds that are rated below investment grade. The fund is non-diversified.

T. Rowe Price Equity Income Fund-The investment seeks to provide substantial dividend income as well as long-term growth of capital. The fund will normally invest at least 80% of net assets (including any borrowings for investment purposes) in common stocks, with an emphasis in the common stocks of well-established companies paying above-average dividends. It invests most assets in U.S. common stock, and may also invest in foreign stocks in keeping with the fund's objectives.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE D: PARTICIPANT-DIRECTED INVESTMENTS (Continued)

Vanguard Target Retirement Income Fund- The investment seeks current income and some capital appreciation. The fund invests in other Vanguard mutual funds according to an asset allocation strategy designed for investors currently in retirement. Its indirect bond holdings are a diversified mix of short-, intermediate-, and long-term U.S. government, U.S. agency, and investment-grade U.S. corporate bonds; inflation-protected public obligations issued by the U.S. Treasury; mortgage-backed and asset-backed securities; and government, agency, corporate, and securitized investment-grade foreign bonds issued in currencies other than the U.S. Dollar.

Vanguard Target Retirement Funds (2020, 2025, 2030, 2035, 2040, 2045, 2050, 2055, 2060, 2065)- The investment seeks to provide growth of capital and current income. The fund primarily invests in other Vanguard mutual funds according to an asset allocation strategy designed for investors planning to retire within a few years of the target year. The fund's asset allocation will become more conservative over time, meaning that the percentage of assets allocated to stocks will decrease as the percentage of assets in bonds and other fixed income investments increases.

Vanguard Total International Stock Index Fund- The investment seeks long-term appreciation by investing in a diversified portfolio of stocks from developed and emerging international economies. It does not invest in US stocks.

Vanguard Wellington Adm- The investment seeks to provide long-term capital appreciation and reasonable current income. The fund invests 60% to 70% of its assets in dividend-paying and, to a lesser extent, non-dividend-paying common stocks of established large and mid-size companies. The advisor seeks those that appear to be undervalued but have prospects for improvement. The remaining 30% to 40% of the assets are invested mainly in fixed income securities that the advisor believes will generate a reasonable level of current income. These securities include investment-grade corporate bonds, with some exposure to U.S. Treasury and government agency bonds, and mortgage-backed securities.

Amana Trust Income- The investment seeks current income and preservation of capital, consistent with Islamic principles. The fund normally invests at least 80% of its assets in income-producing securities, primarily dividend-paying common stocks. It invests mainly in common stocks, including foreign stocks. Investment decisions are made in accordance with Islamic principles. The fund diversifies its investments across industries and companies, and generally follows a large-cap value investment style.

Loomis Sayles Small Cap Growth- The investment normally invests at least 80% of its net assets in the equity securities of "small-cap companies," including preferred stocks, warrants, securities convertible into common or preferred stocks and other equity-like interests in an entity. Currently, the Fund defines a small-cap company to be one whose market capitalization either falls within the capitalization range of the Russell 2000 index, an index that tracks stock of 2,000 of the smallest U.S. companies. The Fund may invest the rest of its assets in companies of any size, including large capitalization companies. Loomis Sayles typically seeks to identify companies that it believes have distinctive products, technologies, or services; dynamic earnings growth; prospects for high levels of profitability; and social management. The Fund typically does not consider current income when making buy and sell decisions.

TD Ameritrade- The investment is a self-directed brokerage account.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE E: PLAN TERMINATION

Although they have not expressed any intent to do so, each Company has the right under the Plan to discontinue its contributions at any time and to terminate their Plan subject to the provisions of ERISA. In the event of plan termination, participants will immediately become 100 percent vested in their accounts.

NOTE F: RISKS AND UNCERTAINTIES

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

NOTE G: CHANGE IN PARTICIPATING COMPANIES

The Plan Sponsor has disposed of its interest in three participating companies. No contributions or deferrals will be made to the Plan for employees of Man Cave, LLC as of October 1, 2019 and for Syntiron, LLC and Epitepix, LLC as of January 1, 2020.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE H: TAX STATUS

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated June 30, 2020 that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the IRC and therefore believe that the Plan is qualified and the related income is tax-exempt.

