

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 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</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>OTJ ARCHITECTS INC 401(K) PROFIT SHARING PLAN & TRUST</u>		1b Three-digit plan number (PN) ▶ <u>001</u>
			1c Effective date of plan <u>01/01/1998</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>OTJ ARCHITECTS INC</u> <u>555 11 STREET, NW SUITE 200</u> <u>WASHINGTON, DC 20004</u>		2b Employer Identification Number (EIN) <u>52-1698957</u> 2c Plan Sponsor's telephone number <u>202-621-1361</u> 2d Business code (see instructions) <u>541400</u>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/10/2023	NICK ORRISON
	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 (2022)
v. 220413

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		5 225
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) 166
a(2) Total number of active participants at the end of the plan year		6a(2) 193
b Retired or separated participants receiving benefits		6b 0
c Other retired or separated participants entitled to future benefits.....		6c 85
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 278
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 278
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 277
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 4
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2E 2F 2G 2K 3D 2T 2J		
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) ☐ 0 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 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan OTJ ARCHITECTS INC 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 OTJ ARCHITECTS INC	D Employer Identification Number (EIN) 52-1698957	

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	
PAYCHEX SECURITIES CORPORATION	225 KENNETH DRIVE ROCHESTER, NY 14623
16-1486352	

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

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

GLOBAL RETIREMENT PARTNERS, LL

4340 REDWOOD HWY
STE B60
SAN RAFAEL, CA 94903

(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?
26 15	ADVISOR	21228	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PAYCHEX, INC.

911 PANORAMA TRAIL S
ROCHESTER, NY 14625

16-1124166

(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?
26 15	RECORDKEEPER	16256	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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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 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan OTJ ARCHITECTS INC 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ▶	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 OTJ ARCHITECTS INC	D Employer Identification Number (EIN) 52-1698957	

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: JOHN HANCOCK STABLE VALUE R11		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 48226
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK LT BL 2025 TR R4		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1258444
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK LT BL 2035 TR R4		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1139285
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK LT BL 2045 TR R4		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3809792
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK LT BL 2055 TR R4		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2913577
a Name of MTIA, CCT, PSA, or 103-12 IE: JOHN HANCOCK LT BL 2065 TR R4		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE COMPANY		
c EIN-PN 01-0233346-000	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 472331
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
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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
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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 2022 This Form is Open to Public Inspection				
For calendar plan year 2022 or fiscal plan year beginning <u>01/01/2022</u> and ending <u>12/31/2022</u>						
A Name of plan <u>OTJ ARCHITECTS INC 401(K) PROFIT SHARING PLAN & TRUST</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> B Three-digit plan number (PN) ► </td> <td style="width: 20%; padding: 5px; text-align: center;"> 001 </td> </tr> <tr> <td colspan="2" style="height: 20px;"></td> </tr> </table>		B Three-digit plan number (PN) ►	001		
B Three-digit plan number (PN) ►	001					
C Plan sponsor's name as shown on line 2a of Form 5500 <u>OTJ ARCHITECTS INC</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%; padding: 5px;"> D Employer Identification Number (EIN) <u>52-1698957</u> </td> <td style="width: 20%;"></td> </tr> </table>		D Employer Identification Number (EIN) <u>52-1698957</u>			
D Employer Identification Number (EIN) <u>52-1698957</u>						

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....		1a	
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....		1b(1)	1404030732
(2) Participant contributions.....		1b(2)	3859580689
(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)	15105162452
(9) Value of interest in common/collective trusts.....		1c(9)	81914029641655
(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)	38773911751928
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14)	
(15) Other		1c(15)	

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	12272479	11567456

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	12272479	11567456
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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)	385977	
(B) Participants	2a(1)(B)	1241617	
(C) Others (including rollovers)	2a(1)(C)	494197	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2121791
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)	3578	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3578
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	80065	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		80065
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-2299613
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		-94179
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	572747	
(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)		572747
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses: (1) Professional fees	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)		
(4) Other	2i(4)	38097	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		38097
j Total expenses. Add all expense amounts in column (b) and enter total	2j		610844
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-705023
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: COUNCILOR, BUCHANAN, & MITCHELL PC

(2) EIN: 52-1711839

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a		X	

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	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.	X		
4n	X		

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

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan OTJ ARCHITECTS INC 401(K) PROFIT SHARING PLAN & TRUST		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 OTJ ARCHITECTS INC		D Employer Identification Number (EIN) 52-1698957
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 16-1470238 01-0233346		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☒ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock?..... ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)..... ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?..... ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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).)

