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

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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.)
- [X] 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:
- [X] 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
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/1993

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)
ROWAN CORNIL, INC.
SUNBELT MATERIAL HANDLING

1617 TERRE COLONY CT.
DALLAS, TX 75212

2b Employer Identification Number (EIN) 75-2194496

2c Plan Sponsor's telephone number 214-819-4150

2d Business code (see instructions) 423800

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.	10/09/2023	JOSEPH NOLAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/09/2023	JOSEPH NOLAN
	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

3a Plan administrator's name and address [X] 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**	137
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)**	132
a(2)	Total number of active participants at the end of the plan year	**6a(2)**	136
b	Retired or separated participants receiving benefits	**6b**	0
c	Other retired or separated participants entitled to future benefits	**6c**	14
d	Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	150
e	Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f	Total. Add lines **6d** and **6e**.	**6f**	151
g	Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	76
h	Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7	Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2E 2F 2G 2J 2T 3D

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)	[X]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	Trust
(4)	[ ]	General assets of the sponsor

9b Plan benefit arrangement (check all that apply)

(1)	[X]	Insurance
(2)	[ ]	Code section 412(e)(3) insurance contracts
(3)	[X]	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)	[X]	**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)	[X]		**H** (Financial Information)
(2)	[ ]		**I** (Financial Information – Small Plan)
(3)	[X]	1	**A** (Insurance Information)
(4)	[X]		**C** (Service Provider Information)
(5)	[X]		**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 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

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
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROWAN CORNIL, INC.

D Employer Identification Number (EIN)
75-2194496

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.

1 Coverage Information:

(a) Name of insurance carrier
SENTRY LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
39-6040276	68810	010799801	151	01/01/2022	12/31/2022

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
1502	0

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

SENTRY INSURANCE
1800 NORTH POINT DRIVE
STEVENS POINT, WI 54481

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
1502			3

(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
	(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
	(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	

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	1384608

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b	Premiums paid to carrier	6b	0
c	Premiums due but unpaid at the end of the year	6c	0
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	0

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 ▶

b	Balance at the end of the previous year			7b	301365
c	Additions: (1) Contributions deposited during the year	7c(1)	18521		
	(2) Dividends and credits	7c(2)	0		
	(3) Interest credited during the year	7c(3)	5125		
	(4) Transferred from separate account	7c(4)	0		
	(5) Other (specify below)	7c(5)	7004		
	▶ LOAN REPAYMENT AND INTEREST				
	(6) Total additions			7c(6)	30650
d	Total of balance and additions (add lines **7b** and **7c(6)**)			7d	332015
e	Deductions:				
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	34103		
	(2) Administration charge made by carrier	7e(2)	615		
	(3) Transferred to separate account	7e(3)	0		
	(4) Other (specify below)	7e(4)	3305		
	▶ LOAN PAYOUT				
	(5) Total deductions			7e(5)	38023
f	Balance at the end of the current year (subtract line **7e(5)** from line **7d**)			7f	293992

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)**	
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)**	
(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)**	
(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.			**10b**	

Specify nature of costs.

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)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**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
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROWAN CORNIL, INC.

D Employer Identification Number (EIN)
75-2194496

Part I Service Provider Information (see instructions)

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).. . . . . [X] 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

SENTRY LIFE INSURANCE COMPANY

39-6040276

(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)

SENTRY LIFE INCURANCE COMPANY

39-6040276

(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	2880	Yes [X] No [ ]	Yes [X] No [ ]	0	Yes [X] No [ ]

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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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

(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.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

A Name of plan
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan or DFE sponsor's name as shown on line 2a of Form 5500
ROWAN CORNIL, INC.

D Employer Identification Number (EIN)
75-2194496

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

a Name of MTIA, CCT, PSA, or 103-12 IE: AA/SMALL CAP GROWTH ACCOUNT III

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-031	P	33033

a Name of MTIA, CCT, PSA, or 103-12 IE: AC/MID-CAP VALUE ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-033	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: AD/DIVERSIFIED GROWTH ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-034	P	3127

a Name of MTIA, CCT, PSA, or 103-12 IE: D0/DIVERSIFIED INCOME ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-004	P	2761

a Name of MTIA, CCT, PSA, or 103-12 IE: G0/BALANCED INCOME ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-007	P	12393

a Name of MTIA, CCT, PSA, or 103-12 IE: H0/AGGRESSIVE GROWTH ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-008	P	248665

a Name of MTIA, CCT, PSA, or 103-12 IE: K0/GLOBAL LARGE CAP ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-011	P	24715

a Name of MTIA, CCT, PSA, or 103-12 IE: L0/CONCENTRATED GROWTH ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-012	P	285667

a Name of MTIA, CCT, PSA, or 103-12 IE: M0/SMALL CAP BLEND ACCOUNT I

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-013	P	14472

a Name of MTIA, CCT, PSA, or 103-12 IE: N0/MID-CAP GROWTH ACCOUNT I

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-014	P	13788

a Name of MTIA, CCT, PSA, or 103-12 IE: O0/EQUITY GROWTH & INCOME ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-015	P	3489

a Name of MTIA, CCT, PSA, or 103-12 IE: P0/SMALL CAP INDEX ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-016	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: Q0/SMALL-MID CAP INDEX ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-017	P	5286

a Name of MTIA, CCT, PSA, or 103-12 IE: R0/TOTAL STOCK INDEX ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-018	P	0

a Name of MTIA, CCT, PSA, or 103-12 IE: S0/LARGE CAP INDEX ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-019	P	2909

a Name of MTIA, CCT, PSA, or 103-12 IE: SA/BALANCED GROWTH ACCOUNT II

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-044	P	70306

a Name of MTIA, CCT, PSA, or 103-12 IE: W0/TOTAL BOND INDEX ACCOUNT

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

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)
39-6040276-023	P	19085

a Name of MTIA, CCT, PSA, or 103-12 IE: YA/TARGET RETIREMENT INCOME ACCT II			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-112	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2807
a Name of MTIA, CCT, PSA, or 103-12 IE: YB/2015 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-091	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	0
a Name of MTIA, CCT, PSA, or 103-12 IE: YC/2025 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-093	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	99214
a Name of MTIA, CCT, PSA, or 103-12 IE: YD/2035 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-095	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	338841
a Name of MTIA, CCT, PSA, or 103-12 IE: YE/2045 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-097	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	84523
a Name of MTIA, CCT, PSA, or 103-12 IE: YF/2055 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-099	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	70205
a Name of MTIA, CCT, PSA, or 103-12 IE: YG/2020 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-092	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	23640
a Name of MTIA, CCT, PSA, or 103-12 IE: YH/2030 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-094	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	11097
a Name of MTIA, CCT, PSA, or 103-12 IE: YI/2040 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-096	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	6861
a Name of MTIA, CCT, PSA, or 103-12 IE: YJ/2050 TARGET RETIREMENT ACCT III			
b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY			
c EIN-PN 39-6040276-098	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	2052

a Name of MTIA, CCT, PSA, or 103-12 IE: YK/2060 TARGET RETIREMENT ACCT III

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

c EIN-PN 39-6040276-100	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1762

a Name of MTIA, CCT, PSA, or 103-12 IE: YL/2065 TARGET RETIREMENT ACCT III

b Name of sponsor of entity listed in (a): SENTRY LIFE INSURANCE COMPANY

c EIN-PN 39-6040276-128	**d** Entity code P	**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3910

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

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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

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
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROWAN CORNIL, INC.

