# Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

# Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

**2022**

**This Form is Open to Public Inspection**

## Part I Annual Report Identification Information

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

**A** This return/report is for:
- ☐ a multiemployer plan
- ☐ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan
- ☐ a DFE (specify) ____

**B** This return/report is:
- ☐ the first return/report
- ☐ the final return/report
- ☐ an amended return/report
- ☐ a short plan year return/report (less than 12 months)

**C** If the plan is a collectively-bargained plan, check here. . . . . ▶ ☐

**D** Check box if filing under:
- ☒ Form 5558
- ☐ automatic extension
- ☐ the DFVC program
- ☐ special extension (enter description)

**E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . ▶ ☐

## Part II Basic Plan Information—enter all requested information

**1a** Name of plan
QUALCOMM INCORPORATED EMPLOYEE SAVINGS AND RETIREMENT PLAN

**1b** Three-digit plan number (PN) ▶ 001

**1c** Effective date of plan 10/01/1986

**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)
QUALCOMM INCORPORATED

5775 MOREHOUSE DRIVE
SAN DIEGO, CA 92121

**2b** Employer Identification Number (EIN)
95-3685934

**2c** Plan Sponsor's telephone number
858-651-1322

**2d** Business code (see instructions)
517000

**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 | MELISSA REAL |
| | **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 [X] Same as Plan Sponsor | **3b** | Administrator's EIN |
| | | **3c** | Administrator's telephone number |
| **4** | If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: | **4b** | EIN |
| **a** | Sponsor's name | **4d** | PN |
| **c** | Plan Name | | |
| **5** | Total number of participants at the beginning of the plan year | **5** | 22493 |
| **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)** | 15049 |
| **a(2)** | Total number of active participants at the end of the plan year | **6a(2)** | 16200 |
| **b** | Retired or separated participants receiving benefits | **6b** | 81 |
| **c** | Other retired or separated participants entitled to future benefits | **6c** | 7730 |
| **d** | Subtotal. Add lines **6a(2)**, **6b**, and **6c** | **6d** | 24011 |
| **e** | Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | **6e** | 20 |
| **f** | Total. Add lines **6d** and **6e**. | **6f** | 24031 |
| **g** | Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | **6g** | 23090 |
| **h** | Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested | **6h** | 178 |
| **7** | Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | **7** | |

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

2E 2F 2G 2J 2K 2T 2R

**b** If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

| **9a** Plan funding arrangement (check all that apply) | | **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)** [X] | Trust | **(3)** [X] | Trust |
| **(4)** | General assets of the sponsor | **(4)** | General assets of the sponsor |

**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

- **(1)** [X] **R** (Retirement Plan Information)
- **(2)** [ ] **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- **(3)** [ ] **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

**b General Schedules**

- **(1)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [X] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

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

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

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

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

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

Receipt Confirmation Code_____

| SCHEDULE C (Form 5500) | Service Provider Information | OMB No. 1210-0110 |
|---|---|---|
| Department of the Treasury<br>Internal Revenue Service<br>Department of Labor<br>Employee Benefits Security Administration<br>Pension Benefit Guaranty Corporation | This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).<br>▶ **File as an attachment to Form 5500.** | **2022**<br>**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 | **B** Three-digit plan number (PN) ▶ |
|---|---|
| QUALCOMM INCORPORATED EMPLOYEE SAVINGS AND RETIREMENT PLAN | 001 |

| **C** Plan sponsor's name as shown on line 2a of Form 5500 | **D** Employer Identification Number (EIN) |
|---|---|
| QUALCOMM INCORPORATED | 95-3685934 |

## Part I Service Provider Information (see instructions)

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

### 1 Information on Persons Receiving Only Eligible Indirect Compensation

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).. . . . . [X] Yes [ ] No

**b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

GALLIARD CAPITAL MANAGEMENT, INC.

41-1813702

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

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

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

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

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

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

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

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

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

**(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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

| (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? |
|---|---|---|---|---|---|---|
| 37 60 64 65 71 | RECORDKEEPER | 918368 | Yes [X] No [ ] | Yes [X] No [ ] | 0 | Yes [X] No [ ] |

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

CALLAN LLC.

94-2192581

| (b) Service Code(s) | (c) Relationship to employer, employee organization, or person known to be a party-in-interest | (d) Enter direct compensation paid by the plan. If none, enter -0-. | (e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor) | (f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures? | (g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-. | (h) Did the service provider give you a formula instead of an amount or estimated amount? |
|---|---|---|---|---|---|---|
| 27 | INVESTMENT ADVISOR | 115875 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

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

DLA PIPER, LLP

52-0616490

| (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? |
|---|---|---|---|---|---|---|
| 29 | ATTORNEY/LEGAL | 25880 | Yes [ ] No [X] | Yes [ ] No [ ] | | Yes [ ] No [ ] |

## Part I Service Provider Information (continued)

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

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ABF SM CAP VAL R5 - SS&C GIDS, INC | 300 MADISON AVE<br>NEW YORK, NY 10017 | 0.04% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| INVESCO DIVERSIFIED DIVIDEND INVES | 11 GREENWAY PLAZA STE 100<br>HOUSTON, TX 77046 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| INVESCO GLOBAL REAL ESTATE INC FD | 11 GREENWAY PLAZA STE 100<br>HOUSTON, TX 77046 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| INVESCO STEELPATH MLP ALPHA A | 11 GREENWAY PLAZA STE 100<br>HOUSTON, TX 77046 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| INVESCO GOLD & SPEC MINERALS A | 11 GREENWAY PLAZA STE 100<br>HOUSTON, TX 77046 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR DIVERSIFYING STRATEGIES FUND C | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR EMERGING MULTI STYLE II CL I | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR DIVERSIFIED ARBITRAGE CLASS N | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR STYLE PREMIA ALTERNATIVE CL N | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AQR SMALL CAP MULTI STYLE FUND CL 1 GREENWICH PLAZA GREENWICH, CT 06830 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AQR LARGE CAP MULTI STYLE FD CL I 1 GREENWICH PLAZA GREENWICH, CT 06830 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AQR INTERNATIONAL MULTI STYLE FUND 1 GREENWICH PLAZA GREENWICH, CT 06830 | 0.12% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR RISK BALANCED COMMOD STRATEGY | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR RISK BALANCED COMMOD STRATEGY | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AQR MANAGED FUTURES FUND CL I | 1 GREENWICH PLAZA<br>GREENWICH, CT 06830 | 0.12% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| EDGEWOOD GROWTH FUND INSTL CL | 1 FREEDOM VALLEY DR<br>OAKS, PA 19456 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CHAMPLAIN MID CAP ADVISOR SHARE | ONE FREEDOM VALLEY DR<br>OAKS, PA 19456 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| KOPERNIK GLOBAL ALL CAP FUND INSTL | ONE FREEDOM VALLEY DR<br>OAKS, PA 19456 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ADV PREFERRED GOLD BULLION STRAT I 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ADVISORS PRFD QUANFDMANAGED INCOME 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| QUANTIFIED GOVT'T INC TACTICAL INV 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| QUANTIFIED TACTICAL SECTOR FUND IN | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ADVISORS PRFD QUANFDMARKET LEADERS | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| QUANTIFIED COMMON GROUND FD INVST | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| QUANTIFIED EVOLUTION PLUS INVST | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| QUANTIFIED TACTICAL FIXED INC INVS | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ADVISORS PRFD QUANFDALTER INVSTMNT | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ADVISORS PREFERRED QUANTIFIED STF | 1445 RESEARCH BLVD STE 530<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GQG PARTNERS EMERG MARKETS EQ INST | 1 FREEDOM VALLEY DR<br>OAKS, PA 19456 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GQG PARTNERS EMRGING MARKETS EQUIT | 1 FREEDOM VALLEY DR<br>OAKS, PA 19456 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| INVESCO INTL SMALL MID COMPANY A<br>11 GREENWAY PLAZA STE 100<br>HOUSTON, TX 77046 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALGER SMALL CAP FOCUS CLASS Z<br>600 PLAZA ONE 6TH FL<br>JERSEY CITY, NJ 07311 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALGER SMALL CAP GROWTH CL Z<br>600 PLAZA ONE 6TH FL<br>JERSEY CITY, NJ 07311 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ALGER SMALL CAP GROWTH FUND A | 600 PLAZA ONE 6TH FL<br>JERSEY CITY, NJ 07311 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ALGER SMALL CAP GROWTH INSTL FD CL | 600 PLAZA ONE 6TH FL<br>JERSITY CITY, NJ 07311 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AB SMALL CAP GROWTH PORT CLASS A | 8000 IH 10 W STE 1400 14TH FL<br>SAN ANTONIO, TX 78230 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| IMAN FUND RETAIL SHARES | 721 ENTERPRISE DR<br>OAKBROOK, IL 60523 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMANA MUTUAL FUND TRUST INCOME | 1300 NORTH STATE ST<br>BELLINGHAM, WA 98225 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMANA MUTUAL FUND TRUST GROWTH | 1300 NORTH STATE ST<br>BELLINGHAM, WA 98225 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMANA DEVELOPING WORLD FUND | 1300 NORTH STATE ST<br>BELLINGHAM, WA 98225 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMANA INCOME FUND INSTITUTIONAL | 1300 NORTH STATE ST<br>BELLINGHAM, WA 98225 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMANA GROWTH FUND INSTITUTIONAL | 1300 NORTH STATE ST<br>BELLINGHAM, WA 98225 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AMANA PARTICIPATION FD INVESTOR CL 1300 NORTH STATE ST BELLINGHAM, WA 98225 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AMANA PARTICIPATION FD INSTITUTION 1300 NORTH STATE ST BELLINGHAM, WA 98225 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AMERICAN AMCAP FUND F2 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN BALANCED FUND F2 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN BEACON ARK TRANS INNOVTN | 220 E LAS COLINAS BLVD STE 1200<br>IRVING, TX 75039 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMER BEACON SHAPIRO SMID CAP EQ IN | 220 E LAS COLINAS BLVD STE 1200<br>IRVING, TX 75039 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CENTURY GL REAL ESTATE IN | 4400 MAIN ST 1ST FL<br>KANSAS CITY, MO 64111 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CENTURY SML CAP VAL CLASS | 4400 MAIN ST 1ST FL<br>KANSAS CITY, MO 64111 | 0.07% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CEN FOCUSEDDYNAMIC GROWTH | 4400 MAIN ST 1ST FL<br>KANSAS CITY, MO 64111 | 0.35% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CENTURY UTILITIES INVESTO | 4400 MAIN ST 1ST FL<br>KANSAS CITY, MO 64111 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CENTURY SH DUR INFL PROT | 4400 MAIN ST 1ST FL<br>KANSAS CITY, MO 64111 | 0.05% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN GLOBAL BALANCED CL F2 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.12% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| AMERICAN MUTUAL FUNDCLASS F1<br>3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.37% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ARTISAN SMALL CAP FUND INVESTOR CL<br>875 E WISCONSIN AVE STE 800<br>MILWAUKEE, WI 53202 | 0.39% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ARTISAN GLOBAL DISCOVERY ADVISOR C<br>875 E WISCONSIN AVE STE 800<br>MILWAUKEE, WI 53202 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ARTISAN THEMATIC FD INVESTOR CLASS 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202 | 0.39% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ARTISAN DEVELOPING WORLD FD INVEST 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202 | 0.39% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ARTISAN INTL VALUE FUND ADVISOR 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ARTISAN GLOBAL OPPORTUNITIES INV | 875 E WISCONSIN AVE STE 800<br>MILWAUKEE, WI 53202 | 0.39% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ARTISAN GLOBAL VALUE FD INVT SHARE | 875 E WISCONSIN AVE STE 800<br>MILWAUKEE, WI 53202 | 0.39% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AZZAD ETHICHAL MID CAP FUND CL A | 8000 TOWN CENTRE DR STE 400<br>BROADVIEW HEIGHTS, OH 44147-4031 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BNY MELLON SMALL MIDCAP GROWTH A | 144 GLENN CURTISS BLVD 8TH FL<br>UNIONDALE, NY 11556 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BNY MELLON NATURAL RESOURCES A | 144 GLENN CURTISS BLVD 8TH FL<br>UNIONDALE, NY 11556 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BNY MELLON GLOBAL REAL RETURN I | 144 GLENN CURTISS BLVD 8TH FL<br>UNIONDALE, NY 11556 | 0.09% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BAIRD AGGREGATE BOND FUND INSTL | 777 E. WISCONSIN AVE 18TH FL<br>MILWAUKEE, WI 53202 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON SMALL CAP FD | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON OPPORTUNITY FUND | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON FIFTH AVENUE GROWTH FUND | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON PARTNERS FUND | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON PARTNERS FUND INSTL CLASS | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON REAL ESTATE FUND RETAIL | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON GLOBAL ADVANTAGE FD RETAIL | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BARON EMERGING MARKETS FUND RETAIL | 767 5TH AVE 49TH FL<br>NEW YORK, NY 10153 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| BERKSHIRE FOCUS FUND<br>475 MILAN DR STE 103<br>SAN JOSE, CA 95134 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| BLACKROCK TACTICAL OPPORTUNITIES I<br>40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.08% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| BLACKROCK TECHNOLOGYOPPORTUNITIES<br>40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BLACKROCK HEALTH SCIENCES OPP PRT | 40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.08% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BLACKROCK GLOBAL ALLOCATION CL A | 40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BLACKROCK STRATEGIC INCOME OPPRTSI | 40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BLACKROCK STRATEGIC INC OPP PORT C | 40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BLACKROCK SYSTEMATICMULTI STRATEGY | 40 EAST 52ND ST<br>NEW YORK, NY 10022 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WILLIAM BLAIR SMALL MID CAP GROWTH | 222 WEST ADAMS ST 12TH FL<br>CHICAGO, IL 60606 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WILLIAM BLAIR LARGE CAP GROWTH FD | 222 WEST ADAMS ST 12TH FL<br>CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BNY MELLON SMALLCAP STOCK INDEX IN | 144 GLENN CURTISS BLVD 8TH FL<br>UNIONDALE, NY 11556 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BROWN ADVISORY SUSTAIN GROWTH ADV | 777 E. WISCONSIN AVE 4TH FL<br>MILWAUKEE, WI 53202 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BUFFALO DISCOVERY FUND | 615 E. MICHIGAN ST<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BUFFALO INTERNATIONAL FUND | 615 E. MICHIGAN ST<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CALAMOS MARKET NEUTRAL INCOME CL I | 2020 CALAMOS COURT<br>NAPERVILLE, IL 60563 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN CAPITAL WORLD GR & INC CL | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FULLER & THALER BEHV SMALL CAP EQT | 411 BOREL AVE STE 300<br>SAN MATEO, CA 94402 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FULLER & THALER BEHVSMALL CAP EQTY | 411 BOREL AVE STE 300<br>SAN MATEO, CA 94402 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CARILLON CLARIVEST INTERNATIONAL S | P. O. BOX 33022<br>ST PETERSBURG, FL 33733-8022 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CARILLON SCOUT MID CAP FUND CL I | P. O. BOX 33022<br>ST PETERSBURG, FL 33733-8022 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| COHEN & STEERS REAL ESTATE SECURIT | 280 PARK AVE 10TH FL<br>NEW YORK, NY 10017 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COHEN & STEERS PREF SECURITIES INC 280 PARK AVE 10TH FL NEW YORK, NY 10017 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COHEN & STEERS REAL ASSET FUND CL 280 PARK AVE 10TH FL NEW YORK, NY 10017 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COHEN & STEERS MLP AND ENERGY OPPO 280 PARK AVE 10TH FL NEW YORK, NY 10017 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COLUMBIA THERMOSTAT CL A<br>225 FRANKLIN ST BX25 10320<br>BOSTON, MA 02110 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COLUMBIA GLOBAL TECHGROWTH CL A<br>225 FRANKLIN ST BX25 10320<br>BOSTON, MA 02110 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COLUMBIA SMALL CAP GROWTH FD CL A<br>225 FRANKLIN ST BX25 10320<br>BOSTON, MA 02110 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| COLUMBIA SELIGMAN TECH AND INFO CL | 225 FRANKLIN ST BX25 10320<br>BOSTON, MA 02110 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CONESTOGA SMALL CAP INVESTOR CLASS | 225 PICTORIA DR STE 450<br>CINCINNATI, OH 45246 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CREDIT SUISSE MULTI ALTERNATIVE ST | ONE MADISON AVE 10TH FL<br>NEW YORK, NY 10010 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US SOCIAL CORE EQUITY 2 PORTFO | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA EMERGING MARKETS SOCIAL CORE E | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INTERNATIONAL CORE EQUITY | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US VECTOR EQUITY PRTF INSTL CL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US CORE EQUITY I | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA EMERGING MRKTS CORE EQU PORTF | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US MICRO CAP PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US TARGETED VALUE PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA ONE YEAR FIXED INCOME PRTF INS | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA EMERGING MARKETS SMALL CAP | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INTERNATIONAL SMALL COMPANY PO | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US SMALL CAP VALUE PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US LARGE CAP VALUE PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA REAL ESTATE SEC PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US SMALL CAP PORTFOLIO INSTL C | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA FIVE YEAR GLBL FIXED INC PRTF | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA EMERGING MARKETS TARGET VAL PO | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA US HIGH RELATIVE PROFIT PORT I | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INVESTMENT GRADE PORTFOLIO INS | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INTERNATIONAL VECTOR EQUITY PO | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DELAWARE EMERGING MARKETS CLASS A | 2005 MARKET ST PHILADELPHIA, PA 19103 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INTERNATIONAL SOCIAL CORE EQ I | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DFA INTERNATIONAL VALUE PRTF INSTL | 6300 BEE CAVES ROAD BUILDING ONE AUSTIN, TX 78746 | 0.02% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DIREXION MONTHLY NASDAQ100BULL2X I | 155 SEAPORT BOULEVARD STE P8 BOSTON, MA 02210 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| DOUBLELINE TOTAL RETURN BOND FD CL 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202 | 0.06% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| DOUBLELINE SHILLER ENHANCED CAP CL 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202 | 0.06% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| DRIEHAUS EVENT DRIVEN FUND 25 EAST ERIE ST CHICAGO, IL 60611 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DRIEHAUS EMERGING MARKETS SM CAP G | 25 EAST ERIE ST<br>CHICAGO, IL 60611 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PARAMETRIC COMMODITYSTRATEGIC CL A | TWO INTERNATIONAL PLACE<br>BOSTON, MA 02110 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| EATON VANCE HIGH INCOPPORTUNITIES | TWO INTERNATIONAL PLACE<br>BOSTON, MA 02110 | $16.00 |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| EATON VANCE FLOATINGRATE ADVANTAGE | TWO INTERNATIONAL PLACE<br>BOSTON, MA 02110 | $16.00 |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FPA CRESCENT FUND | 11601 WILSHIRE BLVD STE 1200<br>LOS ANGELES, CA 90025 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FMI LARGE CAP FUND | 777 EAST WISCONSIN AVE<br>MILWAUKEE, WI 53202 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| FMI INTERNATIONAL<br>777 EAST WISCONSIN AVE<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| FMI COMMON STOCK FUND<br>777 EAST WISCONSIN AVE<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| FEDERATED HERMES KAUFMANN SM CAP A<br>4000 ERICSSON DR<br>WARRENDALE, PA 15086-7515 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALPS CORECOMM MNGMNTCOMPT COMM SM<br>1290 BROADWAY STE 1100<br>DENVER, CO 80203 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALPS CORECOMM MGMT COMP COMM STRT<br>1290 BROADWAY STE 1100<br>DENVER, CO 80203 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| FIRST EAGLE OVERSEAS CLASS I<br>1345 AVE OF THE AMERICAS 48TH FLR<br>NEW YORK, NY 10105 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FIRST EAGLE GOLD CLASS A | 1345 AVE OF THE AMERICAS 48TH FLR<br>NEW YORK, NY 10105 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FIRSTHAND TECHNOLOGYOPPORTUNITIES | 150 ALMADEN BLVD. STE 1250<br>SAN JOSE, CA 95113 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FRANKLIN DYNATECH FUND A | 100 FOUNTAIN PARKWAY<br>ST. PETERSBURG, FL 33716 | $16.00 |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| FRANKLIN FOCUSED GROWTH FUND CL A | 100 FOUNTAIN PARKWAY<br>ST. PETERSBURG, FL 33716 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN FUNDAMENTALINVESTORS CL F | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOTHAM ENHANCED RETURN FUND INSTL | 535 MADISON AVE 30TH FLR<br>NEW YORK, NY 10022 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GABELLI SMALL CAP GROWTH AAA | 401 THEODORE FREMD. AVE.<br>RYE, NY 10580 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOLDMAN SACHS EMERGING MARKETS A | 71 S. WACKER DR 4TH FL<br>CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOLDMAN SACHS MANGD FUTURES STRATE | 71 S. WACKER DR 4TH FL<br>CHICAGO, IL 60606 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOLDMAN SACHS GQG PARTNERS INTL OP | 71 S. WACKER DR 4TH FL<br>CHICAGO, IL 60606 | 0.17% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOLDMAN SACHS GQG PART INTERNTL OP | 71 S. WACKER DR 4TH FL<br>CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN GROWTH FUNDOF AMERICA CL | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GUGGENHEIM MACRO OPPORTUNTITIES IN | 9601 BLACKWELL RD STE 500<br>ROCKVILLE, MD 20850 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GUGGENHEIM CORE BOND FUND P | 9601 BLACKWELL RD STE 500<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JOHN HANCOCK REGIONAL BANK CL A | 601 CONGRESS ST. 9TH FL.<br>BOSTON, MA 02210 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| HARBOR INTL INV | 111 S. WACKER DR 34TH FL<br>CHICAGO, IL 60606 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| HARDING LOEVNER INTL EQUITY PORT I | PO BOX 4766<br>CHICAGO, IL 60680 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OAKMARK FUND INVESTOR CLASS | 111 SOUTH WACKER DR.<br>CHICAGO, IL 60606 | 0.35% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OAKMARK SELECT INVESTOR CL | 111 SOUTH WACKER DR.<br>CHICAGO, IL 60606 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OAKMARK INTL ADVISOR FUND | 111 SOUTH WACKER DR.<br>CHICAGO, IL 60606 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OAKMARK GLOBAL SELECT FD INVESTOR | 111 SOUTH WACKER DR.<br>CHICAGO, IL 60606 | 0.35% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| HENNESSY FOCUS FUND INVESTOR CLASS | 7250 REDWOOD BLVD. STE 200<br>NOVATO, CA 94945 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| HUSSMAN STRATEGIC GROWTH | 225 PICTORIA DR STE 450<br>CINCINNATI, OH 45246 | $12.00 |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| THE INTERNET FUND | 470 PARK AVE SOUTH<br>NEW YORK, NY 10016 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN INVESTMENT CO OF AMERICA | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.37% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN INVESTMENT CO. OF AMERICA | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WCM FOCUSED INTL GROWTH FUND INSTL | 2220 EAST ROUTE 66 STE 226<br>GLENDORA, CA 91740 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| EUROPAC INTL VALUE FUND CLASS A | LOTS 81 82 ST C STE 204<br>DORADO, PR 00646 | 0.08% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RIVERBRIDGE GROWTH FUND INVESTOR | 2220 E. ROUTE 66 STE 226<br>GLENDORA, CA 91740 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PALMER SQUARE INCOME PLUS INSTL | 2220 EAST ROUTE 66 STE 226<br>GLENDORA, CA 91740 | 0.12% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| SILVERPEPPER COMM BASED GLBL MACRO | 570 OAKWOOD AVE.<br>LAKE FOREST, IL 60045 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WCM FOCUSED GLOBAL GROWTH INVESTOR | 2220 EAST ROUTE 66 STE 226<br>GLENDORA, CA 91740 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| DELAWARE IVY MID CAPGROWTH CL A | 2005 MARKET ST<br>PHILADELPHIA, PA 19103 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN HEDGED EQUITY CLASS I | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN SHORT DURATION CORE PLUS | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JACOB MICRO CAP GROWTH INV CL | 727 2ND ST STE 106<br>HERMOSA BEACH, CA 90254 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JANUS HENDERSON VENTURE T | 151 DETROIT ST.<br>DENVER, CO 80206 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JANUS HENDERSON GLOB TECH & INNOV | 151 DETROIT ST.<br>DENVER, CO 80206 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JANUS HENDERSON BALANCED T | 151 DETROIT ST.<br>DENVER, CO 80206 | 0.35% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| JANUS HENDERSON GL REAL ESTATE T 151 DETROIT ST. DENVER, CO 80206 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| JANUS HENDERSON GLBLEQUITY INCOME 151 DETROIT ST. DENVER, CO 80206 | $14.00 |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| JANUS HENDERSON DEVELOPED WORLD BD 151 DETROIT ST. DENVER, CO 80206 | $14.00 |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JOHN HANCOCK DISCIPLINED VALUE MID | 601 CONGRESS ST. 9TH FL.<br>BOSTON, MA 02210 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN EMERGING MKTS EQUITY CLAS | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN SMALL CAP EQUITY FND CLAS | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN LARGE CAP GROWTH CLASS A | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| JPMORGAN DIVERS MID CAP GROWTH CLA | 1111 POLARIS PARKWAY<br>COLUMBUS, OH 43240 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| KINETICS PARADIGM FUND | 470 PARK AVE SOUTH<br>NEW YORK, NY 10016 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| KINETICS SMALL CAP OPPORTUNITIES | 470 PARK AVE SOUTH<br>NEW YORK, NY 10016 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| KINETICS MARKET OPPORTUNITIES FD | 470 PARK AVE SOUTH<br>NEW YORK, NY 10016 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| LAZARD GLOBAL LISTEDINFRASTRUCTURE | 30 ROCKEFELLER PLAZA 57TH FL.<br>NEW YORK, NY 10112 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LAZARD GLOBAL LISTEDINFRASTRUCTE I<br>30 ROCKEFELLER PLAZA 57TH FL.<br>NEW YORK, NY 10112 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LAZARD INTL STRAT EQUITY PORT OPEN<br>30 ROCKEFELLER PLAZA 57TH FL.<br>NEW YORK, NY 10112 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| CLEARBRIDGE SELECT FUND CL A<br>100 FOUNTAIN PARKWAY<br>ST. PETERSBURG, FL 33716 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LONGLEAF PARTNERS<br>6410 POPLAR AVE STE 900<br>MEMPHIS, TN 38119 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LOOMIS SAYLES BOND RETAIL SHARES<br>399 BOYLSTON ST 8TH FL<br>BOSTON, MA 02116 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LOOMIS SAYLES BOND INSTL<br>399 BOYLSTON ST 8TH FL<br>BOSTON, MA 02116 | 0.20% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| LORD ABBETT GROWTH LEADERS FUND CL | 90 HUDSON ST 10TH FL<br>JERSEY CITY, NJ 07302 | 0.45% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| LORD ABBETT SHORT DURATION INCOME | 90 HUDSON ST 10TH FL<br>JERSEY CITY, NJ 07302 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| LORD ABBETT DEVELOP GROWTH CLASS A | 90 HUDSON ST 10TH FL<br>JERSEY CITY, NJ 07302 | 0.45% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LORD ABBETT MICRO CAP GROWTH FUND 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302 | 0.45% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MFS MID CAP VALUE FUND CL I 111 HUNTINGTON AVE BOSTON, MA 02199-7632 | 0.08% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MFS INTERNATIONAL DIVERSIFICATION 111 HUNTINGTON AVE BOSTON, MA 02199-7632 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MFS INTERNATIONAL DIVERSIFICATION | 111 HUNTINGTON AVE<br>BOSTON, MA 02199-7632 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MFS GLOBAL REAL ESTATE CL A | 111 HUNTINGTON AVE<br>BOSTON, MA 02199-7632 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MFS TECHNOLOGY CLASSA | 111 HUNTINGTON AVE<br>BOSTON, MA 02199-7632 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MFS RESEARCH INTL FD CL I<br>111 HUNTINGTON AVE<br>BOSTON, MA 02199-7632 | 0.08% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ATAC ROTATION FUND INVESTOR CL<br>615 E. MICHIGAN ST.<br>MILWAUKEE, WI 53202 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| JACKSON SQUARE SMID CAP GROWTH FD<br>1 LETTERMAN DR<br>SAN FRANCISCO, CA 94129 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| SPYGLASS GROWTH FUND INSTL | ONE LETTERMAN DR<br>SAN FRANCISCO, CA 94129 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MATTHEWS CHINA DIV FUND INVESTOR C | 4 EMBARCADERO CENTER STE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MATTHEWS CHINA SMALLCOMPANIES INVE | 4 EMBARCADERO CENTER STE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MATTHEWS PACIFIC TIGER FUND | 4 EMBARCADERO CENTER STE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MATTHEWS INDIA FUND | 4 EMBARCADERO CENTER STE 550<br>SAN FRANCISCO, CA 94111 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MERGER FUND CLASS A | 100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| METROPOLITAN WEST TOT RETURN BOND | 865 S FIGUEROA ST 1400<br>LOS ANGELES, CA 90017 | 0.35% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| METROPOLITAN WEST TOTAL RETURN CLA | 865 S FIGUEROA ST 1400<br>LOS ANGELES, CA 90017 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| METROPOLITAN WEST HIGH YIELD BOND | 865 S FIGUEROA ST 1400<br>LOS ANGELES, CA 90017 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MORGAN STANLEY DISCOVERY PORT CL I 522 FIFTH AVE 4TH FL NEW YORK, NY 10036 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MORGAN STANLEY DISCOVERY PORT CL A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| MORGAN STANLEY GROWTH PORTFOLIO A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STA INST INC.INCEPTION PORT | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STANLEY GROWTH PORTFOLIO I | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STANLEY INSIGHT A | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STANLEY INSIGHT I | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STANLEY INTL ADVANTAGE CL A | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MORGAN STANLEY GLOBAL OPPORTUNITY | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MSIF ASIA OPPORTUNITY CL A | 522 FIFTH AVE 4TH FL<br>NEW YORK, NY 10036 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RATIONAL DYNAMIC BRANDS FD INSTL C | 80 ARKAY DR STE 110<br>HAUPPAUGE, NY 11788 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| EVENTIDE GILEAD FUND CLASS N | 80 ARKAY STE 110<br>HAUPPAUGE, NY 11788 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ALPHASIMPLEX MANAGEDFUTURE STRAT C | 399 BOYLSTON ST 8TH FL<br>BOSTON, MA 02116 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| NEEDHAM SMALL CAP GROWTH | 445 PARK AVE 15TH FL<br>NEW YORK, NY 10022 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| NEUBERGER BERMAN LARGE CAP VALUE I | 1290 AVE OF THE AMERICAS 22ND FL<br>NEW YORK, NY 10104 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| NEUBERGER BERMAN REAL ESTATE CL I | 1290 AVE OF THE AMERICAS 22ND FL<br>NEW YORK, NY 10104 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN NEW PERSPECTIVE CLASS F1 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.37% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN NEW WORLD CLASS F1 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.37% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| DYNAMIC US OPPOR FD CL N<br>13215 BEE CAVE PKWY<br>AUSTIN, TX 78738 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| GRANT PARK MULTI ALTSTRATIGIES FD<br>555 WEST JACKSON BLVD. STE 600<br>CHICAGO, IL 60661 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| LONGBOARD ALT GROWTHFUND CLASS I<br>P.O. BOX 97730<br>PHOENIX, AZ 85060 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| HCM INCOME PLUS FUNDINVESTOR 1145 HEMBREE ROAD ROSWELL, GA 30076 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ABSOLUTE CAPITAL DEFENDER FD INVES 101 PENNSYLVANIA BLVD PITTSBURGH, PA 15228 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| HCM DIVIDEND SECTOR PLUS FUND INVE 1145 HEMBREE ROAD ROSWELL, GA 30076 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| COUNTERPOINT TACTICAL INCOME CL I<br>12760 HIGH BLUFF DR STE 280<br>SAN DIEGO, CA 92130 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| HCM TACTICAL GROWTH FUND INVESTOR<br>1145 HEMBREE ROAD<br>ROSWELL, GA 30076 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ANCHOR RISK MANAGED EQUITY STRAT I<br>15 ENTERPRISE<br>ALISO VIEJO, CA 92656 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG MFS AGGRESSIVE GROWTH STRATEGY | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG JP MORGAN TACTICAGGRESSIVE STR | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG BNY MELLON DIVERSIFIER STRAT R | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG MEEDER TACTICAL STRATEGY FUND | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG JP MORGAN TACTICMODERATE STRAT | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG ACTIVE CORE BOND STRATEGY FUND | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG INVESCO THEMATIC ESG STRATEGY 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG JANUS HENDERSON BALANCED STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG FIDELITY INST AMBOND ESG STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG TACTICAL INCOME STRATEGY CL R 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG EQUITY INDEX FOCUSED STRATEGY 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PFG SECTOR EQUITY BUS CYCLE STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG BR EQUITY ESG STRATEGY CL R | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PFG AMERICAN FUNDS GROWTH STRAT CL | 777 108TH AVE NE STE 2100<br>BELLEVUE, WA 98004 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| NUVEEN CREDIT INCOMEFUND CLASS A | 333 WEST WACKER DR<br>CHICAGO, IL 60606 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OCM GOLD FUND ADVISOR CLASS SHARES | 235 W. GALENA ST<br>MILWAUKEE, WI 53212 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RED OAK TECHNOLOGY SELECT | 225 PICTORIA DR STE 450<br>CINCINNATI, OH 45246 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| OBERWEIS INTL OPPORTUNITIES FUND | 3333 WARRENVILLE RD STE. 500<br>LISLE, IL 60532 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIMCO TOTAL RETURN CLASS A | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIMCO INTL BD FD U SDOLLAR HEDGED | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIMCO EMERGING MARKETS BOND FUND A | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PARNASSUS VALUE EQUITY INVESTOR | 1 MARKET ST STEUART TOWER STE 1600<br>SAN FRANCISCO, CA 94105 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PARNASSUS MID CAP | 1 MARKET ST STEUART TOWER STE 1600<br>SAN FRANCISCO, CA 94105 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PARNASSUS CORE EQUITY INVESTOR | 1 MARKET ST STEUART TOWER STE 1600<br>SAN FRANCISCO, CA 94105 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PARNASSUS CORE EQUITY INSTL | 1 MARKET ST STEUART TOWER STE 1600<br>SAN FRANCISCO, CA 94105 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| IMPAX INTERNATIONAL SUSTAIN ECON I | 1290 BROADWAY STE 1100<br>DENVER, CO 80203 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PERMANENT PORTFOLIO | 600 MONTGOMERY ST STE 4100<br>SAN FRANCISCO, CA 94111-2702 | 0.38% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PIMCO INTL BOND FUND (UNHEDGED) A<br>1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PIMCO INCOME FUND CL A<br>1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| PIMCO TRENDS MANAGEDFUTURES STRATE<br>1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIMCO RAE US SMALL FUND A | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIMCO FLEXIBLE CREDIT INC FD INSTL | 1633 BROADWAY<br>NEW YORK, NY 10019 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PIONEER FUNDAMENTAL GROWTH FD CL Y | 60 STATE ST 17TH FL.<br>BOSTON, MA 02109 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE COMM & TECHNOLOGY INV | 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE GROWTH STOCK | 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE HEALTH SCIENCES | 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE US HIGHYIELD FD INVES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE GLOBAL TECHNOLOGY 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE GLBL MULTI SECTOR BON 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE RET 2020 FUND<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE RET 2030 FD<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE RETIREMENT 2035 FUND<br>4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PRIMECAP ODYSSEY GROWTH FUND | 2020 E. FINANCIAL WAY STE 100<br>GLENDORA, CA 91741 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PRIMECAP ODYSSEY AGGRESSIVE GRWTH | 2020 E. FINANCIAL WAY STE 100<br>GLENDORA, CA 91741 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AKRE FOCUS FUND RETAIL | 777 E. WISCONSIN AVE. 4TH FL<br>MILWAUKEE, WI 53202 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AKRE FOCUS FUND INSTL | 777 E. WISCONSIN AVE. 4TH FL<br>MILWAUKEE, WI 53202 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| HEALTH CARE ULTRA SECTOR PRO FD IN | 7501 WISCONSIN AVE STE 1000 E TOWE<br>BETHESDA, MD 20814 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BULL PRO FUND INVESTORS SHARES | 7501 WISCONSIN AVE STE 1000 E TOWE<br>BETHESDA, MD 20814 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ULTRA SMALL CAP PROFUND INVESTOR S | 7501 WISCONSIN AVE STE 1000 E TOWE<br>BETHESDA, MD 20814 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BITCOIN STRATEGY FD INVESTOR | 7501 WISCONSIN AVE STE 1000 E TOWE<br>BETHESDA, MD 20814 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PGIM JEN EMRG MRKTS EQUITY OPP CL | 655 BROAD ST<br>NEWARK, NJ 07102 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PGIM HIGH YIELD CL Z | 655 BROAD ST<br>NEWARK, NJ 07102 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PUTNAM LARGE CAP VAL FUND CL Y | 1 POST OFFICE SQ MAILZONE G3C<br>BOSTON, MA 02109 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PUTNAM GLOBAL TECHNOLOGY FUND CL A | 1 POST OFFICE SQ MAILZONE G3C<br>BOSTON, MA 02109 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PUTNAM GROWTH OPPORTUNITIES CL A | 1 POST OFFICE SQ MAILZONE G3C<br>BOSTON, MA 02109 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| BOSTON PARTNERS ALL CAP VALUE INVS | 223 WILMINGTON W CHESTER PIKE 216<br>CHADDS FORD, PA 19317 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| CAMPBELL SYSTEMATIC MACRO FUND CL | 47 HULFISH ST STE 510<br>BALTIMORE, MD 21209 | 0.10% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ABBEY CAPITAL MULTI ASSET FUND CLA | 1 2 CAVENDISH ROW<br>DUBLIN, IE 1 IE | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RMB MENDON FINANCIAL SRVC CL C | 1251 AVE OF THE AMERICAS 8TH FL ST<br>NEW YORK, NY 10020 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE DIVIDEND GROWTH | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE FINANCIAL SERVICES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE U.S EQUITY RESEARCH F 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE BLUE CHIP GROWTH INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE MID CAP GROWTH | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE GLOBAL GR STOCK INVES | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE GLOBAL STOCK | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE SHORT TERM BOND 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE SMALL CAP VALUE FUND 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE US TREALONG TERM INDE 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE MID CAP VALUE 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE DIVERSDMID CAP GROWTH 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| T ROWE PRICE INFLATION PROT BD FD 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117 | 0.15% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE QM US SML CAP GRWTH E | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RYDEX NASDAQ 100 2X STRATEGY CL H | 9601 BLACKWELL RD STE 500<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RYDEX NASDAQ 100 INV CLASS | 9601 BLACKWELL RD STE 500<br>ROCKVILLE, MD 20850 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| RYDEX MONTHLY REBAL NASDAQ 100 2X | 9601 BLACKWELL RD STE 500<br>ROCKVILLE, MD 20850 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| ICON NATURAL RES AND INFRA INVESTO | P.O. BOX 87<br>DENVER, CO 80201-0087 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| SHELTON NASDAQ 100 INDEX INVESTOR | P.O. BOX 87<br>DENVER, CO 80201-0087 | 0.12% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN SMALLCAP WORLD CLASS F1 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.37% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| AMERICAN SMALLCAP WORLD FUND CL F2 | 3500 WISEMAN BLVD<br>SAN ANTONIO, TX 78251-4321 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| SPROTT GOLD EQUITY FUND INVESTOR | 200 BAY ST STE 2600<br>TORONTO, CA M5J 2J1 CA | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| TCW EMERGING MARKETS INCOME CL N<br>865 S FIGUERA ST 22ND FL<br>LOS ANGELES, CA 90017 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| TCW EMERGING MKTS INCOME CL I<br>865 S FIGUERA ST 22ND FL<br>LOS ANGELES, CA 90017 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| TCW GLOBAL REAL ESTATE CLASS N<br>865 S FIGUERA ST 22ND FL<br>LOS ANGELES, CA 90017 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE FLOATING RATE INVEST | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| T ROWE PRICE GLOBAL REAL ESTATE FU | 4515 PAINTERS MILL RD<br>OWINGS MILLS, MD 21117 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| THOMPSON BOND FUND | 1255 FOURIER DR STE 200<br>MADISON, WI 53717 | 0.25% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| THORNBURG LTD TERM INCOME CLASS I | 2300 NORTH RIDGETOP RD<br>SANTA FE, NM 87506 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| THRIVENT MID CAP STOCK FUND CL S | 4321 N. BALLARD ROAD<br>APPLETON, WI 54919-0001 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| TRANSAMERICA CAPITAL GROWTH CL A | 4333 EDGEWOOD RD NE<br>CEDAR RAPIDS, IA 52499 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| PERFORMANCE TRUST STRATEGIC BOND F | 500 WEST MADISON STE 470<br>CHICAGO, IL 60661 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| MAIRS & POWER SMALL CAP FUND | 777 E WISCONSIN AVE FL 4<br>MILWAUKEE, WI 53202 | 0.12% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| TWEEDY BROWNE INTERNATL VALUE FUND | ONE STATION PLACE 5TH FL<br>STAMFORD, CT 06902 | $25.00 |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| USAA INTERMEDIATE TERM BOND RETAIL | 4900 TIEDEMAN RD 4TH FL<br>BROOKLYN, OH 44114 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| THE APPLESEED FUND | 161 NORTH CLARK ST. STE 2200<br>CHICAGO, IL 60601 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| GOLD AND PRECIOUS METALS FUND | 3 CANAL PLAZA STE 600<br>PORTLAND, ME 04101 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VAN ECK CM COMMODITYINDEX FUND A | 666 3RD AVE 9TH FL<br>NEW YORK, NY 10017 | 0.38% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VICTORY SYCAMORE ESTABLISHED VALUE | 4900 TIEDEMAN RD 4TH FL<br>BROOKLYN, OH 44114 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VICTORY GLOBAL ENERGY TRANSITION A | 4900 TIEDEMAN RD 4TH FL<br>BROOKLYN, OH 44114 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VIRTUS KAR SMALL CAP GROWTH CL A | 100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VIRTUS DUFF & PHELPSGLBL REAL EST | 100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| VIRTUS NEWFLEET MLT SECTOR SH TERM | 100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| VIRTUS ZEVENBERGEN INNOVATIVE GR S<br>100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| VIRTUS CONVERTIBLE FUND A<br>100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WASATCH SMALL CAP GROWTH<br>505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WASATCH CORE GROWTH<br>505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WASATCH ULTRA GROWTH<br>505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WASATCH MICROCAP<br>505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WASATCH MICRO CAP FUND INSTL CL | 505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.10% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WASATCH CORE GROWTH INSTITUTIONAL | 505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|---|
| WASATCH EMERGING INDIA FUND | 505 WAKARA WAY STE 300<br>SALT LAKE CITY, UT 84108 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WEITZ VALUE<br>1125 SOUTH 103RD ST<br>OMAHA, NE 68124 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALLSPRING PRMIER LRGCOMPANY GRTH F<br>525 MARKET ST MAC A0103 122<br>SAN FRANCISCO, CA 94105 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| ALLSPRING ABSOLUTE RETURN FD A<br>525 MARKET ST MAC A0103 122<br>SAN FRANCISCO, CA 94105 | 0.40% |