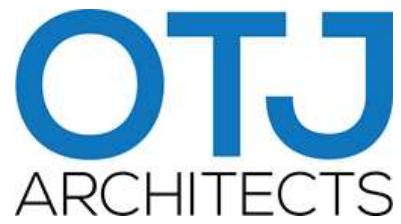
(1) Contribution rate (in dollars and cents) _____

(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
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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 _____



**OTJ ARCHITECTS, INC. 401(K) PROFIT
SHARING PLAN & TRUST**

**FINANCIAL STATEMENTS AND
SUPPLEMENTARY INFORMATION**

DECEMBER 31, 2022 AND 2021

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

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DECEMBER 31, 2022 AND 2021**

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Independent Auditor's Report

To the Trustees/Fiduciaries of
OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust
Arlington, Virginia

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

We have performed audits of the accompanying financial statements of the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2022 and 2021, and the related statement of changes in net assets available for benefits for the year ended December 31, 2022, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust'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 audits 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 certifications from a qualified institution as of December 31, 2022 and 2021, and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits 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 audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. 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 the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the 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 omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

Auditor's Responsibilities for the Audit of the Financial Statements (Continued)

- 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 the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust'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 the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust's ability to continue as a going concern for a reasonable period of time.

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

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

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

Supplementary Schedules Required by ERISA

The supplementary Schedule H, Line 4i - Schedule of Assets (Held at End of Year) and Schedule H, Line 4j - Schedule of Reportable Transactions as of December 31, 2022, are presented for purposes of additional analysis and are not a required part of the financial statements but are 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 supplementary schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplementary schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

To the Trustees/Fiduciaries of
OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust

Supplementary Schedules Required by ERISA (Continued)

In our opinion—

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

Councilor, Buchanan + Mitchell, P.C.

Bethesda, Maryland
October 10, 2023

Certified Public Accountants

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2022 AND 2021**

	<u>2022</u>	<u>2021</u>
Assets		
Investments, at Fair Value	\$ 11,345,357	\$ 12,068,793
Investments, at Contract Value	<u>48,226</u>	<u>-</u>
Total Investments	11,393,583	12,068,793
Participants' Contributions Receivable	80,689	38,595
Employers' Contributions Receivable	30,732	14,040
Notes Receivable from Participants	<u>62,452</u>	<u>151,051</u>
Total Receivables	<u>173,873</u>	<u>203,686</u>
Total Assets	11,567,456	12,272,479
Liabilities		
Excess Contributions Payable	<u>-</u>	<u>145</u>
Net Assets Available for Benefits	<u><u>\$ 11,567,456</u></u>	<u><u>\$ 12,272,334</u></u>

See accompanying Notes to Financial Statements.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2022**

Additions to Net Assets Attributed to	
Participants' Contributions	\$ 1,241,762
Employers' Contributions	385,977
Participants' Contributions - Rollovers	<u>494,197</u>
Total Contributions	2,121,936
Investment Return	
Net Depreciation in Fair Value of Investments	(2,299,613)
Dividends	<u>80,065</u>
Total Investment Return	(2,219,548)
Interest on Notes Receivable from Participants	<u>3,578</u>
Total Additions (Reductions)	<u>(94,034)</u>
Deductions from Net Assets Attributed to	
Benefits Paid to Plan Participants	572,747
Administrative Expenses	<u>38,097</u>
Total Deductions	<u>610,844</u>
Decrease in Net Assets Available for Benefits	(704,878)
Net Assets Available for Benefits, Beginning of Year	<u>12,272,334</u>
Net Assets Available for Benefits, End of Year	<u><u>\$ 11,567,456</u></u>

See accompanying Notes to Financial Statements.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

1. DESCRIPTION OF THE PLAN

The following description of the OTJ Architects, Inc. 401(k) Profit Sharing Plan & Trust (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan pursuant to the provisions of Section 401(k) of the Internal Revenue Code (IRC) established for the benefit of all employees (participants). Employees who have worked three months and have attained age 21 are eligible for the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan is a single employer plan covering the employees of OTJ Architects, Inc. (OTJ).