Accounting principles generally in the United States of America require the plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

NOTE I: INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

	<u>2022</u>	<u>2021</u>
Investments at fair value:		
Mutual Funds:	\$ 53,800,553	\$ 64,256,405
Common/Collective Trusts	\$ 9,251,414	9,441,413
Insurance Company Accounts		
Holding and forfeitures	\$ 74,769	\$ 53,880
Notes Receivable from Participants	\$ 1,030,172	\$ 951,071
Investment (Loss)	\$ (12,220,315)	
Interest income	\$ 51,535	

NOTE J: SUBSEQUENT EVENT

On December 29, 2022 the SECURE 2.0 Act was passed. This act had several retirement provisions that will affect the plan: required minimum distribution age increased to 73 effective January 1, 2023, mandatory cash out limit increases to \$7,000 effective January 1, 2024, an increase in catch-up contributions effective January 1, 2025, early withdrawal tax penalty relief effective January 1, 2024, and other provisions.

LIFE-SCIENCE INNOVATIONS AND AFFILIATES
RETIREMENT PLAN
NOTES TO FINANCIAL STATEMENTS

September 30, 2022 and 2021

NOTE K: FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

		Fair Value Measurements Using:	
	Fair Value	Quoted Prices In Active Markets (Level 1)	Significant Other Observable Inputs (Level 2)
<u>September 30, 2022</u>			
Mutual funds	\$ 53,800,553	\$ 53,800,553	\$
Common/Collective Trusts	9,251,414		9,251,414
Investment account with insurance company	74,769		74,769
Total	\$ 63,126,736	\$ 53,800,553	\$ 9,326,183
<u>September 30, 2021</u>			
Mutual funds	\$ 64,256,405	\$ 64,256,405	\$
Common/Collective Trusts	9,441,413		9,441,413
Investment account with insurance company	53,880		53,880
Total	\$ 73,751,698	\$ 64,256,405	\$ 9,495,293

The fair value measurement accounting literature 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 consist of observable inputs other than quoted prices for identical assets, and Level 3 inputs have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs were used only when Level 1 or Level 2 inputs were not available. There are no plan assets requiring the use on Level 3 inputs for the periods presented.

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset values and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

Level 2 Fair Value Measurements

The guaranteed investment contract with insurance companies are based on quoted net asset values of shares comparable to shares held by the Plan at year-end.

SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Life Science Innovations and Affiliates Retirement Plan

01-OCT-21 to 30-SEP-22

11-OCT-22 10:25:44

(a)	(b) INVESTMENT OPTION	(c) MATURITY DATE	(c) INTEREST RATE	(d) COST OF ASSETS	(e) CURRENT VALUE
	IVTINX				1,298,151.22
	IVTWNX				4,385,442.71
	IVTTVX				1,263.94
	IVTHRX				8,118,296.14
	IVTTHX				34,218.84
	IVFORX				4,819,488.47
	IVTIVX				17,741.17
	IVFIFX				4,436,056.08
	IVFFVX				6,035.36
	IVTTSX				1,246,843.37
	IVLXVX				247,573.37
	IRERFX				927,740.21
	IRNPFX				883,053.99
	IODVYX				841,486.70
	IPDRDX				687,099.88
	IVTIAX				172,585.36
	IFSSNX				2,584,426.40
	IPSCZX				0.08
	ILSSIX				997,118.06
	IVSVIX				836,337.52
	IAMDVX				1,079,420.57
	IHAGAX				1,857,961.55
	IFSMGX				1,046,731.28
	IAMANX				93,751.67
	IAEUDX				1,638,984.25
	IAGRDX				2,190,381.25
	IRFNFX				1,550,220.51
	IFXADX				1,874,985.85
	ITRBCX				1,781,730.20
	IPRFDX				2,491,521.91
	IVWENX				1,770,828.36
	IALADX				69,552.81
	IMWTNX				2,385,118.31
	IPFOAX				386,271.37
	ISAHIX				800,426.41
	ISDBTDA				241,707.71
	IPCSV25				9,251,413.72
	IKGPGW		1.000		0.03
					63,051,966.63
	PARTICIPANT LOANS	VARIOUS	5.250-10.500		1,030,172.46
	FORFEITURES				74,768.94

Attachment to Form 5500, Schedule H, Part 4, Item 1

EIN # 270123014 PLAN NUMBER 1

LEGEND

INVESTMENT OPTION:

IVTINX Vanguard Target Retirement Income Inv
 IVTTVX Vanguard Target Retirement 2025 Inv
 IVTTHX Vanguard Target Retirement 2035 Inv
 IVTIVX Vanguard Target Retirement 2045 Inv
 IVFFVX Vanguard Target Retirement 2055 Inv
 IVLXVX Vanguard Target Retirement 2065 Inv
 IRNPFX American Funds New Perspective R5
 IPDRDX Principal Diversified Real Asset Inst
 IFSSNX Fidelity Small Cap Index
 ILSSIX Loomis Sayles Small Cap Growth Instl
 IAMDVX American Century Mid Cap Value R6
 IFSMDX Fidelity Mid Cap Index
 IAEUDX American Century Equity Income R6
 IRFNFX American Funds Fundamental Investors R5
 ITRBCX T. Rowe Price Blue Chip Growth
 IVWENX Vanguard Wellington Adm
 IMWTNX Metropolitan West Total Re Bd Admin Cl
 ISAHIX Virtus Seix High Income A
 IPCSV25 Putnam Stable Value Fund

