

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2022 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2022 or fiscal plan year beginning 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 GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN	1b	Three-digit plan number (PN) ▶ 001
		1c	Effective date of plan 01/01/1996
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) GEMINI INDUSTRIES, INC. 421 SE 27TH STREET EL RENO, OK 73036-5705	2b	Employer Identification Number (EIN) 73-0743590
		2c	Plan Sponsor's telephone number 405-345-2056
		2d	Business code (see instructions) 325500

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.	10/16/2023	RODNEY WICKERSHAM
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor		3b Administrator's EIN
		3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name		4b EIN 4d PN
5 Total number of participants at the beginning of the plan year		5 218
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) 150
a(2) Total number of active participants at the end of the plan year		6a(2) 135
b Retired or separated participants receiving benefits		6b 0
c Other retired or separated participants entitled to future benefits.....		6c 80
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 215
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 0
f Total. Add lines 6d and 6e		6f 215
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item).....		6g 215
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h 9
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 2H 2J 2K 2P 2Q 3I		
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) ☒ Insurance	(1) ☒ Insurance	
(2) ☐ Code section 412(e)(3) insurance contracts	(2) ☐ Code section 412(e)(3) insurance contracts	
(3) ☒ Trust	(3) ☒ 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		b General Schedules
(1) ☒ R (Retirement Plan Information)	(1) ☒ H (Financial Information)	
(2) ☐ MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) ☐ I (Financial Information – Small Plan)	
(3) ☐ SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) ☒ 1 A (Insurance Information)	
	(4) ☒ C (Service Provider Information)	
	(5) ☒ D (DFE/Participating Plan Information)	
	(6) ☐ G (Financial Transaction Schedules)	

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2022 Form M-1 annual report. If the plan was not required to file the 2022 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE 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
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GEMINI INDUSTRIES, INC.	D Employer Identification Number (EIN) 73-0743590	

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

(a) Name of insurance carrier PRINCIPAL 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
42-0127290	61271	613953	0	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.
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(a) Total amount of commissions paid	(b) Total amount of fees paid

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

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

(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	0

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

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

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

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

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ CUSTODIAL GUARANTEED INTEREST CONTRACT

b	Balance at the end of the previous year	7b	1774026
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c	Additions: (1) Contributions deposited during the year	7c(1)		
	(2) Dividends and credits	7c(2)		
	(3) Interest credited during the year	7c(3)	11331	
	(4) Transferred from separate account	7c(4)		
	(5) Other (specify below)	7c(5)		

(6) Total additions	7c(6)	11331
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d	Total of balance and additions (add lines 7b and 7c(6))	7d	1785357
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e Deductions:

e	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)		
	(2) Administration charge made by carrier	7e(2)		
	(3) Transferred to separate account	7e(3)	1785357	
	(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	1785357
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f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	0
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Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount.	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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2022
		This Form is Open to Public Inspection.

For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GEMINI INDUSTRIES, INC.	D Employer Identification Number (EIN) 73-0743590	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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--

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

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

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

ONEAMERICA RETIREMENT SERVICES LLC

46-5378846

(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?
15 36 37 38 50 59 63 64	NONE	38436	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARINER RETIREMENT ADVISORS LLC

61-1740806

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27 99	NONE	26583	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MATRIX TRUST COMPANY

75-3182674

(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?
19 21 25 62	NONE	0	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
MATRIX TRUST COMPANY	19 21 25 62	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
ONEAMERICA RETIREMENT SERVICES LLC 46-5378846	ONEAMERICA HAS AN AGREEMENT WITH MATRIX TRUST COMPANY TO PAY 1,250 ANNUAL TRUST AND CUSTODY FEES PLUS 2 BASIS POINTS ON MARKET VALUE ANNUALIZED MONTHLY	
(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
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
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For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN	B Three-digit plan number (PN) ►	001
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 GEMINI INDUSTRIES, INC.	D Employer Identification Number (EIN) 73-0743590	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: T ROWE PRICE STABLE VALUE FUND		
b Name of sponsor of entity listed in (a): T ROWE PRICE		
c EIN-PN 52-1309931-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1514555
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**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
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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 <u>01/01/2022</u> and ending <u>12/31/2022</u>		
A Name of plan <u>GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>GEMINI INDUSTRIES, INC.</u>	D Employer Identification Number (EIN) <u>73-0743590</u>	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a	557	1094
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions.....	1b(1)	832821	1328282
(2) Participant contributions.....	1b(2)	53832	0
(3) Other.....	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit).....	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common.....	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants).....	1c(7)		
(8) Participant loans.....	1c(8)	381014	394921
(9) Value of interest in common/collective trusts.....	1c(9)	474922	1514555
(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)	23220099	18784707
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	1774026	0
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	39766806	44918114
(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	66504077	66941673

Liabilities

g Benefit claims payable	1g		
h Operating payables	1h	0	0
i Acquisition indebtedness	1i		
j Other liabilities	1j	5697988	8255057
k Total liabilities (add all amounts in lines 1g through 1j)	1k	5697988	8255057

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	60806089	58686616
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Part II Income and Expense Statement

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

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	972796	
(B) Participants	2a(1)(B)	874530	
(C) Others (including rollovers)	2a(1)(C)	374646	
(2) Noncash contributions	2a(2)	1328282	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		3550254
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)	16120	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		16120
(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)	961962	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		961962
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	3177275	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		3177275

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		32383
(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)		-4443430
c Other income	2c		18501
d Total income. Add all income amounts in column (b) and enter total	2d		3313065
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5225614	
(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)		5225614
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		141905
i Administrative expenses: (1) Professional fees	2i(1)	38436	
(2) Contract administrator fees	2i(2)		
(3) Investment advisory and management fees	2i(3)	26583	
(4) Other	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		65019
j Total expenses. Add all expense amounts in column (b) and enter total	2j		5432538
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d	2k		-2119473
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: **FORVIS, LLP**