Effective July 2, 2018, the plan sponsor elected to restate the Plan in order to merge employees of Martinez & Johnson Architecture, Inc., into the Plan, as long as they were employed on August 1, 2018, and met the age and eligibility service requirements mentioned above. All assets of the Plan for Martinez & Johnson Architecture, Inc., employees remained with the trustee of that Plan.

Contributions

Participant contributions consist of pre-tax elective deferrals, Roth contributions, and after-tax contributions. Participants may contribute pre-tax elective deferrals and Roth contributions up to the dollar limitation contained in Section 402(g) of IRC in effect at the beginning of the year. Participants may also rollover contributions from other qualified plans. Employer contributions include matching contributions of two percent of eligible compensation and is paid each pay period. OTJ may also provide discretionary profit-sharing contributions subject to certain limitations. The discretionary profit-sharing contributions uses an age-weighted formula to allocate the approved annual employer contribution. There were no discretionary profit-sharing contributions made in 2022.

Effective January 1, 2020, the Plan was amended to allow bonuses to be eligible for employee deferrals only.

In 2022, Plan management elected to change trustees. From January 1, 2021 through September 1, 2022, assets were held at Mid Atlantic Trust Company, and from September 1, 2022 through December 31, 2022, assets were held at John Hancock Trust Company, LLC. In September and October 2022, plan assets totaling \$10,013,094 were transferred from Mid Atlantic Trust Company to John Hancock Trust Company, LLC.

Participant Accounts

Each participant's account is credited with participant's contributions, employer contributions and allocations of plan earnings, and charged with an allocation of investment expenses. Plan earnings and investment expenses are allocated based on the participant's share of each investment. Participants direct the investment of their contributions into various investment options offered by the Plan. The investment options available to participants include mutual funds and a common collective trust.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

1. DESCRIPTION OF THE PLAN (CONTINUED)

Vesting

Each participant is immediately vested in his or her voluntary contributions plus earnings on those contributions. For participants hired after April 1, 2012, vesting in the remainder of the participant's account balance, which arises from the employers' matching and discretionary contributions, forfeitures, plus earnings on those contributions, is based on years of continuous service. A participant is 20 percent vested after two years of service is completed and vests an additional 20 percent per year until full vesting after six years.

Participants hired before April 1, 2012, are fully vested in their total participant account balances.

Notes Receivable from Participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum of 50% of the participant's vested interest in the Plan or \$50,000, whichever is less. Loan terms range from one to five years. The interest rate for a loan will be based on the rates available for similar loans from commercial lending institutions. Principal and interest are paid ratably through payroll deductions.

Benefits

Amounts credited to a participant's account are distributed at termination of employment as a lump sum, in installments, or, if qualified, as an annuity. Distributions may be deferred until the participant reaches the age of 72 (70½ if you reach 70½ before January 1, 2020), if the value of the distribution is not less than \$5,000. However, the Plan stipulates those distributions must commence no later than April 1 of the year following the year in which the participant reaches the age of 72 (70½ if you reach 70½ before January 1, 2020). Hardship withdrawals are permitted, subject to provisions described in the plan document, which were amended January 1, 2020. Withdrawals from rollover and after-tax contributions are permitted at any time.

Forfeited Accounts

Terminating participants forfeit the non-vested portions of the participants' employer contributions. Forfeitures can be used to pay administrative costs, restore previously forfeited account balances as necessary, or reduce future employer contributions. As of December 31, 2022 and 2021, there were no forfeited non-vested accounts. Available forfeiture accounts will be used to offset administrative costs or reduce future Company contributions.