**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 |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| VIRTUS WESTCHESTER EVENT DRIVEN I<br>100 SUMMIT LAKE DR 201<br>GREENFIELD, MA 01301 | 0.15% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| WILLIAM BLAIR INTNATLEADERS FUND C<br>222 WEST ADAMS ST 12TH FL<br>CHICAGO, IL 60606 | 0.40% |

| **(a)** Enter service provider name as it appears on line 2 | **(b)** Service Codes (see instructions) | **(c)** Enter amount of indirect compensation |
|---|---|---|
| FIDELITY INVESTMENTS INSTITUTIONAL | 60 | 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. |
|---|---|
| CBOE VEST US LARGE CAP 20% BUFFER<br>8730 STONY POINT PKWY STE 205<br>RICHMOND, VA 23235 | 0.40% |

## 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: PRICEWATERHOUSECOOPERS, LLC
**b** EIN: 13-4008324
**c** Position: AUDITOR
**d** Address: 601 S. FIGUEROA ST.
SUITE 900
LOS ANGELES, CA 90017
**e** Telephone: 310-435-6722

Explanation: QUALCOMM TERMINATED PWC AND SELECTED MOSS ADAMS AS A RESULT OF A VENDOR RFP THAT WAS CONDUCTED.

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

# SCHEDULE D (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

## DFE/Participating Plan Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).

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

OMB No. 1210-0110

**2022**

**This Form is Open to Public Inspection.**

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

**A** Name of plan
QUALCOMM INCORPORATED EMPLOYEE SAVINGS AND RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan or DFE sponsor's name as shown on line 2a of Form 5500
QUALCOMM INCORPORATED

**D** Employer Identification Number (EIN)
95-3685934

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

**a** Name of MTIA, CCT, PSA, or 103-12 IE: METWEST TOT RTN BD B

**b** Name of sponsor of entity listed in (a): SEI TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 47-2418714-005 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2070

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 88-6095930-001 | C | 292324 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2050

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735976-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: WF/BLACKROCK ST INVESTMENT FUND S

**b** Name of sponsor of entity listed in (a): WELLS FARGO BANK, N.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) |
|---|---|---|
| 41-6292499-001 | C | 16936869 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FID CONTRA POOL CL 3

**b** Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-3022712-133 | C | 725571218 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2025

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735963-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2030

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735964-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: FID OTC POOL CLASS 3

**b** Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 04-3022712-143 | C | 718235959 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2055

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735978-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2060

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 45-3799736-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2015

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735891-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2020

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735899-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2035

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735965-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET INC

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735883-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2045

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735972-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2040

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 90-0735971-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2065

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 82-6204383-001 | C | 0 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2020

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 47-6935530-001 | C | 38907092 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2055

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 47-6948719-001 | C | 99533431 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: AB SMALL CAP VAL II

**b** Name of sponsor of entity listed in (a): GLOBAL TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 27-6334452-003 | C | 227249831 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2060

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 47-6948754-001 | C | 59835515 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2065

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 82-6200492-001 | C | 13472646 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2050

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 47-6944390-001 | C | 128269081 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANG INST 500 IDX TR

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 81-6327546-001 | C | 993199747 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANG INST TOT INTL

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 81-6317280-001 | C | 47497793 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANG INST TOT BD MKT

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 81-6321044-001 | C | 72450307 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANG IS EXT MKT IDX

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN | **d** Entity code | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
|---|---|---|
| 81-6324211-001 | C | 295162304 |

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2025

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6938034-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 245005879 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET INC

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6930815-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 88677005 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2045

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6944355-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 342334631 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2030

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6938065-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 151454663 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2035

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6941311-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 352162621 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2040

**b** Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY

| **c** EIN-PN 47-6941351-001 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 177043933 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE: TCW MULTIPLE INVESTMENT TRUST

**b** Name of sponsor of entity listed in (a): SEI TRUST COMPANY

| **c** EIN-PN 26-3015340-030 | **d** Entity code C | **e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 264788871 |
|---|---|---|

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

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

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

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

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

**a** Plan name

| **b** Name of plan sponsor | **c** EIN-PN |
|---|---|

# SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

## Financial Information

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

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

OMB No. 1210-0110

**2022**

**This Form is Open to Public Inspection**

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

**A** Name of plan
QUALCOMM INCORPORATED EMPLOYEE SAVINGS AND RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
QUALCOMM INCORPORATED

**D** Employer Identification Number (EIN)
95-3685934

## 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 | 931296 | 503577 |
| **b** Receivables (less allowance for doubtful accounts): | | | |
| **(1)** Employer contributions | 1b(1) | 5991376 | 7661135 |
| **(2)** Participant contributions | 1b(2) | 7661556 | 9615376 |
| **(3)** Other | 1b(3) | 12603328 | 2062981 |
| **c** General investments: | | | |
| **(1)** Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | 149190130 | 158566794 |
| **(2)** U.S. Government securities | 1c(2) | 130249183 | 138372979 |
| **(3)** Corporate debt instruments (other than employer securities): | | | |
| **(A)** Preferred | 1c(3)(A) | 80260012 | 87802303 |
| **(B)** All other | 1c(3)(B) | 56948443 | 69853172 |
| **(4)** Corporate stocks (other than employer securities): | | | |
| **(A)** Preferred | 1c(4)(A) | 393305 | 734401 |
| **(B)** Common | 1c(4)(B) | 467159866 | 267787682 |
| **(5)** Partnership/joint venture interests | 1c(5) | 0 | 0 |
| **(6)** Real estate (other than employer real property) | 1c(6) | 0 | 0 |
| **(7)** Loans (other than to participants) | 1c(7) | 0 | 0 |
| **(8)** Participant loans | 1c(8) | 26274333 | 28928901 |
| **(9)** Value of interest in common/collective trusts | 1c(9) | 6037292565 | 5058081720 |
| **(10)** Value of interest in pooled separate accounts | 1c(10) | 0 | 0 |
| **(11)** Value of interest in master trust investment accounts | 1c(11) | 0 | 0 |
| **(12)** Value of interest in 103-12 investment entities | 1c(12) | 0 | 0 |
| **(13)** Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | 1047619959 | 666489467 |
| **(14)** Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | 0 | 0 |
| **(15)** Other | 1c(15) | 24250086 | 19305294 |

| | | (a) Beginning of Year | (b) End of Year |
|---|---|---|---|
| **1d** Employer-related investments: | | | |
| **(1)** Employer securities | 1d(1) | 0 | 0 |
| **(2)** Employer real property | 1d(2) | 0 | 0 |
| **e** Buildings and other property used in plan operation | 1e | 0 | 0 |
| **f** Total assets (add all amounts in lines 1a through 1e) | 1f | 8046825438 | 6515765782 |
| **Liabilities** | | | |
| **g** Benefit claims payable | 1g | 0 | 0 |
| **h** Operating payables | 1h | 6885 | 10222 |
| **i** Acquisition indebtedness | 1i | 0 | 0 |
| **j** Other liabilities | 1j | 19446987 | 2281346 |
| **k** Total liabilities (add all amounts in lines 1g through1j) | 1k | 19453872 | 2291568 |
| **Net Assets** | | | |
| **l** Net assets (subtract line 1k from line 1f) | 1l | 8027371566 | 6513474214 |

## 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) | 81603167 | |
| **(B)** Participants | 2a(1)(B) | 334785614 | |
| **(C)** Others (including rollovers) | 2a(1)(C) | 48806708 | |
| **(2)** Noncash contributions | 2a(2) | 0 | |
| **(3)** Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)** | 2a(3) | | 465195489 |
| **b Earnings on investments:** | | | |
| **(1)** Interest: | | | |
| **(A)** Interest-bearing cash (including money market accounts and certificates of deposit) | 2b(1)(A) | 2100547 | |
| **(B)** U.S. Government securities | 2b(1)(B) | 3125446 | |
| **(C)** Corporate debt instruments | 2b(1)(C) | 4159457 | |
| **(D)** Loans (other than to participants) | 2b(1)(D) | 0 | |
| **(E)** Participant loans | 2b(1)(E) | 1307341 | |
| **(F)** Other | 2b(1)(F) | 498554 | |
| **(G)** Total interest. Add lines **2b(1)(A)** through **(F)** | 2b(1)(G) | | 11191345 |
| **(2)** Dividends: **(A)** Preferred stock | 2b(2)(A) | 31677 | |
| **(B)** Common stock | 2b(2)(B) | 2490981 | |
| **(C)** Registered investment company shares (e.g. mutual funds) | 2b(2)(C) | 27624898 | |
| **(D)** Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)** | 2b(2)(D) | | 30147556 |
| **(3)** Rents | 2b(3) | | 0 |
| **(4)** Net gain (loss) on sale of assets: **(A)** Aggregate proceeds | 2b(4)(A) | 664372610 | |
| **(B)** Aggregate carrying amount (see instructions) | 2b(4)(B) | 801744871 | |
| **(C)** Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result | 2b(4)(C) | | -137372261 |
| **(5)** Unrealized appreciation (depreciation) of assets: **(A)** Real estate | 2b(5)(A) | 0 | |
| **(B)** Other | 2b(5)(B) | -98016496 | |
| **(C)** Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)** | 2b(5)(C) | | -98016496 |

| | | (a) Amount | (b) Total |
|---|---|---|---|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | -1345424607 |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | -7 |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | 0 |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | 0 |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | -199922290 |
| **c** Other income | 2c | | 0 |
| **d** Total income. Add all **income** amounts in column (b) and enter total | 2d | | -1274201271 |
| **Expenses** | | | |
| **e** Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers | 2e(1) | 239112572 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | 0 | |
| (3) Other | 2e(3) | 0 | |
| (4) Total benefit payments. Add lines **2e(1)** through **(3)** | 2e(4) | | 239112572 |
| **f** Corrective distributions (see instructions) | 2f | | 157953 |
| **g** Certain deemed distributions of participant loans (see instructions) | 2g | | 46770 |
| **h** Interest expense | 2h | | 0 |
| **i** Administrative expenses: (1) Professional fees | 2i(1) | 0 | |
| (2) Contract administrator fees | 2i(2) | 0 | |
| (3) Investment advisory and management fees | 2i(3) | 0 | |
| (4) Other | 2i(4) | 707832 | |
| (5) Total administrative expenses. Add lines **2i(1)** through **(4)** | 2i(5) | | 707832 |
| **j** Total expenses. Add all **expense** amounts in column (b) and enter total | 2j | | 240025127 |
| **Net Income and Reconciliation** | | | |
| **k** Net income (loss). Subtract line **2j** from line **2d** | 2k | | -1514226398 |
| **l** Transfers of assets: | | | |
| (1) To this plan | 2l(1) | | 329046 |
| (2) From this plan | 2l(2) | | 0 |