(2) EIN: **44-0160260**

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

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

Part IV Compliance Questions

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

During the plan year:

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

	Yes	No	Amount
4a	X		67538

	Yes	No	Amount
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	X		
4m	X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.	X		
4n	X		

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

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2022 This Form is Open to Public Inspection.
For calendar plan year 2022 or fiscal plan year beginning 01/01/2022 and ending 12/31/2022		
A Name of plan GEMINI INDUSTRIES, INC. PROFIT SHARING PLAN		B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 GEMINI INDUSTRIES, INC.		D Employer Identification Number (EIN) 73-0743590
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 42-0127290 75-3182674		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived).....		6a
b Enter the amount contributed by the employer to the plan for this plan year.....		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box..... ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?.....		☐ Yes ☒ No
11 a Does the ESOP hold any preferred stock?.....		☐ Yes ☒ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.).....		☐ Yes ☒ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?.....		☒ Yes ☐ No
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2022 v. 220413		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

14	Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:		
	a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....	14a	
	b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14b	
	c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment)	14c	
15	Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:		
	a The corresponding number for the plan year immediately preceding the current plan year.....	15a	
	b The corresponding number for the second preceding plan year.....	15b	
16	Information with respect to any employers who withdrew from the plan during the preceding plan year:		
	a Enter the number of employers who withdrew during the preceding plan year	16a	
	b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	
17	If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18	If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐
19	If the total number of participants is 1,000 or more, complete lines (a) through (c) a Enter the percentage of plan assets held as: Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____% b Provide the average duration of the combined investment-grade and high-yield debt: ☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more c What duration measure was used to calculate line 19(b)? ☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____
20	PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20. a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation _____

Gemini Industries, Inc.
Profit Sharing Plan
EIN 73-0743590 PN 001

**Independent Auditor's Report and
Financial Statements**

December 31, 2022 and 2021



Gemini Industries, Inc. Profit Sharing Plan

December 31, 2022 and 2021

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Two Leadership Square South Tower, 211 N. Robinson Avenue, Suite 600 / Oklahoma City, OK 73102

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forvis.com

Independent Auditor's Report

Board of Trustees and Management
Gemini Industries, Inc. Profit Sharing Plan
El Reno, Oklahoma

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

We have performed audits of the financial statements of Gemini Industries, Inc. Profit Sharing 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 statements of net assets available for benefits as of December 31, 2022 and 2021 and the related statements of changes in net assets available for benefits for the years then ended and the related notes to the financial statements.

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

Management has obtained certifications from qualified institutions as of December 31, 2022 and 2021, and for the years then ended, stating that the certified investment information, as described in *Note 3* to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan’s ability to continue as a going concern within one year after the date that these financial statements are available to be issued.

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

Auditor’s Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an

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

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

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

Other Matter – Supplemental Schedules Required by ERISA

The supplemental schedules listed in the table of contents are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

- The form and content of the supplemental schedules, other than the information in the supplemental schedules that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

- The information in the supplemental schedules related to assets held by and certified to by qualified institutions agrees to, or is derived from, in all material respects, the information prepared and certified by institutions that management determined meets the requirements of ERISA Section 103(a)(3)(C).

FORVIS, LLP

Oklahoma City, Oklahoma
October 13, 2023

Federal Employer Identification Number: 44-0160260

Gemini Industries, Inc. Profit Sharing Plan
Statement of Net Assets Available for Benefits
December 31, 2022

Assets

	<u>Allocated</u>	<u>Unallocated</u>	<u>Total</u>
Investments, at Fair Value			
Mutual funds	\$ 18,784,707	\$ -	\$ 18,784,707
Common/collective trust funds	1,514,555	-	1,514,555
Company common stock	<u>34,141,858</u>	<u>10,776,256</u>	<u>44,918,114</u>
Total investments, at fair value	<u>54,441,120</u>	<u>10,776,256</u>	<u>65,217,376</u>
Receivables			
Employer contributions	1,328,282	-	1,328,282
Notes receivable from participants	<u>394,922</u>	<u>-</u>	<u>394,922</u>
Total receivables	<u>1,723,204</u>	<u>-</u>	<u>1,723,204</u>
Noninterest-Bearing Cash	<u>1,094</u>	<u>-</u>	<u>1,094</u>
Total assets	56,165,418	10,776,256	66,941,674

Liabilities

Notes Payable	<u>-</u>	<u>8,255,056</u>	<u>8,255,056</u>
Net Assets Available for Benefits	<u><u>\$ 56,165,418</u></u>	<u><u>\$ 2,521,200</u></u>	<u><u>\$ 58,686,618</u></u>

Gemini Industries, Inc. Profit Sharing Plan
Statement of Net Assets Available for Benefits
December 31, 2021

Assets

	<u>Allocated</u>	<u>Unallocated</u>	<u>Total</u>
Investments, at Fair Value			
Mutual funds	\$ 23,220,099	\$ -	\$ 23,220,099
Common/collective trust funds	474,922	-	474,922
Company common stock	<u>32,177,654</u>	<u>7,589,152</u>	<u>39,766,806</u>
Total investments, at fair value	<u>55,872,675</u>	<u>7,589,152</u>	<u>63,461,827</u>
Investments, at Contract Value	<u>1,774,026</u>	<u>-</u>	<u>1,774,026</u>
Receivables			
Employer contributions	789,296	-	789,296
Employer matching contributions	43,525	-	43,525
Participant contributions	53,832	-	53,832
Notes receivable from participants	<u>381,014</u>	<u>-</u>	<u>381,014</u>
Total receivables	<u>1,267,667</u>	<u>-</u>	<u>1,267,667</u>
Noninterest-Bearing Cash	<u>557</u>	<u>-</u>	<u>557</u>
Total assets	58,914,925	7,589,152	66,504,077