Administrative Cost

Certain administrative expenses are paid by the Plan and are allocated proportionately to participant account balances. The Companies may absorb other costs related to managing the Plan or use forfeited accounts to fund administrative costs.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The Plan presents its financial statements under the accrual method of accounting in accordance with generally accepted accounting principles in the United States of America.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Contributions

Employee contributions are recorded in the period that the Companies deduct deferrals from the participant's earnings. Contributions from the employers of the Plan are accrued in the period in which they become obligations under provision of the plan agreement.

Notes Receivable from Participants

The notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions.

Payment of Benefits

Benefits are recorded when paid.

Excess Contributions Payable

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service are recorded as a liability with a corresponding reduction to contributions.

Investment Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of registered investment companies (mutual funds) are valued at quoted market prices which represent the net asset values of shares held by the Plan at year end. Units of the Common/Collective Trusts investments are valued based on net asset value per share provided by the manager of the fund.

Purchases and sales of securities are recorded on a trade-date basis. Purchases and sales are recorded on the ex-dividend date. Interest is accrued when earned. Unrealized appreciation and depreciation in the fair value of investments are recognized in the financial statements in the period in which such changes occur. Earnings from investments are recorded as earned using the accrual method of accounting. Dividends are recorded on the ex-dividend date.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

3. INFORMATION CERTIFIED BY THE PLAN TRUSTEES

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8(c) of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mid Atlantic Trust Company from January 1, 2021 through September 1, 2022, and John Hancock Trust Company, LLC, from September 1, 2022 through December 31, 2022, the trustees of the Plan, have certified that the information related to investments included in the accompanying financial statements and supplementary schedules is complete and accurate.

	2022	2021
Investments, at Fair Value	\$ 11,345,357	\$ 12,068,793
Investments, at Contract Value	48,226	-
Notes Receivable from Participants	62,452	151,051
Interest on Notes Receivable from Participants	3,578	*
Investment Return		
Net Depreciation in Fair Value of Investments	\$ (2,299,613)	*
Dividends	80,065	*
Total Investment Return	<u>\$ (2,219,548)</u>	*

* Prior year information not required.

4. FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of fair value hierarchy under the accounting literature are described as follows:

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

Level 2 - inputs to the valuation methodology are unadjusted quoted prices for similar assets in active or inactive markets.

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

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

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

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

4. FAIR VALUE MEASUREMENTS (CONTINUED)

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement.

Following is a description of the valuation methodologies used for assets measured at fair value on a recurring basis as of December 31, 2022 and 2021.

Registered Investment Company Shares (mutual funds): Based on quoted market price values of the shares on the last business day of the plan year.

Collective Investment Trust: The fair value of the common collective trust funds are based on the net asset value (NAV) on the last business day of the plan year provided by the entity holding the trust funds. The NAV of the common collective trust is used as a practical expedient to estimate fair value and is determined by the trustee based on the fair value of underlying assets in the trusts, less the liabilities. These investments can be redeemed immediately at the current net asset value. There are no withdrawal limits, redemption frequency limits, or redemption notice periods. There were no unfunded commitments for these investments as of December 31, 2022.

The preceding 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.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value for December 31, 2022 and 2021:

	<u>Fair Value</u>	<u>Level 1 Inputs</u>	<u>Level 2 Inputs</u>	<u>Level 3 Inputs</u>
<u>December 31, 2022</u>				
Mutual Funds	\$ 1,751,928	\$ 1,751,928	\$ -	\$ -
	1,751,928	<u>\$ 1,751,928</u>	<u>\$ -</u>	<u>\$ -</u>
Investments Measured at Net Asset Value *	<u>9,593,429</u>			
Total Investments at Fair Value	<u>\$ 11,345,357</u>			
<u>December 31, 2021</u>				
Mutual Funds	\$ 3,877,391	\$ 3,877,391	\$ -	\$ -
	3,877,391	<u>\$ 3,877,391</u>	<u>\$ -</u>	<u>\$ -</u>
Investments Measured at Net Asset Value *	<u>8,191,402</u>			
Total Investments at Fair Value	<u>\$ 12,068,793</u>			
	<u>Fair Value</u>	<u>Fair Value</u>	<u>Unfunded</u>	<u>Redemption</u>
	2021	2022	Commitments	Frequency
* Collective Investment Trust	<u>\$ 8,191,402</u>	<u>\$ 9,593,429</u>	-	daily
				Notice
				Period

* In accordance with ASU 2015-07, investments that are measured at net asset value per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in these tables are intended to permit reconciliation of the fair value hierarchy to the line items presented in the statements of net assets available for benefits.