## Part III Accountant's Opinion

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

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

**(1)** [X] Unmodified **(2)** [ ] Qualified **(3)** [ ] Disclaimer **(4)** [ ] Adverse

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

**(1)** [X] DOL Regulation 2520.103-8 **(2)** [ ] DOL Regulation 2520.103-12(d) **(3)** [ ] neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

**(1)** Name: MOSS ADAMS **(2)** EIN: 91-0189318

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

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

## Part IV Compliance Questions

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

During the plan year:

| | | Yes | No | Amount |
|---|---|---|---|---|
| **a** Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | 4a | X | | 227633 |

| | | | Yes | No | Amount |
|---|---|---|---|---|---|
| **b** | Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | 4b | | X | |
| **c** | Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | 4c | | X | |
| **d** | Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | 4d | | X | |
| **e** | Was this plan covered by a fidelity bond? | 4e | X | | 25000000 |
| **f** | Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 4f | | X | |
| **g** | Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4g | | X | |
| **h** | Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | 4h | | X | |
| **i** | Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | 4i | X | | |
| **j** | Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | 4j | | X | |
| **k** | Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | 4k | | X | |
| **l** | Has the plan failed to provide any benefit when due under the plan? | 4l | | X | |
| **m** | If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 4m | | X | |
| **n** | If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | 4n | | 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
QUALCOMM INCORPORATED EMPLOYEE SAVINGS AND RETIREMENT PLAN

**B** Three-digit plan number (PN) ▶ 001

**C** Plan sponsor's name as shown on line 2a of Form 5500
QUALCOMM INCORPORATED

**D** Employer Identification Number (EIN)
95-3685934

## Part I Distributions

**All references to distributions relate only to payments of benefits during the plan year.**

**1** Total value of distributions paid in property other than in cash or the forms of property specified in the instructions ..... **1**

**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 04-6568107 _____

**Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.**

**3** Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year ..... **3**

## Part II Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)

**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

**If the plan is a defined benefit plan, go to line 8.**

**5** If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

**If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.**

**6 a** Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) ..... **6a**

**b** Enter the amount contributed by the employer to the plan for this plan year ..... **6b**

**c** Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) ..... **6c**

**If you completed line 6c, skip lines 8 and 9.**

**7** Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

**8** If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

## Part III Amendments

**9** If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ..... ☐ **Increase** ☐ **Decrease** ☐ **Both** ☐ **No**

## Part IV ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.

**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

**11 a** Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

**b** If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

**12** Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

## Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify):

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

---

**a** Name of contributing employer

**b** EIN **c** Dollar amount contributed by employer

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

**e** Contribution rate information *(If more than one rate applies, check this box* ☐ *and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)*
(1) Contribution rate (in dollars and cents) _____
(2) Base unit measure: ☐ Hourly ☐ Weekly ☐ Unit of production ☐ Other (specify): _____

**14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

| | | |
|---|---|---|
| **a** The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment) | **14a** | |
| **b** The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) | **14b** | |
| **c** The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) | **14c** | |

**15** Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

| | | |
|---|---|---|
| **a** The corresponding number for the plan year immediately preceding the current plan year | **15a** | |
| **b** The corresponding number for the second preceding plan year | **15b** | |

**16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

| | | |
|---|---|---|
| **a** Enter the number of employers who withdrew during the preceding plan year | **16a** | |
| **b** If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers | **16b** | |

**17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

## Part VI Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans

**18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment ☐

**19** If the total number of participants is 1,000 or more, complete lines (a) through (c)

**a** Enter the percentage of plan assets held as:
Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

**b** Provide the average duration of the combined investment-grade and high-yield debt:
☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

**c** What duration measure was used to calculate line 19(b)?
☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify):

**20** **PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

**a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No

**b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation_____

# QUALCOMM Incorporated Employee Savings and Retirement Plan

## Financial Statements and Supplemental Schedules
## December 31, 2022 and 2021

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
# Index


| | Page |
|---|---|
| **Report of Independent Auditors** | 1 |
| **Financial Statements** | |
| Statements of Net Assets Available for Benefits<br>December 31, 2022 and 2021 | 5 |
| Statement of Changes in Net Assets Available for Benefits<br>Year Ended December 31, 2022 | 6 |
| Notes to Financial Statements<br>December 31, 2022 and 2021 | 7 |
| **Supplemental Schedules** | |
| Schedule of Assets (Held at End of Year)<br>December 31, 2022 | 15-58 |
| Schedule of Delinquent Participant Contributions<br>Year Ended December 31, 2022 | 59 |

MOSSADAMS

# Report of Independent Auditors

The Plan Administrator and Participants
Qualcomm Incorporated Employee Savings and Retirement Plan

## Report on the Audit of the Financial Statements

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

We have performed an audit of the financial statements of Qualcomm Incorporated Employee Savings and Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2022, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2022 financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2022, stating that the certified investment information, as described in Note 7 to the financial statements, is complete and accurate.

### *Opinion*

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

- the amounts and disclosures in the accompanying 2022 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 (GAAP).
- the information in the accompanying 2022 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

### *Basis for Opinion*

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (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 Qualcomm Incorporated Employee Savings and Retirement Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion on the 2022 financial statements.

### *Responsibilities of Management for the Financial Statements*

Management is responsible for the preparation and fair presentation of the financial statements in accordance with GAAP, 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 Qualcomm Incorporated Employee Savings and Retirement Plan's ability to continue as a going concern within one year after the date that the financial statements are available to be issued.

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

### *Auditor's Responsibilities for the Audit of the Financial Statements*

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 Qualcomm Incorporated Employee Savings and Retirement Plan's internal control. Accordingly, no such opinion is expressed.

- evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Qualcomm Incorporated Employee Savings and Retirement Plan's ability to continue as a going concern for a reasonable period of time.

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2022 financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2022 financial statements as a whole are presented fairly, in all material respects, in accordance with GAAP.

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

***Other Matters***

*Supplemental Schedules Required by ERISA*

The supplemental schedules of Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year) and Schedule H, Line 4(a) Schedule of Delinquent Participant Contributions as of December 31, 2022, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, 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 Disclosures under ERISA.

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

*Auditor's Report on the 2021 Financial Statements*

Predecessor auditors performed an audit of the 2021 financial statements of Qualcomm Incorporated Employee Savings and Retirement Plan. 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, the prior year audit did not extend to any statements or information related to assets held for investment of the plan that were certified by a qualified institution. Their report dated October 7, 2022, indicated that (a) the amounts and disclosures in the 2021 financial statements, other than those agreed to or derived from the certified investment information, were presented fairly, in all material respects, in accordance with GAAP, and (b) the information in the 2021 financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C). Their report also indicated that the form and content of the 2021 supplemental schedules, other than the information in the 2021 supplemental schedules that agreed to or is derived from the certified investment information, were presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA; and the information in the 2021 supplemental schedules related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determines meets the requirements of ERISA Section 103(a)(3)(C).

Moss Adams LLP

Los Angeles, California
October 16, 2023

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
## Statements of Net Assets Available for Benefits
## December 31, 2022 and 2021

| | 2022 | 2021 |
|---|---|---|
| Investments at fair value | | |
| Mutual funds | $ 459,154,177 | $ 803,760,734 |
| Collective trusts | 5,058,081,720 | 6,037,292,565 |
| Self-directed brokerage accounts ("SDBAs") | 646,257,439 | 854,630,191 |
| Total investments at fair value | 6,163,493,336 | 7,695,683,490 |
| Investments at contract value | 323,412,480 | 284,480,283 |
| Participant contributions receivable | 9,615,377 | 7,661,556 |
| Company contributions receivable | 7,661,135 | 5,991,376 |
| Notes receivable from participants | 28,928,901 | 26,274,333 |
| Noninterest-bearing cash | 503,577 | 930,022 |
| Net assets available for benefits | $ 6,533,614,806 | $ 8,021,021,060 |

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

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
## Statement of Changes in Net Assets Available for Benefits
## Year Ended December 31, 2022

| | | 2022 |
|---|---|---|
| **Additions** | | |
| Investment income (loss) | | |
| Net depreciation in fair value of investments | $ | (1,752,990,520) |
| Interest and dividends | | 38,756,630 |
| Net investment loss | | (1,714,233,890) |
| Interest income on notes receivable from participants | | 1,307,341 |
| Contributions | | |
| Participants | | 334,785,615 |
| Company | | 81,603,167 |
| Participant rollovers | | 48,806,708 |
| Total contributions | | 465,195,490 |
| Total additions | | (1,247,731,059) |
| **Deductions** | | |
| Distributions to participants | | (239,317,294) |
| Administrative expenses, net | | (686,947) |
| Total deductions | | (240,004,241) |
| Net decrease before transfers | | (1,487,735,300) |
| **Net assets transferred from acquisition** | | 329,046 |
| Net decrease in net assets available for benefits | | (1,487,406,254) |
| **Net assets available for benefits** | | |
| Beginning of year | | 8,021,021,060 |
| End of year | $ | 6,533,614,806 |

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

## 1. Description of Plan

### General

The QUALCOMM Incorporated Employee Savings and Retirement Plan (the "Plan") is a qualified 401(k) savings plan that was established in 1986 to enable employees of QUALCOMM Incorporated (the "Company" or the "Plan Administrator") to set aside earnings for the purpose of retirement. The Plan covers all eligible employees of the Company as defined in the Plan. The Qualcomm Incorporated US Retirement Committee (the "Committee") is responsible for oversight of the Plan, including determining the appropriateness of the Plan's investment offerings and monitoring investment performance. The following description provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

### Participation

An eligible employee can participate in the Plan on the day the employee is first employed, provided he or she is at least 18 years old, with the exception of interns who are eligible to participate after 90 days of service. Leased, temporary or seasonal employees are not eligible to participate.

### Employee Contributions

Participants are permitted to make pre-tax, Roth and traditional after-tax contributions to the Plan in amounts from 1% to 85% of their annual salary, up to prescribed limits established by the Internal Revenue Service ("IRS") which were $20,500 and $19,500 during 2022 and 2021, respectively excluding catch-up contributions. Additionally, participants are permitted to make pre-tax, Roth and traditional after-tax contributions of up to 85% of their eligible annual bonus compensation.

### Rollover Contributions

All employees are eligible to make rollover contributions from previous employers' qualified defined contribution plans if the contributions satisfied the requirements of the Internal Revenue Code ("IRC").

### Catch-up Contributions

In accordance with the Economic Growth and Tax Relief Reconciliation Act of 2001, the Plan allows for additional salary deferrals or "catch-up contributions" for employees age 50 and older, with a maximum catch-up of $6,500 during both 2022 and 2021.

### Company Contributions

During 2022 and 2021, the Company contributed $1.00 for each dollar a participant contributed up to $1,500, $0.50 for each dollar the participant contributed for the next $1,500 and $0.33 for each dollar the participant contributed for the next $7,500. The Company also matches additional contributions of $0.10 for each dollar a participant contributes in excess of $10,500 up to the maximum allowable contribution for federal income tax purposes. The Company's matching and discretionary contributions are made to the employees' pre-tax accounts regardless of whether the employees' contributions were pre-tax or Roth contributions. The Company does not match employees' traditional after-tax contributions. The Company did not make any discretionary contributions to the Plan during 2022 or 2021.

**Participant Accounts and Investment Alternatives**
Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contributions and (b) Plan investment earnings and expenses. Allocations are based on the participant's contributions and investment elections. Participants can allocate their contributions among the Plan's investment alternatives ("Participant Directed") or to self-directed brokerage accounts ("SDBAs"). The benefit to which a participant is entitled is based on the participant's vested account balance.

**Vesting**
Salary deferrals (including earnings thereon) are immediately 100% vested. Participants vest in the Company's matching and discretionary contributions and the related earnings at the rate of 50% on the first anniversary date and 100% on the second anniversary date of the employee's hire date. A participant automatically becomes 100% vested after attaining age 60 or after becoming disabled, deceased or Plan termination based upon the terms of the Plan document.

**Forfeitures**
A forfeiture is defined as the nonvested portion of a participant's account upon that participant's termination from the Company. Forfeitures can be used to offset the Company's matching contributions or to pay Plan administrative expenses. During 2022, employer contributions were reduced by nonvested forfeitures of $654,000. These accounts will be used to offset future employer contributions.

**Distributions to Participants**
Upon termination of employment or retirement, participants may elect to receive a lump-sum amount equal to the vested value of their account. If the lump-sum amount is valued at $5,000 or greater, participants may elect to receive the distribution in either a lump-sum amount or in installment payments or a partial distribution. A participant's vested account balance in excess of $1,000 but less than $5,000 is rolled over to a Fidelity Individual Retirement Account ("IRA") if the Plan is not directed otherwise by the participant, while vested account balances less than $1,000 are paid to the participant in cash in a lump sum. Hardship withdrawals are permitted if certain criteria are met. Participants may elect to have their account balances distributed to their beneficiaries in lump sum payments or in installments or a partial distribution in the event of the participant's death.

Effective September 1, 2021, a Participant may elect to receive a distribution from his or her Deferral Account, Traditional After-tax Contributions Account, Qualified Nonelective Contributions Account, Qualified Matching Contributions Account, Rollover Account, Roth Contribution Account, Roth Rollover Account, or Traditional After-tax Rollover Account, of an amount not to exceed $5,000 within the one-year period beginning on the date on which the child of such Participant is born or on which the legal adoption by the Participant is finalized with respect to any individual (other than a child of the Participant's spouse) who has not attained age 18 or is physically or mentally incapable of self-support.

**Notes Receivable From Participants**
Participants may obtain cash loans from the Plan with the approval of the Plan Administrator. Loan amounts are limited to the lesser of $50,000 reduced by the highest outstanding loan balance in the participant's account during the prior twelve-month period or one-half of the participant's vested account balance. Promissory notes are secured by all accounts of the participant. Loans bear interest at prime plus 1% and are repayable within five years or, if the loan is for the purchase of a primary residence, within ten years.

**Administrative Expenses**
Plan participants pay for the Plan's administrative expenses through a quarterly direct charge to their accounts. Certain administrative expenses related to a specific participant's account activity are charged directly to the participant's account. All other administrative expenses are paid by the Plan, and no expenses are paid by the Company. The Plan allocates revenue sharing credits back to participants' accounts who invest in the funds which generate the revenue credit. During 2022, total net administrative expenses were $686,947, including $779,289 in administrative expenses, partially offset by $92,342 in revenue sharing credits previously earned on the investments within the Plan.

**Plan Termination**
The Company expects and intends to continue the Plan on a permanent basis. However, the Company reserves the right to amend or discontinue the Plan at any time subject to the provisions of the Employment Retirement Income Security Act of 1974 ("ERISA"). In the event of a Plan termination, participants would become 100% vested in their accounts.

## 2. Summary of Significant Accounting Policies

**Basis of Accounting**
The financial statements of the Plan are prepared under the accrual method of accounting in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP").

**Investment Valuation and Income Recognition**
Investments are stated at fair value except for fully benefit-responsive investment contracts, which are reported at contract value. The Committee determines the Plan's valuation policies utilizing information provided by the Committee's Investment Adviser as well as the Fidelity Management Trust Company and Wells Fargo Bank, N.A. (collectively the "Trustees"). Wells Fargo Bank, N.A. was the trustee of the Wells Fargo/ BlackRock Short Term Investment Fund (Class S) until March, 2022. On April 1, 2022, Wells Fargo Bank, N.A. resigned as the trustee of the Wells Fargo/ BlackRock Short Term Investment Fund (Class S) (the "Fund"), and effective April 1, 2022, SEI Trust Company became the successor trustee of the Fund. The Plan's fair value measurements are discussed in Note 5.

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

**Distributions to Participants**
Distributions to participants are recorded when paid.

**Tax Status**
The IRS determined and informed the Company in a letter dated June 6, 2016 that the Plan and related trust are designed in accordance with applicable sections of the IRC. Since receiving the determination letter, amendments to the Plan that have been effected have not changed the design or operation of the Plan as a whole. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable sections of the IRC and therefore believes that the Plan is qualified, and the related trust is tax exempt.

U.S. GAAP requires that the Plan Administrator evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator has analyzed the tax positions taken by the Plan and has concluded that, as of December 31, 2022 and 2021, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are no audits for any tax periods currently in progress.

**Contributions**
Company and employee contributions are reported in the financial statements in the period in which the related employee services are rendered.

**Use of Estimates**
The preparation of the Plan's financial statements in conformity with U.S. GAAP requires that the Plan's Administrator make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes in net assets available for benefits during the reporting periods. Actual results could differ from those estimates.

**Notes Receivable From Participants**
Notes receivable from participants are measured at their unpaid principal balances plus any accrued but unpaid interest. If a participant ceases to make loan repayments and the Plan Administrator deems the participant loan to be in default, the participant's available account balance is reduced, and a benefit payment is recorded.

**Risks and Uncertainties**
The Plan allows participants to invest their accounts in any combination of funds offered by the Plan and other investment securities in participants' SDBAs. Investment securities are subject to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the fair value of investment securities, it is at least reasonably possible that changes in risks in the near term could materially affect participants' account balances and the amounts reported in future financial statements. Fair values of investments may decline for a number of reasons, including changes in prevailing market and interest rates, increases in defaults and credit rating downgrades, among others.

## 3. Net Asset Transfers

In connection with the Company's acquisition of Arriver Software LLC (Arriver) on April 1, 2022, the assets of the Arriver employee's 401(k) accounts held by Arriver's Professional Employer Organization, CoStaff, ("CoStaff Plan") were transferred into the Plan during 2022 with the Plan as the surviving plan. Except in the case of any protected benefits under the CoStaff Plan as defined under 26 CFR 1.411(d) - 4 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA, all other provisions of the CoStaff Plan that were inconsistent with the Plan were considered deleted so that the terms, conditions and provisions of the Plan shall prevail. A net transfer-in of $329,046 was received from the CoStaff plan on December 22, 2022.

## 4. Party-in-Interest and Related Party Transactions

The Plan's Fidelity investments are party-in-interest transactions because they are managed by Fidelity Management and Research LLC, an affiliate of the Trustee, as permitted under ERISA. Notes receivable from participants and revenue sharing credits discussed in Note 1 also represent permitted party-in-interest transactions. The Plan's Wells Fargo investments were party-in-interest transactions, because they are managed by Wells Fargo Bank, N.A., the Trustee, as permitted under ERISA.

## 5. Fair Value Measurements

Fair value is defined as the exchange price that would be received for an asset or paid to transfer a liability (an exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants as of the measurement date. Applicable accounting guidance provides an established hierarchy for inputs used in measuring fair value that maximizes the use of observable inputs and minimizes the use of unobservable inputs by requiring that the most observable inputs be used when available. Observable inputs are inputs that market participants would use in valuing the asset or liability and are developed based on market data obtained from sources independent of the Plan. Unobservable inputs are inputs that reflect the Company's assumptions about the factors that market participants would use in valuing the asset or liability. There are three levels of inputs that may be used to measure fair value:

- Level 1 includes financial instruments for which quoted market prices for identical instruments are available in active markets.

- Level 2 includes financial instruments for which there are inputs other than quoted prices included within Level 1 that are observable for the instrument.

- Level 3 includes financial instruments for which fair value is derived from valuation techniques in which one or more significant inputs are unobservable, including the Company's own assumptions.

Assets and liabilities are classified based on the lowest level of input that is significant to the fair value measurements.

The valuation methodologies used for Plan assets measured at fair value were as follows:

- **Mutual funds (included as Level 1):** Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their net asset value ("NAV") and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

- **Common stock (included in SDBAs as Level 1):** Valued at the closing price reported in the active market in which the individual securities are traded.

- **Certificate of deposits, corporate bonds and preferred stock (included in SDBAs as Level 2):** Valued using pricing models that maximize the use of observable inputs for similar securities, or if the security is purchased at a discount, it is valued based on the straight-line amortization to face value at maturity. This includes basing values on yields currently available on comparable securities of issuers with similar credit ratings.

- **Collective trusts (included as Level 2):** Valued using the NAV of the collective trusts as published by the investment managers. The NAV is based on the fair value of the underlying assets owned by the collective trusts, minus their liabilities, and then divided by the number of shares outstanding. The NAV of the collective trusts is calculated based on a compilation of primarily observable market information, such as the share price of the underlying mutual funds held by the collective trusts. Participants can transact every business day in the collective trusts, and there are no restrictions on collective trust transactions.

There have been no changes in the methodologies used during the years ended December 31, 2022 and 2021. The valuation methodologies may produce fair value calculations that are not indicative of net realizable value or reflective of future fair value. Furthermore, although the Company believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. The following tables present the fair value hierarchy for the Plan's financial instruments measured at fair value as of December 31, 2022 and 2021:

| | December 31, 2022 | | |
|---|---|---|---|
| | **Level 1** | **Level 2** | **Total** |
| Mutual funds | $ 459,154,177 | $ — | $ 459,154,177 |
| Collective Trusts | — | 5,058,081,720 | 5,058,081,720 |
| SDBAs | 637,317,515 | 8,939,924 | 646,257,439 |
| Total investments at fair value | $ 1,096,471,692 | $5,067,021,644 | $ 6,163,493,336 |

| | December 31, 2021 | | |
|---|---|---|---|
| | **Level 1** | **Level 2** | **Total** |
| Mutual funds | $ 803,760,734 | $ — | $ 803,760,734 |
| Collective Trusts | — | 6,037,292,565 | 6,037,292,565 |
| SDBAs | 851,991,966 | 2,638,225 | 854,630,191 |
| Total investments at fair value | $ 1,655,752,700 | $6,039,930,790 | $ 7,695,683,490 |

## 6. Investment Contracts

The Plan holds a portfolio of synthetic guaranteed investment contracts. These contracts meet the fully benefit-responsive investment contract criteria, and therefore, are reported at contract value. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants when they initiate permitted transactions under the term of the Plan. Contract value represents contributions made under each contract, plus earnings, less withdrawals. The Plan had $323,412,480 and $284,480,283 in synthetic guaranteed investment contracts at December 31, 2022 and December 31, 2021, respectively.

Synthetic guaranteed investment contracts are issued by insurance companies or other financial institutions and are backed by a portfolio of bonds. The bond portfolio may be structured as a fixed income separate account or collective fund. The issuer guarantees that all qualified participant withdrawals will be at contract value and that the crediting rate applied will not be less than 0%.The synthetic guaranteed investments are wrap contracts paired with underlying investments, primarily consisting of high-quality fixed income securities owned by the Plan.

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

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events may include, but are not limited to: (1) amendments to the Plan documents (including complete or partial plan termination or merger with another plan), (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions, (3) bankruptcy of the Company or other Company events that cause a significant withdrawal from the Plan, or (4) the failure of the Plan's trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act. The Plan's administrator does not believe that the occurrence of any such event, which would limit the Plan's ability to transact at contract value with participants, is probable. Certain events allow the contract issuer to terminate the contract with the Plan and settle at an amount different from contract value. Such events may include, but are not limited to: (1) an uncured violation of the Plan's investment guidelines, (2) a breach of material obligation under the contract, (3) a material misrepresentation, (4) a material amendment to the agreement without the consent of the issuer. At December 31, 2022, we are unaware of any events occurring in 2022 that would allow contract issuers to terminate the contracts held by the Plan.

## 7. Information Certified by the Plan's Trustees

The investments (except for Short-term Investment Fund A S in 2022 and Wells Fargo/BlackRock Short Term Investment Fund (Class S) in 2021), participant notes receivable balances and related interest income, noninterest-bearing cash and related investment income and losses included in the accompanying financial statements and the related notes and the supplemental schedule of assets (held at end of year) are based solely on information certified by Fidelity Management Trust Company. The above investment information was obtained by management and agreed to or derived from information certified as complete and accurate by Fidelity Management Trust Company.

**8. Difference between Financial Statements and Form 5500**

The following is a reconciliation of net assets available for benefits at December 31, 2021 and 2020 per the Plan's financial statement to the Form 5500:

| | 2022 | 2021 |
|---|---|---|
| Net assets available for benefits per the financial statements | $ 6,533,614,806 | $ 8,021,021,060 |
| Adjustments from contract value to fair value for fully benefit-responsive investment contracts | (19,913,785) | 13,199,100 |
| Adjustment for Stable Value Fund Fixed Income investments pending trades | (226,807) | (6,848,594) |
| Net assets available for benefits per the Form 5500 | 6,513,474,214 | $ 8,027,371,566 |

The following is a reconciliation of the net increase in the net assets available for benefits per the Plan's financial statements to the Form 5500:

| | 2022 |
|---|---|
| Net decrease in net assets available for benefits per the financial statements | $ (1,487,735,300) |
| Adjustments from contract value to fair value for fully benefit-responsive investment contracts | (33,112,885) |
| Adjustment for Stable Value Fund Fixed Income investments pending trades | 6,621,787 |
| Net decrease in net assets available for benefits per the Form 5500 | $ (1,514,226,398) |

**9. Subsequent Events**

No additional subsequent events were identified through October 15, 2023, the date these financial statements were available to be issued.