Liabilities

Notes Payable	<u>-</u>	<u>5,697,988</u>	<u>5,697,988</u>
Net Assets Available for Benefits	<u>\$ 58,914,925</u>	<u>\$ 1,891,164</u>	<u>\$ 60,806,089</u>

Gemini Industries, Inc. Profit Sharing Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2022

	Allocated	Unallocated	Total
Investment Income (Loss)			
Net depreciation in fair value of investments	\$ (4,392,544)	\$ -	\$ (4,392,544)
Net appreciation in fair value of company common stock	2,367,643	809,632	3,177,275
Interest and dividends	961,962	-	961,962
	<u>(1,062,939)</u>	<u>809,632</u>	<u>(253,307)</u>
Interest Income on Notes Receivable from Participants	<u>16,120</u>	<u>-</u>	<u>16,120</u>
Contributions			
Participants	874,530	-	874,530
Employer matching	667,310	-	667,310
Employer profit-sharing	1,328,282	305,486	1,633,768
Rollovers	374,646	-	374,646
Allocation of 571 shares of company common stock, at fair value	343,177	-	343,177
	<u>3,587,945</u>	<u>305,486</u>	<u>3,893,431</u>
Total contributions	<u>3,587,945</u>	<u>305,486</u>	<u>3,893,431</u>
Total additions	<u>2,541,126</u>	<u>1,115,118</u>	<u>3,656,244</u>
Deductions			
Interest expense	-	141,905	141,905
Allocation of 571 shares of company common stock, at fair value	-	343,177	343,177
Benefits paid directly to participants	5,225,614	-	5,225,614
Administrative expenses	65,019	-	65,019
	<u>5,290,633</u>	<u>485,082</u>	<u>5,775,715</u>
Total deductions	<u>5,290,633</u>	<u>485,082</u>	<u>5,775,715</u>
Net Increase (Decrease)	<u>(2,749,507)</u>	<u>630,036</u>	<u>(2,119,471)</u>
Net Assets Available for Benefits, Beginning of Year	<u>58,914,925</u>	<u>1,891,164</u>	<u>60,806,089</u>
Net Assets Available for Benefits, End of Year	<u><u>\$ 56,165,418</u></u>	<u><u>\$ 2,521,200</u></u>	<u><u>\$ 58,686,618</u></u>

Gemini Industries, Inc. Profit Sharing Plan
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2021

	Allocated	Unallocated	Total
Investment Income			
Net appreciation in fair value of investments	\$ 1,601,360	\$ -	\$ 1,601,360
Net appreciation in fair value of company common stock	4,119,639	1,075,895	5,195,534
Interest	1,229,966	-	1,229,966
	<u>6,950,965</u>	<u>1,075,895</u>	<u>8,026,860</u>
Net investment income			
	<u>6,950,965</u>	<u>1,075,895</u>	<u>8,026,860</u>
Interest Income on Notes Receivable from Participants	16,659	-	16,659
	<u>16,659</u>	<u>-</u>	<u>16,659</u>
Contributions			
Participants	800,203	-	800,203
Employer matching	567,180	-	567,180
Employer profit-sharing	824,253	188,427	1,012,680
Rollovers	17,329	-	17,329
Allocation of 401 shares of company common stock, at fair value	223,384	-	223,384
	<u>2,432,349</u>	<u>188,427</u>	<u>2,620,776</u>
Total contributions			
	<u>2,432,349</u>	<u>188,427</u>	<u>2,620,776</u>
Total additions			
	<u>9,399,973</u>	<u>1,264,322</u>	<u>10,664,295</u>
Deductions			
Interest expense	-	83,574	83,574
Allocation of 401 shares of company common stock, at fair value	-	223,384	223,384
Benefits paid directly to participants	3,679,681	-	3,679,681
Administrative expenses	45,130	-	45,130
	<u>3,724,811</u>	<u>306,958</u>	<u>4,031,769</u>
Total deductions			
	<u>3,724,811</u>	<u>306,958</u>	<u>4,031,769</u>
Net Increase	5,675,162	957,364	6,632,526
Net Assets Available for Benefits, Beginning of Year	53,239,763	933,800	54,173,563
	<u>53,239,763</u>	<u>933,800</u>	<u>54,173,563</u>
Net Assets Available for Benefits, End of Year	<u>\$ 58,914,925</u>	<u>\$ 1,891,164</u>	<u>\$ 60,806,089</u>

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 1: Description of the Plan

The following description of Gemini Industries, Inc. Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the plan document and *Summary Plan Description* for a more complete description of the Plan's provisions, which are available from the plan administrator.

General

The Plan was originally established in 1969 as an employee profit-sharing plan. On January 1, 1983, the Plan was amended and restated as a profit-sharing plan, originally known as the Gemini Industries, Inc. Profit Sharing Plan. On December 31, 2002, the Gemini Industries, Inc. Money Purchase Pension Plan was merged with and into the Plan. The Plan is sponsored by Gemini Industries, Inc. (the Company) and operates, in relevant part, as a leveraged employee stock ownership plan (ESOP) and is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code of 1986, as amended, and is subject to the applicable provisions of the *Employee Retirement Income Security Act of 1974* (ERISA). Three employees serve as the Plan's trustees. Effective October 1, 2021, the Plan's record-keeper and custodian changed from Principal Life Insurance Company, Principal Global Investors Trust Company, and Principal Trust Company (Principal) to OneAmerica Retirement Services LLC (OneAmerica) and Matrix Trust Company (Matrix).