D Employer Identification Number (EIN)
75-2194496

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	88728	52271
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	1595857	1384608
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	301365	293992
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d Employer-related investments:			
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1985950	1730871
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1985950	1730871

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)	0	
(B) Participants	2a(1)(B)	226461	
(C) Others (including rollovers)	2a(1)(C)	4610	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		231071
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	3222	
(F) Other	2b(1)(F)	5125	
(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		8347
(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	0	
(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		0
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(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)	0	
(B) Other	2b(5)(B)	0	
(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)		0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		-400854
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		0
c Other income	2c		0
d Total income. Add all **income** amounts in column (b) and enter total	2d		-161436
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	86710	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines **2e(1)** through **(3)**	2e(4)		86710
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		4053
h Interest expense	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	2880	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		2880
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		93643
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		-255079
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		0

Part III Accountant's Opinion

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

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

(1) [X] 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) [X] 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: PAYNE & SMITH, LLC **(2)** EIN: 27-0316262

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:

		Yes	No	Amount
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.)	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?	4e	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?	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.)	4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	4k		X	
l Has the plan failed to provide any benefit when due under the plan?	4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	4m		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	4n			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) ☐ Yes ☐ No ☐ Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Retirement Plan Information

This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

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
ROWAN CORNIL, INC. PROFIT SHARING & 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
ROWAN CORNIL, INC.

D Employer Identification Number (EIN)
75-2194496

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**

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): 39-6040276

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**

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

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---

a Name of contributing employer

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(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_____

ROWAN CORNIL, INC.
PROFIT SHARING & 401(k) PLAN

Financial Statements and
Supplemental Schedule

December 31, 2022

(With Independent Auditor's Report Thereon)

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PAYNE & SMITH, LLC
Certified Public Accountants

Independent Auditor's Report

To the Sponsor
Rowan Cornil, Inc. Profit Sharing & 401(k) Plan
Dallas, Texas

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 Financial Statements

We have performed an audit of the financial statements of Rowan Cornil, Inc. Profit Sharing & 401(k) Plan ("the Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits (modified cash basis) as of December 31, 2022, and the related statement of changes in net assets available for benefits (modified cash basis) 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 the Plan's 2022 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 December 31, 2022, 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 on the 2022 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 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 the modified cash basis of accounting as described in Note 2.

- 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 on the 2022 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 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.

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements and supplemental schedule were prepared on a modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting as described in Note 2, and for determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible 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 Plan's ability to continue as a going concern for a reasonable period of time, which is generally one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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.
- 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 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 the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2022 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 the modified cash basis of accounting as described in Note 2.

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 the modified cash basis of accounting as described in Note 2.

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.

Other Matters

2022 Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of or for the year ended December 31, 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).

Prior Period Statement of Net Assets Available for Benefits

We performed a compilation engagement with respect to the 2021 statement of net assets available for benefits and our report on the financial statements thereon, dated October 6, 2023, stated that we did not audit or review the financial statements and accordingly express no opinion, or other form of assurance on the accompanying 2021 statement of net assets available for benefits.

Payne & Smith, LLC

October 6, 2023

ROWAN CORNIL, INC. PROFIT SHARING & 401(k) PLAN

STATEMENTS OF NET ASSETS
AVAILABLE FOR BENEFITS

At December 31, 2022 and 2021

	2022	COMPILED 2021
ASSETS		
Investments, at fair value:		
Fixed annuities in general account	$ 293,992	$ 301,365
Variable annuities in pooled separate accounts	1,384,608	1,595,856
Total investments, at fair value	1,678,600	1,897,221
Notes receivable from participants	52,270	88,728
Total assets	1,730,870	1,985,949
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 1,730,870	$ 1,985,949

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

STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS

For the Year Ended December 31, 2022

ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Interest income on notes receivable from participants	$	3,222
Contributions:		
Participants'		226,461
Rollover		4,610
Total contributions		231,071
Total additions		234,293
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Investment (income) loss:		
Net depreciation in fair value of investments		399,352
Interest on fixed income funds in the general and pooled separate accounts		(5,125)
Total investment loss		394,227
Benefits paid to participants		90,763
Administrative expenses		4,382
Total deductions		489,372
NET DECREASE IN NET ASSETS AVAILABLE FOR BENEFITS		(255,079)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year		1,985,949
End of year	$	1,730,870

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

1. Description of the Plan

The following description of the Rowan Cornil, Inc. Profit Sharing & 401(k) Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees of Rowan Cornil, Inc. and affiliated entities. Unionized employees and nonresident aliens with no United States of America sourced income are not eligible to participate. The Plan has no minimum age or service requirements. The Plan entry date for eligible employees is the first day of the month immediately following the date on which an employee satisfies the eligibility requirements. The Plan was established on September 1, 1993 and was most recently amended on July 29, 2022. The Plan is subject to the requirements of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, participants may elect to make pre-tax deferral contributions or Roth after-tax deferral contributions of up to 100% of eligible compensation subject to certain maximum limitations imposed by the Internal Revenue Code (the "Code"). Participants who are eligible to make elective deferrals under the Plan and who have attained age of 50 before the close of the plan year are also eligible to make catch-up contributions subject to the maximum limitation imposed by the Code. Participants may also rollover amounts representing distributions from other qualified defined benefit or defined contribution plans.

Each year, the Employer may make a discretionary nonelective contribution to participants who are employed on the last day of the Plan year and have completed at least 1,000 hours of service during the Plan year (Eligible participants). The nonelective contribution will be allocated to eligible participants based on a compensation-based formula described in the Plan document.

Investment Options

Participants direct the investment of their contributions and their portion of Employer nonelective contributions into various investment options offered by the Plan. Participants may change their investment options via internet or direct phone access to Sentry Life Insurance Company, the trustee of the Plan.

The Plan currently offers a fixed annuity guaranteed fund and various variable annuities in pooled separate accounts as investment options for participants. The Plan's Qualified Default Investment Alternative ("QDIA") for those participants, including beneficiaries, who have not provided investment directions is the Sentry separate accounts investing in Vanguard Target Retirement accounts. Contributions are automatically invested in QDIA fund until changed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of the Company's discretionary nonelective contributions plus plan earnings or losses with an allocation of plan expenses, as defined in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Forfeited Accounts

Terminated participants may forfeit the non-vested portion of their Employer nonelective contribution account balance. A forfeiture will occur in the Plan Year that a terminated participant receives a distribution of the entire vested Account, or after five consecutive one-year breaks in service for terminated participants who do not receive a distribution. However, forfeited account balances of a terminated participant will be restored according to the Plan when the participant is rehired by the Company before incurring five consecutive one-year breaks in service, and the participant repays the full amount of the distribution before the end of the five-year period that begins on the date of re-employment. Unrestored forfeitures may be used to pay plan expenses, or used to reduce any nonelective contribution, or may be allocated as an additional discretionary nonelective contribution. At December 31, 2022 and 2021, the Plan did not have any forfeited nonvested account balances.

Vesting

Participants are always 100% vested in their contributions plus earnings or losses thereon, attributable to elective deferral contributions, Roth after-tax deferral contributions, and catch-up contributions. Vesting in participant accounts attributable to nonelective contributions is based on years of continuous service according to the following schedule:

Years of Service	Vested %
Less than 2	0%
At least 2 years, but less than 3	20%
At least 3 years, but less than 4	40%
At least 4 years, but less than 5	60%
At least 5 years, but less than 6	80%
6 years or more	100%

However, participants still employed on or after attaining the Early or Normal Retirement Age, or those whose employment is terminated on account of their death or disabled are always 100% vested in their account balances attributable to nonelective contributions.

Notes Receivable from Participants

Generally, participants may borrow from their accounts a minimum of $1,000 as long as the borrowed amount does not to exceed the lesser of: (a) one-half of the participant's vested account balance or (b) $50,000 reduced by the participant's greatest outstanding loan balance during the 12 months preceding the date of the loan. Two loan may be outstanding at any time. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 7.25%, which are commensurate with local prevailing rates based on the rates available for similar loans from commercial lending institutions. Loans are required to be repaid within 5 years of the date of the loan except in the case of certain loans to acquire a principal residence, which may be repaid over a period not to exceed 30 years. Principal and interest are repaid ratably through payroll deductions.

Payments of Benefits

Participants may withdraw all or any part of their vested account resulting from rollover contributions at any time. Participants aged 59 1/2 or older may withdraw all or any part of their vested account resulting from their elective deferral contributions, Company discretionary matching contributions, or Company discretionary contributions.