# Supplemental Schedules

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
## Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
## December 31, 2022

| | (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|---|
| | | Identity of Issue, Borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| | | Mutual Funds | | | |
| | | American Funds EuroPacific Growth Fund® Class R-6 | Mutual fund | | $ 126,663,308 |
| | | Vanguard Windsor™ II Fund Admiral™ Shares | Mutual fund | | 181,220,416 |
| | | Vanguard Explorer Fund Admiral Shares | Mutual fund | | 140,457,265 |
| | | DFA World ex US Core Equity Portfolio | Mutual fund | | 10,491,571 |
| | | Vanguard Federal Money Market Fund Investor | Mutual fund | | 321,617 |
| | | Total | | | 459,154,177 |
| | | Collective Trusts | | | |
| * | | Fidelity® Contrafund® Commingled Pool | Collective Trust | | 725,571,218 |
| * | | Fidelity® OTC Portfolio | Collective Trust | | 718,235,959 |
| | | American Beacon Small Cap Value CIT Fund Class II | Collective Trust | | 227,249,831 |
| | | Vanguard Institutional Extended Market Index Trust | Collective Trust | | 295,162,304 |
| | | Vanguard Institutional Total Bond Market Index Trust | Collective Trust | | 72,450,307 |
| | | Vanguard Institutional Total International Stock Market Index Trust | Collective Trust | | 47,497,793 |
| | | Short-Term Investment Fund A S (formerly "Wells Fargo/ BlackRock Short Term Investment Fund (Class S)") | Collective Trust | | 16,936,869 |
| | | Vanguard Target Retirement Income Trust Plus | Collective Trust | | 88,677,005 |
| | | Vanguard Target Retirement 2020 Trust Plus | Collective Trust | | 38,907,092 |
| | | Vanguard Target Retirement 2025 Trust Plus | Collective Trust | | 245,005,879 |
| | | Vanguard Target Retirement 2030 Trust Plus | Collective Trust | | 151,454,663 |
| | | Vanguard Target Retirement 2035 Trust Plus | Collective Trust | | 352,162,621 |
| | | Vanguard Target Retirement 2040 Trust Plus | Collective Trust | | 177,043,933 |
| | | Vanguard Target Retirement 2045 Trust Plus | Collective Trust | | 342,334,631 |
| | | Vanguard Target Retirement 2050 Trust Plus | Collective Trust | | 128,269,081 |
| | | Vanguard Target Retirement 2055 Trust Plus | Collective Trust | | 99,533,431 |
| | | Vanguard Target Retirement 2060 Trust Plus | Collective Trust | | 59,835,515 |
| | | Vanguard Target Retirement 2065 Trust Plus | Collective Trust | | 13,472,646 |
| | | Vanguard Target Retirement 2070 Trust Plus | Collective Trust | | 292,324 |
| | | Vanguard Institutional 500 Index Trust | Collective Trust | | 993,199,747 |
| | | MetWest Total Return Bond Fund (Class B) | Collective Trust | | 264,788,871 |
| | | Total | | | 5,058,081,720 |