Unallocated and Allocated Shares

On December 31, 2018, the Plan purchased 8,014 shares of the Company's treasury stock with a loan of \$2,724,630. The stock was purchased at a price of approximately \$340 per share for an aggregate purchase price of \$2,724,630. On December 31, 2021, the Plan purchased 6,801 shares of the Company's treasury stock with a loan of \$3,277,946. The stock was purchased at a price of approximately \$482 per share for an aggregate purchase price of \$3,277,946. On December 31, 2022, the Plan purchased 4,880 shares of the Company's treasury stock with a loan of \$2,720,649. The stock was purchased at a price of approximately \$558. See *Note 9* for discussion of loans. The borrowings are collateralized by the unallocated shares of common stock and are guaranteed by the Company. The Company (lender) has no rights against shares once they are allocated to participants in accordance with the terms of the Plan. Accordingly, the accompanying financial statements of the Plan as of and for the years ended December 31, 2022 and 2021 present separately the assets and liabilities and changes therein pertaining to:

- (A) The accounts of employees with vested rights in allocated common stock (Allocated)
- (B) Common stock not yet allocated to employees (Unallocated)

Eligibility

Employees of the Company are generally eligible to participate in the Plan after six months of service providing they worked more than 500 hours during such plan year.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Contributions

The Plan permits eligible employees through a salary deferral election to have the Company make annual contributions of up to 100% of eligible compensation. Employee rollover contributions are also permitted. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. The Company makes safe harbor matching contributions of 100% of employees' salary deferral amounts on the first 6% of employees' compensation and also makes profit-sharing contributions. Contributions are subject to certain limitations.

Company nonelective profit-sharing contributions are discretionary as determined by the Company's Board of Trustees. Nonelective profit-sharing contributions are limited to participants who (i) have a year of service during the plan year and are actively employed on the last day of the plan year or (ii) on or after July 1 of such plan year, (a) retired during the plan year on or after their normal retirement date, (b) terminated as a result of a total and permanent disability during the plan year, or (c) died during the plan year.

Company profit-sharing contributions are discretionary as determined by the Company's Board of Trustees. Discretionary contributions are made in company common stock.

The Company is obligated to make contributions in cash to the Plan that, when aggregated with the Plan's dividends and interest earnings, equal the amount necessary to enable the Plan to make its regularly scheduled payments of principal and interest due on its term loans.

Participant Investment Account Options

Each participant has the option of directing their contributions into any of the various investment options offered by the Plan and may change the allocation daily.

Company common stock allocated to participants is maintained in a nonparticipant-directed account.

Participant Accounts

Each participant's account is credited with the participant's contributions, the Company's contributions, and plan earnings and is charged with an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from their vested account.

Each participant's account is credited as of the last day of each plan year with an allocation of shares of the Company's common stock released by the trustee from the unallocated account and forfeitures of terminated participants' nonvested accounts. Only those participants who are eligible employees of the Company as of the last day of the plan year will receive an allocation. Allocations are based on a participant's eligible compensation, relative to total eligible compensation. Employer contributions are allocated to each participant's account based upon the relation of the participant's compensation to total compensation for the plan year. Plan earnings are allocated to each participant's account based on the ratio of the participant's beginning of the year account balance to all participants' beginning of the year account balances.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Vesting

Participants are immediately vested in their voluntary contributions and the Company's safe harbor matching contributions plus earnings thereon. Prior to completing two years of service, the participant will not be vested in any portion of the Company's discretionary employer profit-sharing contribution. Participants vest 20% per year of service in years two through six, becoming fully vested after six years of service. Participants terminating due to normal retirement, death, or disability will be 100% vested.

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate, determined quarterly, is set at the national prime rate. Principal and interest are paid ratably through biweekly payroll deductions.

Voting Rights

The trustee shall vote all company stock held by it as part of the plan assets. With respect to the approval or disapproval of any corporate merger or consolidation, recapitalization, reclassification, liquidation, dissolution, sale of substantially all assets of a trade or business, or such similar transactions as prescribed in regulations, each participant or beneficiary in the Plan shall be entitled to direct the trustee as to the manner in which voting rights on shares of company stock are allocated to the company stock account of such participant or beneficiary.

Diversification

Diversification is offered to participants close to retirement so they may have the opportunity to move part of the value of their investment in company common stock into investments that are more diversified. Participants who are at least age 55 with at least 10 years of participation in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25% of the number of post-1986 shares allocated to their account less any shares previously diversified. In the sixth year, the percentage changes to 50%. Funds that become available through diversification transactions by participants are transferred to the participants' self-directed account and reinvested.

Put Option

Under federal income tax regulations, the company common stock held by the Plan and its participants that is not readily tradable on an established market or is subject to trading limitations includes a put option. The put option is a right to demand that the Company buy any shares of its stock that is distributed from the Plan to participants in satisfaction of the Plan's legal distribution and/or diversification requirements for which there is no market. The put price is representative of the current appraised value of the stock. By law, shares that are distributed from the Plan to plan participants and that are then "put" to the Company by such participants are purchased by the

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Company based on the appraised value of the stock, as determined by the annual valuation for the plan year ending immediately prior to the occurrence of the distribution. The Company can pay for the purchase with interest over a period of time agreed to by the Company and participant. The purpose of the put option is to ensure the participant has the ability to ultimately obtain cash.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant may elect to receive either a lump-sum amount equal to the value of their vested interest in their account or installments over a period determined by the participant not to exceed the joint life expectancy of the participant or the participant's spouse, or the participant can choose to purchase an annuity contract issued by an insurance company mutually agreeable to the participant and plan administrator. For termination of service for other reasons, a participant may receive the value of the vested interest in their account as a lump-sum distribution. Effective January 1, 2019, the distribution policy was changed to pay out distributions related to company stock conversions greater than \$150,000 over a period of three years. In 2022, the distribution policy was amended to pay out distributions over a period of five years. Effective October 16, 2020, participants may make hardship withdrawals from their accounts as defined by the plan document.