Participants who are also active employees may make hardship withdrawals only from the vested portion of their pre-tax deferral accounts plus earning, Roth after-tax deferral accounts plus earnings, and accounts attributable to Employer nonelective contributions. Participants should refer to the Plan document for a more complete description of the Plan's hardship withdrawals provision.

Terminated participants with vested account balances in excess of $5,000 may elect to postpone distributions until they attain the age for required minimum distributions. Such accounts will continue participating in the Plan investments and provide benefits upon attainment of the retirement age or death. Terminated participants may also request a partial distribution, or a single lump-sum payment in cash or installments over a period not to exceed the participant's estimated life expectancy.

Terminated participants with vested account balances of $5,000 or less will receive a distribution of their entire account balances in the Plan. For such terminated participants who do not elect to receive or rollover their Plan account balances, the Plan will automatically roll over distributions that exceed $1,000 (including any rollover contribution) into an Individual Retirement Account ("IRA") as soon as administratively feasible.

For participants who die while still employed by the Employer, 100% of their Plan account balances will be used to provide death benefits to the designated beneficiaries or in accordance with the Plan rules for rules for accounts with no beneficiary designations. For Accounts with no designated beneficiaries, the spouses of participants who are married at the time of death will be the beneficiary of the entire death benefit.

2. Summary of Significant Accounting Policies

Date of Management's Review and Subsequent Events

The Plan has evaluated subsequent events and transactions for potential recognition or disclosure through October 6, 2023, which is the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan have been prepared using the modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

Use of Estimates

The preparation of financial statements in conformity with a basis of accounting other than accounting principles generally accepted in the United States of America ("GAAP") requires management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure 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 investments that are fully benefit-responsive contracts (FBRICS), which are required to be 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. As discussed in Note 4, certain investments of the Plan are fixed annuities in a group annuity contract. Because the group annuity contract is not fully benefit-responsive, the fixed annuities are presented in the statement of net assets available for benefits at contract value, which approximates fair value. Accordingly, the statement of changes in net assets available for benefits has been prepared on a fair value basis. See Note 5 for discussion of fair value measurements.

The net depreciation in fair value of investments consists of the realized gains and losses on investments bought and sold as well as held during the year and unrealized appreciation (depreciation) of investments. The net change in unrealized appreciation (depreciation) in the fair value of investments is determined by the change in fair value from the beginning of the year to the end of the year or change in fair value from date of the purchase to the end of the year.

Purchases and sales are recorded on a trade date basis. Interest income and dividends are recorded on the accrual basis.

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. As of December 31, 2022 and 2021, no allowance for credit losses has been recorded.

If a participant does not make loan repayments 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.

The fair value disclosures for financial instruments are not required for participant loans. Also, participant loans continue to be considered as investments for Form 5500 reporting purposes.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses of the Plan are paid by the Company if not paid by the Plan.

3. Information Prepared and Certified by Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by Sentry Life Insurance Company, the trustee of the Plan.

	2022	2021
Total investments, at fair value	$ 1,678,600	$ 1,897,221
Notes receivable from participants	$ 52,270	$ 88,728
Interest on fixed income funds in the general, and pooled separate accounts	$ 5,125	
Interest income on notes receivable from participants	$ 3,222	

4. Investment Contract with Sentry Life Insurance Company

The Plan has a benefit-responsive group annuity contract comprised of fixed annuities in a general account and variable annuities in separate accounts with Sentry Life Insurance Company ("Sentry"). The group annuity contract may provide payments or value which are not guaranteed as to fixed dollar amounts although the value may increase or decrease according to the investment experience of a variable account or separate account.

Variable Annuities in Pooled Separate Accounts

Contributions into the variable annuities are maintained in Pooled Separate Accounts. Each Eligible Fund is a separate mutual fund having its own investment objectives and policies and is registered with the Securities and Exchange Commission ("SEC") as an open-end management investment company or portfolio thereof. The SEC does not supervise the management or the investment practices and policies of any of the Eligible Funds. Many of the Eligible Funds are available only to insurance companies for their variable contracts (Insurance-Dedicated Funds) and are used for mixed and shared funding. Mixed funding occurs when shares of an Eligible Fund under the group contract are bought for variable life insurance policies issued by Sentry or other insurance companies. Shared funding occurs when shares of an Eligible Fund under the group annuity contract are also bought by other insurance companies for their variable annuity contract.

Some of the Insurance-Dedicated Eligible Funds have been established by investment advisers which manage publicly traded mutual funds having similar names and investment objectives. While some of the Eligible Funds may be similar to, and may in fact be modeled after publicly traded mutual funds, those Eligible Funds are not otherwise directly related to any publicly traded mutual fund. Consequently, the investment performance of publicly traded mutual funds and any corresponding Eligible Funds may differ substantially. At December 31, 2022 and 2021, the fair value of the variable annuities in separate accounts was $1,384,608 and $1,595,856, respectively.

Fixed Annuities in General Account

Contributions into the guaranteed fund comprised of fixed annuities are maintained in a general account (guaranteed investment contract). The methodology for calculating the interest crediting rate is based on the earnings of the underlying assets in the entire medium-long term new portfolio compared to the minimum interest crediting rate, as stated in the contract, and prevailing market conditions.

Contract value is the relevant measurement attribute for that portion of net assets available for benefits attributable to the guaranteed investment contract ("GIC") for fully benefit-responsive GICs. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Because the fixed annuities in the GIC are not fully benefit-responsive and are included in the financial statements at contract value, which approximates fair value reported to the Plan by Sentry, the fixed annuities in the GIC are deemed to be presented on the statement of net assets available for benefits at approximate fair value. Participants may ordinarily direct the withdrawal or transfer all or a portion of their investment at contract value, which approximates fair value as reported to the Plan by Sentry.

The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than zero percent. Such interest rates are reviewed annually for resetting.

Certain events may limit the Plan's ability to transact at contract value with Sentry. Sentry reserves the right to unilaterally discontinue the contract upon 60 days written notice to the Plan if any of the following in the events occur: Such events include the following: (a) the Plan fails to pay any expense charges described in the contract (b) the Plan fails to provide Sentry with any information or contributions required under the contract (c) Sentry is notified that the Plan is no longer a qualified Plan pursuant to Section 401(a) of the Internal Revenue Code (d) the Plan fails to make contributions, over and above any expense charges described in the contract, totaling at least $75,000 over a period of three consecutive years (e) there is a complete or a partial termination of the Plan. The Plan may discontinue the contract at any time by providing written notice to Sentry with the information Sentry requires to process the discontinuance. The Plan administrator believes that no event that would trigger a discontinuation of the contract had occurred or is probable of occurring as of the date of this report.

5. Fair Value Measurements

ASC Topic 820, *Fair Value Measurements and Disclosures* establishes a fair value hierarchy for valuation inputs that gives the highest priority to quoted prices in active markets for identical assets or liabilities and the lowest priority to unobservable inputs. The three broad levels of the fair value hierarchy are as follows:

- 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 (Level 1).
- Level 3 inputs consist of unobservable inputs and have the lowest priority.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures 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 are not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs are not available. At December 31, 2022 and 2021, there were no plan assets requiring the use of Level 1 inputs.

Level 2 Fair Value Measurements

Variable annuities - The fair value of the variable annuities in separate accounts is calculated daily based on the quoted prices obtained for the underlying mutual fund which is then adjusted to apply the expense factors disclosed in the group annuity contract (formula-calculated unit value). The formula-calculated unit value is then compared, the following morning, to an accounting-driven unit value determined in a manner similar to a mutual fund Net Asset Value (NAV) calculation. Any discrepancies between the two unit values are reconciled to ensure the record keeping system reflects the accurate value for the day.

Level 3 Fair Value Measurements

Fixed annuities - The fixed annuities in the general account with Sentry are not actively traded and significant other observable inputs are not available. Thus, the fair value of the fixed annuities in the general account (guaranteed fund account) is determined by; all contributions made by or on behalf of the participant that are allocated to the guaranteed fund account option; plus, all interest credited to the guaranteed fund account on an annual basis pursuant to the guaranteed interest rate applicable to the guaranteed fund account; less, any amounts transferred or distributed from the guaranteed fund account; less, any applicable charges described in the group annuity contract.