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
## Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
## December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | **Identity of Issue, Borrower, Lessor or Similar Party** | **Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value** | **Cost*** ** | **Current Value** |
| | Synthetic Guaranteed Investment Contracts | | | |
| | Stable Value Fund Fixed Income Securities (see detail) | Separate Investment Trust | | $ 299,074,905 |
| | Stable Value Fund Cash Equivalents (see detail) | Separate Investment Trust | | 4,423,790 |
| | Transamerica Premier Life Insurance Company (Contract no. MDA01349TR) | Wrapper | | — |
| | Prudential Insurance Company of America (Contract no. GA-64203) | Wrapper | | — |
| | Voya Retirement Insurance and Annuity Company (Contract no. MCA-800261) | Wrapper | | — |
| | Nationwide Life Insurance Company (Contract no. GAL_QCM_IP 0119) | Wrapper | | — |
| | Total | | | 303,498,695 |
| | Self-directed brokerage accounts ("SDBAs") | | | 646,257,439 |
| | Noninterest-bearing cash | Cash | | 503,577 |
| * | Notes receivable from participants | 4.25% to 8.00% maturing from 2023 to 2032 | | 28,928,901 |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) | |
|---|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value | |
| | **** * SECURITIES * **** | ***UNIT COST MARKET PRICE SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | FIXED INCOME | | | | |
| | ABBVIE INC 2.6% 11/21/2024 | 99.911 | | | |
| | SEMI-ANN. 2.600% 11/21/2024 | 95.6659 | 199,822.00 | 191,331.87 | (8,490.13) |
| | 00287YBZ1 | 200,000 | | | |
| | ABBVIE INC 2.95% 11/21/2026 | 99.881 | | | |
| | SEMI-ANN. 2.950% 11/21/2026 | 92.9984 | 119,857.20 | 111,598.10 | (8,259.10) |
| | 00287YBV0 | 120,000 | | | |
| | ACCSS 2013-1 A 1ML+50 02/25/36 144A | 99.0728 | | | |
| | MONTHLY FLOATING 02/25/2036 | 97.8312 | 681,984.74 | 673,438.12 | (8,546.62) |
| | 00434QAA6 | 688,367.3600 | | | |
| | ADVOCATE HEALTH &HOSPITALS CORP 3.829% 0 | 101.867 | | | |
| | SEMI-ANN. 3.829% 08/15/2028 | 93.2376 | 509,335.00 | 466,188.00 | (43,147.00) |
| | 007589AA2 | 500,000 | | | |
| | AIG GLOBAL FDG 0.9% 09/22/2025 144A | 99.917 | | | |
| | SEMI-ANN. 0.900% 09/22/2025 | 89.2743 | 439,634.80 | 392,806.99 | (46,827.81) |
| | 00138CAN8 | 440,000 | | | |
| | AL FEDERAL 1.547% 9/1/2027 | 100.00 | | | |
| | SEMI-ANN. 1.547% 09/01/2027 | 86.5192 | 160,000.00 | 138,430.78 | (21,569.22) |
| | 010268CP3 | 160,000 | | | |
| | AL FEDERAL 1.856% 9/1/2029 | 100.00 | | | |
| | SEMI-ANN. 1.856% 09/01/2029 | 83.0396 | 310,000.00 | 257,422.67 | (52,577.33) |
| | 010268CR9 | 310,000 | | | |
| | ALABAMA POWER CO 3.75% 09/01/2027 | 99.916 | | | |
| | SEMI-ANN. 3.750% 09/01/2027 | 95.8127 | 289,756.40 | 277,856.85 | (11,899.55) |
| | 010392FY9 | 290,000 | | | |
| | ALBEMARLE CORP US 4.65% 06/01/2027 | 99.908 | | | |
| | SEMI-ANN. 4.650% 06/01/2027 | 97.5175 | 199,816.00 | 195,035.07 | (4,780.93) |
| | 012653AD3 | 200,000 | | | |
| | ALEXANDRIA REAL EST EQUITS INC 4.3% 01/1 | 102.762 | | | |
| | SEMI-ANN. 4.300% 01/15/2026 | 97.4067 | 277,457.40 | 262,998.14 | (14,459.26) |
| | 015271AH2 | 270,000 | | | |
| | ALLIANT ENERGY FINANCE LLC 3.75% 06/15/2 | 100.629 | | | |
| | SEMI-ANN. 3.750% 06/15/2023 | 99.3068 | 150,943.50 | 148,960.13 | (1,983.37) |
| | 01882YAA4 | 150,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| AMEREN ILL CO 3.8% 05/15/2028 | | 111.455 | | | |
| SEMI-ANN. 3.800% 05/15/2028 | | 95.3567 | 312,074.00 | 266,998.72 | (45,075.28) |
| 02361DAS9 | | 280,000 | | | |
| AMERICAN EXPRESS CO 2.55% 03/04/2027 | | 99.907 | | | |
| SEMI-ANN. 2.550% 03/04/2027 | | 90.9703 | 639,404.80 | 582,210.05 | (57,194.75) |
| 025816CS6 | | 640,000 | | | |
| AMERICAN EXPRESS CO 3.95% 08/01/2025 | | 99.90 | | | |
| SEMI-ANN. 3.950% 08/01/2025 | | 97.9638 | 619,380.00 | 607,375.60 | (12,004.40) |
| 025816CY3 | | 620,000 | | | |
| AMERICAN HONDA FINANCE CORP 2.25% 01/12/ | | 99.775 | | | |
| SEMI-ANN. 2.250% 01/12/2029 | | 85.7697 | 369,167.50 | 317,347.89 | (51,819.61) |
| 02665WEB3 | | 370,000 | | | |
| AMERICREDIT AUTOMOBILE RECEIVABLES TR 20 | | 99.9829 | | | |
| MONTHLY 2.450% 11/18/2026 | | 96.7924 | 519,910.87 | 503,320.53 | (16,590.34) |
| 03066TAC5 | | 520,000 | | | |
| AMPHENOL CORPORATION NEW 3.2% 04/01/2024 | | 97.682 | | | |
| SEMI-ANN. 3.200% 04/01/2024 | | 97.7668 | 488,410.00 | 488,834.07 | 424.07 |
| 032095AG6 | | 500,000 | | | |
| AMPHENOL CORPORATION NEW 4.35% 06/01/202 | | 99.904 | | | |
| SEMI-ANN. 4.350% 06/01/2029 | | 95.5238 | 99,904.00 | 95,523.78 | (4,380.22) |
| 032095AH4 | | 100,000 | | | |
| ANDOVER MA 1.873% 11/1/2029 | | 100.00 | | | |
| SEMI-ANN. 1.873% 11/01/2029 | | 83.1047 | 600,000.00 | 498,628.38 | (101,371.62) |
| 034286FK5 | | 600,000 | | | |
| ANGLO AMERICAN CAPITAL PLC 2.25% 03/17/2 | | 99.428 | | | |
| SEMI-ANN. 2.250% 03/17/2028 | | 84.5313 | 198,856.00 | 169,062.50 | (29,793.50) |
| 034863AZ3 | | 200,000 | | | |
| ANGLO AMERICAN CAPITAL PLC 3.875% 03/16/ | | 99.352 | | | |
| SEMI-ANN. 3.875% 03/16/2029 | | 89.9375 | 238,444.80 | 215,850.00 | (22,594.80) |
| 034863BB5 | | 240,000 | | | |
| AON CORP / AON GLOBAL HOLDINGS PLC 2.85% | | 99.9482 | | | |
| SEMI-ANN. 2.850% 05/28/2027 | | 91.8551 | 119,937.80 | 110,226.09 | (9,711.71) |
| 03740LAD4 | | 120,000 | | | |
| ASCENSION HEALTH 2.532% 11/15/2029 | | 104.8786 | | | |
| SEMI-ANN. 2.532% 11/15/2029 | | 85.7108 | 485,587.70 | 396,840.87 | (88,746.83) |
| 04352EAA3 | | 463,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| ASTRAZENECA FINANCE LLC 0.7% 05/28/2024 | | 99.991 | | | |
| SEMI-ANN. 0.700% 05/28/2024 | | 94.2498 | 349,968.50 | 329,874.43 | (20,094.07) |
| 04636NAC7 | | 350,000 | | | |
| AT&T INC FRN 3ML+118 06/12/2024 | | 97.62 | | | |
| QUARTERLY FLOATING 06/12/2024 | | 100.7146 | 488,100.00 | 503,573.21 | 15,473.21 |
| 00206RGD8 | | 500,000 | | | |
| AT&T INC 1.65% 02/01/2028 | | 99.874 | | | |
| SEMI-ANN. 1.650% 02/01/2028 | | 84.4551 | 199,748.00 | 168,910.25 | (30,837.75) |
| 00206RKG6 | | 200,000 | | | |
| AT&T INC 2.25% 02/01/2032 | | 99.819 | | | |
| SEMI-ANN. 2.250% 02/01/2032 | | 78.3822 | 119,782.80 | 94,058.59 | (25,724.21) |
| 00206RKH4 | | 120,000 | | | |
| AT&T INC 2.3% 06/01/2027 | | 99.852 | | | |
| SEMI-ANN. 2.300% 06/01/2027 | | 88.9389 | 104,844.60 | 93,385.83 | (11,458.77) |
| 00206RJX1 | | 105,000 | | | |
| AT&T INC 4.35% 03/01/2029 | | 99.508 | | | |
| SEMI-ANN. 4.350% 03/01/2029 | | 95.0967 | 208,966.80 | 199,703.07 | (9,263.73) |
| 00206RHJ4 | | 210,000 | | | |
| BA CR CARD TR 5% 04/17/2028 | | 99.9835 | | | |
| MONTHLY 5.000% 04/17/2028 | | 101.0557 | 544,910.18 | 550,753.62 | 5,843.44 |
| 05522RDF2 | | 545,000 | | | |
| BAE SYSTEMS HOLDINGS INC 3.85% 12/15/202 | | 111.05 | | | |
| SEMI-ANN. 3.850% 12/15/2025 | | 96.4106 | 288,730.00 | 250,667.55 | (38,062.45) |
| 05523UAP5 | | 260,000 | | | |
| BANK NEW YORK MELLON CORP 2.05% 01/26/20 | | 99.915 | | | |
| SEMI-ANN. 2.050% 01/26/2027 | | 89.7931 | 529,549.50 | 475,903.68 | (53,645.82) |
| 06406RBA4 | | 530,000 | | | |
| BANK NEW YORK MELLON CORP 3.85% 04/28/20 | | 106.869 | | | |
| SEMI-ANN. 3.850% 04/28/2028 | | 95.9068 | 299,233.20 | 268,539.07 | (30,694.13) |
| 06406RAH0 | | 280,000 | | | |
| BANK NEW YORK MELLON CORP 3.992%/VAR SOF | | 100.00 | | | |
| SEMI-ANN. FLOATING 06/13/2028 | | 95.6629 | 90,000.00 | 86,096.63 | (3,903.37) |
| 06406RBG1 | | 90,000 | | | |
| BANK NEW YORK MELLON CORP 4.414%/VAR 07/ | | 100.00 | | | |
| SEMI-ANN. FLOATING 07/24/2026 | | 98.4755 | 200,000.00 | 196,950.94 | (3,049.06) |
| 06406RBJ5 | | 200,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| BANK OF AMERICA CORP 1.734%/VAR 07/22/20 | | 101.0188 | | | |
| SEMI-ANN. FLOATING 07/22/2027 | | 87.6116 | 303,056.50 | 262,834.92 | (40,221.58) |
| 06051GJS9 | | 300,000 | | | |
| BANK OF AMERICA CORPORATION 1.197/VAR 10 | | 100.00 | | | |
| SEMI-ANN. FLOATING 10/24/2026 | | 88.903 | 600,000.00 | 533,418.00 | (66,582.00) |
| 06051GJK6 | | 600,000 | | | |
| BANK OF AMERICA CORPORATION 2.015/VAR 02 | | 100.00 | | | |
| SEMI-ANN. FLOATING 02/13/2026 | | 92.822 | 310,000.00 | 287,748.20 | (22,251.80) |
| 06051GHY8 | | 310,000 | | | |
| BANK OF AMERICA CORPORATION 2.456%/VAR 1 | | 104.6932 | | | |
| SEMI-ANN. FLOATING 10/22/2025 | | 94.4857 | 617,690.00 | 557,465.68 | (60,224.32) |
| 06051GHW2 | | 590,000 | | | |
| BANK OF AMERICA CORPORATION 3.384%/VAR 0 | | 100.00 | | | |
| SEMI-ANN. FLOATING 04/02/2026 | | 95.5039 | 160,000.00 | 152,806.20 | (7,193.80) |
| 06051GKM0 | | 160,000 | | | |
| BANK OF AMERICA CORPORATION 3.705/VAR 04 | | 114.185 | | | |
| SEMI-ANN. FLOATING 04/24/2028 | | 92.5393 | 616,599.00 | 499,712.46 | (116,886.54) |
| 06051GGL7 | | 540,000 | | | |
| BANK OF AMERICA CORPORATION 4.376%/VAR 0 | | 100.00 | | | |
| SEMI-ANN. FLOATING 04/27/2028 | | 95.6323 | 300,000.00 | 286,896.89 | (13,103.11) |
| 06051GKP3 | | 300,000 | | | |
| BANK OF AMERICA CORPORATION 4.571%/VAR 0 | | 100.00 | | | |
| SEMI-ANN. FLOATING 04/27/2033 | | 91.4703 | 70,000.00 | 64,029.19 | (5,970.81) |
| 06051GKQ1 | | 70,000 | | | |
| BANK OF AMERICA CORPORATION 4.827%/VAR 0 | | 100.00 | | | |
| SEMI-ANN. FLOATING 07/22/2026 | | 98.8315 | 500,000.00 | 494,157.43 | (5,842.57) |
| 06051GLA5 | | 500,000 | | | |
| BANK OF AMERICA CORPORATION 4.948/VAR 07 | | 100.00 | | | |
| SEMI-ANN. FLOATING 07/22/2028 | | 97.6661 | 190,000.00 | 185,565.53 | (4,434.47) |
| 06051GKW8 | | 190,000 | | | |
| BANK OF MONTREAL QUE 1.85% 05/01/2025 | | 99.924 | | | |
| SEMI-ANN. 1.850% 05/01/2025 | | 93.4105 | 399,696.00 | 373,641.84 | (26,054.16) |
| 06367WB85 | | 400,000 | | | |
| BANK OF MONTREAL QUE 2.65% 03/08/2027 | | 99.791 | | | |
| SEMI-ANN. 2.650% 03/08/2027 | | 91.3302 | 239,498.40 | 219,192.44 | (20,305.96) |
| 06368FAJ8 | | 240,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| BANK OF MONTREAL QUE 3.7% 06/07/2025 | | 99.977 | | | |
| SEMI-ANN. 3.700% 06/07/2025 | | 97.0356 | 149,965.50 | 145,553.36 | (4,412.14) |
| 06368D3S1 | | 150,000 | | | |
| BANK OF MONTREAL QUE 4.7% 09/14/2027 | | 99.956 | | | |
| SEMI-ANN. 4.700% 09/14/2027 | | 98.9475 | 229,898.80 | 227,579.28 | (2,319.52) |
| 06368LAQ9 | | 230,000 | | | |
| BANK OF NOVA SCOTIA 1.3% 09/15/2026 | | 99.995 | | | |
| SEMI-ANN. 1.300% 09/15/2026 | | 87.3483 | 309,984.50 | 270,779.62 | (39,204.88) |
| 0641598K5 | | 310,000 | | | |
| BANK OF NOVA SCOTIA 1.95% 02/02/2027 | | 99.956 | | | |
| SEMI-ANN. 1.950% 02/02/2027 | | 89.0201 | 249,890.00 | 222,550.14 | (27,339.86) |
| 06417XAD3 | | 250,000 | | | |
| BANK OF NOVA SCOTIA 3.45% 04/11/2025 | | 99.887 | | | |
| SEMI-ANN. 3.450% 04/11/2025 | | 96.2337 | 169,807.90 | 163,597.36 | (6,210.54) |
| 06417XAH4 | | 170,000 | | | |
| BAXTER INTERNATIONAL INC 1.322% 11/29/20 | | 100.00 | | | |
| SEMI-ANN. 1.322% 11/29/2024 | | 93.0963 | 800,000.00 | 744,770.77 | (55,229.23) |
| 071813CH0 | | 800,000 | | | |
| BAYER US FIN LLC 3.375% 10/08/2024 144A | | 95.369 | | | |
| SEMI-ANN. 3.375% 10/08/2024 | | 96.6310 | 476,845.00 | 483,155.21 | 6,310.21 |
| 07274EAG8 | | 500,000 | | | |
| BLACK HILLS CORP 3.95% 01/15/2026 | | 112.108 | | | |
| SEMI-ANN. 3.950% 01/15/2026 | | 95.8748 | 369,956.40 | 316,386.73 | (53,569.67) |
| 092113AL3 | | 330,000 | | | |
| BMW US CAPITAL LLC 1.25% 08/12/2026 144A | | 99.8335 | | | |
| SEMI-ANN. 1.250% 08/12/2026 | | 87.4397 | 259,567.10 | 227,343.19 | (32,223.91) |
| 05565EBW4 | | 260,000 | | | |
| BMW US CAPITAL LLC 3.45% 04/01/2027 144A | | 99.895 | | | |
| SEMI-ANN. 3.450% 04/01/2027 | | 94.3872 | 199,790.00 | 188,774.38 | (11,015.62) |
| 05565ECA1 | | 200,000 | | | |
| BNP PARIBAS 1.675%/VAR 06/30/2027 144A | | 100.00 | | | |
| SEMI-ANN. FLOATING 06/30/2027 | | 87.0257 | 200,000.00 | 174,051.46 | (25,948.54) |
| 09659W2Q6 | | 200,000 | | | |
| BNP PARIBAS 4.4% 08/14/2028 144A | | 99.329 | | | |
| SEMI-ANN. 4.400% 08/14/2028 | | 94.5406 | 248,322.50 | 236,351.61 | (11,970.89) |
| 09659W2F0 | | 250,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| BNP PARIBAS 4.705%/VAR 01/10/2025 144A | | 101.872 | | | |
| SEMI-ANN. FLOATING 01/10/2025 | | 99.0004 | 488,985.60 | 475,201.70 | (13,783.90) |
| 09659W2G8 | | 480,000 | | | |
| BOEING CO 2.7% 02/01/2027 | | 99.73 | | | |
| SEMI-ANN. 2.700% 02/01/2027 | | 90.2661 | 349,055.00 | 315,931.36 | (33,123.64) |
| 097023CM5 | | 350,000 | | | |
| BOEING CO 5.04% 05/01/2027 | | 100.00 | | | |
| SEMI-ANN. 5.040% 05/01/2027 | | 98.8978 | 295,000.00 | 291,748.38 | (3,251.62) |
| 097023CU7 | | 295,000 | | | |
| BOSTON PPTYS LTD PARTNERSHIP 3.125% 09/0 | | 96.80 | | | |
| SEMI-ANN. 3.125% 09/01/2023 | | 98.4375 | 561,440.00 | 570,937.44 | 9,497.44 |
| 10112RAV6 | | 580,000 | | | |
| BOSTON PPTYS LTD PARTNERSHIP 3.8% 02/01/ | | 99.319 | | | |
| SEMI-ANN. 3.800% 02/01/2024 | | 98.2113 | 427,071.70 | 422,308.79 | (4,762.91) |
| 10112RAW4 | | 430,000 | | | |
| BP CAP MARKETS AMERICA INC 4.234% 11/06/ | | 101.279 | | | |
| SEMI-ANN. 4.234% 11/06/2028 | | 96.8862 | 303,837.00 | 290,658.45 | (13,178.55) |
| 10373QAE0 | | 300,000 | | | |
| BPCE SA 1.625% 01/14/2025 144A | | 99.694 | | | |
| SEMI-ANN. 1.625% 01/14/2025 | | 93.0685 | 368,867.80 | 344,353.62 | (24,514.18) |
| 05578AAV0 | | 370,000 | | | |
| BPR TRUST 2021-TY TSFR1M+174.77 04/15/20 | | 99.7518 | | | |
| MONTHLY FLOATING 04/15/2037 | | 97.5997 | 852,877.89 | 834,477.61 | (18,400.28) |
| 05592DAA2 | | 855,000 | | | |
| BRAZOS EDUCATION LOAN AUTHORITY INC 1ML+ | | 100.00 | | | |
| MONTHLY FLOATING 11/25/2071 | | 97.4164 | 907,941.37 | 884,483.89 | (23,457.48) |
| 10620WAF5 | | 907,941.3700 | | | |
| BRAZOS EDUCATION LOAN AUTHORITY INC 1ML+ | | 100.00 | | | |
| MONTHLY FLOATING 01/25/2072 | | 97.7346 | 486,975.35 | 475,943.61 | (11,031.74) |
| 10620WAJ7 | | 486,975.3500 | | | |
| BRAZOS HIGHER ED AUTH INC A2 3ML+80 02/2 | | 100.00 | | | |
| QUARTERLY FLOATING 02/25/2030 | | 99.9253 | 87,642.76 | 87,577.28 | (65.48) |
| 10620NCG1 | | 87,642.7600 | | | |
| BX COML MTG TR 2022-CSMO TSFR1M+211.48 0 | | 99.5991 | | | |
| MONTHLY FLOATING 06/15/2027 | | 99.2484 | 597,594.54 | 595,490.64 | (2,103.90) |
| 05610MAA0 | | 600,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) | |
|---|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value | |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | BX TRUST 2022-IND A TSFR1M+139.8 04/15/2 | 99.7157 | | | |
| | MONTHLY FLOATING 04/15/2037 | 97.8704 | 940,241.78 | 922,841.66 | (17,400.12) |
| | 05609WAA1 | 942,922.5100 | | | |
| | CA ST 1.70% 2/1/2028 | 93.637 | | | |
| | SEMI-ANN. 1.700% 02/01/2028 | 86.0818 | 561,822.00 | 516,490.50 | (45,331.50) |
| | 13063DC48 | 600,000 | | | |
| | CANADIAN NATL RESOURCES LTD 3.85% 06/01/ | 104.14 | | | |
| | SEMI-ANN. 3.850% 06/01/2027 | 94.1742 | 145,796.00 | 131,843.93 | (13,952.07) |
| | 136385AX9 | 140,000 | | | |
| | CANADIAN PAC RY CO 1.75% 12/02/2026 | 99.852 | | | |
| | SEMI-ANN. 1.750% 12/02/2026 | 89.1138 | 249,630.00 | 222,784.43 | (26,845.57) |
| | 13645RBE3 | 250,000 | | | |
| | CAPITAL ONE FINANCIAL CORP SOFR 4.985%/V | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/24/2026 | 97.9409 | 500,000.00 | 489,704.66 | (10,295.34) |
| | 14040HCU7 | 500,000 | | | |
| | CAPITAL ONE FINANCIAL CORP 3.273%/VAR 03 | 100.00 | | | |
| | SEMI-ANN. FLOATING 03/01/2030 | 85.4970 | 110,000.00 | 94,046.67 | (15,953.33) |
| | 14040HCN3 | 110,000 | | | |
| | CAPITAL ONE FINANCIAL CORP 3.3% 10/30/20 | 97.029 | | | |
| | SEMI-ANN. 3.300% 10/30/2024 | 96.5149 | 242,572.50 | 241,287.33 | (1,285.17) |
| | 14040HBT1 | 250,000 | | | |
| | CAPITAL ONE FINANCIAL CORP 4.927/VAR 05/ | 100.00 | | | |
| | SEMI-ANN. FLOATING 05/10/2028 | 96.8107 | 130,000.00 | 125,853.93 | (4,146.07) |
| | 14040HCS2 | 130,000 | | | |
| | CAPITAL ONE MULTI-ASST EXEC TR 2.8% 03/1 | 99.9925 | | | |
| | MONTHLY 2.800% 03/15/2027 | 95.9098 | 1,339,898.96 | 1,285,191.86 | (54,707.10) |
| | 14041NFZ9 | 1,340,000 | | | |
| | CARGILL INC 3.625% 04/22/2027 144A | 99.471 | | | |
| | SEMI-ANN. 3.625% 04/22/2027 | 95.5471 | 288,465.90 | 277,086.47 | (11,379.43) |
| | 141781BV5 | 290,000 | | | |
| | CARMAX AUTO OWNER TR 2022-3 3.97% 04/15/ | 99.9976 | | | |
| | MONTHLY 3.970% 04/15/2027 | 98.0880 | 579,986.31 | 568,910.23 | (11,076.08) |
| | 14318MAD1 | 580,000 | | | |
| | CARRIER GLOBAL CORP 2.242% 02/15/2025 | 100.00 | | | |
| | SEMI-ANN. 2.242% 02/15/2025 | 94.1935 | 370,000.00 | 348,515.92 | (21,484.08) |
| | 14448CAN4 | 370,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| CFCRE 2016-C3 MTG TR 3.597% 01/10/2048 | | 94.1328 | | | |
| MONTHLY 3.597% 01/10/2048 | | 94.7166 | 187,042.90 | 188,202.85 | 1,159.95 |
| 12531WBA9 | | 198,701.0600 | | | |
| CGMS COMMERCIAL MORTGAGE TRUST 2017-B1 3 | | 95.8789 | | | |
| MONTHLY 3.197% 08/15/2050 | | 90.7075 | 746,642.33 | 706,370.48 | (40,271.85) |
| 17326CAY0 | | 778,734.7200 | | | |
| CHASE AUTO OWNER TRUST 2022-A 3.99% 03/2 | | 99.9943 | | | |
| MONTHLY 3.990% 03/27/2028 | | 97.6767 | 629,964.28 | 615,362.96 | (14,601.32) |
| 16144JAD3 | | 630,000 | | | |
| CHRISTUS HEALT 4.341% 07/01/2028 | | 98.523 | | | |
| SEMI-ANN. 4.341% 07/01/2028 | | 95.0112 | 492,615.00 | 475,055.97 | (17,559.03) |
| 17108JAA1 | | 500,000 | | | |
| CIGNA CORP 3.75% 07/15/2023 | | 99.491 | | | |
| SEMI-ANN. 3.750% 07/15/2023 | | 99.3401 | 110,435.01 | 110,267.48 | (167.53) |
| 125523AF7 | | 111,000 | | | |
| CITIGROUP COML MTG TR 2014-GC21 3.855% 0 | | 102.3125 | | | |
| MONTHLY 3.855% 05/10/2047 | | 97.3553 | 849,193.75 | 808,048.66 | (41,145.09) |
| 17322MAW6 | | 830,000 | | | |
| CITIGROUP COML MTG TR 2015-GC29 2.935% 0 | | 100.6055 | | | |
| MONTHLY 2.935% 04/10/2048 | | 94.5744 | 245,544.05 | 230,824.29 | (14,719.76) |
| 17323VAY1 | | 244,066.3000 | | | |
| CITIGROUP INC FRN 3ML+102.3 06/01/2024 | | 99.877 | | | |
| QUARTERLY FLOATING 06/01/2024 | | 100.1096 | 499,385.00 | 500,548.04 | 1,163.04 |
| 172967MA6 | | 500,000 | | | |
| CITIGROUP INC SOFR 2.014%/VAR 01/25/2026 | | 100.00 | | | |
| SEMI-ANN. FLOATING 01/25/2026 | | 92.6767 | 210,000.00 | 194,621.05 | (15,378.95) |
| 17327CAN3 | | 210,000 | | | |
| CITIGROUP INC 0.981%/VAR 5/01/2025 | | 100.00 | | | |
| SEMI-ANN. FLOATING 05/01/2025 | | 93.6441 | 120,000.00 | 112,372.89 | (7,627.11) |
| 172967MX6 | | 120,000 | | | |
| CITIGROUP INC 3.070%/VAR 02/24/28 | | 100.00 | | | |
| SEMI-ANN. FLOATING 02/24/2028 | | 90.1529 | 280,000.00 | 252,428.07 | (27,571.93) |
| 172967NG2 | | 280,000 | | | |
| CITIGROUP INC 3.2% 10/21/2026 | | 106.428 | | | |
| SEMI-ANN. 3.200% 10/21/2026 | | 92.5161 | 266,070.00 | 231,290.20 | (34,779.80) |
| 172967KY6 | | 250,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| CITIGROUP INC 3.29%/VAR 03/17/2026 | | 100.00 | | | |
| SEMI-ANN. FLOATING 03/17/2026 | | 95.0551 | 230,000.00 | 218,626.84 | (11,373.16) |
| 172967NL1 | | 230,000 | | | |
| CITIGROUP INC 3.785%/VAR 03/17/2033 | | 100.00 | | | |
| SEMI-ANN. FLOATING 03/17/2033 | | 85.5292 | 150,000.00 | 128,293.73 | (21,706.27) |
| 172967NN7 | | 150,000 | | | |
| CITIGROUP INC 4.044/VAR 06/01/2024 | | 100.076 | | | |
| SEMI-ANN. FLOATING 06/01/2024 | | 99.3335 | 500,380.00 | 496,667.59 | (3,712.41) |
| 172967LZ2 | | 500,000 | | | |
| CITIGROUP INC 4.658/VAR 05/24/2028 | | 100.00 | | | |
| SEMI-ANN. FLOATING 05/24/2028 | | 96.7760 | 210,000.00 | 203,229.55 | (6,770.45) |
| 172967NS6 | | 210,000 | | | |
| CITIGROUP INC 5.61/VAR 09/29/2026 | | 100.00 | | | |
| SEMI-ANN. FLOATING 09/29/2026 | | 100.4277 | 190,000.00 | 190,812.63 | 812.63 |
| 172967NX5 | | 190,000 | | | |
| CITIZENS BANK NA 3.7% 03/29/2023 | | 101.288 | | | |
| SEMI-ANN. 3.700% 03/29/2023 | | 99.7275 | 429,461.12 | 422,844.53 | (6,616.59) |
| 17401QAQ4 | | 424,000 | | | |
| CITY OF IRVING TX 3.735% 9/15/2029 | | 100.00 | | | |
| SEMI-ANN. 3.735% 09/15/2029 | | 94.2211 | 500,000.00 | 471,105.60 | (28,894.40) |
| 463778AG5 | | 500,000 | | | |
| CITY OF IRVING 3.871% 9/15/2031 | | 100.00 | | | |
| SEMI-ANN. 3.871% 09/15/2031 | | 93.2805 | 395,000.00 | 368,457.98 | (26,542.02) |
| 463778AJ9 | | 395,000 | | | |
| CLOROX CO 3.9% 05/15/2028 | | 106.472 | | | |
| SEMI-ANN. 3.900% 05/15/2028 | | 95.3033 | 149,060.80 | 133,424.61 | (15,636.19) |
| 189054AW9 | | 140,000 | | | |
| CNH INDUSTRIAL CAPITAL LLC 3.95% 05/23/2 | | 99.469 | | | |
| SEMI-ANN. 3.950% 05/23/2025 | | 97.0027 | 198,938.00 | 194,005.33 | (4,932.67) |
| 12592BAN4 | | 200,000 | | | |
| COMCAST CORP NEW 3.3% 04/01/2027 | | 99.733 | | | |
| SEMI-ANN. 3.300% 04/01/2027 | | 94.2376 | 274,265.75 | 259,153.38 | (15,112.37) |
| 20030NDK4 | | 275,000 | | | |
| COMCAST CORP NEW 5.25% 11/07/2025 | | 99.973 | | | |
| SEMI-ANN. 5.250% 11/07/2025 | | 101.3102 | 139,962.20 | 141,834.33 | 1,872.13 |
| 20030NDZ1 | | 140,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | COMERICA INC 3.7% 07/31/2023 | 100.212 | | | |
| | SEMI-ANN. 3.700% 07/31/2023 | 99.2654 | 200,424.00 | 198,530.74 | (1,893.26) |
| | 200340AS6 | 200,000 | | | |
| | COMM 2013-CCRE13 MTG TR 4.194% 10/10/204 | 103.9688 | | | |
| | MONTHLY 4.194% 11/10/2046 | 98.2459 | 1,341,196.88 | 1,267,371.85 | (73,825.03) |
| | 12630BBA5 | 1,290,000 | | | |
| | COMM 2013-CCRE9 MTG TR VAR 07/10/2045 | 105.2539 | | | |
| | MONTHLY FLOATING 07/10/2045 | 99.3875 | 926,415.35 | 874,780.98 | (51,634.37) |
| | 12625UBF9 | 880,171.9500 | | | |
| | COMM 2013-CR6 A4 MTG TR 3.101% 03/10/204 | 99.6406 | | | |
| | MONTHLY 3.101% 03/10/2046 | 99.6789 | 722,982.57 | 723,260.14 | 277.57 |