Forfeited Accounts

At December 31, 2022 and 2021, forfeited nonvested accounts totaled \$22,443 and \$2,236, respectively. These amounts will be used to pay plan expenses and then to reduce company matching contributions. Also, in 2022 and 2021, employer contributions were reduced by approximately \$0 and \$48,000, respectively, from forfeited nonvested accounts.

Note 2: Summary of Significant Accounting Policies

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting.

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets and changes in net assets and disclosure of contingent assets and liabilities at the date of the financial statements. Actual results could differ from those estimates.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Investment Valuation and Income Recognition

Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Quoted market prices, if available, are used to value investments. Mutual funds are valued at the net asset value (NAV) of shares held by the Plan at year-end.

The Plan's investment in shares of the Company's common stock is stated at estimated fair value as determined by an annual independent appraisal.

The Plan's interest in the common/collective trust funds are at the NAV of units of the collective trusts reported by the custodians using the audited financial statements of the collective trusts at year-end.

Pooled separate accounts are valued at estimated fair value as provided by Principal.

Fully benefit-responsive investment contracts are valued at contract value. Contract value represents contributions made under the contract, plus interest at the contract rate, less participant withdrawals and administrative expenses.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable from participants are reclassified as distributions based upon the terms of the plan document.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Allocations

The financial statements of the Plan present separately the assets and liabilities and changes therein pertaining to: (a) the accounts of employees with rights in allocated stock (allocated) and (b) stock not yet allocated to employees (unallocated), including shares that are committed to be released. Shares are released from collateral and become allocated generally in the period in which debt service is actually paid.

Administrative Expenses

Administrative expenses may be paid by the Company or the Plan at the Company's discretion.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 3: Certifications of Plan Custodians

The plan administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, Matrix, a qualified institution as of December 31, 2022 and 2021 and for the year ended December 31, 2022 and for the period from October 1, 2021 through December 31, 2021, and Principal, a qualified institution for the period from January 1, 2021 through September 30, 2021, has certified the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule of assets (held at end of year) are complete and accurate:

- Investments, except for company common stock, and notes receivable from participants as shown in the accompanying statements of net assets available for benefits as of December 31, 2022 and 2021
- Investment income (loss), except for net appreciation in fair value of company common stock, and interest income on notes receivable from participants as shown in the accompanying statements of changes in net assets available for benefits for the years ended December 31, 2022 and 2021
- Investment information, except for company common stock, and notes receivable from participants included in the accompanying schedule of assets (held at end of year) as of December 31, 2022

The Plan's independent auditors did not perform auditing procedures with respect to this certified investment information except for comparing such certified investment information to the related information included in the accompanying financial statements and ERISA-required supplemental schedule of assets (held at end of year).

Note 4: Related-Party and Party-in-Interest Transactions

Party-in-interest transactions include those with fiduciaries or employees of the Plan, any person who provides services to the Plan, an employer whose employees are covered by the Plan, an employee organization whose members are covered by the Plan, a person who owns 50% or more of such an employer or employee association, or relatives of such persons.

In 2021, the Plan held an investment in a fixed income guaranteed option managed by Principal. This transaction qualifies as a party-in-interest transaction.

The Plan holds outstanding common stock of the Company and has notes payable to the Company as of December 31, 2022 and 2021. All transactions between the Company, the custodians, and the participants are considered party-in-interest transactions. Fees for trust services paid by the Plan to the custodians were approximately \$38,000 and \$45,000 for the years ended December 31, 2022 and 2021, respectively.

The Company provides certain administrative services at no cost to the Plan.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 5: Company Stock Transactions

During 2022 and 2021, the Plan purchased 4,880 and 6,801 shares, respectively, from the Company. Additionally, the Company contributed 1,816 and 2,037 shares, respectively, to the Plan during 2022 and 2021 at a value determined by the Plan's Stock Fund Procedures for Terminated Employees. During 2022 and 2021, the Plan entered into loan agreements with the Company to purchase 4,880 and 6,801 shares of treasury stock, respectively, from the Company (see *Note 9*).

The Plan did not receive any dividends on company common stock during 2022 and 2021.

Note 6: Company Common Stock

The Plan's investment in company common stock at December 31 is presented in the following table:

	2022		2021	
	Allocated	Unallocated	Allocated	Unallocated
Company common stock				
Number of shares	<u>56,778</u>	<u>17,921</u>	<u>57,717</u>	<u>13,612</u>
Cost	<u>\$ 6,163,506</u>	<u>\$ 8,254,832</u>	<u>\$ 6,265,439</u>	<u>\$ 4,627,808</u>
Estimated fair value	<u>\$ 34,141,858</u>	<u>\$ 10,776,256</u>	<u>\$ 32,177,654</u>	<u>\$ 7,589,152</u>

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 7: Net Assets by Participant- and Nonparticipant-Directed Investments

Information about the net assets and the significant components of the changes in net assets relating to the participant- and nonparticipant-directed investments is as follows:

	2022		
	Nonparticipant-Directed Funds	Participant-Directed Funds	Total
Additions			
Investment income (loss)			
Net appreciation (depreciation) in fair value of investments	\$ 3,177,275	\$ (4,392,544)	\$ (1,215,269)
Interest	-	961,962	961,962
Net investment income (loss)	3,177,275	(3,430,582)	(253,307)
Interest income on notes receivable from participants	-	16,120	16,120
Contributions			
Participants	-	874,530	874,530
Employer	1,633,768	667,310	2,301,078
Rollovers	-	374,646	374,646
Total contributions	1,633,768	1,916,486	3,550,254
Total net additions	4,811,043	(1,497,976)	3,313,067
Deductions			
Interest expense	141,905	-	141,905
Benefits paid directly to participants	2,720,649	2,504,965	5,225,614
Administrative expenses	-	65,019	65,019
Total deductions	2,862,554	2,569,984	5,432,538
Net increase (decrease)	1,948,489	(4,067,960)	(2,119,471)
Net assets available for benefits, beginning of year	35,069,362	25,736,727	60,806,089
Net assets available for benefits, end of year	\$ 37,017,851	\$ 21,668,767	\$ 58,686,618