The following table set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2022 and 2021:

	Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Fair Value
December 31, 2022:			
Fixed annuities in general account	$ -	$ 293,992	$ 293,992
Variable annuities in pooled separate accounts	1,384,608	-	1,384,608
Total investments, at fair value	1,384,608	293,992	1,678,600
December 31, 2021:			
Fixed annuities in general account	$ -	$ 301,365	$ 301,365
Variable annuities in pooled separate accounts	1,595,856	-	1,595,856
Total investments, at fair value	1,595,856	301,365	1,897,221

Gains and losses included in changes in net assets available for benefits for the years ended December 31, 2022 are reported in net depreciation in fair value of investments.

6. Related Party and Party-In-Interest Transactions

Plan investments are fixed and variable annuities managed by the trustee of the Plan, Sentry Life Insurance Company ("Sentry"). Plan transactions and recordkeeping are also administered by Sentry as the Plan's third-party contract administrator. Therefore, Sentry is a party-in-interest under ERISA and transactions with Sentry qualify as party-in-interest transactions. Fees paid by the Plan for investment advisory services are included in investment income (loss) on the accompanying statement of changes in net assets available for benefits, as they are paid through investment revenue sharing arrangements rather than direct payment arrangements. Fees paid by the Plan to Sentry for contract administration and recordkeeping services are included in administrative expenses on the accompanying statement of changes in net assets available for benefits. During 2022, the Plan paid $4,382 in administrative expenses to Sentry.

Payne & Smith, LLC is the Plan's independent public accountant ("IPA") as defined by the Plan. Therefore, the IPA is a party-in-interest under ERISA and transactions with the IPA qualify as party-in-interest transactions. Fees incurred by the Plan for audit and nonattest services provided by the IPA are paid fully by the Company if not paid by the Plan. No fees are due the IPA as of the date of this report.

7. Tax Status

The Plan has adopted a Non-Standardized Pre-Approved Profit Sharing/Money Purchase plan with qualified Cash or Deferred Arrangement (Profit Sharing Plan with CODA) sponsored by Sentry Life Insurance Company ("Sentry"). The Sentry Profit Sharing with CODA received its latest determination letter, dated June 30, 2020, from the Internal Revenue Service (IRS) as to the plan's qualified status. The IRS opinion letter has been relied upon by the Plan.. Although the Plan has been amended since receiving the IRS opinion letter, the plan administrator believes that the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management 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 audit by tax authorities; however, there are currently no audit for any tax period in progress.

8. Plan Termination

Although it has not expressed any intent to do so, the Company reserves the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their employer contribution balances, if any.

9. Risks and Uncertainties

The Plan may invest 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 values of the 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.

The following table presents concentrations of investments that represented 5% or more of the Plan's net assets at December 31, 2022 and 2021:

	2022	2021
Fixed annuities in general account-		
Sentry Life Insurance Company Guaranteed Fund	$ 293,992	$ 301,365
Variable annuities in pooled separate accounts:		
H0/Aggressive Growth Account	248,665	360,195
L0/Concentrated Growth Account	285,668	414,686
YC/2025 Target Retirement Acct III	99,214	105,183
YD/2035 Target Retirement Acct III	338,842	342,160

***Investment concentration did not represent 5% or more of the Plan assets as of the year end presented.

SUPPLEMENTAL SCHEDULE

ROWAN CORNIL, INC. PROFIT SHARING & 401(k) PLAN

FORM 5500 - SCHEDULE H, PART IV, LINE 4 (i) – SCHEDULE OF ASSETS

(HELD AT END OF YEAR)

December 31, 2022

EIN: 75-2194496
PN: 001

	(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment	Units(Shares)	(d) Cost	(e) Current Value
*		**Sentry Life Insurance Company**				
		Guaranteed Fund	Fixed annuity	277,055.115	**	$ 293,992
*		**Sentry Life Insurance Company**				
		Pooled Separate Accounts				
		AA/Small Cap Growth Account III	Variable annuity	862.504	**	33,032
		AD/Diversified Growth Account	Variable annuity	128.068	**	3,127
		D0/Diversified Income Account	Variable annuity	169.069	**	2,761
		G0/Balanced Income Account	Variable annuity	556.761	**	12,393
		H0/Aggressive Growth Account	Variable annuity	7,705.170	**	248,665
		K0/Global Large Cap Account	Variable annuity	1,361.960	**	24,715
		L0/Concentrated Growth Account	Variable annuity	7,514.374	**	285,668
		M0/Small Cap Blend Account I	Variable annuity	556.044	**	14,472
		N0/Mid-Cap Growth Account I	Variable annuity	378.518	**	13,788
		O0/Equity Growth & Income Account	Variable annuity	148.407	**	3,489
		Q0/Small-Mid Cap Index Account	Variable annuity	203.772	**	5,286
		S0/Large Cap Index Account	Variable annuity	94.351	**	2,909
		SA/Balanced Growth Account II	Variable annuity	3,445.073	**	70,306
		W0/Total Bond Index Account	Variable annuity	1,387.208	**	19,085
		YA/Target Retirement Income Acct III	Variable annuity	161.236	**	2,807
		YC/2025 Target Retirement Acct III	Variable annuity	4,426.427	**	99,214
		YD/2035 Target Retirement Acct III	Variable annuity	13,655.623	**	338,842
		YE/2045 Target Retirement Acct III	Variable annuity	3,146.190	**	84,523
		YF/2055 Target Retirement Acct III	Variable annuity	3,002.879	**	70,205
		YG/2020 Target Retirement Acct III	Variable annuity	2,056.903	**	23,640
		YH/2030 Target Retirement Acct III	Variable annuity	931.030	**	11,097
		YI/2040 Target Retirement Acct III	Variable annuity	553.407	**	6,861
		YJ/2050 Target Retirement Acct III	Variable annuity	161.523	**	2,051
		YK/2060 Target Retirement Acct III	Variable annuity	137.338	**	1,762
		Yl/2065 Target Retirement Acct III	Variable annuity	457.577	**	3,910
		Total variable annuities				1,384,608
		Notes receivable from participants:				
*		Participant loans	Interest rates range from 4.25% to 7.25%; various maturity dates through September 2027			52,270
		TOTAL ASSETS AT DECEMBER 31, 2022				$ 1,730,870

* Denotes party-in-interest

** Cost not required for participant-directed investments

See accompanying independent auditor's report and notes thereto.

800-4SENTRY (800-473-6879) PHONE
715 346-8966 FAX

May 2023

JOSEPH NOLAN
ROWAN CORNIL INC
1617 TERRE COLONY CT
DALLAS TX 75212

Rowan Cornil, Inc. Profit Sharing and 401(k) Plan (01-07998-01)
Disclosure of Eligible Indirect Compensation

Source of Eligible Indirect Compensation	Dollar Amount or Formula

Sales Producer*:

Finder Fee	--
Commission	--
Trips or Other Rewards	--

* Not reportable because total eligible indirect compensation <$5,000

Regional Marketing Manager:

New Case Commission Case Count Basis	--
New Case Commission Asset Flow	--
Trips or Other Rewards	--

Sentry Insurance:

Wrap Fees on Separate Accounts	0.65% of total assets invested in Separate Accounts
Sub-transfer Agent Fees	T. Rowe Price Shares currently 0.15% annualized (except for Large Cap Value Account which has no fee) Janus Global Allocation Growth Fund currently 0.15% annualized

This information is being provided as part of the disclosure requirements for Schedule C of the Form 5500. The amounts displayed above may be an estimate of the actual compensation associated with your plan. Compensation reported on this disclosure is for the administrative support of your plan.