| | 12624XAD0 | 725,590.1600 | | | |
| | COMM 2014-CCRE19 MTG TR 3.796% 08/10/204 | 102.4041 | | | |
| | MONTHLY 3.796% 08/10/2047 | 96.7336 | 1,228,849.61 | 1,160,803.44 | (68,046.17) |
| | 12592GBD4 | 1,200,000 | | | |
| | COMM 2014-CCRE21 MTG TR 3.528% 12/10/204 | 100.5391 | | | |
| | MONTHLY 3.528% 12/10/2047 | 96.2772 | 706,154.50 | 676,220.89 | (29,933.61) |
| | 12592RBF5 | 702,368.3100 | | | |
| | COMM 2014-CR14 A4 VAR 02/10/2047 | 104.0977 | | | |
| | MONTHLY FLOATING 02/10/2047 | 98.2911 | 1,337,654.88 | 1,263,040.38 | (74,614.50) |
| | 12630DAY0 | 1,285,000 | | | |
| | COMM 2014-CR17 A5 3.977% 05/10/2047 | 104.7383 | | | |
| | MONTHLY 3.977% 05/10/2047 | 97.5524 | 1,120,699.61 | 1,043,810.15 | (76,889.46) |
| | 12631DBB8 | 1,070,000 | | | |
| | COMM 2016-COR1 MTG TR 3.091% 10/10/2049 | 97.1563 | | | |
| | MONTHLY 3.091% 10/10/2049 | 91.8470 | 480,923.44 | 454,642.70 | (26,280.74) |
| | 12594MBC1 | 495,000 | | | |
| | COMMONWEALTH BANK AUSTRALIA 2.552% 03/14 | 100.00 | | | |
| | SEMI-ANN. 2.552% 03/14/2027 | 90.9099 | 440,000.00 | 400,003.60 | (39,996.40) |
| | 2027A0KK4 | 440,000 | | | |
| | COMMONWEALTH EDISON CO 2.95% 08/15/2027 | 93.288 | | | |
| | SEMI-ANN. 2.950% 08/15/2027 | 92.2484 | 307,850.40 | 304,419.62 | (3,430.78) |
| | 202795JK7 | 330,000 | | | |
| | COMMONWEALTH EDISON CO 3.7% 08/15/2028 | 100.868 | | | |
| | SEMI-ANN. 3.700% 08/15/2028 | 94.0936 | 544,687.20 | 508,105.60 | (36,581.60) |
| | 202795JN1 | 540,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| CONOCOPHILLIPS CO 2.4% 03/07/2025 | | 99.882 | | | |
| SEMI-ANN. 2.400% 03/07/2025 | | 95.0432 | 519,386.40 | 494,224.79 | (25,161.61) |
| 20826FAU0 | | 520,000 | | | |
| CONSUMERS ENERGY CO 3.8% 11/15/2028 | | 96.046 | | | |
| SEMI-ANN. 3.800% 11/15/2028 | | 94.8986 | 316,951.80 | 313,165.44 | (3,786.36) |
| 210518DC7 | | 330,000 | | | |
| COTERRA ENERGY INC 3.9% 05/15/2027 | | 100.984 | | | |
| SEMI-ANN. 3.900% 05/15/2027 | | 93.3721 | 161,574.40 | 149,395.36 | (12,179.04) |
| 127097AG8 | | 160,000 | | | |
| CREDIT SUISSE AG NY BRNCH 3.7% 02/21/202 | | 99.876 | | | |
| SEMI-ANN. 3.700% 02/21/2025 | | 92.2092 | 389,516.40 | 359,616.01 | (29,900.39) |
| 22550L2H3 | | 390,000 | | | |
| CRH AMER INC 3.875% 05/18/2025 144A | | 110.211 | | | |
| SEMI-ANN. 3.875% 05/18/2025 | | 96.4638 | 330,633.00 | 289,391.52 | (41,241.48) |
| 12626PAM5 | | 300,000 | | | |
| CUBESMART LP 2.25% 12/15/2028 | | 99.515 | | | |
| SEMI-ANN. 2.250% 12/15/2028 | | 82.4161 | 89,563.50 | 74,174.51 | (15,388.99) |
| 22966RAH9 | | 90,000 | | | |
| CVS HEALTH CORP 1.3% 08/21/2027 | | 99.72 | | | |
| SEMI-ANN. 1.300% 08/21/2027 | | 84.6635 | 877,536.00 | 745,038.65 | (132,497.35) |
| 126650DM9 | | 880,000 | | | |
| DAIMLER TRUCKS FINANCE NORTH AMERICA LLC | | 99.974 | | | |
| SEMI-ANN. 1.625% 12/13/2024 | | 92.8039 | 299,922.00 | 278,411.63 | (21,510.37) |
| 233853AD2 | | 300,000 | | | |
| DAIMLER TRUCKS FINANCE NORTH AMERICA LLC | | 99.565 | | | |
| SEMI-ANN. 2.000% 12/14/2026 | | 88.1093 | 348,477.50 | 308,382.55 | (40,094.95) |
| 233853AF7 | | 350,000 | | | |
| DEERE JOHN CAPITAL CORP 4.15% 09/15/2027 | | 99.829 | | | |
| SEMI-ANN. 4.150% 09/15/2027 | | 98.0720 | 439,247.60 | 431,516.68 | (7,730.92) |
| 24422EWK1 | | 440,000 | | | |
| DESERT CA CCD 2.208% 8/1/2030 | | 100.00 | | | |
| SEMI-ANN. 2.208% 08/01/2030 | | 82.7918 | 505,000.00 | 418,098.34 | (86,901.66) |
| 250375LV2 | | 505,000 | | | |
| DIAGEO CAPITAL PLC 5.3% 10/24/2027 | | 99.852 | | | |
| SEMI-ANN. 5.300% 10/24/2027 | | 102.2833 | 239,644.80 | 245,479.97 | 5,835.17 |
| 25243YBG3 | | 240,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | DIGITAL REALTY TRUST LP 4.45% 07/15/2028 | 115.181 | | | |
| | SEMI-ANN. 4.450% 07/15/2028 | 94.6744 | 299,470.60 | 246,153.42 | (53,317.18) |
| | 25389JAT3 | 260,000 | | | |
| | DIGITAL REALTY TRUST LP 5.55% 01/15/2028 | 99.918 | | | |
| | SEMI-ANN. 5.550% 01/15/2028 | 100.6612 | 119,901.60 | 120,793.39 | 891.79 |
| | 25389JAV8 | 120,000 | | | |
| | DISCOVER CARD EXECUTION NT TR 5.03% 10/1 | 99.9871 | | | |
| | MONTHLY 5.030% 10/15/2027 | 101.0785 | 504,935.01 | 510,446.63 | 5,511.62 |
| | 254683CX1 | 505,000 | | | |
| | DLLAD 2021-1A A2 0.64% 09/21/2026 144A | 99.9938 | | | |
| | MONTHLY 0.640% 09/21/2026 | 93.1058 | 704,955.94 | 656,395.89 | (48,560.05) |
| | 233262AC8 | 705,000 | | | |
| | DLLMT 2021-1 LLC 1% 07/21/2025 144A | 99.9956 | | | |
| | MONTHLY 1.000% 07/21/2025 | 94.9265 | 429,981.17 | 408,184.04 | (21,797.13) |
| | 23345FAC6 | 430,000 | | | |
| | DOMINION ENERGY SOUTH CAROLINA INC 2.3% | 99.938 | | | |
| | SEMI-ANN. 2.300% 12/01/2031 | 80.6516 | 59,962.80 | 48,390.93 | (11,571.87) |
| | 25731VAA2 | 60,000 | | | |
| | DTE ELEC CO 1.9% 04/01/2028 | 84.554 | | | |
| | SEMI-ANN. 1.900% 04/01/2028 | 86.8982 | 126,831.00 | 130,347.34 | 3,516.34 |
| | 23338VAN6 | 150,000 | | | |
| | DTE ELEC CO 3% 03/01/2032 | 99.596 | | | |
| | SEMI-ANN. 3.000% 03/01/2032 | 86.2129 | 219,111.20 | 189,668.31 | (29,442.89) |
| | 23338VAQ9 | 220,000 | | | |
| | DUKE ENERGY CAROLINAS LLC 2.5% 03/15/202 | 97.9651 | | | |
| | SEMI-ANN. 2.500% 03/15/2023 | 99.7321 | 541,747.26 | 551,518.61 | 9,771.35 |
| | 26442CAQ7 | 553,000 | | | |
| | DUKE ENERGY CAROLINAS LLC 2.85% 03/15/20 | 99.939 | | | |
| | SEMI-ANN. 2.850% 03/15/2032 | 84.5924 | 39,975.60 | 33,836.97 | (6,138.63) |
| | 26442CBG8 | 40,000 | | | |
| | DUKE ENERGY PROGRESS LLC 3.4% 04/01/2032 | 99.737 | | | |
| | SEMI-ANN. 3.400% 04/01/2032 | 88.3780 | 259,316.20 | 229,782.86 | (29,533.34) |
| | 26442UAN4 | 260,000 | | | |
| | DUKE ENERGY PROGRESS LLC 3.45% 03/15/202 | 106.941 | | | |
| | SEMI-ANN. 3.450% 03/15/2029 | 92.0515 | 299,434.80 | 257,744.31 | (41,690.49) |
| | 26442UAH7 | 280,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | | (d) | (e) | |
|---|---|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | | Cost*** | Current Value | |
| * * SECURITIES * * | | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | DUPONT DE NEMOURS INC FRN 3ML+111 11/15/ | | 99.955 | | | |
| | QUARTERLY FLOATING 11/15/2023 | | 100.4253 | 369,833.50 | 371,573.74 | 1,740.24 |
| | 26078JAH3 | | 370,000 | | | |
| | DUPONT DE NEMOURS INC 4.493% 11/15/2025 | | 104.334 | | | |
| | SEMI-ANN. 4.493% 11/15/2025 | | 98.3352 | 521,670.00 | 491,675.95 | (29,994.05) |
| | 26078JAC4 | | 500,000 | | | |
| | DY9 LEASING LLC 2.372% 03/19/2027 | | 105.4700 | | | |
| | QUARTERLY 2.372% 03/19/2027 | | 94.0592 | 1,055,702.42 | 941,486.31 | (114,216.11) |
| | 26818LAB6 | | 1,000,950.4521 | | | |
| | EAST OHIO GAS CO/THE 1.3% 06/15/2025 144 | | 99.453 | | | |
| | SEMI-ANN. 1.300% 06/15/2025 | | 90.6050 | 298,359.00 | 271,815.08 | (26,543.92) |
| | 27409LAA1 | | 300,000 | | | |
| | ECMC GROUP STUDENT LOAN TRUST 2018-1 1ML | | 98.5352 | | | |
| | MONTHLY FLOATING 02/27/2068 | | 95.0253 | 580,078.62 | 559,415.96 | (20,662.66) |
| | 26828HAA5 | | 588,702.1900 | | | |
| | ECMC GROUP STUDENT LOAN TRUST 2021-1 1ML | | 100.00 | | | |
| | MONTHLY FLOATING 11/25/2070 | | 95.2226 | 436,962.87 | 416,087.36 | (20,875.51) |
| | 26833RAB4 | | 436,962.8700 | | | |
| | EDUCATIONAL SERVICES OF AMERICA INC 1ML+ | | 99.2852 | | | |
| | MONTHLY FLOATING 04/25/2039 | | 98.8013 | 213,619.61 | 212,578.67 | (1,040.94) |
| | 28137QAA7 | | 215,157.6600 | | | |
| | EL PASO283443 3% 9/15/2026 | | 104.282 | | | |
| | SEMI-ANN. 3.000% 09/15/2026 | | 94.2308 | 495,339.50 | 447,596.44 | (47,743.06) |
| | 283443KK4 | | 475,000 | | | |
| | EMD FIN LLC 3.25% 03/19/2025 144A | | 107.621 | | | |
| | SEMI-ANN. 3.250% 03/19/2025 | | 95.8308 | 150,669.40 | 134,163.17 | (16,506.23) |
| | 26867LAL4 | | 140,000 | | | |
| | EMERSON ELECTRIC CO 2% 12/21/2028 | | 99.779 | | | |
| | SEMI-ANN. 2.000% 12/21/2028 | | 84.9129 | 668,519.30 | 568,916.32 | (99,602.98) |
| | 291011BQ6 | | 670,000 | | | |
| | EMORY UNIVERSITY GA 1.566% 09/01/2025 | | 100.00 | | | |
| | SEMI-ANN. 1.566% 09/01/2025 | | 91.5812 | 155,000.00 | 141,950.92 | (13,049.08) |
| | 29157TAC0 | | 155,000 | | | |
| | ENBRIDGE INC 1.6% 10/04/2026 | | 95.226 | | | |
| | SEMI-ANN. 1.600% 10/04/2026 | | 87.5803 | 228,542.40 | 210,192.75 | (18,349.65) |
| | 29250NBH7 | | 240,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| ENBRIDGE INC 3.7% 07/15/2027 | | 104.37 | | | |
| SEMI-ANN. 3.700% 07/15/2027 | | 93.6082 | 135,681.00 | 121,690.62 | (13,990.38) |
| 29250NAR6 | | 130,000 | | | |
| ENBRIDGE INC 4.25% 12/01/2026 | | 106.636 | | | |
| SEMI-ANN. 4.250% 12/01/2026 | | 96.1411 | 95,972.40 | 86,526.95 | (9,445.45) |
| 29250NAL9 | | 90,000 | | | |
| ENTERGY ARKANSAS LLC 3.05% 06/01/2023 | | 98.40 | | | |
| SEMI-ANN. 3.050% 06/01/2023 | | 99.2410 | 492,000.00 | 496,204.82 | 4,204.82 |
| 29364DAR1 | | 500,000 | | | |
| ENTERPRISE FLEET FINANCING 2022-2 LLC 4. | | 99.9893 | | | |
| MONTHLY 4.650% 05/21/2029 | | 98.6186 | 839,910.46 | 828,395.99 | (11,514.47) |
| 29374JAB1 | | 840,000 | | | |
| ENTERPRISE FLEET FING 2022-4 LLC 5.76% 1 | | 99.9837 | | | |
| MONTHLY 5.760% 10/22/2029 | | 100.5104 | 349,943.09 | 351,786.30 | 1,843.21 |
| 29374GAB7 | | 350,000 | | | |
| ENTERPRISE PRODS OPER LLC 3.95% 02/15/20 | | 105.0094 | | | |
| SEMI-ANN. 3.950% 02/15/2027 | | 95.9087 | 658,409.14 | 601,347.45 | (57,061.69) |
| 29379VBL6 | | 627,000 | | | |
| EQUIFAX INC 3.95% 06/15/2023 | | 98.615 | | | |
| SEMI-ANN. 3.950% 06/15/2023 | | 99.4301 | 493,075.00 | 497,150.52 | 4,075.52 |
| 294429AN5 | | 500,000 | | | |
| EQUIFAX INC 5.1% 12/15/2027 | | 99.907 | | | |
| SEMI-ANN. 5.100% 12/15/2027 | | 98.7090 | 259,758.20 | 256,643.38 | (3,114.82) |
| 294429AV7 | | 260,000 | | | |
| EQUINOR ASA 1.75% 01/22/2026 | | 99.599 | | | |
| SEMI-ANN. 1.750% 01/22/2026 | | 91.3927 | 39,839.60 | 36,557.06 | (3,282.54) |
| 29446MAJ1 | | 40,000 | | | |
| EQUINOR ASA 2.875% 04/06/2025 | | 103.4025 | | | |
| SEMI-ANN. 2.875% 04/06/2025 | | 95.8217 | 299,867.25 | 277,882.94 | (21,984.31) |
| 29446MAD4 | | 290,000 | | | |
| ERP OPERATING LP 3.25% 08/01/2027 | | 95.086 | | | |
| SEMI-ANN. 3.250% 08/01/2027 | | 91.5748 | 256,732.20 | 247,252.05 | (9,480.15) |
| 26884ABG7 | | 270,000 | | | |
| EVERGY KANSAS CENTRAL 2.55% 07/01/2026 | | 105.201 | | | |
| SEMI-ANN. 2.550% 07/01/2026 | | 92.1077 | 568,085.40 | 497,381.82 | (70,703.58) |
| 95709TAN0 | | 540,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | EVERGY KANSAS CENTRAL 3.1% 04/01/2027 | 103.267 | | | |
| | SEMI-ANN. 3.100% 04/01/2027 | 92.7136 | 123,920.40 | 111,256.37 | (12,664.03) |
| | 95709TAP5 | 120,000 | | | |
| | EVERGY MISSOURI WEST INC 5.15% 12/15/202 | 99.806 | | | |
| | SEMI-ANN. 5.150% 12/15/2027 | 99.6268 | 89,825.40 | 89,664.12 | (161.28) |
| | 30037FAA8 | 90,000 | | | |
| | EXELON CORP 2.75% 03/15/2027 | 99.869 | | | |
| | SEMI-ANN. 2.750% 03/15/2027 | 91.7085 | 39,947.60 | 36,683.38 | (3,264.22) |
| | 30161NBB6 | 40,000 | | | |
| | FANNIEMAE 30YR 3% 04/01/2050#BP0957 | 105.5781 | | | |
| | MONTHLY 3.000% 04/01/2050 | 88.9238 | 338,387.04 | 285,008.41 | (53,378.63) |
| | 3140K8B34 | 320,508.6900 | | | |
| | FEDERAL HOME LN MTG MLT CTF GT 1.336% 09 | 102.9953 | | | |
| | MONTHLY 1.336% 09/25/2027 | 87.2974 | 1,452,233.73 | 1,230,893.76 | (221,339.97) |
| | 3137F64P9 | 1,410,000 | | | |
| | FEDERAL REALTY INVESTMENT TR 1.25% 02/15 | 99.339 | | | |
| | SEMI-ANN. 1.250% 02/15/2026 | 88.0725 | 129,140.70 | 114,494.25 | (14,646.45) |
| | 313747BB2 | 130,000 | | | |
| | FEDERAL REALTY INVESTMENT TR 2.75% 06/01 | 95.406 | | | |
| | SEMI-ANN. 2.750% 06/01/2023 | 98.8854 | 190,812.00 | 197,770.70 | 6,958.70 |
| | 313747AT4 | 200,000 | | | |
| | FEDERATION DES CAISE DESJARDIN 0.45% 10/ | 99.878 | | | |
| | SEMI-ANN. 0.450% 10/07/2023 | 96.5221 | 749,085.00 | 723,915.78 | (25,169.22) |
| | 31430WET7 | 750,000 | | | |
| | FEDEX CORP 4.2% 10/17/2028 | 100.589 | | | |
| | SEMI-ANN. 4.200% 10/17/2028 | 94.9619 | 211,236.90 | 199,419.92 | (11,816.98) |
| | 31428XBR6 | 210,000 | | | |
| | FHLG ARM 3.072% 11/01/2044#2B3360 | 101.0859 | | | |
| | MONTHLY FLOATING 11/01/2044 | 96.8619 | 18,968.25 | 18,175.65 | (792.60) |
| | 31326HWV2 | 18,764.4900 | | | |
| | FHLG ARM 3.16% 07/01/2044#2B2966 | 100.6563 | | | |
| | MONTHLY FLOATING 07/01/2044 | 97.9665 | 59,542.95 | 57,951.82 | (1,591.13) |
| | 31326HJK1 | 59,154.7300 | | | |
| | FHLG 15YR 2.5% 01/01/2035#QN1350 | 101.4961 | | | |
| | MONTHLY 2.500% 01/01/2035 | 92.3956 | 580,238.25 | 528,211.79 | (52,026.46) |
| | 3133G7QB2 | 571,685.3100 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| | **** * SECURITIES * *** | ***UNIT COST<br>MARKET PRICE<br>SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | FHLG 15YR 2.5% 01/01/2035#QN1355 | 101.4336 | | | |
| | MONTHLY 2.500% 01/01/2035 | 92.2393 | 726,506.89 | 660,653.77 | (65,853.12) |
| | 3133G7QG1 | 716,238.9200 | | | |
| | FHLG 15YR 2.5% 02/01/2035#QN1511 | 101.7813 | | | |
| | MONTHLY 2.500% 02/01/2035 | 92.0831 | 379,388.34 | 343,238.42 | (36,149.92) |
| | 3133G7VC4 | 372,748.7500 | | | |
| | FHLG 15YR 2.5% 02/01/2035#QN1577 | 101.9141 | | | |
| | MONTHLY 2.500% 02/01/2035 | 92.1456 | 82,584.65 | 74,668.87 | (7,915.78) |
| | 3133G7XE8 | 81,033.6100 | | | |
| | FHLG 15YR 2.5% 02/01/2035#QN1678 | 101.7969 | | | |
| | MONTHLY 2.500% 02/01/2035 | 92.0831 | 287,255.86 | 259,844.88 | (27,410.98) |
| | 3133G72K8 | 282,185.3500 | | | |
| | FHLG 15YR 2.5% 11/01/2034#QN0876 | 100.9375 | | | |
| | MONTHLY 2.500% 11/01/2034 | 92.1768 | 679,274.99 | 620,318.47 | (58,956.52) |
| | 3133G66M2 | 672,965.9400 | | | |
| | FHLG 15YR 2.5% 12/01/2034#QN1198 | 101.0235 | | | |
| | MONTHLY 2.500% 12/01/2034 | 92.2393 | 98,418.43 | 89,860.78 | (8,557.65) |
| | 3133G7KK8 | 97,421.3600 | | | |
| | FHLG 30YR 2.5% 01/01/2052#QD5209 | 101.6406 | | | |
| | MONTHLY 2.500% 01/01/2052 | 85.2601 | 543,327.75 | 455,764.40 | (87,563.35) |
| | 3133B2YE3 | 534,557.6600 | | | |
| | FHLG 30YR 2.5% 09/01/2051#RA5782 | 100.6033 | | | |
| | MONTHLY 2.500% 09/01/2051 | 85.8070 | 4,884,434.18 | 4,166,050.06 | (718,384.12) |
| | 3133KMM77 | 4,855,141.7900 | | | |
| | FHLG 30YR 2% 12/01/2051#QD2058 | 100.4883 | | | |
| | MONTHLY 2.000% 12/01/2051 | 82.1075 | 261,748.17 | 213,870.68 | (47,877.49) |
| | 3133AYJB7 | 260,476.3300 | | | |
| | FHLG 30YR 2% 12/01/2051#QD2067 | 100.3789 | | | |
| | MONTHLY 2.000% 12/01/2051 | 82.0763 | 460,804.22 | 376,783.32 | (84,020.90) |
| | 3133AYJL5 | 459,064.8100 | | | |
| | FHLG 30YR 2% 12/01/2051#QD2940 | 99.9336 | | | |
| | MONTHLY 2.000% 12/01/2051 | 82.0763 | 124,336.05 | 102,118.22 | (22,217.83) |
| | 3133B0HR7 | 124,418.6800 | | | |
| | FHLG 30YR 2% 12/01/2051#QD3152 | 100.0234 | | | |
| | MONTHLY 2.000% 12/01/2051 | 82.0763 | 106,873.28 | 87,697.07 | (19,176.21) |
| | 3133B0QD8 | 106,848.2500 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FHLG 30YR 2% 12/01/2051#QD3165 | | 100.1601 | | | |
| MONTHLY 2.000% 12/01/2051 | | 82.0763 | 89,621.04 | 73,440.01 | (16,181.03) |
| 3133B0QS5 | | 89,477.7500 | | | |
| FHLG 30YR 3.5% 01/01/2048#G67707 | | 100.4844 | | | |
| MONTHLY 3.500% 01/01/2048 | | 93.5703 | 1,144,732.15 | 1,065,965.80 | (78,766.35) |
| 3132XCR49 | | 1,139,214.0700 | | | |
| FHLG 30YR 3.5% 03/01/2048#G67710 | | 100.1758 | | | |
| MONTHLY 3.500% 03/01/2048 | | 93.0703 | 1,170,431.95 | 1,087,412.82 | (83,019.13) |
| 3132XCR72 | | 1,168,378.1600 | | | |
| FHLG 30YR 3.5% 08/01/2046#G67700 | | 100.5156 | | | |
| MONTHLY 3.500% 08/01/2046 | | 93.5078 | 930,246.12 | 865,390.32 | (64,855.80) |
| 3132XCRV9 | | 925,474.1400 | | | |
| FHLG 30YR 3.5% 10/45#G60238 | | 100.6172 | | | |
| MONTHLY 3.500% 10/01/2045 | | 93.5390 | 335,905.04 | 312,275.00 | (23,630.04) |
| 31335AHP6 | | 333,844.6000 | | | |
| FHLG 30YR 3% 04/01/2050#QA9008 | | 105.5312 | | | |
| MONTHLY 3.000% 04/01/2050 | | 88.9238 | 795,633.70 | 670,424.62 | (125,209.08) |
| 3133A4AH9 | | 753,931.8500 | | | |
| FHLG 30YR 3% 04/01/2050#QA9071 | | 105.5313 | | | |
| MONTHLY 3.000% 04/01/2050 | | 88.8300 | 328,368.93 | 276,401.71 | (51,967.22) |
| 3133A4CG9 | | 311,158 | | | |
| FHLG 30YR 3% 12/01/2049#QA5182 | | 101.8477 | | | |
| MONTHLY 3.000% 12/01/2049 | | 89.0800 | 611,316.65 | 534,681.92 | (76,634.73) |
| 31346YXK4 | | 600,226.5400 | | | |
| FHLG 30YR 3% 12/01/2049#QA5215 | | 101.8125 | | | |
| MONTHLY 3.000% 12/01/2049 | | 89.0175 | 287,593.13 | 251,450.73 | (36,142.40) |
| 31346YYL1 | | 282,473.3000 | | | |
| FHLM ARM 0% 10/01/2046#2B5647 | | 98.6055 | | | |
| MONTHLY FLOATING 10/01/2046 | | 99.5989 | 388,780.44 | 392,697.25 | 3,916.81 |
| 31326LHY4 | | 394,278.7800 | | | |
| FHLM ARM 2.481% 03/01/2047#840637 | | 99.7226 | | | |
| MONTHLY FLOATING 03/01/2047 | | 98.7597 | 20,828.70 | 20,627.58 | (201.12) |
| 31347AV68 | | 20,886.6300 | | | |
| FHLM ARM 2.553% 11/46#2B5726 | | 99.3867 | | | |
| MONTHLY FLOATING 11/01/2046 | | 99.0195 | 302,598.89 | 301,480.99 | (1,117.90) |
| 31326LLF0 | | 304,466.1300 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST MARKET PRICE SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FHLM ARM 2.631% 07/01/2046#840357 | | 98.6875 | | | |
| MONTHLY FLOATING 07/01/2046 | | 99.8543 | 107,386.27 | 108,655.90 | 1,269.63 |
| 31347AME1 | | 108,814.4400 | | | |
| FHLM ARM 2.808% 01/01/2046#2B5033 | | 100.1289 | | | |
| MONTHLY FLOATING 01/01/2046 | | 95.8770 | 24,985.76 | 23,924.76 | (1,061.00) |
| 31326KSW8 | | 24,953.5900 | | | |
| FHLM ARM 2.808% 06/01/2045#849709 | | 100.125 | | | |
| MONTHLY FLOATING 06/01/2045 | | 95.9192 | 1,127,122.34 | 1,079,776.56 | (47,345.78) |
| 31300MYE7 | | 1,125,715.2000 | | | |
| FHLM ARM 2.879% 02/01/2046#2B5130 | | 100.7657 | | | |
| MONTHLY FLOATING 02/01/2046 | | 101.2425 | 28,069.27 | 28,202.11 | 132.84 |
| 31326KVX2 | | 27,855.9900 | | | |
| FHLM ARM 2.904% 03/01/2046#840260 | | 99.7656 | | | |
| MONTHLY FLOATING 03/01/2046 | | 102.1173 | 46,998.41 | 48,106.25 | 1,107.84 |
| 31347AJD7 | | 47,108.8200 | | | |
| FHLM ARM 2.907% 03/01/2046#2B5188 | | 100.4414 | | | |
| MONTHLY FLOATING 03/01/2046 | | 95.9753 | 29,331.58 | 28,027.37 | (1,304.21) |
| 31326KXR3 | | 29,202.6800 | | | |
| FHLM ARM 2.949% 07/01/2045#2B4390 | | 100.1250 | | | |
| MONTHLY FLOATING 07/01/2045 | | 95.5130 | 315,683.31 | 301,142.03 | (14,541.28) |
| 31326J2X7 | | 315,289.2100 | | | |
| FHLM ARM 2.966% 01/01/2042#2B0180 | | 100.125 | | | |
| MONTHLY FLOATING 01/01/2042 | | 99.5612 | 344,741.09 | 342,799.73 | (1,941.36) |
| 3128LLFV3 | | 344,310.7000 | | | |
| FHLM ARM 2.988% 12/01/2041#2B0103 | | 100.1250 | | | |
| MONTHLY FLOATING 12/01/2041 | | 99.7052 | 81,507.02 | 81,165.25 | (341.77) |
| 3128LLDG8 | | 81,405.2700 | | | |
| FHLM ARM 3.099% 12/01/2041#2B0088 | | 100.125 | | | |
| MONTHLY FLOATING 12/01/2041 | | 99.7126 | 1,325,357.72 | 1,319,899.30 | (5,458.42) |
| 3128LLCZ7 | | 1,323,703.0900 | | | |
| FHLM ARM 3.18% 11/01/2041#1B8988 | | 100.1250 | | | |
| MONTHLY FLOATING 11/01/2041 | | 99.9262 | 633,302.38 | 632,044.70 | (1,257.68) |
| 3128UHLU7 | | 632,511.7500 | | | |
| FHLM ARM 3.239% 12/01/2041#848661 | | 100.1250 | | | |
| MONTHLY FLOATING 12/01/2041 | | 99.8063 | 491,649.01 | 490,083.94 | (1,565.07) |
| 31300LTS4 | | 491,035.2200 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | FIDELITY NATL INFORMN SVCS INC 4.5% 07/1 | 99.964 | | | |
| | SEMI-ANN. 4.500% 07/15/2025 | 98.0555 | 164,940.60 | 161,791.51 | (3,149.09) |
| | 31620MBV7 | 165,000 | | | |
| | FIFTH THIRD BANCORP 2.375% 01/28/2025 | 99.972 | | | |
| | SEMI-ANN. 2.375% 01/28/2025 | 94.8185 | 89,974.80 | 85,336.66 | (4,638.14) |
| | 316773CY4 | 90,000 | | | |
| | FIFTH THIRD BANCORP 4.055%/VAR 04/25/202 | 100.00 | | | |
| | SEMI-ANN. FLOATING 04/25/2028 | 94.8132 | 150,000.00 | 142,219.74 | (7,780.26) |
| | 316773DE7 | 150,000 | | | |
| | FIFTH THIRD BANCORP 4.772%/VAR 07/28/203 | 100.0147 | | | |
| | SEMI-ANN. FLOATING 07/28/2030 | 95.3725 | 100,014.70 | 95,372.53 | (4,642.17) |
| | 316773DG2 | 100,000 | | | |
| | FIFTH THIRD BANCORP 6.361/VAR 10/27/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 10/27/2028 | 102.8894 | 500,000.00 | 514,447.04 | 14,447.04 |
| | 316773DJ6 | 500,000 | | | |
| | FISERV INC 3.85% 06/01/2025 | 108.317 | | | |
| | SEMI-ANN. 3.850% 06/01/2025 | 96.8793 | 292,455.90 | 261,574.07 | (30,881.83) |
| | 337738AP3 | 270,000 | | | |
| | FLORIDA GAS TRANSMISSION CO LLC 4.35% 07 | 101.97 | | | |
| | SEMI-ANN. 4.350% 07/15/2025 | 97.1760 | 509,850.00 | 485,879.81 | (23,970.19) |
| | 340711AW0 | 500,000 | | | |
| | FMC CORP 3.2% 10/01/2026 | 105.181 | | | |
| | SEMI-ANN. 3.200% 10/01/2026 | 93.0203 | 294,506.80 | 260,456.73 | (34,050.07) |
| | 302491AT2 | 280,000 | | | |
| | FNMA ARM 0% 09/01/2052# | 100.1563 | | | |
| | MONTHLY FLOATING 09/01/2052 | 96.6768 | 1,494,405.31 | 1,442,488.89 | (51,916.42) |
| | 3140LXJV8 | 1,492,073.9400 | | | |
| | FNMA ARM 2.392% 12/01/2046#BE4194 | 98.2656 | | | |
| | MONTHLY FLOATING 12/01/2046 | 99.9157 | 103,166.61 | 104,898.99 | 1,732.38 |
| | 3140FPUU1 | 104,987.5000 | | | |
| | FNMA ARM 2.424% 05/01/2043#AL3544 | 98.5624 | | | |
| | MONTHLY FLOATING 05/01/2043 | 100.2966 | 8,863.45 | 9,019.40 | 155.95 |
| | 3138EK5E1 | 8,992.7300 | | | |
| | FNMA ARM 2.488% 09/01/2042#AP7557 | 99.7187 | | | |
| | MONTHLY FLOATING 09/01/2042 | 103.0640 | 13,822.84 | 14,286.55 | 463.71 |
| | 3138MBMF0 | 13,861.8300 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FNMA ARM 2.704% 07/01/2046#BC1205 | | 99.3750 | | | |
| MONTHLY FLOATING 07/01/2046 | | 99.7084 | 60,960.95 | 61,165.49 | 204.54 |
| 3140EVKT3 | | 61,344.3700 | | | |
| FNMA ARM 2.712% 07/01/2043#AL7431 | | 99.5156 | | | |