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

	2021		
	Nonparticipant-Directed Funds	Participant-Directed Funds	Total
Additions			
Investment income			
Net appreciation in fair value of investments	\$ 5,195,534	\$ 1,601,360	\$ 6,796,894
Interest	-	1,229,966	1,229,966
Net investment income	5,195,534	2,831,326	8,026,860
Interest income on notes receivable from participants	-	16,659	16,659
Contributions			
Participants	-	800,203	800,203
Employer	1,012,680	567,180	1,579,860
Rollovers	-	17,329	17,329
Total contributions	1,012,680	1,384,712	2,397,392
Total additions	6,208,214	4,232,697	10,440,911
Deductions			
Interest expense	83,574	-	83,574
Benefits paid directly to participants	3,277,946	401,735	3,679,681
Administrative expenses	-	45,130	45,130
Total deductions	3,361,520	446,865	3,808,385
Net increase	2,846,694	3,785,832	6,632,526
Net assets available for benefits, beginning of year	32,222,668	21,950,895	54,173,563
Net assets available for benefits, end of year	\$ 35,069,362	\$ 25,736,727	\$ 60,806,089

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 8: Disclosures About Fair Value of Plan Assets

Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. Fair value measurements must maximize the use of observable inputs and minimize the use of unobservable inputs. There is a hierarchy of three levels of inputs that may be used to measure fair value:

- Level 1** Quoted prices in active markets for identical assets
- Level 2** Observable inputs other than Level 1 prices, such as quoted prices for similar assets, quoted prices in markets that are not active, or other inputs that are observable or can be corroborated by observable market data for substantially the full term of the assets
- Level 3** Unobservable inputs supported by little or no market activity and significant to the fair value of the assets

Recurring Measurements

The following tables present the fair value measurements of assets recognized in the accompanying statements of net assets available for benefits measured at fair value on a recurring basis and the level within the fair value hierarchy in which the fair value measurements fall at December 31:

	Fair Value	Fair Value Measurements Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
2022				
Mutual funds	\$ 18,784,707	\$ 18,784,707	\$ -	\$ -
Company common stock	<u>44,918,114</u>	<u>-</u>	<u>-</u>	<u>44,918,114</u>
Total assets in the fair value hierarchy	63,702,821	<u>\$ 18,784,707</u>	<u>\$ -</u>	<u>\$ 44,918,114</u>
Investments measured at NAV (A)	<u>1,514,555</u>			
Investments measured at fair value	<u>\$ 65,217,376</u>			

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

		Fair Value Measurements Using		
		Quoted Prices in Active Markets for Identical Assets (Level 1)	Significant Other Observable Inputs (Level 2)	Significant Unobservable Inputs (Level 3)
	Fair Value			
2021				
Mutual funds	\$ 23,220,099	\$ 23,220,099	\$ -	\$ -
Company common stock	39,766,806	-	-	39,766,806
Total assets in the fair value hierarchy	62,986,905	<u>\$ 23,220,099</u>	<u>\$ -</u>	<u>\$ 39,766,806</u>
Investments measured at NAV (A)	<u>474,922</u>			
Investments measured at fair value	<u>\$ 63,461,827</u>			

- (A) In accordance with Accounting Standards Codification, *Fair Value Measurement (Topic 820-10)*, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the accompanying statements of net assets available for benefits. There are no participant redemption restrictions for these investments or unfunded commitments. The redemption notice period is only applicable to the Plan and does not apply to individual participant transactions, which are allowed daily.

Following is a description of the valuation methodologies and inputs used for assets measured at fair value on a recurring basis and recognized in the accompanying statements of net assets available for benefits, as well as the general classification of such assets pursuant to the valuation hierarchy. There have been no significant changes in the valuation techniques during the years ended December 31, 2022 and 2021. The Plan had no liabilities measured at fair value on a recurring basis. In addition, the Plan had no assets or liabilities measured at fair value on a nonrecurring basis. For assets classified within Level 3 of the fair value hierarchy, the process used to develop the reported fair value is described below.

Investments

Where quoted market prices are available in an active market, investments are classified within Level 1 of the valuation hierarchy. If quoted market prices are not available, then fair values are estimated by using quoted prices of investments with similar characteristics, or independent asset pricing services and pricing models, the inputs of which are market-based or independently sourced market parameters, including, but not limited to, yield curves, interest rates, volatilities,

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

prepayments, defaults, cumulative loss projections, and cash flows. Such investments are classified in Level 2 of the valuation hierarchy. In certain cases where Level 1 or Level 2 inputs are not available, investments are classified within Level 3 of the hierarchy. See the table below for inputs and valuation techniques used for Level 3 investments.

Level 3 Activity

Purchases of company common stock totaled \$3,509,945 and \$4,259,739 during 2022 and 2021, respectively. Of the \$3,509,945 purchases of company common stock during 2022, \$2,720,649 was purchased through a note payable to the Company (see *Note 9*). Sales of company common stock totaled \$2,720,649 and \$3,277,946 during 2022 and 2021, respectively.