John Hyland
President – Sentry Life Insurance Company

ROWAN CORNIL, INC.
PROFIT SHARING & 401(k) PLAN

Financial Statements and
Supplemental Schedule

December 31, 2022

(With Independent Auditor's Report Thereon)

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PAYNE & SMITH, LLC
Certified Public Accountants

Independent Auditor's Report

To the Sponsor
Rowan Cornil, Inc. Profit Sharing & 401(k) Plan
Dallas, Texas

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 Financial Statements

We have performed an audit of the financial statements of Rowan Cornil, Inc. Profit Sharing & 401(k) Plan ("the Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits (modified cash basis) as of December 31, 2022, and the related statement of changes in net assets available for benefits (modified cash basis) 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 the Plan's 2022 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 December 31, 2022, 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 on the 2022 Financial Statements

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 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 the modified cash basis of accounting as described in Note 2.

- 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 on the 2022 Financial Statements

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. 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 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.

Basis of Accounting

We draw attention to Note 2 to the financial statements, which describes the basis of accounting. The financial statements and supplemental schedule were prepared on a modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting as described in Note 2, and for determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible 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 Plan's ability to continue as a going concern for a reasonable period of time, which is generally one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2022 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an 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.
- 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 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 the Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2022 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 the modified cash basis of accounting as described in Note 2.

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 the modified cash basis of accounting as described in Note 2.

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.

Other Matters

2022 Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of or for the year ended December 31, 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).

Prior Period Statement of Net Assets Available for Benefits

We performed a compilation engagement with respect to the 2021 statement of net assets available for benefits and our report on the financial statements thereon, dated October 6, 2023, stated that we did not audit or review the financial statements and accordingly express no opinion, or other form of assurance on the accompanying 2021 statement of net assets available for benefits.

Payne & Smith, LLC

October 6, 2023

ROWAN CORNIL, INC. PROFIT SHARING & 401(k) PLAN

STATEMENTS OF NET ASSETS
AVAILABLE FOR BENEFITS

At December 31, 2022 and 2021

	2022	COMPILED 2021
ASSETS		
Investments, at fair value:		
Fixed annuities in general account	$ 293,992	$ 301,365
Variable annuities in pooled separate accounts	1,384,608	1,595,856
Total investments, at fair value	1,678,600	1,897,221
Notes receivable from participants	52,270	88,728
Total assets	1,730,870	1,985,949
LIABILITIES	-	-
NET ASSETS AVAILABLE FOR BENEFITS	$ 1,730,870	$ 1,985,949

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

STATEMENT OF CHANGES IN NET ASSETS
AVAILABLE FOR BENEFITS

For the Year Ended December 31, 2022

ADDITIONS TO NET ASSETS ATTRIBUTED TO:		
Interest income on notes receivable from participants	$	3,222
Contributions:		
Participants'		226,461
Rollover		4,610
Total contributions		231,071
Total additions		234,293
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:		
Investment (income) loss:		
Net depreciation in fair value of investments		399,352
Interest on fixed income funds in the general and pooled separate accounts		(5,125)
Total investment loss		394,227
Benefits paid to participants		90,763
Administrative expenses		4,382
Total deductions		489,372
NET DECREASE IN NET ASSETS AVAILABLE FOR BENEFITS		(255,079)
NET ASSETS AVAILABLE FOR BENEFITS:		
Beginning of year		1,985,949
End of year	$	1,730,870

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

1. Description of the Plan

The following description of the Rowan Cornil, Inc. Profit Sharing & 401(k) Plan provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all eligible employees of Rowan Cornil, Inc. and affiliated entities. Unionized employees and nonresident aliens with no United States of America sourced income are not eligible to participate. The Plan has no minimum age or service requirements. The Plan entry date for eligible employees is the first day of the month immediately following the date on which an employee satisfies the eligibility requirements. The Plan was established on September 1, 1993 and was most recently amended on July 29, 2022. The Plan is subject to the requirements of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, participants may elect to make pre-tax deferral contributions or Roth after-tax deferral contributions of up to 100% of eligible compensation subject to certain maximum limitations imposed by the Internal Revenue Code (the "Code"). Participants who are eligible to make elective deferrals under the Plan and who have attained age of 50 before the close of the plan year are also eligible to make catch-up contributions subject to the maximum limitation imposed by the Code. Participants may also rollover amounts representing distributions from other qualified defined benefit or defined contribution plans.

Each year, the Employer may make a discretionary nonelective contribution to participants who are employed on the last day of the Plan year and have completed at least 1,000 hours of service during the Plan year (Eligible participants). The nonelective contribution will be allocated to eligible participants based on a compensation-based formula described in the Plan document.

Investment Options

Participants direct the investment of their contributions and their portion of Employer nonelective contributions into various investment options offered by the Plan. Participants may change their investment options via internet or direct phone access to Sentry Life Insurance Company, the trustee of the Plan.

The Plan currently offers a fixed annuity guaranteed fund and various variable annuities in pooled separate accounts as investment options for participants. The Plan's Qualified Default Investment Alternative ("QDIA") for those participants, including beneficiaries, who have not provided investment directions is the Sentry separate accounts investing in Vanguard Target Retirement accounts. Contributions are automatically invested in QDIA fund until changed by the participant.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of the Company's discretionary nonelective contributions plus plan earnings or losses with an allocation of plan expenses, as defined in the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Forfeited Accounts

Terminated participants may forfeit the non-vested portion of their Employer nonelective contribution account balance. A forfeiture will occur in the Plan Year that a terminated participant receives a distribution of the entire vested Account, or after five consecutive one-year breaks in service for terminated participants who do not receive a distribution. However, forfeited account balances of a terminated participant will be restored according to the Plan when the participant is rehired by the Company before incurring five consecutive one-year breaks in service, and the participant repays the full amount of the distribution before the end of the five-year period that begins on the date of re-employment. Unrestored forfeitures may be used to pay plan expenses, or used to reduce any nonelective contribution, or may be allocated as an additional discretionary nonelective contribution. At December 31, 2022 and 2021, the Plan did not have any forfeited nonvested account balances.

Vesting

Participants are always 100% vested in their contributions plus earnings or losses thereon, attributable to elective deferral contributions, Roth after-tax deferral contributions, and catch-up contributions. Vesting in participant accounts attributable to nonelective contributions is based on years of continuous service according to the following schedule:

Years of Service	Vested %
Less than 2	0%
At least 2 years, but less than 3	20%
At least 3 years, but less than 4	40%
At least 4 years, but less than 5	60%
At least 5 years, but less than 6	80%
6 years or more	100%

However, participants still employed on or after attaining the Early or Normal Retirement Age, or those whose employment is terminated on account of their death or disabled are always 100% vested in their account balances attributable to nonelective contributions.

Notes Receivable from Participants

Generally, participants may borrow from their accounts a minimum of $1,000 as long as the borrowed amount does not to exceed the lesser of: (a) one-half of the participant's vested account balance or (b) $50,000 reduced by the participant's greatest outstanding loan balance during the 12 months preceding the date of the loan. Two loan may be outstanding at any time. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 7.25%, which are commensurate with local prevailing rates based on the rates available for similar loans from commercial lending institutions. Loans are required to be repaid within 5 years of the date of the loan except in the case of certain loans to acquire a principal residence, which may be repaid over a period not to exceed 30 years. Principal and interest are repaid ratably through payroll deductions.

Payments of Benefits

Participants may withdraw all or any part of their vested account resulting from rollover contributions at any time. Participants aged 59 1/2 or older may withdraw all or any part of their vested account resulting from their elective deferral contributions, Company discretionary matching contributions, or Company discretionary contributions.

Participants who are also active employees may make hardship withdrawals only from the vested portion of their pre-tax deferral accounts plus earning, Roth after-tax deferral accounts plus earnings, and accounts attributable to Employer nonelective contributions. Participants should refer to the Plan document for a more complete description of the Plan's hardship withdrawals provision.

Terminated participants with vested account balances in excess of $5,000 may elect to postpone distributions until they attain the age for required minimum distributions. Such accounts will continue participating in the Plan investments and provide benefits upon attainment of the retirement age or death. Terminated participants may also request a partial distribution, or a single lump-sum payment in cash or installments over a period not to exceed the participant's estimated life expectancy.

Terminated participants with vested account balances of $5,000 or less will receive a distribution of their entire account balances in the Plan. For such terminated participants who do not elect to receive or rollover their Plan account balances, the Plan will automatically roll over distributions that exceed $1,000 (including any rollover contribution) into an Individual Retirement Account ("IRA") as soon as administratively feasible.