| MONTHLY FLOATING 07/01/2043 | | 101.3977 | 60,803.80 | 61,953.74 | 1,149.94 |
| 3138EQHH8 | | 61,099.7500 | | | |
| FNMA ARM 2.769% 05/01/2046#BC2832 | | 99.5625 | | | |
| MONTHLY FLOATING 05/01/2046 | | 100.2723 | 64,968.20 | 65,431.33 | 463.13 |
| 3140EXEE9 | | 65,253.6600 | | | |
| FNMA ARM 2.844% 10/01/2045#BA2731 | | 99.7812 | | | |
| MONTHLY FLOATING 10/01/2045 | | 102.6321 | 14,399.64 | 14,811.06 | 411.42 |
| 3140E7A91 | | 14,431.2100 | | | |
| FNMA ARM 3.69% 01/01/2049#BJ7558 | | 101.7344 | | | |
| MONTHLY FLOATING 01/01/2049 | | 96.7714 | 584,002.15 | 555,512.10 | (28,490.05) |
| 3140H9MG5 | | 574,046.0400 | | | |
| FNMA ARM 7/45#AY5666 | | 99.2969 | | | |
| MONTHLY FLOATING 07/01/2045 | | 101.1586 | 53,792.89 | 54,801.45 | 1,008.56 |
| 3138YKJL8 | | 54,173.8000 | | | |
| FNMA 15YR 2.5% 01/01/2035#FM2268 | | 101.9063 | | | |
| MONTHLY 2.500% 01/01/2035 | | 92.2393 | 598,370.98 | 541,608.78 | (56,762.20) |
| 3140X5QW6 | | 587,177.8900 | | | |
| FNMA 15YR 2.5% 02/01/2035#BK0700 | | 102.0860 | | | |
| MONTHLY 2.500% 02/01/2035 | | 92.1456 | 50,444.19 | 45,532.30 | (4,911.89) |
| 3140HDX66 | | 49,413.4500 | | | |
| FNMA 15YR 2.5% 02/01/2035#BK0706 | | 101.9922 | | | |
| MONTHLY 2.500% 02/01/2035 | | 92.1456 | 53,048.55 | 47,927.07 | (5,121.48) |
| 3140HDYC2 | | 52,012.3500 | | | |
| FNMA 15YR 2.5% 02/01/2035#BK0707 | | 102.1953 | | | |
| MONTHLY 2.500% 02/01/2035 | | 92.3018 | 599,954.17 | 541,872.71 | (58,081.46) |
| 3140HDYD0 | | 587,066.2400 | | | |
| FNMA 15YR 2.5% 02/01/2035#BO9283 | | 101.9141 | | | |
| MONTHLY 2.500% 02/01/2035 | | 92.1456 | 98,792.47 | 89,323.16 | (9,469.31) |
| 3140K5J57 | | 96,937.0300 | | | |
| FNMA 15YR 2.5% 11/01/2034#BO3664 | | 100.8750 | | | |
| MONTHLY 2.500% 11/01/2034 | | 92.1768 | 583,651.96 | 533,325.10 | (50,326.86) |
| 3140JYCA2 | | 578,589.3000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FNMA 15YR 2.5% 11/01/2034#CA4446 | | 101.6406 | | | |
| MONTHLY | 2.500% | 11/01/2034 | 92.3956 | 595,151.77 | 541,017.71 | (54,134.06) |
| 3140QB5G9 | | | 585,545.2000 | | | |
| FNMA 15YR 2.5% 12/01/2034#BK0498 | | | 100.9297 | | | |
| MONTHLY | 2.500% | 12/01/2034 | 92.2393 | 474,667.28 | 433,796.82 | (40,870.46) |
| 3140HDRU0 | | | 470,295 | | | |
| FNMA 15YR 2.5% 12/01/2034#BO6253 | | | 101.0313 | | | |
| MONTHLY | 2.500% | 12/01/2034 | 92.2393 | 131,276.05 | 119,852.13 | (11,423.92) |
| 3140K15P7 | | | 129,936.0800 | | | |
| FNMA 15YR 3% 01/01/2035#CA5070 | | | 103.3516 | | | |
| MONTHLY | 3.000% | 01/01/2035 | 94.5872 | 638,117.41 | 584,004.25 | (54,113.16) |
| 3140QCT48 | | | 617,424.0600 | | | |
| FNMA 15YR 3% 12/01/2034#BK0505 | | | 102.8828 | | | |
| MONTHLY | 3.000% | 12/01/2034 | 94.5872 | 239,290.93 | 219,996.57 | (19,294.36) |
| 3140HDR30 | | | 232,585.9300 | | | |
| FNMA 15YR 4% 02/01/2034#CA3155 | | | 103.5234 | | | |
| MONTHLY | 4.000% | 02/01/2034 | 98.2053 | 376,690.02 | 357,339.05 | (19,350.97) |
| 3140QAQH6 | | | 363,869.3000 | | | |
| FNMA 15YR 4% 02/01/2034#CA3156 | | | 103.3359 | | | |
| MONTHLY | 4.000% | 02/01/2034 | 98.2053 | 249,623.89 | 237,230.12 | (12,393.77) |
| 3140QAQJ2 | | | 241,565.4200 | | | |
| FNMA 30YR 1.03% 12/01/2027#BL9422 | | | 101.0313 | | | |
| MONTHLY | 1.030% | 12/01/2027 | 85.4762 | 1,816,184.34 | 1,536,558.67 | (279,625.67) |
| 3140J2PG5 | | | 1,797,646.0900 | | | |
| FNMA 30YR 2.08% 10/01/2026#BL3670 | | | 100.3125 | | | |
| MONTHLY | 2.080% | 10/01/2026 | 91.2832 | 1,294,031.25 | 1,177,553.02 | (116,478.23) |
| 3140HVCG7 | | | 1,290,000 | | | |
| FNMA 30YR 2.5% 01/01/2052#BU1439 | | | 101.5000 | | | |
| MONTHLY | 2.500% | 01/01/2052 | 85.1976 | 554,179.37 | 465,169.97 | (89,009.40) |
| 3140M2S52 | | | 545,989.5200 | | | |
| FNMA 30YR 2.5% 01/01/2052#CB2625 | | | 99.9922 | | | |
| MONTHLY | 2.500% | 01/01/2052 | 85.2601 | 1,303,586.89 | 1,111,526.32 | (192,060.57) |
| 3140QM4K7 | | | 1,303,688.7400 | | | |
| FNMA 30YR 2% 12/01/2051#BT9487 | | | 99.9727 | | | |
| MONTHLY | 2.000% | 12/01/2051 | 82.0763 | 104,102.09 | 85,466.49 | (18,635.60) |
| 3140LYRH8 | | | 104,130.5600 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FNMA 30YR 2% 12/01/2051#BT9492 | | 100.1250 | | | |
| MONTHLY 2.000% 12/01/2051 | | 82.0763 | 105,001.23 | 86,073.50 | (18,927.73) |
| 3140LYRN5 | | 104,870.1300 | | | |
| FNMA 30YR 2% 12/01/2051#CB2279 | | 100.3438 | | | |
| MONTHLY 2.000% 12/01/2051 | | 82.2638 | 1,540,112.42 | 1,262,614.45 | (277,497.97) |
| 3140QMQ98 | | 1,534,836.4100 | | | |
| FNMA 30YR 2% 12/01/2051#CB2280 | | 99.3203 | | | |
| MONTHLY 2.000% 12/01/2051 | | 82.1075 | 499,670.71 | 413,074.89 | (86,595.82) |
| 3140QMRA4 | | 503,090.1400 | | | |
| FNMA 30YR 3.069% 09/01/2025#BM6010 | | 102.3468 | | | |
| MONTHLY FLOATING 09/01/2025 | | 96.2250 | 352,697.44 | 331,600.96 | (21,096.48) |
| 3140JAVC9 | | 344,610.1300 | | | |
| FNMA 30YR 3.23% 11/01/2028#BS5507 | | 101.0625 | | | |
| MONTHLY 3.230% 11/01/2028 | | 92.9003 | 1,010,625.00 | 929,002.70 | (81,622.30) |
| 3140LGDM1 | | 1,000,000 | | | |
| FNMA 30YR 3.5% 02/01/2047#BE7488 | | 100.1875 | | | |
| MONTHLY 3.500% 02/01/2047 | | 93.1086 | 171,217.94 | 159,120.25 | (12,097.69) |
| 3140FTKA8 | | 170,897.5000 | | | |
| FNMA 30YR 3% 04/01/2047#FM1000 | | 101.0313 | | | |
| MONTHLY 3.000% 04/01/2047 | | 89.9238 | 116,474.18 | 103,668.89 | (12,805.29) |
| 3140X4DE3 | | 115,285.3000 | | | |
| FNMA 30YR 3% 04/01/2050#BO7852 | | 105.5312 | | | |
| MONTHLY 3.000% 04/01/2050 | | 88.9238 | 841,191.07 | 708,812.63 | (132,378.44) |
| 3140K3WN8 | | 797,101.4200 | | | |
| FNMA 30YR 3% 04/01/2050#BP5167 | | 105.5391 | | | |
| MONTHLY 3.000% 04/01/2050 | | 89.0488 | 280,209.07 | 236,426.88 | (43,782.19) |
| 3140KCW57 | | 265,502.6900 | | | |
| FNMA 30YR 3% 04/01/2050#BP5168 | | 105.6875 | | | |
| MONTHLY 3.000% 04/01/2050 | | 89.2988 | 237,495.89 | 200,667.90 | (36,827.99) |
| 3140KCW65 | | 224,715.1900 | | | |
| FNMA 30YR 3% 04/01/2050#QA8876 | | 105.6875 | | | |
| MONTHLY 3.000% 04/01/2050 | | 89.3613 | 157,093.54 | 132,826.27 | (24,267.27) |
| 3133A32H0 | | 148,639.6400 | | | |
| FNMA 30YR 3% 04/01/2050#QA8877 | | 105.5313 | | | |
| MONTHLY 3.000% 04/01/2050 | | 89.0488 | 486,671.57 | 410,660.39 | (76,011.18) |
| 3133A32J6 | | 461,163.4600 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| FNMA 30YR 3% 11/01/2049#BO8255 | | 101.5781 | | | |
| MONTHLY 3.000% 11/01/2049 | | 89.0175 | 1,071,921.46 | 939,373.39 | (132,548.07) |
| 3140K4E55 | | 1,055,267.9800 | | | |
| FNMA 30YR 3% 12/01/2049#BO5023 | | 101.7945 | | | |
| MONTHLY 3.000% 12/01/2049 | | 89.0800 | 699,305.79 | 611,959.91 | (87,345.88) |
| 3140K0SM1 | | 686,977.7400 | | | |
| FNMA 30YR 3% 12/01/2049#BO9979 | | 101.8125 | | | |
| MONTHLY 3.000% 12/01/2049 | | 89.0175 | 225,183.16 | 196,883.94 | (28,299.22) |
| 3140K6CR4 | | 221,174.3700 | | | |
| FNMA 30YR 4.73% 07/01/2027#BS6998 | | 100.0625 | | | |
| MONTHLY 4.730% 07/01/2027 | | 99.9599 | 740,462.50 | 739,702.89 | (759.61) |
| 3140LHX47 | | 740,000 | | | |
| FNMA 30YR 4.77% 07/01/2027#BS7000 | | 100.0625 | | | |
| MONTHLY 4.770% 07/01/2027 | | 100.0918 | 409,963.77 | 410,083.93 | 120.16 |
| 3140LHX62 | | 409,707.7000 | | | |
| FORD CR AUTO OWNER TR 2019-1 A 3.52% 07/ | | 99.9771 | | | |
| MONTHLY 3.520% 07/15/2030 | | 98.0458 | 1,399,679.82 | 1,372,640.50 | (27,039.32) |
| 34532PAA8 | | 1,400,000 | | | |
| FORD CR AUTO OWNER TR 2020-REV1 2.04% 08 | | 99.9656 | | | |
| MONTHLY 2.040% 08/15/2031 | | 93.6845 | 484,832.97 | 454,369.78 | (30,463.19) |
| 34531NAA4 | | 485,000 | | | |
| FORD CR AUTO OWNER TR 2020-REV2 1.06% 04 | | 99.9676 | | | |
| MONTHLY 1.060% 04/15/2033 | | 89.6211 | 1,609,478.84 | 1,442,900.19 | (166,578.65) |
| 34532JAA2 | | 1,610,000 | | | |
| FORD CREDIT AUTO OWNER TRUST 2021-1 A 1. | | 99.9996 | | | |
| MONTHLY 1.370% 10/17/2033 | | 89.4006 | 779,996.80 | 697,324.91 | (82,671.89) |
| 345340AA1 | | 780,000 | | | |
| FORD CREDIT AUTO OWNER TRUST 2022-REV1 3 | | 99.9708 | | | |
| MONTHLY 3.880% 11/15/2034 | | 96.0029 | 624,817.50 | 600,018.38 | (24,799.12) |
| 34528EAA9 | | 625,000 | | | |
| FORD CREDIT AUTO OWNER TRUST 22-C A3 4.4 | | 99.9942 | | | |
| MONTHLY 4.480% 12/15/2026 | | 99.1651 | 829,952.03 | 823,070.00 | (6,882.03) |
| 34535AAD2 | | 830,000 | | | |
| FORTUNE BRANDS INNOVATIONS INC 4% 09/21/ | | 99.662 | | | |
| SEMI-ANN. 4.000% 09/21/2023 | | 99.2830 | 239,188.80 | 238,279.29 | (909.51) |
| 34964CAC0 | | 240,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | | (d) | (e) |
|---|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | | Cost*** | Current Value |
| * * | ***SECURITIES * *** | | ***UNIT COST MARKET PRICE SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | FREDDIE MAC NON ARM 4.049% 09/01/2052#8C | | 100.0391 | | | |
| | MONTHLY FLOATING 09/01/2052 | | 96.5807 | 1,511,842.49 | 1,459,578.21 | (52,264.28) |
| | 3142BAMP4 | | 1,511,252.1500 | | | |
| | FREDDIE MAC NON GOLD POOL ARM 0% 06/01/2 | | 95.9531 | | | |
| | MONTHLY FLOATING 06/01/2052 | | 91.3906 | 1,446,614.74 | 1,377,828.41 | (68,786.33) |
| | 3142BAJY9 | | 1,507,626.4900 | | | |
| | FRISCO TX ISCD 1.551% 2/15/2028 | | 100.00 | | | |
| | SEMI-ANN. 1.551% 02/15/2028 | | 84.9508 | 590,000.00 | 501,209.78 | (88,790.22) |
| | 35880CD84 | | 590,000 | | | |
| | GE HEALTHCARE HOLDING LLC 5.65% 11/15/20 | | 99.599 | | | |
| | SEMI-ANN. 5.650% 11/15/2027 | | 101.1700 | 348,596.50 | 354,095.17 | 5,498.67 |
| | 36267VAE3 | | 350,000 | | | |
| | GENERAL MTRS FINL CO INC 2.4% 10/15/2028 | | 99.75 | | | |
| | SEMI-ANN. 2.400% 10/15/2028 | | 82.9206 | 478,800.00 | 398,018.88 | (80,781.12) |
| | 37045XDP8 | | 480,000 | | | |
| | GENERAL MTRS FINL CO INC 3.8% 04/07/2025 | | 99.98 | | | |
| | SEMI-ANN. 3.800% 04/07/2025 | | 96.5294 | 259,948.00 | 250,976.53 | (8,971.47) |
| | 37045XDU7 | | 260,000 | | | |
| | GENERAL MTRS FINL CO INC 5% 04/09/2027 | | 99.888 | | | |
| | SEMI-ANN. 5.000% 04/09/2027 | | 96.8669 | 149,832.00 | 145,300.29 | (4,531.71) |
| | 37045XDW3 | | 150,000 | | | |
| | GEORGIA PAC LLC 1.75% 09/30/2025 144A | | 96.6374 | | | |
| | SEMI-ANN. 1.750% 09/30/2025 | | 91.3386 | 376,886.00 | 356,220.60 | (20,665.40) |
| | 37331NAJ0 | | 390,000 | | | |
| | GLENDALE CA USD 1.58% 9/1/2030 | | 85.103 | | | |
| | SEMI-ANN. 1.580% 09/01/2030 | | 78.9670 | 855,285.15 | 793,618.25 | (61,666.90) |
| | 378460C49 | | 1,005,000 | | | |
| | GM FINANCIAL REVOLVING RECEIVABLES TRUST | | 99.9801 | | | |
| | MONTHLY 1.170% 06/12/2034 | | 87.0137 | 489,902.54 | 426,366.93 | (63,535.61) |
| | 36263HAA6 | | 490,000 | | | |
| | GM FINANCIAL REVOLVING RECEIVABLES TRUST | | 99.9802 | | | |
| | MONTHLY 5.910% 10/11/2035 | | 101.9654 | 429,914.77 | 438,451.26 | 8,536.49 |
| | 36265UAA5 | | 430,000 | | | |
| | GM FINL CONSUMER AUTOMOBILE RECEIVABLES | | 99.9791 | | | |
| | MONTHLY 3.100% 02/16/2027 | | 96.8807 | 729,847.43 | 707,229.40 | (22,618.03) |
| | 362585AC5 | | 730,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| GOLDMAN SACHS GROUP INC (THE) SOFR 1.948 | | 99.8878 | | | |
| SEMI-ANN. FLOATING 10/21/2027 | | 87.4385 | 649,271.00 | 568,350.22 | (80,920.78) |
| 38141GYM0 | | 650,000 | | | |
| GOLDMAN SACHS GROUP INC (THE) 2.64%/VAR | | 100.00 | | | |
| SEMI-ANN. FLOATING 02/24/2028 | | 89.0385 | 320,000.00 | 284,923.32 | (35,076.68) |
| 38141GZK3 | | 320,000 | | | |
| GOLDMAN SACHS GROUP INC (THE) 3.272/VAR | | 94.424 | | | |
| SEMI-ANN. FLOATING 09/29/2025 | | 96.3628 | 472,120.00 | 481,814.16 | 9,694.16 |
| 38141GWQ3 | | 500,000 | | | |
| GOLDMAN SACHS GROUP INC (THE) 3.615/VAR | | 100.00 | | | |
| SEMI-ANN. FLOATING 03/15/2028 | | 93.1462 | 580,000.00 | 540,247.72 | (39,752.28) |
| 38141GZR8 | | 580,000 | | | |
| GOLDMAN SACHS GROUP INC (THE) 4.387%/VAR | | 100.00 | | | |
| SEMI-ANN. FLOATING 06/15/2027 | | 96.3418 | 80,000.00 | 77,073.40 | (2,926.60) |
| 38141GZT4 | | 80,000 | | | |
| GOVERNMENT NAT MTG AS REMIC PT 1ML+72 01 | | 100.00 | | | |
| MONTHLY FLOATING 01/20/2069 | | 97.6542 | 693,848.12 | 677,571.97 | (16,276.15) |
| 38381TC37 | | 693,848.1200 | | | |
| GSK CONSUMER HEALTHCARE CAPITAL UK PLC 3 | | 99.739 | | | |
| SEMI-ANN. 3.125% 03/24/2025 | | 95.0995 | 299,217.00 | 285,298.38 | (13,918.62) |
| 36264NAB0 | | 300,000 | | | |
| GSMS 2013-GC16 A4 4.271% 11/46 | | 104.7422 | | | |
| MONTHLY 4.271% 11/10/2046 | | 98.7788 | 1,162,638.28 | 1,096,444.68 | (66,193.60) |
| 36248GAD2 | | 1,110,000 | | | |
| GUARDIAN LIFE GLOBAL FUNDING 3.246% 03/2 | | 100.00 | | | |
| SEMI-ANN. 3.246% 03/29/2027 | | 93.5709 | 170,000.00 | 159,070.47 | (10,929.53) |
| 40139LBF9 | | 170,000 | | | |
| GULFSTREAM NAT GAS SYS LLC 4.6% 09/15/20 | | 99.928 | | | |
| SEMI-ANN. 4.600% 09/15/2025 | | 96.7152 | 169,877.60 | 164,415.77 | (5,461.83) |
| 402740AD6 | | 170,000 | | | |
| HALLIBURTON CO 2.92% 03/01/2030 | | 99.974 | | | |
| SEMI-ANN. 2.920% 03/01/2030 | | 85.7319 | 309,919.40 | 265,768.95 | (44,150.45) |
| 406216BL4 | | 310,000 | | | |
| HALLIBURTON CO 3.8% 11/15/2025 | | 98.828 | | | |
| SEMI-ANN. 3.800% 11/15/2025 | | 97.2656 | 11,859.36 | 11,671.87 | (187.49) |
| 406216BG5 | | 12,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | HEALTH CARE SVCS CORP 1.5% 06/01/2025 14 | 102.537 | | | |
| | SEMI-ANN. 1.500% 06/01/2025 | 91.8600 | 266,596.20 | 238,836.04 | (27,760.16) |
| | 42218SAD0 | 260,000 | | | |
| | HEALTHPEAK PROPERTIES 2.125% 12/01/2028 | 99.398 | | | |
| | SEMI-ANN. 2.125% 12/01/2028 | 83.8274 | 99,398.00 | 83,827.40 | (15,570.60) |
| | 42250PAD5 | 100,000 | | | |
| | HEINEKEN NV 3.5% 01/29/2028 144A | 103.746 | | | |
| | SEMI-ANN. 3.500% 01/29/2028 | 94.4387 | 207,492.00 | 188,877.38 | (18,614.62) |
| | 423012AF0 | 200,000 | | | |
| | HEWLETT PACKARD ENTERPRISE CO 4.45% 10/0 | 99.956 | | | |
| | SEMI-ANN. 4.450% 10/02/2023 | 99.4070 | 349,846.00 | 347,924.60 | (1,921.40) |
| | 42824CBG3 | 350,000 | | | |
| | HI ST 1.535% 8/1/2027 | 100.00 | | | |
| | SEMI-ANN. 1.535% 08/01/2027 | 87.1192 | 550,000.00 | 479,155.44 | (70,844.56) |
| | 419792G34 | 550,000 | | | |
| | HONDA AUTO RECEIVABLES 2022-1 OWNER TRUS | 99.9850 | | | |
| | MONTHLY 1.880% 05/15/2026 | 95.0299 | 204,969.17 | 194,811.38 | (10,157.79) |
| | 43815BAC4 | 205,000 | | | |
| | HONDA MOTOR CO LTD 2.271% 03/10/2025 | 100.00 | | | |
| | SEMI-ANN. 2.271% 03/10/2025 | 94.6271 | 280,000.00 | 264,955.91 | (15,044.09) |
| | 438127AA0 | 280,000 | | | |
| | HONDA MOTOR CO LTD 2.534% 03/10/2027 | 100.00 | | | |
| | SEMI-ANN. 2.534% 03/10/2027 | 91.3618 | 290,000.00 | 264,949.19 | (25,050.81) |
| | 438127AB8 | 290,000 | | | |
| | HP INC 1.45% 06/17/2026 | 99.808 | | | |
| | SEMI-ANN. 1.450% 06/17/2026 | 87.6002 | 209,596.80 | 183,960.44 | (25,636.36) |
| | 40434LAF2 | 210,000 | | | |
| | HP INC 4.75% 01/15/2028 | 99.841 | | | |
| | SEMI-ANN. 4.750% 01/15/2028 | 97.0233 | 69,888.70 | 67,916.33 | (1,972.37) |
| | 40434LAM7 | 70,000 | | | |
| | HP INC 4% 04/15/2029 | 99.767 | | | |
| | SEMI-ANN. 4.000% 04/15/2029 | 91.2795 | 189,557.30 | 173,430.96 | (16,126.34) |
| | 40434LAK1 | 190,000 | | | |
| | HSBC HOLDINGS PLC 2.633%/VAR 11/07/2025 | 100.00 | | | |
| | SEMI-ANN. FLOATING 11/07/2025 | 93.9134 | 200,000.00 | 187,826.73 | (12,173.27) |
| | 404280CE7 | 200,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | HSBC HOLDINGS PLC 2.999%/VAR 03/10/2026 | 100.00 | | | |
| | SEMI-ANN. FLOATING 03/10/2026 | 93.9875 | 200,000.00 | 187,975.09 | (12,024.91) |
| | 404280DA4 | 200,000 | | | |
| | HSBC HOLDINGS PLC 3.803%/VAR 03/11/2025 | 100.00 | | | |
| | SEMI-ANN. FLOATING 03/11/2025 | 97.2128 | 715,000.00 | 695,071.31 | (19,928.69) |
| | 404280BZ1 | 715,000 | | | |
| | HSBC HOLDINGS PLC 4.292%/VAR 09/12/2026 | 100.787 | | | |
| | SEMI-ANN. FLOATING 09/12/2026 | 95.6557 | 503,935.00 | 478,278.48 | (25,656.52) |
| | 404280BX6 | 500,000 | | | |
| | HSBC HOLDINGS PLC 4.755/VAR 06/09/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 06/09/2028 | 94.5208 | 200,000.00 | 189,041.52 | (10,958.48) |
| | 404280DF3 | 200,000 | | | |
| | HUNTINGTON BANCSHARES INC/OH 2.625% 08/0 | 99.781 | | | |
| | SEMI-ANN. 2.625% 08/06/2024 | 95.9807 | 429,058.30 | 412,716.97 | (16,341.33) |
| | 446150AQ7 | 430,000 | | | |
| | HUNTINGTON BANCSHARES INC/OH 4.443%/VAR | 100.00 | | | |
| | SEMI-ANN. FLOATING 08/04/2028 | 95.2522 | 90,000.00 | 85,727.00 | (4,273.00) |
| | 446150BB9 | 90,000 | | | |
| | HUNTINGTON NATL BK COLUMBUS OH 4.008%/VA | 100.00 | | | |
| | SEMI-ANN. FLOATING 05/16/2025 | 97.8241 | 250,000.00 | 244,560.33 | (5,439.67) |
| | 44644MAD3 | 250,000 | | | |
| | IBM CORPORATION 2.2% 02/09/2027 | 99.9708 | | | |
| | SEMI-ANN. 2.200% 02/09/2027 | 89.8511 | 199,941.50 | 179,702.12 | (20,239.38) |
| | 459200KM2 | 200,000 | | | |
| | IBM CORPORATION 4% 07/27/2025 | 100.00 | | | |
| | SEMI-ANN. 4.000% 07/27/2025 | 98.3771 | 440,000.00 | 432,859.44 | (7,140.56) |
| | 459200KS9 | 440,000 | | | |
| | INGERSOLL RAND GLB HLDG CO LTD 3.75% 08/ | 104.119 | | | |
| | SEMI-ANN. 3.750% 08/21/2028 | 93.6407 | 297,780.34 | 267,812.32 | (29,968.02) |
| | 45687AAP7 | 286,000 | | | |
| | INGREDION INC 2.9% 06/01/2030 | 94.2752 | | | |
| | SEMI-ANN. 2.900% 06/01/2030 | 84.7148 | 169,695.30 | 152,486.64 | (17,208.66) |
| | 457187AC6 | 180,000 | | | |
| | INTEL CORP 3.75% 08/05/2027 | 99.896 | | | |
| | SEMI-ANN. 3.750% 08/05/2027 | 96.0682 | 449,532.00 | 432,306.76 | (17,225.24) |
| | 458140BY5 | 450,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | INTERSTATE PWR & LT CO 3.25% 12/01/2024 | 98.644 | | | |
| | SEMI-ANN. 3.250% 12/01/2024 | 96.4601 | 463,626.80 | 453,362.61 | (10,264.19) |
| | 461070AL8 | 470,000 | | | |
| | INTERSTATE PWR & LT CO 4.1% 09/26/2028 | 118.163 | | | |
| | SEMI-ANN. 4.100% 09/26/2028 | 95.2165 | 319,040.10 | 257,084.65 | (61,955.45) |
| | 461070AP9 | 270,000 | | | |
| | J P MORGAN CHASE COML MTG SECS TR 2013-C | 103.5898 | | | |
| | MONTHLY FLOATING 01/15/2046 | 99.1501 | 603,344.46 | 577,485.79 | (25,858.67) |
| | 46640JAR8 | 582,435.9100 | | | |
| | JOHN DEERE OWNER TRUST 2021 0.36% 09/15/ | 99.9808 | | | |
| | MONTHLY 0.360% 09/15/2025 | 96.554 | 959,238.05 | 926,360.75 | (32,877.30) |
| | 47788UAC6 | 959,422.4500 | | | |
| | JP MORGAN CHASE COMMERCIAL MORTGAGE SECU | 96.2000 | | | |
| | MONTHLY FLOATING 04/15/2037 | 92.4824 | 694,218.57 | 667,391.07 | (26,827.50) |
| | 466317AA2 | 721,640.9300 | | | |
| | JPMBB COML MTG SES TR 2014-C19 3.997% 04 | 102.9963 | | | |
| | MONTHLY 3.996% 04/15/2047 | 97.6716 | 1,235,955.47 | 1,172,058.60 | (63,896.87) |
| | 46641WAV9 | 1,200,000 | | | |
| | JPMDB COML MTG SECS TR 2016-C4 A3 3.1413 | 93.9648 | | | |
| | MONTHLY 3.141% 12/15/2049 | 92.0877 | 775,209.96 | 759,723.61 | (15,486.35) |
| | 46646RAJ2 | 825,000 | | | |
| | JPMORGAN CHASE & CO SOFR 1.47%/VAR 09/22 | 100.00 | | | |
| | SEMI-ANN. FLOATING 09/22/2027 | 86.5763 | 260,000.00 | 225,098.38 | (34,901.62) |
| | 46647PCP9 | 260,000 | | | |
| | JPMORGAN CHASE & CO VAR/3.782 02/01/2028 | 113.747 | | | |
| | SEMI-ANN. FLOATING 02/01/2028 | 93.4295 | 318,491.60 | 261,602.65 | (56,888.95) |
| | 46625HRY8 | 280,000 | | | |
| | JPMORGAN CHASE & CO 0.824/VAR 06/01/2025 | 100.00 | | | |
| | SEMI-ANN. FLOATING 06/01/2025 | 93.2149 | 230,000.00 | 214,394.24 | (15,605.76) |
| | 46647PCH7 | 230,000 | | | |
| | JPMORGAN CHASE & CO 0.969%/VAR 06/23/202 | 100.2336 | | | |
| | SEMI-ANN. FLOATING 06/23/2025 | 93.2169 | 390,911.10 | 363,545.93 | (27,365.17) |
| | 46647PCK0 | 390,000 | | | |
| | JPMORGAN CHASE & CO 1.578%/VAR 04/22/202 | 100.00 | | | |
| | SEMI-ANN. FLOATING 04/22/2027 | 87.8662 | 340,000.00 | 298,745.24 | (41,254.76) |
| | 46647PCB0 | 340,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | JPMORGAN CHASE & CO 2.947%/VAR 02/24/202 | 100.00 | | | |
| | SEMI-ANN. FLOATING 02/24/2028 | 90.4597 | 560,000.00 | 506,574.51 | (53,425.49) |
| | 46647PCW4 | 560,000 | | | |
| | JPMORGAN CHASE & CO 3.559%/VAR 04/23/24 | 99.856 | | | |
| | SEMI-ANN. FLOATING 04/23/2024 | 99.3413 | 499,280.00 | 496,706.67 | (2,573.33) |
| | 46647PAP1 | 500,000 | | | |
| | JPMORGAN CHASE & CO 3.96%/VAR 01/29/2027 | 99.9527 | | | |
| | SEMI-ANN. FLOATING 01/29/2027 | 95.3247 | 409,806.00 | 390,831.16 | (18,974.84) |
| | 46647PBA3 | 410,000 | | | |
| | JPMORGAN CHASE & CO 4.323/VAR 04/26/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 04/26/2028 | 95.4987 | 660,000.00 | 630,291.31 | (29,708.69) |
| | 46647PDA1 | 660,000 | | | |
| | JPMORGAN CHASE & CO 4.851%/VAR 07/25/202 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/25/2028 | 97.4783 | 70,000.00 | 68,234.84 | (1,765.16) |
| | 46647PDG8 | 70,000 | | | |
| | KENTUCKY UTILITIES CO 3.3% 10/01/2025 | 98.117 | | | |
| | SEMI-ANN. 3.300% 10/01/2025 | 95.2287 | 245,292.50 | 238,071.70 | (7,220.80) |
| | 491674BK2 | 250,000 | | | |
| | KEYBANK NATL ASSN 4.39% 12/14/2027 | 100.55 | | | |
| | SEMI-ANN. 4.390% 12/14/2027 | 96.1580 | 402,200.00 | 384,632.11 | (17,567.89) |
| | 49306SAA4 | 400,000 | | | |
| | KEYCORP 3.878%/VAR 05/23/2025 | 100.00 | | | |
| | SEMI-ANN. FLOATING 05/23/2025 | 97.8464 | 110,000.00 | 107,631.00 | (2,369.00) |
| | 49326EEL3 | 110,000 | | | |
| | KIMCO REALTY CORP 2.7% 03/01/2024 | 95.147 | | | |
| | SEMI-ANN. 2.700% 03/01/2024 | 96.7792 | 267,363.07 | 271,949.64 | 4,586.57 |
| | 49446RAR0 | 281,000 | | | |
| | KINDER MORGAN INC DEL 1.75% 11/15/2026 | 99.828 | | | |
| | SEMI-ANN. 1.750% 11/15/2026 | 88.2540 | 339,415.20 | 300,063.75 | (39,351.45) |
| | 49456BAU5 | 340,000 | | | |
| | KING&SNOHO WA 4.493% 12/1/2025 | 102.197 | | | |
| | SEMI-ANN. 4.493% 12/01/2025 | 98.8490 | 510,985.00 | 494,244.90 | (16,740.10) |