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2022 AND 2021

5. FULLY BENEFIT-RESPONSIVE CONTRACT

Beginning in September 2022, the Plan participates in a fully benefit-responsive investment contract with John Hancock Life Insurance Company via an investment in the John Hancock Stable Value Fund. This is an investment option within the group annuity contract that invests into the John Hancock Stable Value Fund Collective Investment Trust (CIT). The underlying CIT itself is generally fully benefit-responsive and honors eligible redemptions at \$1.00 per unit.

The John Hancock Stable Value Fund is considered a sub-account and is calculated as the number of units of the sub-account held on a particular date multiplied by the unit value on that date, and generally is the value that would be paid out for participant-initiated or benefit withdrawals. The contract value of the Stable Value Fund included in the statements of net assets available for benefits as of December 31, 2022, approximates fair value which totaled \$48,226.

6. RELATED PARTY TRANSACTIONS

Mid Atlantic Trust Company, trustee of the Plan from January 1, 2022 to September 1, 2022, and John Hancock Trust Company, LLC, trustee of the Plan from September 1, 2022 to December 31, 2022, act as the trustees of the accounts and therefore, these transactions qualify as party-in-interest transactions. Administrative fees paid to the trustees also qualify as party-in-interest transactions.

7. PLAN TERMINATION

While the employer has not expressed any intent to do so, the employer has the right under the Plan to terminate the Plan, subject to the provisions of ERISA. In the event of plan termination, participants are 100% vested in their accounts. Also, upon such termination, the commitment of the employer to make contributions shall terminate.

8. TAX STATUS

The Plan meets the requirements under the Internal Revenue Code and ERISA to qualify as exempt from federal income taxes. The plan sponsor obtained a prototype opinion letter dated April 10, 2014, in which the Internal Revenue Service determined that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code.

The Plan's policy would be to recognize interest and penalties, if any, on tax positions related to its unrecognized tax benefits in income tax expense in the financial statements. No interest and penalties were assessed or recorded during the year ended December 31, 2022. The Plan's Forms 5500, *Annual Return/Report of Employee Benefit Plan*, is open for inspection by the taxing authorities, generally for three years after filing.

9. RISKS AND UNCERTAINTIES

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

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

**NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2022 AND 2021**

9. RISKS AND UNCERTAINTIES (CONTINUED)

The Coronavirus Aid, Relief, and Economic Security Act (the CARES Act) was signed into law on March 27, 2020, and the Setting Every Community Up for Retirement Enhancement Act of 2019 (the SECURE Act) was signed into law December 29, 2019. These laws change the Plan to, among others, allow certain eligible individuals to receive coronavirus-related relief for loan repayment, suspend required minimum distributions, and delay the commencement date for required minimum distributions.

Effective April 17, 2020, certain provisions were implemented under the CARES Act. The Plan will be formerly amended for the CARES Act and the SECURE Act provisions elected in accordance with applicable law and IRS guidance. Under Notice 2022-33 and Notice 2022-45, the IRS has extended the deadline for retirement plans to adopt the amendments required by the SECURE Act and the CARES Act until December 31, 2025.

10. CONCENTRATIONS

Investments representing 15% or more of the Plan's net assets as of December 31 are as follows:

	<u>2022</u>		<u>2021</u>	
flexPATH Index + Moderate 2045 Fund R1	*		\$ 3,752,353	31%
JH Lifetime Blend 2045 Trust Fund	\$ 3,809,792	33%	*	
JH Lifetime Blend 2055 Trust Fund	2,913,577	25%	*	

* Investment did not represent 15% or more of the Plan's net assets available for benefits.