For participants who die while still employed by the Employer, 100% of their Plan account balances will be used to provide death benefits to the designated beneficiaries or in accordance with the Plan rules for rules for accounts with no beneficiary designations. For Accounts with no designated beneficiaries, the spouses of participants who are married at the time of death will be the beneficiary of the entire death benefit.

2. Summary of Significant Accounting Policies

Date of Management's Review and Subsequent Events

The Plan has evaluated subsequent events and transactions for potential recognition or disclosure through October 6, 2023, which is the date the financial statements were available to be issued.

Basis of Accounting

The financial statements of the Plan have been prepared using the modified cash basis of accounting, which is a comprehensive basis of accounting other than generally accepted accounting principles.

Use of Estimates

The preparation of financial statements in conformity with a basis of accounting other than accounting principles generally accepted in the United States of America ("GAAP") requires management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure 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 investments that are fully benefit-responsive contracts (FBRICS), which are required to be 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. As discussed in Note 4, certain investments of the Plan are fixed annuities in a group annuity contract. Because the group annuity contract is not fully benefit-responsive, the fixed annuities are presented in the statement of net assets available for benefits at contract value, which approximates fair value. Accordingly, the statement of changes in net assets available for benefits has been prepared on a fair value basis. See Note 5 for discussion of fair value measurements.

The net depreciation in fair value of investments consists of the realized gains and losses on investments bought and sold as well as held during the year and unrealized appreciation (depreciation) of investments. The net change in unrealized appreciation (depreciation) in the fair value of investments is determined by the change in fair value from the beginning of the year to the end of the year or change in fair value from date of the purchase to the end of the year.

Purchases and sales are recorded on a trade date basis. Interest income and dividends are recorded on the accrual basis.

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. As of December 31, 2022 and 2021, no allowance for credit losses has been recorded.

If a participant does not make loan repayments 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.

The fair value disclosures for financial instruments are not required for participant loans. Also, participant loans continue to be considered as investments for Form 5500 reporting purposes.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Administrative expenses of the Plan are paid by the Company if not paid by the Plan.

3. Information Prepared and Certified by Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by Sentry Life Insurance Company, the trustee of the Plan.

	2022	2021
Total investments, at fair value	$ 1,678,600	$ 1,897,221
Notes receivable from participants	$ 52,270	$ 88,728
Interest on fixed income funds in the general, and pooled separate accounts	$ 5,125	
Interest income on notes receivable from participants	$ 3,222	

4. Investment Contract with Sentry Life Insurance Company

The Plan has a benefit-responsive group annuity contract comprised of fixed annuities in a general account and variable annuities in separate accounts with Sentry Life Insurance Company ("Sentry"). The group annuity contract may provide payments or value which are not guaranteed as to fixed dollar amounts although the value may increase or decrease according to the investment experience of a variable account or separate account.

Variable Annuities in Pooled Separate Accounts

Contributions into the variable annuities are maintained in Pooled Separate Accounts. Each Eligible Fund is a separate mutual fund having its own investment objectives and policies and is registered with the Securities and Exchange Commission ("SEC") as an open-end management investment company or portfolio thereof. The SEC does not supervise the management or the investment practices and policies of any of the Eligible Funds. Many of the Eligible Funds are available only to insurance companies for their variable contracts (Insurance-Dedicated Funds) and are used for mixed and shared funding. Mixed funding occurs when shares of an Eligible Fund under the group contract are bought for variable life insurance policies issued by Sentry or other insurance companies. Shared funding occurs when shares of an Eligible Fund under the group annuity contract are also bought by other insurance companies for their variable annuity contract.

Some of the Insurance-Dedicated Eligible Funds have been established by investment advisers which manage publicly traded mutual funds having similar names and investment objectives. While some of the Eligible Funds may be similar to, and may in fact be modeled after publicly traded mutual funds, those Eligible Funds are not otherwise directly related to any publicly traded mutual fund. Consequently, the investment performance of publicly traded mutual funds and any corresponding Eligible Funds may differ substantially. At December 31, 2022 and 2021, the fair value of the variable annuities in separate accounts was $1,384,608 and $1,595,856, respectively.

Fixed Annuities in General Account

Contributions into the guaranteed fund comprised of fixed annuities are maintained in a general account (guaranteed investment contract). The methodology for calculating the interest crediting rate is based on the earnings of the underlying assets in the entire medium-long term new portfolio compared to the minimum interest crediting rate, as stated in the contract, and prevailing market conditions.

Contract value is the relevant measurement attribute for that portion of net assets available for benefits attributable to the guaranteed investment contract ("GIC") for fully benefit-responsive GICs. Contract value represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Because the fixed annuities in the GIC are not fully benefit-responsive and are included in the financial statements at contract value, which approximates fair value reported to the Plan by Sentry, the fixed annuities in the GIC are deemed to be presented on the statement of net assets available for benefits at approximate fair value. Participants may ordinarily direct the withdrawal or transfer all or a portion of their investment at contract value, which approximates fair value as reported to the Plan by Sentry.

The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than zero percent. Such interest rates are reviewed annually for resetting.

Certain events may limit the Plan's ability to transact at contract value with Sentry. Sentry reserves the right to unilaterally discontinue the contract upon 60 days written notice to the Plan if any of the following in the events occur: Such events include the following: (a) the Plan fails to pay any expense charges described in the contract (b) the Plan fails to provide Sentry with any information or contributions required under the contract (c) Sentry is notified that the Plan is no longer a qualified Plan pursuant to Section 401(a) of the Internal Revenue Code (d) the Plan fails to make contributions, over and above any expense charges described in the contract, totaling at least $75,000 over a period of three consecutive years (e) there is a complete or a partial termination of the Plan. The Plan may discontinue the contract at any time by providing written notice to Sentry with the information Sentry requires to process the discontinuance. The Plan administrator believes that no event that would trigger a discontinuation of the contract had occurred or is probable of occurring as of the date of this report.

5. Fair Value Measurements

ASC Topic 820, *Fair Value Measurements and Disclosures* establishes a fair value hierarchy for valuation inputs that gives the highest priority to quoted prices in active markets for identical assets or liabilities and the lowest priority to unobservable inputs. The three broad levels of the fair value hierarchy are as follows:

- 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 (Level 1).
- Level 3 inputs consist of unobservable inputs and have the lowest priority.

The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures 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 are not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs are not available. At December 31, 2022 and 2021, there were no plan assets requiring the use of Level 1 inputs.

Level 2 Fair Value Measurements

Variable annuities - The fair value of the variable annuities in separate accounts is calculated daily based on the quoted prices obtained for the underlying mutual fund which is then adjusted to apply the expense factors disclosed in the group annuity contract (formula-calculated unit value). The formula-calculated unit value is then compared, the following morning, to an accounting-driven unit value determined in a manner similar to a mutual fund Net Asset Value (NAV) calculation. Any discrepancies between the two unit values are reconciled to ensure the record keeping system reflects the accurate value for the day.

Level 3 Fair Value Measurements

Fixed annuities - The fixed annuities in the general account with Sentry are not actively traded and significant other observable inputs are not available. Thus, the fair value of the fixed annuities in the general account (guaranteed fund account) is determined by; all contributions made by or on behalf of the participant that are allocated to the guaranteed fund account option; plus, all interest credited to the guaranteed fund account on an annual basis pursuant to the guaranteed interest rate applicable to the guaranteed fund account; less, any amounts transferred or distributed from the guaranteed fund account; less, any applicable charges described in the group annuity contract.

The following table set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2022 and 2021:

	Other Observable Inputs (Level 2)	Unobservable Inputs (Level 3)	Fair Value
December 31, 2022:			
Fixed annuities in general account	$ -	$ 293,992	$ 293,992
Variable annuities in pooled separate accounts	1,384,608	-	1,384,608
Total investments, at fair value	1,384,608	293,992	1,678,600
December 31, 2021:			
Fixed annuities in general account	$ -	$ 301,365	$ 301,365
Variable annuities in pooled separate accounts	1,595,856	-	1,595,856
Total investments, at fair value	1,595,856	301,365	1,897,221

Gains and losses included in changes in net assets available for benefits for the years ended December 31, 2022 are reported in net depreciation in fair value of investments.