	Fair Value 2022	Fair Value 2021	Valuation Technique	Unobservable Inputs	Range (Weighted Average)
Company common stock	\$ 44,918,114	\$ 39,766,806	Guideline public company	Comparison to comparable publicly traded companies	Not applicable
			Merger and acquisition	Comparison to companies acquired in a merger or acquisition transaction	Not applicable
			Discounted cash flow	Weighted-average cost of capital	15.9% – 2022; 14.6% – 2021
				Terminal multiple	6.0x - 2022; 6.0x - 2021;
				Cost of equity	20.6% – 2022; 18.3% – 2021
				Discount for lack of marketability	5.0%

The valuation process involves plan management's selection of an independent appraiser. Plan management accumulates the data for the appraiser from the audited financial statements of the Company. The appraiser prepares a preliminary report that plan management reviews in detail and discusses and approves. The results of this process are documented in the minutes of the Company.

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

Note 9: Notes Payable

On December 31, 2018, the Plan entered into a \$2,724,630 term note agreement with the Company. The proceeds of the note were used to purchase 8,014 shares of treasury stock from the Company. On December 31, 2021, the Plan entered into another note agreement to borrow \$3,277,946 from the Company to purchase 6,801 shares of treasury stock from the Company.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

On December 31, 2022, the Plan entered into a \$2,720,649 term note agreement with the Company. The proceeds of the note were used to purchase 4,880 shares of treasury stock from the Company.

Unallocated shares are collateral for the three notes. Shares are released from collateral and allocated to participants as payments of principal and interest are made. The number of shares released in any year is the number of shares held as collateral multiplied by the ratio of the current year payments divided by the total of this year's payments plus all future years' principal and interest payments. This resulted in 401 shares being released and allocated for the plan years ended December 31, 2022 and 2021.

The December 31, 2018, note agreement provides for the note to be repaid over 20 years in annual installments. The note bears interest at 3.31%. The December 31, 2021, note agreement provides for the note to be repaid over 40 years in annual installments. The note bears interest at 1.90%. The December 31, 2022 note agreements provides for the note to be repaid over 40 years in annual installments. The note bears interest at 5.20%.

The scheduled amortization of the notes for the next five years and thereafter is as follows:

2023	\$ 193,942
2024	199,363
2025	205,968
2026	212,289
2027	218,818
Thereafter	<u>7,224,676</u>
	<u>\$ 8,255,056</u>

Note 10: Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100% vested in their company profit-sharing contributions.

Note 11: Tax Status

The Internal Revenue Service has determined and informed the Company, by a letter dated March 1, 2017, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC) and, therefore, not subject to tax. The Plan has been amended since receiving the determination letter. However, the plan administrator believes that the Plan and related trust are currently designed and being operated in compliance with the applicable requirements of the IRC.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 12: Nonexempt Transactions

Defined contribution plans are required to remit employee contributions to the Plan as soon as they can be reasonably segregated from the employer's general assets, but no later than the 15th business day of the month following the month in which the participant contributions are withheld by the employer.

While the Company remitted all employee contributions and loan repayments to the Plan, employee contributions and loan repayments of \$67,538 in 2021, \$32,312 in 2017, and \$34,373 in 2016 were not remitted within the "as soon as they can be reasonably segregated" required time period. Of the \$67,538 in 2021, \$34,287 and the lost earnings associated with the contribution were corrected under the Voluntary Fiduciary Correction Program (VFCP) during the 2022 plan year. For the noted remaining remittances, management believes any lost earnings would be insignificant and not material and, therefore, elected to not make any corrections for lost earnings under the VFCP. Late remittance to the Plan is required to be reported as a nonexempt transaction until the year after the violation has been fully corrected; therefore, the late contributions for 2021 have been included on Schedule H, Line 4a, of the Form 5500.

Note 13: Risks and Uncertainties

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

The Plan also invests in company common stock, which is exposed to various risks, such as interest rate, market, and credit risks, as well as valuation assumptions based on earnings, cash flows, and/or other such techniques. Due to the level of risk associated with such investment securities and the level of uncertainty related to changes in the value of such investments, it is at least reasonably possible that changes in risk in the near term could materially affect the participants' account balances and the amounts reported in the accompanying statements of net assets available for benefits and changes in net assets available for benefits.

Note 14: Concentrations

At December 31, 2022 and 2021, certain plan investments were held in 74,699 and 71,329 shares, respectively, of the Company's common stock. The Company earns revenues primarily from the manufacturing and distribution of specialty coatings, lacquers, solvents, and aerosol products with primary operations in El Reno, Oklahoma, and Grand Prairie, Texas. The Company's principal customers are national and regional paint manufacturers and retailers as well as industrial manufacturers of wood products. The Company had no customers that accounted for more than 10% of total revenues for the year ended December 31, 2022.

Gemini Industries, Inc. Profit Sharing Plan

Notes to Financial Statements

December 31, 2022 and 2021

Note 15: Subsequent Events

Subsequent events have been evaluated through October 13, 2023, which is the date the financial statements were available to be issued.

Supplemental Schedules

Gemini Industries, Inc. Profit Sharing Plan

EIN 73-0743590 PN 001

Schedule H, Line 4a – Schedule of Delinquent Participant Contributions

December 31, 2022

Participant Contributions Transferred Late to Plan	Contributions Corrected Outside VFCP	Total Fully Corrected Under VFCP
<u>\$ 67,538 *</u>	<u>\$ 33,251</u>	<u>\$ 34,287</u>

*Amounts represent late contributions made during the plan year ended December 31, 2021, with a portion of these being fully corrected under VFCP in 2022, as discussed in *Note 12*.