11. RECONCILIATION TO FORM 5500

The following is a reconciliation of amounts in the statement of changes in net assets available for benefits to Form 5500 as of December 31, 2022.

Total Additions (Reductions) per the Financial Statements	\$ (94,034)
Less Excess Contributions Payable - Prior Year	<u>(145)</u>
Total Income per Form 5500	<u><u>\$ (94,179)</u></u>

12. SUBSEQUENT EVENTS

The Plan's management has evaluated subsequent events through October 10, 2023, the date on which the financial statements were available to be issued.

SUPPLEMENTARY INFORMATION

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

EIN: 52-1698957

PN: 001

**SCHEDULE H, LINE 4j - SCHEDULE OF REPORTABLE TRANSACTIONS
DECEMBER 31, 2022**

(a) Identity of party involved	(b) Description of assets	(c) Purchase price	(d) Selling price	(e) Lease rental	(f) Expenses incurred	(g) Cost of asset	(h) Current value of asset on transaction date	(i) Net gain or (loss)
American Funds	American Balanced Fund Class R6	\$ 988,208	N/A	N/A	N/A	\$ 1,194,369	N/A	\$ (206,161)
Fidelity	Fidelity 500 Index	\$ 1,249,607	N/A	N/A	N/A	\$ 1,555,611	N/A	\$ (306,004)
flexPATH	Index + Moderate 2055 Fund R1	\$ 1,871,019	N/A	N/A	N/A	\$ 2,329,677	N/A	\$ (458,658)
flexPATH	Index + Moderate 2045 Fund R1	\$ 3,676,467	N/A	N/A	N/A	\$ 4,657,979	N/A	\$ (981,512)
flexPATH	Index + Moderate 2035 Fund R1	\$ 965,632	N/A	N/A	N/A	\$ 1,224,989	N/A	\$ (259,356)
flexPATH	Index + Moderate 2025 Fund R1	\$ 1,148,441	N/A	N/A	N/A	\$ 1,385,567	N/A	\$ (237,126)
John Hancock	John Hancock Lifetime Blend 2025 Trust Class R4	\$ 1,402,080	N/A	N/A	N/A	\$ 1,402,080	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2025 Trust Class R4	\$ 1,424,482	N/A	N/A	N/A	\$ 1,424,482	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2035 Trust Class R4	\$ 1,958,010	N/A	N/A	N/A	\$ 1,958,010	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2035 Trust Class R4	N/A	\$ 694,106	N/A	N/A	\$ 642,733	N/A	\$ 51,373
John Hancock	John Hancock Lifetime Blend 2035 Trust Class R4	N/A	\$ 1,010,991	N/A	N/A	\$ 941,794	N/A	\$ 69,197
John Hancock	John Hancock Lifetime Blend 2035 Trust Class R4	\$ 2,017,065	N/A	N/A	N/A	\$ 2,017,065	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2045 Trust Class R4	\$ 3,697,135	N/A	N/A	N/A	\$ 3,697,135	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2045 Trust Class R4	\$ 4,109,401	N/A	N/A	N/A	\$ 4,109,401	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2055 Trust Class R4	\$ 2,560,895	N/A	N/A	N/A	\$ 2,560,895	N/A	\$ -
John Hancock	John Hancock Lifetime Blend 2055 Trust Class R4	\$ 2,825,569	N/A	N/A	N/A	\$ 2,825,569	N/A	\$ -
Natixis	Natixis Sustainable Future 2030 Fund Class N	\$ 694,106	N/A	N/A	N/A	\$ 694,106	N/A	\$ -
Natixis	Natixis Sustainable Future 2030 Fund Class N	\$ 720,212	N/A	N/A	N/A	\$ 720,212	N/A	\$ -
JPMorgan	JPMorgan U.S. Government Money Market Fund (Class Capital)	\$ 9,996,271	N/A	N/A	N/A	\$ 9,996,271	N/A	\$ -
JPMorgan	JPMorgan U.S. Government Money Market Fund (Class Capital)	N/A	\$ 10,013,881	N/A	N/A	\$ 10,013,881	N/A	\$ -
JPMorgan	JPMorgan U.S. Government Money Market Fund (Class Capital)	\$ 10,147,475	N/A	N/A	N/A	\$ 10,147,475	N/A	\$ -
JPMorgan	JPMorgan U.S. Government Money Market Fund (Class Capital)	N/A	\$ 10,147,274	N/A	N/A	\$ 10,147,274	N/A	\$ -