6. Related Party and Party-In-Interest Transactions

Plan investments are fixed and variable annuities managed by the trustee of the Plan, Sentry Life Insurance Company ("Sentry"). Plan transactions and recordkeeping are also administered by Sentry as the Plan's third-party contract administrator. Therefore, Sentry is a party-in-interest under ERISA and transactions with Sentry qualify as party-in-interest transactions. Fees paid by the Plan for investment advisory services are included in investment income (loss) on the accompanying statement of changes in net assets available for benefits, as they are paid through investment revenue sharing arrangements rather than direct payment arrangements. Fees paid by the Plan to Sentry for contract administration and recordkeeping services are included in administrative expenses on the accompanying statement of changes in net assets available for benefits. During 2022, the Plan paid $4,382 in administrative expenses to Sentry.

Payne & Smith, LLC is the Plan's independent public accountant ("IPA") as defined by the Plan. Therefore, the IPA is a party-in-interest under ERISA and transactions with the IPA qualify as party-in-interest transactions. Fees incurred by the Plan for audit and nonattest services provided by the IPA are paid fully by the Company if not paid by the Plan. No fees are due the IPA as of the date of this report.

7. Tax Status

The Plan has adopted a Non-Standardized Pre-Approved Profit Sharing/Money Purchase plan with qualified Cash or Deferred Arrangement (Profit Sharing Plan with CODA) sponsored by Sentry Life Insurance Company ("Sentry"). The Sentry Profit Sharing with CODA received its latest determination letter, dated June 30, 2020, from the Internal Revenue Service (IRS) as to the plan's qualified status. The IRS opinion letter has been relied upon by the Plan.. Although the Plan has been amended since receiving the IRS opinion letter, the plan administrator believes that the Plan is designed and is being operated in compliance with the applicable provisions of the Internal Revenue Code.

Accounting principles generally accepted in the United States of America require Plan management 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 audit by tax authorities; however, there are currently no audit for any tax period in progress.

8. Plan Termination

Although it has not expressed any intent to do so, the Company reserves the right to discontinue contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their employer contribution balances, if any.

9. Risks and Uncertainties

The Plan may invest 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 values of the 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.

The following table presents concentrations of investments that represented 5% or more of the Plan's net assets at December 31, 2022 and 2021:

	2022	2021
Fixed annuities in general account-		
Sentry Life Insurance Company Guaranteed Fund	$ 293,992	$ 301,365
Variable annuities in pooled separate accounts:		
H0/Aggressive Growth Account	248,665	360,195
L0/Concentrated Growth Account	285,668	414,686
YC/2025 Target Retirement Acct III	99,214	105,183
YD/2035 Target Retirement Acct III	338,842	342,160

***Investment concentration did not represent 5% or more of the Plan assets as of the year end presented.

SUPPLEMENTAL SCHEDULE

ROWAN CORNIL, INC. PROFIT SHARING & 401(k) PLAN

FORM 5500 - SCHEDULE H, PART IV, LINE 4 (i) – SCHEDULE OF ASSETS

(HELD AT END OF YEAR)

December 31, 2022

EIN: 75-2194496
PN: 001

	(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment	Units(Shares)	(d) Cost	(e) Current Value
*		**Sentry Life Insurance Company**				
		Guaranteed Fund	Fixed annuity	277,055.115	**	$ 293,992
*		**Sentry Life Insurance Company**				
		Pooled Separate Accounts				
		AA/Small Cap Growth Account III	Variable annuity	862.504	**	33,032
		AD/Diversified Growth Account	Variable annuity	128.068	**	3,127
		D0/Diversified Income Account	Variable annuity	169.069	**	2,761
		G0/Balanced Income Account	Variable annuity	556.761	**	12,393
		H0/Aggressive Growth Account	Variable annuity	7,705.170	**	248,665
		K0/Global Large Cap Account	Variable annuity	1,361.960	**	24,715
		L0/Concentrated Growth Account	Variable annuity	7,514.374	**	285,668
		M0/Small Cap Blend Account I	Variable annuity	556.044	**	14,472
		N0/Mid-Cap Growth Account I	Variable annuity	378.518	**	13,788
		O0/Equity Growth & Income Account	Variable annuity	148.407	**	3,489
		Q0/Small-Mid Cap Index Account	Variable annuity	203.772	**	5,286
		S0/Large Cap Index Account	Variable annuity	94.351	**	2,909
		SA/Balanced Growth Account II	Variable annuity	3,445.073	**	70,306
		W0/Total Bond Index Account	Variable annuity	1,387.208	**	19,085
		YA/Target Retirement Income Acct III	Variable annuity	161.236	**	2,807
		YC/2025 Target Retirement Acct III	Variable annuity	4,426.427	**	99,214
		YD/2035 Target Retirement Acct III	Variable annuity	13,655.623	**	338,842
		YE/2045 Target Retirement Acct III	Variable annuity	3,146.190	**	84,523
		YF/2055 Target Retirement Acct III	Variable annuity	3,002.879	**	70,205
		YG/2020 Target Retirement Acct III	Variable annuity	2,056.903	**	23,640
		YH/2030 Target Retirement Acct III	Variable annuity	931.030	**	11,097
		YI/2040 Target Retirement Acct III	Variable annuity	553.407	**	6,861
		YJ/2050 Target Retirement Acct III	Variable annuity	161.523	**	2,051
		YK/2060 Target Retirement Acct III	Variable annuity	137.338	**	1,762
		Yl/2065 Target Retirement Acct III	Variable annuity	457.577	**	3,910
		Total variable annuities				1,384,608
		Notes receivable from participants:				
*		Participant loans	Interest rates range from 4.25% to 7.25%; various maturity dates through September 2027			52,270
		TOTAL ASSETS AT DECEMBER 31, 2022				$ 1,730,870

* Denotes party-in-interest

** Cost not required for participant-directed investments

See accompanying independent auditor's report and notes thereto.

ROWAN CORNIL, INC. PROFIT SHARING & 401(k) PLAN

FORM 5500 - SCHEDULE H, PART IV, LINE 4 (i) – SCHEDULE OF ASSETS

(HELD AT END OF YEAR)

December 31, 2022

EIN: 75-2194496
PN: 001

	(a)	(b) Identity of issuer, borrower, lessor, or similar party	(c) Description of investment	Units(Shares)	(d) Cost	(e) Current Value
*		**Sentry Life Insurance Company**				
		Guaranteed Fund	Fixed annuity	277,055.115	**	$ 293,992
*		**Sentry Life Insurance Company**				
		Pooled Separate Accounts				
		AA/Small Cap Growth Account III	Variable annuity	862.504	**	33,032
		AD/Diversified Growth Account	Variable annuity	128.068	**	3,127
		D0/Diversified Income Account	Variable annuity	169.069	**	2,761
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		H0/Aggressive Growth Account	Variable annuity	7,705.170	**	248,665
		K0/Global Large Cap Account	Variable annuity	1,361.960	**	24,715
		L0/Concentrated Growth Account	Variable annuity	7,514.374	**	285,668
		M0/Small Cap Blend Account I	Variable annuity	556.044	**	14,472
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		O0/Equity Growth & Income Account	Variable annuity	148.407	**	3,489
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		S0/Large Cap Index Account	Variable annuity	94.351	**	2,909
		SA/Balanced Growth Account II	Variable annuity	3,445.073	**	70,306
		W0/Total Bond Index Account	Variable annuity	1,387.208	**	19,085
		YA/Target Retirement Income Acct III	Variable annuity	161.236	**	2,807
		YC/2025 Target Retirement Acct III	Variable annuity	4,426.427	**	99,214
		YD/2035 Target Retirement Acct III	Variable annuity	13,655.623	**	338,842
		YE/2045 Target Retirement Acct III	Variable annuity	3,146.190	**	84,523
		YF/2055 Target Retirement Acct III	Variable annuity	3,002.879	**	70,205
		YG/2020 Target Retirement Acct III	Variable annuity	2,056.903	**	23,640
		YH/2030 Target Retirement Acct III	Variable annuity	931.030	**	11,097
		YI/2040 Target Retirement Acct III	Variable annuity	553.407	**	6,861
		YJ/2050 Target Retirement Acct III	Variable annuity	161.523	**	2,051
		YK/2060 Target Retirement Acct III	Variable annuity	137.338	**	1,762
		Yl/2065 Target Retirement Acct III	Variable annuity	457.577	**	3,910
		Total variable annuities				1,384,608
		Notes receivable from participants:				
*		Participant loans	Interest rates range from 4.25% to 7.25%; various maturity dates through September 2027			52,270
		TOTAL ASSETS AT DECEMBER 31, 2022				$ 1,730,870

* Denotes party-in-interest

** Cost not required for participant-directed investments

See accompanying independent auditor's report and notes thereto.