IVTWNX Vanguard Target Retirement 2020 Inv
 IVTHRX Vanguard Target Retirement 2030 Inv
 IVFORX Vanguard Target Retirement 2040 Inv
 IVFIFX Vanguard Target Retirement 2050 Inv
 IVTTSX Vanguard Target Retirement 2060 Inv
 IRERFX American Funds EuroPacific Gr R5
 IODVYX Invesco Developing Markets Y
 IVTIAX Vanguard Total Intl Stock Index Admiral
 IPSCZX PGIM Jennison Small Company Z
 IVSVIX Victory Integrity Small-Cap Value Y
 IHAGAX Carillon Eagle Mid Cap Growth A
 IAMANX Amana Trust Income
 IAGRDX American Century Growth R6
 IFXADX Fidelity 500 Index
 IPRFDX T. Rowe Price Equity Income Fund
 IALADX American Century Inflation Adj Bond R6
 IPFOAX PIMCO Int Bond (USD-Hedged) A
 ISDBTDA TD Ameritrade SDB
 IKGPGW Key Guaranteed Portfolio Fund

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year

CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year

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<u>Multiple Employer Plan Participating Employer Information</u>			
Name of participating employer	EIN	Percent of Total Contributions	Aggregate Account Balance
Life Science Innovations, LLC	27-0123014	10.21%	15.09%
Nova-Tech Engineering, LLC	20-2845550	42.03%	44.36%
Norling Farms, Inc.	41-1429560	0.00%	0.00%
Turkey Valley Farms, LLC	80-0160634	10.51%	7.16%
Willmar Poultry Company, Inc.	43-2063888	4.16%	4.61%
PALS, Inc.	41-0751063	3.76%	5.05%
Select Genetics, LLC	82-0682657	29.32%	23.72%

SCHEDULE OF ASSETS (HELD AT END OF YEAR)**Life-Science Innovations and Affiliates Retirement Plan****01-OCT-21 to 30-SEP-22****11-OCT-22 20:25:44**

INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
1VTINX			1,500,542.35	1,298,151.22
1VTWNX			5,123,239.37	4,385,442.71
1VTTVX			1,360.90	1,263.94
1VTHRX			9,779,653.17	8,118,296.14
1VTTHX			37,438.39	34,218.84
1VFORX			5,889,208.57	4,819,488.47
1VTIVX			19,404.77	17,741.17
1VFIFX			5,469,283.72	4,436,056.08
1VFFVX			6,612.11	6,035.36
1VTTSX			1,529,541.80	1,246,843.37
1VLXVX			278,824.09	247,573.37
1RERFX			1,163,906.03	927,740.21
1RNPFX			856,024.69	883,053.99
1ODVYX			1,118,497.77	841,486.70
1PDRDX			729,631.03	687,099.88
1VTIAX			209,640.60	172,585.36
1FSSNX			2,582,065.94	2,584,426.40
1PSCZX			0.10	0.08
1LSSIX			1,366,633.22	997,118.06
1VSVIX			872,314.42	836,337.52
1AMDVX			1,220,813.23	1,079,420.57
1HAGAX			1,990,670.33	1,857,961.55
1FSMDX			1,040,166.34	1,046,731.28
1AMANX			87,612.83	93,751.67
1AEUDX			1,724,372.43	1,638,984.25
1AGRDX			2,214,994.56	2,190,381.25
1RFNFX			1,657,788.71	1,550,220.51
1FXAIX			1,664,274.22	1,874,985.85
1TRBCX			1,957,484.66	1,781,730.20
1PRFDX			2,459,962.88	2,491,521.91
1VWENX			1,923,470.08	1,770,828.36
1AIADX			77,350.88	69,552.81
1MWTNX			2,864,592.61	2,385,118.31
1PFOAX			411,638.78	386,271.37
1SAHIX			934,710.70	800,426.41
1SDBTDA			241,707.71	241,707.71
1PCSV25			9,250,141.98	9,251,413.72
1KGPBW		1.000	0.00	0.03
			70,255,575.97	63,051,966.63
PARTICIPANT LOANS	VARIOUS	5.250-10.500	1,030,128.92	1,030,172.46
FORFEITURES			74,768.94	74,768.94