Schedule H, Line 4i
Schedule of Assets (Held At End of Year)

Name of Plan:

▶ OTJ Architects Inc 401(k) Profit Sharing Plan & Trust

Employer Identification Number: ▶ 52-1698957

For plan year (beginning/ending): ▶ 01/01/2022 - 12/31/2022

Plan number: ▶

001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
		SEE AUDIT REPORT		

OTJ ARCHITECTS, INC. 401(K) PROFIT SHARING PLAN & TRUST

EIN: 52-1698957

PN: 001

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

DECEMBER 31, 2022

(a)	(b)	(c)	(d)	(e)
	Identity of issue, borrower, lessor, or similar party	Description of investment including maturity date, rate of interest, collateral, par, or maturity value	Cost	Current value
*	JH Lifetime Blend 2045 Trust Fund	Collective Investment Trust	**	\$ 3,809,792
*	JH Lifetime Blend 2055 Trust Fund	Collective Investment Trust	**	2,913,577
*	JH Lifetime Blend 2025 Trust Fund	Collective Investment Trust	**	1,258,444
*	JH Lifetime Blend 2035 Trust Fund	Collective Investment Trust	**	1,139,285
	Natixis Sustainable Future 2030 Fund	Registered Investment Co. Shares (Mutual Funds)	**	685,835
	Fidelity 500 Index Fund	Registered Investment Co. Shares (Mutual Funds)	**	536,584
*	JH Lifetime Blend 2065 Trust Fund	Collective Investment Trust	**	472,331
	American Funds Wash Mutual Investors Fund	Registered Investment Co. Shares (Mutual Funds)	**	125,382
	American Funds American Balanced Fund	Registered Investment Co. Shares (Mutual Funds)	**	98,173
	Natixis Sustainable Future 2035 Fund	Registered Investment Co. Shares (Mutual Funds)	**	65,448
*	John Hancock Stable Value Fund	Group Annuity Contract	**	48,226
	Putnam Small Cap Growth Fund	Registered Investment Co. Shares (Mutual Funds)	**	44,876
	Goldman Sachs Small Cap Value Insights R6	Registered Investment Co. Shares (Mutual Funds)	**	38,988
	Fidelity Advisor Growth Opportunities Fund Class Z	Registered Investment Co. Shares (Mutual Funds)	**	38,129
	Natixis Sustainable Future 2040 Fund	Registered Investment Co. Shares (Mutual Funds)	**	32,724
	Fidelity International Index Fund	Registered Investment Co. Shares (Mutual Funds)	**	21,559
	Pioneer Strategic Income Fund Class K	Registered Investment Co. Shares (Mutual Funds)	**	16,906
	Fidelity Small Cap Index Fund	Registered Investment Co. Shares (Mutual Funds)	**	16,745
	American Funds Fundamental Investors	Registered Investment Co. Shares (Mutual Funds)	**	15,486
*	JH ESG Large Cap Core Fund	Registered Investment Co. Shares (Mutual Funds)	**	9,173
	Invesco Oppenheimer Global Fund Class R6	Registered Investment Co. Shares (Mutual Funds)	**	5,699
	JPMorgan US Government Money Market Fund	Registered Investment Co. Shares (Mutual Funds)	**	201
	Invesco Oppenheimer Developing Markets Fund	Registered Investment Co. Shares (Mutual Funds)	**	18
	The Hartford MidCap Fund Class Y	Registered Investment Co. Shares (Mutual Funds)	**	2
*	Notes Receivable from Participants	Interest Rates from 4.25% - 8.00%		62,452
				<u>\$ 11,456,035</u>

* Cost information not required - participant-directed investment.

** Denotes participant-in-interest to the Plan.