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

Part I Annual Report Identification Information

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022

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
Rowan Cornil, Inc. Profit Sharing & 401(k) Plan

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 09/01/1993

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)

Rowan Cornil, Inc.

Sunbelt Material Handling

1617 Terre Colony Ct.

Dallas TX 75212

2b Employer Identification Number (EIN) 75-2194496

2c Plan Sponsor's telephone number (214)819-4150

2d Business code (see instructions) 423800

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	[signature]	10/10/2023	JOSEPH NOLAN
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	[signature]	10/10/2023	JOSEPH NOLAN
	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

3a Plan administrator's name and address [X] 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**	137
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)**	132
a(2) Total number of active participants at the end of the plan year	**6a(2)**	136
b Retired or separated participants receiving benefits	**6b**	0
c Other retired or separated participants entitled to future benefits	**6c**	14
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	150
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	151
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	76
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2E 2F 2G 2J 2T 3D

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)		**9b** Plan benefit arrangement (check all that apply)	
(1) [X]	Insurance	(1) [X]	Insurance
(2) [ ]	Code section 412(e)(3) insurance contracts	(2) [ ]	Code section 412(e)(3) insurance contracts
(3) [X]	Trust	(3) [X]	Trust
(4) [ ]	General assets of the sponsor	(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) [X] **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) [X] **H** (Financial Information)

(2) [ ] **I** (Financial Information – Small Plan)

(3) [X] 001 **A** (Insurance Information)

(4) [X] **C** (Service Provider Information)

(5) [X] **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 H (Form 5500)	Financial Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2022** **This Form is Open to Public Inspection**

For calendar plan year 2022 or fiscal plan year beginning and ending

A Name of plan	**B** Three-digit plan number (PN) ▶
C Plan sponsor's name as shown on line 2a of Form 5500	**D** Employer Identification Number (EIN)

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)		
(2) Participant contributions	1b(2)		
(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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(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**		
	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 through1j)	**1k**		
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	**1l**		

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)**		
	(B) Participants	**2a(1)(B)**		
	(C) Others (including rollovers)	**2a(1)(C)**		
	(2) Noncash contributions	**2a(2)**		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	**2a(3)**		
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)**		
	(F) Other	**2b(1)(F)**		
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	**2b(1)(G)**		
	(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)**		
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	**2b(2)(D)**		
	(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)**		
	(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)**		

		(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)		
c Other income	2c		
d Total income. Add all **income** amounts in column (b) and enter total	2d		
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(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)		
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)		
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		
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: **(2)** EIN:

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:		Yes	No	Amount
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.)	4a			

			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**			
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**			
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**			
e	Was this plan covered by a fidelity bond?	**4e**			
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**			
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**			
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**			
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**			
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**			
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**			
l	Has the plan failed to provide any benefit when due under the plan?	**4l**			
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**			
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 _____.

Attachment to 2022 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Rowan Cornil, Inc. Profit Sharing & 401(k) Plan **EIN:** 75-2194496

Plan Sponsor's Name Rowan Cornil, Inc. **PN:** 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
*	Sentry Life Insurance Company	GUARANTEED FUND		293,992
*	Sentry Life Insurance Company	AA/SMALL CAP GROWTH ACCOUNT III		33,033
*	Sentry Life Insurance Company	AC/MID-CAP VALUE ACCOUNT		0
*	Sentry Life Insurance Company	AD/DIVERSIFIED GROWTH ACCOUNT		3,127
*	Sentry Life Insurance Company	D0/DIVERSIFIED INCOME ACCOUNT		2,761
*	Sentry Life Insurance Company	G0/BALANCED INCOME ACCOUNT		12,393
*	Sentry Life Insurance Company	H0/AGGRESSIVE GROWTH ACCOUNT		248,665

Attachment to 2022 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Rowan Cornil, Inc. Profit Sharing & 401(k) Plan **EIN:** 75-2194496

Plan Sponsor's Name Rowan Cornil, Inc. **PN:** 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
*	Sentry Life Insurance Company	K0/GLOBAL LARGE CAP ACCOUNT		24,715
*	Sentry Life Insurance Company	L0/CONCENTRATED GROWTH ACCOUNT		285,667
*	Sentry Life Insurance Company	M0/SMALL CAP BLEND ACCOUNT I		14,472
*	Sentry Life Insurance Company	N0/MID-CAP GROWTH ACCOUNT I		13,788
*	Sentry Life Insurance Company	O0/EQUITY GROWTH & INCOME ACCOUNT		3,489
*	Sentry Life Insurance Company	P0/SMALL CAP INDEX ACCOUNT		0
*	Sentry Life Insurance Company	Q0/SMALL-MID CAP INDEX ACCOUNT		5,286

Attachment to 2022 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Rowan Cornil, Inc. Profit Sharing & 401(k) Plan **EIN:** 75-2194496

Plan Sponsor's Name Rowan Cornil, Inc. **PN:** 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
*	Sentry Life Insurance Company	R0/TOTAL STOCK INDEX ACCOUNT		0
*	Sentry Life Insurance Company	S0/LARGE CAP INDEX ACCOUNT		2,909
*	Sentry Life Insurance Company	SA/BALANCED GROWTH ACCOUNT II		70,306
*	Sentry Life Insurance Company	W0/TOTAL BOND INDEX ACCOUNT		19,085
*	Sentry Life Insurance Company	YA/TARGET RETIREMENT INCOME ACCT III		2,807
*	Sentry Life Insurance Company	YB/2015 TARGET RETIREMENT ACCT III		0
*	Sentry Life Insurance Company	YC/2025 TARGET RETIREMENT ACCT III		99,214

Attachment to 2022 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Rowan Cornil, Inc. Profit Sharing & 401(k) Plan **EIN:** 75-2194496

Plan Sponsor's Name Rowan Cornil, Inc. **PN:** 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
*	Sentry Life Insurance Company	YD/2035 TARGET RETIREMENT ACCT III		338,841
*	Sentry Life Insurance Company	YE/2045 TARGET RETIREMENT ACCT III		84,523
*	Sentry Life Insurance Company	YF/2055 TARGET RETIREMENT ACCT III		70,205
*	Sentry Life Insurance Company	YG/2020 TARGET RETIREMENT ACCT III		23,640
*	Sentry Life Insurance Company	YH/2030 TARGET RETIREMENT ACCT III		11,097
*	Sentry Life Insurance Company	YI/2040 TARGET RETIREMENT ACCT III		6,861
*	Sentry Life Insurance Company	YJ/2050 TARGET RETIREMENT ACCT III		2,052

Attachment to 2022 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name Rowan Cornil, Inc. Profit Sharing & 401(k) Plan **EIN:** 75-2194496

Plan Sponsor's Name Rowan Cornil, Inc. **PN:** 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
*	Sentry Life Insurance Company	YK/2060 TARGET RETIREMENT ACCT III		1,762
*	Sentry Life Insurance Company	YL/2065 TARGET RETIREMENT ACCT III		3,910
*	PARTICIPANT LOANS	4.25% to 7.25%		52,271