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EIN 73-0743590 PN 001

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

December 31, 2022

Identity of Issuer and Description	Shares	Cost	Current Value
Common Stock			
*Gemini Industries, Inc.	74,699	\$ 14,418,338	\$ 44,918,114
Mutual Funds			
AB Small Cap Growth Portfolio Fund Z	1,185		62,305
American Funds 2010 Target Date Retire R6	40,358		437,076
American Funds 2015 Target Date Retire R6	5,694		64,346
American Funds 2020 Target Date Retire R6	46,579		569,193
American Funds 2025 Target Date Retire R6	135,498		1,833,286
American Funds 2030 Target Date Retire R6	274,338		4,002,584
American Funds 2035 Target Date Retire R6	258,854		4,022,591
American Funds 2040 Target Date Retire R6	199,993		3,201,889
American Funds 2045 Target Date Retire R6	59,314		967,410
American Funds 2050 Target Date Retire R6	70,538		1,123,667
American Funds 2055 Target Date Retire R6	29,336		585,850
American Funds 2060 Target Date Retire R6	36,263		489,185
American Funds 2065 Target Date Retire R6	1,930		25,162
American Funds Euro Pacific Growth R6	1,297		63,576
American Funds New World R6	196		13,041
Cohen & Steers Real Estate Securities I	863		13,077
DFA Inflation – Protected Securities I	4,959		53,658
Dodge & Cox Stock CI I	854		184,178
Fidelity® 500 Index Institutional Prem	2,737		364,357
Fidelity® International Index Instl Prem	2,642		108,824
Fidelity® Mid Cap Index Instl Prem	9,353		242,437
Fidelity® Small Cap Index Instl Prem	4,677		101,499
Fidelity® US Bond Index Instl Prem	7,741		78,808
Invesco Discovery Mid Cap Growth R6	67		1,707
Metropolitan West Total Return Bd Plan	17,046		144,551
MFS® Growth Fund R6	205		27,408
MFS® Mid Cap Value R6	92		2,600
Undiscovered Managers Behavioral Val R6	6		442
			<u>18,784,707</u>
Common/Collective Trust Funds			
T. Rowe Price Stable Value Fund	1,514,555		<u>1,514,555</u>
*Notes Receivable from Participants			
Various self-amortizing loans with interest rates from 3.25% to 8.0%; maturity dates from 2022 to 2027			<u>394,922</u>
			<u><u>\$ 65,612,298</u></u>

* Indicates party-in-interest to the Plan

Note: Disclosure of mutual funds and common/collective trust funds accounts cost information is not required as these investment options are participant-directed.

Gemini Industries, Inc. Profit Sharing Plan

EIN 73-0743590 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2022

Identity	Description	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions						
*Gemini Industries, Inc.	Common stock	\$ 3,509,945	\$ -	\$ 3,509,945	\$ 3,509,945	\$ -

* Indicates party-in-interest to the Plan

Gemini Industries, Inc. Profit Sharing Plan

EIN 73-0743590 PN 001

Schedule H, Line 4j – Schedule of Reportable Transactions

Year Ended December 31, 2022

Identity	Description	Purchase Price	Selling Price	Cost of Asset	Current Value of Asset on Transaction Date	Net Gain (Loss)
Series of Transactions						
*Gemini Industries, Inc.	Common stock	\$ 3,509,945	\$ -	\$ 3,509,945	\$ 3,509,945	\$ -

* Indicates party-in-interest to the Plan

Gemini Industries, Inc. Profit Sharing Plan

EIN 73-0743590 PN 001

Schedule H, Line 4a – Schedule of Delinquent Participant Contributions

December 31, 2022

Participant Contributions Transferred Late to Plan	Contributions Corrected Outside VFCP	Total Fully Corrected Under VFCP
<u><u>\$ 67,538 *</u></u>	<u><u>\$ 33,251</u></u>	<u><u>\$ 34,287</u></u>

*Amounts represent late contributions made during the plan year ended December 31, 2021, with a portion of these being fully corrected under VFCP in 2022, as discussed in *Note 12*.

Gemini Industries, Inc. Profit Sharing Plan

EIN 73-0743590 PN 001

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

December 31, 2022

Identity of Issuer and Description	Shares	Cost	Current Value
Common Stock			
*Gemini Industries, Inc.	74,699	\$ 14,418,338	\$ 44,918,114
Mutual Funds			
AB Small Cap Growth Portfolio Fund Z	1,185		62,305
American Funds 2010 Target Date Retire R6	40,358		437,076
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American Funds 2035 Target Date Retire R6	258,854		4,022,591
American Funds 2040 Target Date Retire R6	199,993		3,201,889
American Funds 2045 Target Date Retire R6	59,314		967,410
American Funds 2050 Target Date Retire R6	70,538		1,123,667
American Funds 2055 Target Date Retire R6	29,336		585,850
American Funds 2060 Target Date Retire R6	36,263		489,185
American Funds 2065 Target Date Retire R6	1,930		25,162
American Funds Euro Pacific Growth R6	1,297		63,576
American Funds New World R6	196		13,041
Cohen & Steers Real Estate Securities I	863		13,077
DFA Inflation – Protected Securities I	4,959		53,658
Dodge & Cox Stock CI I	854		184,178
Fidelity® 500 Index Institutional Prem	2,737		364,357
Fidelity® International Index Instl Prem	2,642		108,824
Fidelity® Mid Cap Index Instl Prem	9,353		242,437
Fidelity® Small Cap Index Instl Prem	4,677		101,499
Fidelity® US Bond Index Instl Prem	7,741		78,808
Invesco Discovery Mid Cap Growth R6	67		1,707
Metropolitan West Total Return Bd Plan	17,046		144,551
MFS® Growth Fund R6	205		27,408
MFS® Mid Cap Value R6	92		2,600
Undiscovered Managers Behavioral Val R6	6		442
			<u>18,784,707</u>
Common/Collective Trust Funds			
T. Rowe Price Stable Value Fund	1,514,555		<u>1,514,555</u>
*Notes Receivable from Participants			
Various self-amortizing loans with interest rates from 3.25% to 8.0%; maturity dates from 2022 to 2027			<u>394,922</u>
			<u><u>\$ 65,612,298</u></u>

* Indicates party-in-interest to the Plan

Note: Disclosure of mutual funds and common/collective trust funds accounts cost information is not required as these investment options are participant-directed.