| | 494656F89 | 500,000 | | | |
| | KRAFT HEINZ FOODS CO 3.875% 05/15/2027 | 101.375 | | | |
| | SEMI-ANN. 3.875% 05/15/2027 | 95.5397 | 101,375.00 | 95,539.68 | (5,835.32) |
| | 50077LBC9 | 100,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | LA CA CCD 1.806% 8/1/2030 | 96.91 | | | |
| | SEMI-ANN. 1.806% 08/01/2030 | 81.9110 | 387,640.00 | 327,644.08 | (59,995.92) |
| | 54438CYN6 | 400,000 | | | |
| | LACLEDE GAS CO FRN SOFR+50 12/02/2024 | 100.00 | | | |
| | QUARTERLY FLOATING 12/02/2024 | 99.1217 | 590,000.00 | 584,818.13 | (5,181.87) |
| | 84859DAB3 | 590,000 | | | |
| | LAKE CTRL IN M 1.20% 1/15/2026 | 100.00 | | | |
| | SEMI-ANN. 1.200% 01/15/2026 | 89.7236 | 460,000.00 | 412,728.65 | (47,271.35) |
| | 507686RH8 | 460,000 | | | |
| | LAKESIDE CASITAS 4.21% 12/19/2042 | 100.1563 | | | |
| | MONTHLY 4.210% 12/19/2042 | 100.1563 | 2,193,421.88 | 2,193,421.88 | 0.00 |
| | JOW872000 | 2,190,000 | | | |
| | LANSE CREUSE 1.841% 5/1/2029 | 81.667 | | | |
| | SEMI-ANN. 1.841% 05/01/2029 | 81.1011 | 530,835.50 | 527,157.28 | (3,678.22) |
| | 516228RX3 | 650,000 | | | |
| | LELAND STANFORD JR UNIV CALIF 1.289% 06/ | 100.00 | | | |
| | SEMI-ANN. 1.289% 06/01/2027 | 86.8133 | 205,000.00 | 177,967.29 | (27,032.71) |
| | 85440KAC8 | 205,000 | | | |
| | LIFE FINANCIAL SERVICES TRUST 2022 TSFR1 | 99.5000 | | | |
| | MONTHLY FLOATING 05/15/2039 | 97.4947 | 626,849.94 | 614,216.74 | (12,633.20) |
| | 53218DAA6 | 630,000 | | | |
| | LOUISIANA LOC GOVT ENVIRONMENTAL FACS & | 100.00 | | | |
| | SEMI-ANN. 4.145% 02/01/2033 | 94.709 | 990,000.00 | 937,619.10 | (52,380.90) |
| | 54627RAM2 | 990,000 | | | |
| | LOUISVILLE GAS & ELECTRIC CO 3.3% 10/01/ | 98.5961 | | | |
| | SEMI-ANN. 3.300% 10/01/2025 | 95.5350 | 788,768.40 | 764,280.26 | (24,488.14) |
| | 546676AW7 | 800,000 | | | |
| | LOWES COS INC 1.7% 09/15/2028 | 99.777 | | | |
| | SEMI-ANN. 1.700% 09/15/2028 | 83.9908 | 129,710.10 | 109,188.06 | (20,522.04) |
| | 548661ED5 | 130,000 | | | |
| | LOWES COS INC 3.35% 04/01/2027 | 100.3698 | | | |
| | SEMI-ANN. 3.350% 04/01/2027 | 93.8764 | 220,813.60 | 206,528.08 | (14,285.52) |
| | 548661EG8 | 220,000 | | | |
| | LOWES COS INC 4.4% 09/08/2025 | 99.9961 | | | |
| | SEMI-ANN. 4.400% 09/08/2025 | 98.5069 | 109,995.70 | 108,357.56 | (1,638.14) |
| | 548661EK9 | 110,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | LOWES COS INC 4% 04/15/2025 | 110.089 | | | |
| | SEMI-ANN. 4.000% 04/15/2025 | 98.0524 | 49,540.05 | 44,123.60 | (5,416.45) |
| | 548661DT1 | 45,000 | | | |
| | M&T BANK CORP FRN 3ML+68 07/26/2023 | 98.9401 | | | |
| | QUARTERLY FLOATING 07/26/2023 | 100.0221 | 549,117.32 | 555,122.46 | 6,005.14 |
| | 55261FAK0 | 555,000 | | | |
| | M&T BANK CORP 4.553%/VAR 0 08/16/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 08/16/2028 | 97.397 | 140,000.00 | 136,355.80 | (3,644.20) |
| | 55261FAQ7 | 140,000 | | | |
| | MA SCH BLDG 1.753% 8/15/2030 | 99.285 | | | |
| | SEMI-ANN. 1.753% 08/15/2030 | 81.6427 | 347,497.50 | 285,749.38 | (61,748.12) |
| | 576000ZJ5 | 350,000 | | | |
| | MA ST SPL OB RV 3.68% 7/15/2027 | 100.00 | | | |
| | SEMI-ANN. 3.680% 07/15/2027 | 96.2782 | 640,000.00 | 616,180.67 | (23,819.33) |
| | 576004HD0 | 640,000 | | | |
| | MA ST 4.5% 8/01/31 | 113.624 | | | |
| | SEMI-ANN. 4.500% 08/01/2031 | 97.5048 | 568,120.00 | 487,524.05 | (80,595.95) |
| | 57582PWH9 | 500,000 | | | |
| | MA ST 5.306% 01/01/2030 | 115.498 | | | |
| | SEMI-ANN. 5.306% 01/01/2030 | 101.0486 | 230,996.00 | 202,097.12 | (28,898.88) |
| | 57582PUD0 | 200,000 | | | |
| | MAGALLANES INC 3.755% 03/15/2027 144A | 100.00 | | | |
| | SEMI-ANN. 3.755% 03/15/2027 | 90.0529 | 730,000.00 | 657,386.51 | (72,613.49) |
| | 55903VAG8 | 730,000 | | | |
| | MANUFACTURERS & TRADERS TR CO 5.4% 11/21 | 99.94 | | | |
| | SEMI-ANN. 5.400% 11/21/2025 | 100.5244 | 259,844.00 | 261,363.44 | 1,519.44 |
| | 55279HAT7 | 260,000 | | | |
| | MARATHON PETROLEUM CORP 4.7% 05/01/2025 | 99.805 | | | |
| | SEMI-ANN. 4.700% 05/01/2025 | 98.4710 | 329,356.50 | 324,954.17 | (4,402.33) |
| | 56585ABH4 | 330,000 | | | |
| | MARSH & MCLENNAN COS INC 3.875% 03/15/20 | 99.945 | | | |
| | SEMI-ANN. 3.875% 03/15/2024 | 98.6126 | 189,895.50 | 187,363.97 | (2,531.53) |
| | 571748BF8 | 190,000 | | | |
| | MARSH & MCLENNAN COS INC 4.375% 03/15/20 | 99.965 | | | |
| | SEMI-ANN. 4.375% 03/15/2029 | 96.5888 | 299,895.00 | 289,766.48 | (10,128.52) |
| | 571748BG6 | 300,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| | **** * SECURITIES * *** | ***UNIT COST MARKET PRICE SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | MARTA GA 2.111% 7/1/2031 | 100.00 | | | |
| | SEMI-ANN. 2.111% 07/01/2031 | 80.0826 | 375,000.00 | 300,309.68 | (74,690.32) |
| | 5917457W8 | 375,000 | | | |
| | MASCO CORP 3.5% 11/15/2027 | 102.906 | | | |
| | SEMI-ANN. 3.500% 11/15/2027 | 92.6250 | 154,359.00 | 138,937.53 | (15,421.47) |
| | 574599BN5 | 150,000 | | | |
| | MASSMUTUAL GLOBAL FDG II 2.75% 06/22/202 | 96.105 | | | |
| | SEMI-ANN. 2.750% 06/22/2024 | 96.5400 | 240,262.50 | 241,349.97 | 1,087.47 |
| | 57629WCE8 | 250,000 | | | |
| | MASSMUTUAL GLOBAL FDG II 5.05% 12/07/202 | 99.956 | | | |
| | SEMI-ANN. 5.050% 12/07/2027 | 100.4855 | 319,859.20 | 321,553.53 | 1,694.33 |
| | 57629WDL1 | 320,000 | | | |
| | MCCORMICK & CO INC 3.15% 08/15/2024 | 96.438 | | | |
| | SEMI-ANN. 3.150% 08/15/2024 | 96.8101 | 482,190.00 | 484,050.41 | 1,860.41 |
| | 579780AM9 | 500,000 | | | |
| | MCDONALDS CORP 3.5% 07/01/2027 | 99.515 | | | |
| | SEMI-ANN. 3.500% 07/01/2027 | 94.8569 | 169,175.50 | 161,256.69 | (7,918.81) |
| | 58013MFP4 | 170,000 | | | |
| | MERCEDES BENZ RETAIL SA 5.375% 11/26/202 | 99.752 | | | |
| | SEMI-ANN. 5.375% 11/26/2025 | 100.5411 | 149,628.00 | 150,811.70 | 1,183.70 |
| | 58769JAB3 | 150,000 | | | |
| | METLIFE SECURITIZATION TRUST 2019-1A A1A | 101.8157 | | | |
| | MONTHLY 3.750% 04/25/2058 | 96.8728 | 140,661.16 | 133,832.48 | (6,828.68) |
| | 59166EAB1 | 138,152.7700 | | | |
| | METROPOLITAN LIFE GLBL FDG I 3.3% 03/21/ | 99.709 | | | |
| | SEMI-ANN. 3.300% 03/21/2029 | 89.5375 | 418,777.80 | 376,057.65 | (42,720.15) |
| | 59217GEZ8 | 420,000 | | | |
| | MICROCHIP TECHNOLOGY INC 4.333% 06/01/20 | 98.163 | | | |
| | SEMI-ANN. 4.333% 06/01/2023 | 99.5729 | 245,407.50 | 248,932.29 | 3,524.79 |
| | 595017AP9 | 250,000 | | | |
| | MID AMERICA APTS LP 1.1% 09/15/2026 | 94.7948 | | | |
| | SEMI-ANN. 1.100% 09/15/2026 | 86.4801 | 303,343.20 | 276,736.34 | (26,606.86) |
| | 59523UAT4 | 320,000 | | | |
| | MID AMERICA APTS LP 1.7% 02/15/2031 | 99.465 | | | |
| | SEMI-ANN. 1.700% 02/15/2031 | 77.9664 | 119,358.00 | 93,559.62 | (25,798.38) |
| | 59523UAS6 | 120,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | MID AMERICA APTS LP 3.95% 03/15/2029 | 99.72 | | | |
| | SEMI-ANN. 3.950% 03/15/2029 | 93.8591 | 49,860.00 | 46,929.57 | (2,930.43) |
| | 59523UAQ0 | 50,000 | | | |
| | MIDAMERICAN ENERGY CO 3.1% 05/01/2027 | 103.298 | | | |
| | SEMI-ANN. 3.100% 05/01/2027 | 93.6219 | 568,139.00 | 514,920.51 | (53,218.49) |
| | 595620AQ8 | 550,000 | | | |
| | MITSUBISHI UFJ FIN GRP INC T1Y 2.341%/VA | 100.00 | | | |
| | SEMI-ANN. FLOATING 01/19/2028 | 88.0184 | 200,000.00 | 176,036.77 | (23,963.23) |
| | 606822CC6 | 200,000 | | | |
| | MITSUBISHI UFJ FIN GRP INC 1.538%/VAR 07 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/20/2027 | 86.6940 | 520,000.00 | 450,808.62 | (69,191.38) |
| | 606822BY9 | 520,000 | | | |
| | MITSUBISHI UFJ FIN GRP INC 1.64%/VAR 10/ | 100.00 | | | |
| | SEMI-ANN. FLOATING 10/13/2027 | 86.6064 | 390,000.00 | 337,765.01 | (52,234.99) |
| | 606822BZ6 | 390,000 | | | |
| | MITSUBISHI UFJ FIN GRP INC 2.193% 02/25/ | 100.00 | | | |
| | SEMI-ANN. 2.193% 02/25/2025 | 93.5894 | 200,000.00 | 187,178.85 | (12,821.15) |
| | 606822BN3 | 200,000 | | | |
| | MITSUBISHI UFJ FIN GRP INC 5.017%/VAR 0 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/20/2028 | 97.6125 | 200,000.00 | 195,224.99 | (4,775.01) |
| | 606822CL6 | 200,000 | | | |
| | MMAF EQUIP FIN LLC 2020-B 0.66% 11/15/20 | 99.9996 | | | |
| | MONTHLY 0.660% 11/15/2027 | 90.9322 | 924,996.49 | 841,122.76 | (83,873.73) |
| | 60700KAD4 | 925,000 | | | |
| | MMAF EQUIPMENT FINANCE LLC 22-A A3 3.2% | 99.9787 | | | |
| | MONTHLY 3.200% 01/13/2028 | 95.7006 | 574,877.64 | 550,278.16 | (24,599.48) |
| | 55317RAC6 | 575,000 | | | |
| | MONDELEZ INTL HLDGS NETH B V 1.25% 09/24 | 99.619 | | | |
| | SEMI-ANN. 1.250% 09/24/2026 | 86.9120 | 358,628.40 | 312,883.35 | (45,745.05) |
| | 60920LAR5 | 360,000 | | | |
| | MONDELEZ INTL INC 2.625% 03/17/2027 | 99.8174 | | | |
| | SEMI-ANN. 2.625% 03/17/2027 | 90.6563 | 369,324.50 | 335,428.16 | (33,896.34) |
| | 609207BA2 | 370,000 | | | |
| | MORGAN STANLEY BANK OF AMERICA MERRILL L | 95.5253 | | | |
| | MONTHLY 3.276% 11/15/2052 | 91.7103 | 592,256.83 | 568,603.98 | (23,652.85) |
| | 61767EAD6 | 620,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | MORGAN STANLEY BK AMER MERRILL LYNCH TR | 101.1250 | | | |
| | MONTHLY 3.600% 06/15/2047 | 97.3727 | 656,009.52 | 631,667.59 | (24,341.93) |
| | 61763MAE0 | 648,711.5100 | | | |
| | MORGAN STANLEY BK AMER MERRILL LYNCH TR | 93.9844 | | | |
| | MONTHLY 3.337% 05/15/2050 | 92.3529 | 535,710.94 | 526,411.25 | (9,299.69) |
| | 61767CAU2 | 570,000 | | | |
| | MORGAN STANLEY BK OF AMER MERRILL LYNCH | 101.875 | | | |
| | MONTHLY 3.741% 08/15/2047 | 96.8679 | 1,222,500.00 | 1,162,415.16 | (60,084.84) |
| | 61763UAZ5 | 1,200,000 | | | |
| | MORGAN STANLEY 0.791%/VAR 01/22/2025 | 99.514 | | | |
| | SEMI-ANN. FLOATING 01/22/2025 | 94.6049 | 298,542.00 | 283,814.81 | (14,727.19) |
| | 61747YEB7 | 300,000 | | | |
| | MORGAN STANLEY 2.188%/VAR 04/28/2026 | 105.09 | | | |
| | SEMI-ANN. FLOATING 04/28/2026 | 92.9265 | 325,779.00 | 288,072.24 | (37,706.76) |
| | 6174468Q5 | 310,000 | | | |
| | MORGAN STANLEY 2.475/VAR 01/21/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 01/21/2028 | 88.8553 | 90,000.00 | 79,969.78 | (10,030.22) |
| | 61747YEK7 | 90,000 | | | |
| | MORGAN STANLEY 3.625% 01/20/2027 | 95.729 | | | |
| | SEMI-ANN. 3.625% 01/20/2027 | 94.3015 | 67,010.30 | 66,011.05 | (999.25) |
| | 61746BEF9 | 70,000 | | | |
| | MORGAN STANLEY 3.875% 01/27/2026 | 99.146 | | | |
| | SEMI-ANN. 3.875% 01/27/2026 | 96.8020 | 495,730.00 | 484,009.86 | (11,720.14) |
| | 61746BDZ6 | 500,000 | | | |
| | MORGAN STANLEY 4.679%/VAR 07/17/2026 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/17/2026 | 98.2855 | 380,000.00 | 373,485.06 | (6,514.94) |
| | 61747YET8 | 380,000 | | | |
| | MORGAN STANLEY 6.296/VAR 10/18/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 10/18/2028 | 103.2305 | 870,000.00 | 898,104.94 | 28,104.94 |
| | 61747YEV3 | 870,000 | | | |
| | MPLX LP 1.75% 03/01/2026 | 99.785 | | | |
| | SEMI-ANN. 1.750% 03/01/2026 | 89.1370 | 189,591.50 | 169,360.32 | (20,231.18) |
| | 55336VBR0 | 190,000 | | | |
| | MSBAM 2013-C9 A4 3.102% 5/46 | 98.9844 | | | |
| | MONTHLY 3.102% 05/15/2046 | 99.2421 | 989,843.75 | 992,421.40 | 2,577.65 |
| | 61762DAW1 | 1,000,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | | (d) | (e) |
|---|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | | Cost*** | Current Value |
| * * SECURITIES * * | | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | NATIONAL AUSTRALIA BANK LTD 1.887% 01/12 | | 100.00 | | | |
| | SEMI-ANN. 1.887% 01/12/2027 | | 88.8344 | 360,000.00 | 319,804.00 | (40,196.00) |
| | 6325C0EB3 | | 360,000 | | | |
| | NATURE CONSERVANCY/THE FRN 3ML+108 02/01 | | 100.00 | | | |
| | QUARTERLY FLOATING 02/01/2024 | | 99.9076 | 475,000.00 | 474,561.30 | (438.70) |
| | 63902HAC3 | | 475,000 | | | |
| | NAVIENT STUDENT LOAN TRUST 2021-1 1ML+ 1 | | 100.00 | | | |
| | MONTHLY FLOATING 12/26/2069 | | 95.6298 | 618,965.52 | 591,915.67 | (27,049.85) |
| | 63942NAB4 | | 618,965.5200 | | | |
| | ND PUB FIN AUTH 1.81% 12/1/2027 | | 100.00 | | | |
| | SEMI-ANN. 1.810% 12/01/2027 | | 87.1809 | 500,000.00 | 435,904.35 | (64,095.65) |
| | 65887PWE1 | | 500,000 | | | |
| | NELNET STUDENT LN TR 2021-C 1.32% 04/20/ | | 99.9699 | | | |
| | MONTHLY 1.320% 04/20/2062 | | 88.8636 | 166,472.20 | 147,977.77 | (18,494.43) |
| | 64035GAB5 | | 166,522.3700 | | | |
| | NELNET STUDENT LOAN TRUST 2021-A 1.36% 0 | | 99.9827 | | | |
| | MONTHLY 1.360% 04/20/2062 | | 88.5703 | 592,226.89 | 524,627.69 | (67,599.20) |
| | 64035DAB2 | | 592,329.0700 | | | |
| | NELNET STUDENT LOAN TRUST 2021-D 1.63% 0 | | 99.9924 | | | |
| | MONTHLY 1.630% 04/20/2062 | | 90.1959 | 865,400.96 | 780,615.29 | (84,785.67) |
| | 64034YAB7 | | 865,466.3900 | | | |
| | NESTLE HOLDINGS INC 4.125% 10/01/2027 14 | | 99.93 | | | |
| | SEMI-ANN. 4.125% 10/01/2027 | | 97.6463 | 489,657.00 | 478,467.04 | (11,189.96) |
| | 641062BB9 | | 490,000 | | | |
| | NEW YORK LIFE GLOBAL FDG 1.45% 01/14/202 | | 99.892 | | | |
| | SEMI-ANN. 1.450% 01/14/2025 | | 93.1574 | 319,654.40 | 298,103.66 | (21,550.74) |
| | 64952WEK5 | | 320,000 | | | |
| | NEW YORK LIFE GLOBAL FDG 2.35% 07/14/202 | | 105.149 | | | |
| | SEMI-ANN. 2.350% 07/14/2026 | | 92.0015 | 262,872.50 | 230,003.87 | (32,868.63) |
| | 64952WCH4 | | 250,000 | | | |
| | NEW YORK LIFE GLOBAL FDG 3.6% 08/05/2025 | | 99.972 | | | |
| | SEMI-ANN. 3.600% 08/05/2025 | | 96.3840 | 339,904.80 | 327,705.74 | (12,199.06) |
| | 64952WEU3 | | 340,000 | | | |
| | NEW YORK ST D 1.952% 3/15/2029 | | 85.562 | | | |
| | SEMI-ANN. 1.952% 03/15/2029 | | 83.3640 | 299,467.00 | 291,774.04 | (7,692.96) |
| | 64990FD84 | | 350,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | NEW YORK ST D 2.657% 2/15/2028 | 91.928 | | | |
| | SEMI-ANN. 2.657% 02/15/2028 | 88.5258 | 151,681.20 | 146,067.50 | (5,613.70) |
| | 64990FS96 | 165,000 | | | |
| | NEXTERA ENERGY CAP HLDGS INC 1.875% 01/1 | 99.931 | | | |
| | SEMI-ANN. 1.875% 01/15/2027 | 88.5057 | 614,575.65 | 544,309.98 | (70,265.67) |
| | 65339KBY5 | 615,000 | | | |
| | NEXTERA ENERGY CAP HLDGS INC 4.625% 07/1 | 99.961 | | | |
| | SEMI-ANN. 4.625% 07/15/2027 | 98.3255 | 169,933.70 | 167,153.41 | (2,780.29) |
| | 65339KCH1 | 170,000 | | | |
| | NISSAN AUTO RECEIVABLES 2022-B OWNER TR | 99.9793 | | | |
| | MONTHLY 4.460% 05/17/2027 | 99.2451 | 959,801.38 | 952,752.86 | (7,048.52) |
| | 65480JAC4 | 960,000 | | | |
| | NORFOLK SOUTHERN CORP 3.15% 06/01/2027 | 93.887 | | | |
| | SEMI-ANN. 3.150% 06/01/2027 | 92.9526 | 300,438.40 | 297,448.28 | (2,990.12) |
| | 655844BT4 | 320,000 | | | |
| | NORFOLK SOUTHERN CORP 3.65% 08/01/2025 | 101.356 | | | |
| | SEMI-ANN. 3.650% 08/01/2025 | 96.7850 | 506,780.00 | 483,924.89 | (22,855.11) |
| | 655844CA4 | 500,000 | | | |
| | NORTH TEXAS HIGHER EDUCATION AUTHORITY I | 100.00 | | | |
| | MONTHLY FLOATING 09/25/2061 | 96.3626 | 513,276.84 | 494,607.01 | (18,669.83) |
| | 66286VAB3 | 513,276.8400 | | | |
| | NORTH TX STUD 0% 10/25/2061 | 100.00 | | | |
| | MONTHLY FLOATING 10/25/2061 | 94.3936 | 609,073.01 | 574,926.18 | (34,146.83) |
| | 662826FP6 | 609,073.0100 | | | |
| | NORTHROP GRUMMAN CORP 2.93% 01/15/2025 | 96.66 | | | |
| | SEMI-ANN. 2.930% 01/15/2025 | 95.9001 | 241,650.00 | 239,750.22 | (1,899.78) |
| | 666807BM3 | 250,000 | | | |
| | NORTHROP GRUMMAN CORP 3.25% 01/15/2028 | 102.329 | | | |
| | SEMI-ANN. 3.250% 01/15/2028 | 92.2250 | 286,521.20 | 258,229.91 | (28,291.29) |
| | 666807BN1 | 280,000 | | | |
| | NORTHWESTERN MUTUAL GLOBAL FUNDING 0.8% | 99.824 | | | |
| | SEMI-ANN. 0.800% 01/14/2026 | 88.4672 | 279,507.20 | 247,708.20 | (31,799.00) |
| | 66815L2A6 | 280,000 | | | |
| | NORTHWESTERN MUTUAL GLOBAL FUNDING 1.75% | 99.919 | | | |
| | SEMI-ANN. 1.750% 01/11/2027 | 88.2970 | 279,773.20 | 247,231.62 | (32,541.58) |
| | 66815L2F5 | 280,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | NORTHWESTERN MUTUAL GLOBAL FUNDING 3.3% | 99.789 | | | |
| | SEMI-ANN. 3.300% 04/04/2029 | 90.6447 | 189,599.10 | 172,224.94 | (17,374.16) |
| | 66815L2H1 | 190,000 | | | |
| | NORTHWESTERN MUTUAL GLOBAL FUNDING 4.35% | 99.96 | | | |
| | SEMI-ANN. 4.350% 09/15/2027 | 97.3595 | 149,940.00 | 146,039.28 | (3,900.72) |
| | 66815L2K4 | 150,000 | | | |
| | NORTHWESTERN MUTUAL GLOBAL FUNDING 4% 07 | 99.966 | | | |
| | SEMI-ANN. 4.000% 07/01/2025 | 98.0322 | 194,933.70 | 191,162.72 | (3,770.98) |
| | 66815L2J7 | 195,000 | | | |
| | NTT FINANCE CORP 1.162% 04/03/2026 144A | 100.00 | | | |
| | SEMI-ANN. 1.162% 04/03/2026 | 88.4356 | 420,000.00 | 371,429.35 | (48,570.65) |
| | 62954WAC9 | 420,000 | | | |
| | NTT FINANCE CORP 4.239% 07/25/2025 144A | 100.00 | | | |
| | SEMI-ANN. 4.239% 07/25/2025 | 98.1931 | 200,000.00 | 196,386.25 | (3,613.75) |
| | 62954WAJ4 | 200,000 | | | |
| | NUCOR CORP 3.95% 05/23/2025 | 99.936 | | | |
| | SEMI-ANN. 3.950% 05/23/2025 | 97.8372 | 99,936.00 | 97,837.19 | (2,098.81) |
| | 670346AX3 | 100,000 | | | |
| | NUTRIEN LTD 1.9% 05/13/2023 | 99.91 | | | |
| | SEMI-ANN. 1.900% 05/13/2023 | 98.8573 | 199,820.00 | 197,714.60 | (2,105.40) |
| | 67077MAV0 | 200,000 | | | |
| | NUTRIEN LTD 4% 12/15/2026 | 115.807 | | | |
| | SEMI-ANN. 4.000% 12/15/2026 | 96.1460 | 220,033.30 | 182,677.48 | (37,355.82) |
| | 67077MAE8 | 190,000 | | | |
| | NUTRIEN LTD 5.95% 11/07/2025 | 99.892 | | | |
| | SEMI-ANN. 5.950% 11/07/2025 | 102.0333 | 209,773.20 | 214,269.93 | 4,496.73 |
| | 67077MAY4 | 210,000 | | | |
| | NXP B V/NXP FDG LLC/NXP USA INC 4.4% 06/ | 99.9016 | | | |
| | SEMI-ANN. 4.400% 06/01/2027 | 95.6125 | 259,744.10 | 248,592.50 | (11,151.60) |
| | 62954HBE7 | 260,000 | | | |
| | NYC TFA (PIT) 3.45% 2/1/2029 | 100.087 | | | |
| | SEMI-ANN. 3.450% 02/01/2029 | 90.7007 | 300,261.00 | 272,102.19 | (28,158.81) |
| | 64971XS33 | 300,000 | | | |
| | OCCIDENTAL PETROLEUM CORP 3.5% 06/15/202 | 101.444 | | | |
| | SEMI-ANN. 3.500% 06/15/2025 | 96.625 | 305,346.44 | 290,841.25 | (14,505.19) |
| | 674599CG8 | 301,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | OHLONE CA CCD 2.337% 8/1/2029 | 91.007 | | | |
| | SEMI-ANN. 2.337% 08/01/2029 | 86.4622 | 318,524.50 | 302,617.84 | (15,906.66) |
| | 677765HA0 | 350,000 | | | |
| | OK ST DFA 4.135% 12/1/2033 | 100.00 | | | |
| | SEMI-ANN. 4.135% 12/01/2033 | 96.3449 | 250,000.00 | 240,862.35 | (9,137.65) |
| | 6789084F8 | 250,000 | | | |
| | OKLAHOMA DEV FIN AUTH REV 3.877% 05/01/2 | 100.00 | | | |
| | SEMI-ANN. 3.877% 05/01/2037 | 94.7016 | 410,000.00 | 388,276.36 | (21,723.64) |
| | 6789084C5 | 410,000 | | | |
| | OKLAHOMA DEV FIN AUTH REV 4.285% 02/01/2 | 100.00 | | | |
| | SEMI-ANN. 4.285% 02/01/2034 | 96.9984 | 265,000.00 | 257,045.81 | (7,954.19) |
| | 6789083Z5 | 265,000 | | | |
| | OLATHE KS SD233 3.741% 9/1/2030 | 100.00 | | | |
| | SEMI-ANN. 3.741% 09/01/2030 | 91.0822 | 1,250,000.00 | 1,138,527.00 | (111,473.00) |
| | 4787182T5 | 1,250,000 | | | |
| | ONCOR ELEC DELIVERY CO LLC 2.75% 05/15/2 | 99.412 | | | |
| | SEMI-ANN. 2.750% 05/15/2030 | 87.0874 | 278,353.60 | 243,844.58 | (34,509.02) |
| | 68233JBU7 | 280,000 | | | |
| | OR ST ADMIN LOT 3.321% 4/1/2027 | 100.00 | | | |
| | SEMI-ANN. 3.321% 04/01/2027 | 94.7066 | 285,000.00 | 269,913.84 | (15,086.16) |
| | 68607V3L7 | 285,000 | | | |
| | OR ST TAXM PENSN 5.892% 6/1/27 | 105.47 | | | |
| | SEMI-ANN. 5.892% 06/01/2027 | 103.1152 | 458,794.50 | 448,551.25 | (10,243.25) |
| | 68607LXQ5 | 435,000 | | | |
| | ORACLE CORP 2.5% 04/01/2025 | 99.963 | | | |
| | SEMI-ANN. 2.500% 04/01/2025 | 94.2877 | 879,674.40 | 829,731.43 | (49,942.97) |
| | 68389XBT1 | 880,000 | | | |
| | ORACLE CORP 5.8% 11/10/2025 | 99.869 | | | |
| | SEMI-ANN. 5.800% 11/10/2025 | 102.2385 | 149,803.50 | 153,357.78 | 3,554.28 |
| | 68389XCF0 | 150,000 | | | |
| | ORLANDO HEALTH OBLIGATED GRP 3.777% 10/0 | 100.548 | | | |
| | SEMI-ANN. 3.777% 10/01/2028 | 90.6497 | 502,740.00 | 453,248.27 | (49,491.73) |
| | 686514AE0 | 500,000 | | | |
| | OTIS WORLDWIDE CORP 2.056% 04/05/2025 | 99.999 | | | |
| | SEMI-ANN. 2.056% 04/05/2025 | 93.5622 | 319,996.80 | 299,399.13 | (20,597.67) |
| | 68902VAH0 | 320,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | PACIFIC LIFE GF II 1.2% 06/24/2025 144A | 96.146 | | | |
| | SEMI-ANN. 1.200% 06/24/2025 | 90.6539 | 129,797.10 | 122,382.70 | (7,414.40) |
| | 6944PL2B4 | 135,000 | | | |
| | PACIFIC LIFE GF II 1.45% 01/20/2028 144A | 92.563 | | | |
| | SEMI-ANN. 1.450% 01/20/2028 | 81.9639 | 277,689.00 | 245,891.63 | (31,797.37) |
| | 6944PL2D0 | 300,000 | | | |
| | PACIFICORP 3.35% 07/01/2025 | 97.976 | | | |
| | SEMI-ANN. 3.350% 07/01/2025 | 95.8118 | 269,434.00 | 263,482.42 | (5,951.58) |
| | 695114CS5 | 275,000 | | | |
| | PALOMAR CA CCD 1.473% 8/1/2028 | 100.00 | | | |
| | SEMI-ANN. 1.473% 08/01/2028 | 83.0342 | 390,000.00 | 323,833.50 | (66,166.50) |
| | 697511FW8 | 390,000 | | | |
| | PARKER-HANNIFIN CORP 3.3% 11/21/2024 | 98.235 | | | |
| | SEMI-ANN. 3.300% 11/21/2024 | 96.5415 | 355,610.70 | 349,480.36 | (6,130.34) |
| | 70109HAL9 | 362,000 | | | |
| | PARKER-HANNIFIN CORP 3.65% 06/15/2024 | 99.931 | | | |
| | SEMI-ANN. 3.650% 06/15/2024 | 97.8450 | 199,862.00 | 195,690.01 | (4,171.99) |
| | 701094AQ7 | 200,000 | | | |
| | PARKER-HANNIFIN CORP 4.25% 09/15/2027 | 99.788 | | | |
| | SEMI-ANN. 4.250% 09/15/2027 | 97.0195 | 79,830.40 | 77,615.56 | (2,214.84) |
| | 701094AR5 | 80,000 | | | |
| | PAYPAL HLDGS INC 3.9% 06/01/2027 | 99.873 | | | |
| | SEMI-ANN. 3.900% 06/01/2027 | 96.2243 | 139,822.20 | 134,714.04 | (5,108.16) |
| | 70450YAK9 | 140,000 | | | |
| | PEACEHEALTH OBLIGATED GROUP 1.375% 11/15 | 100.00 | | | |
| | SEMI-ANN. 1.375% 11/15/2025 | 89.6248 | 95,000.00 | 85,143.59 | (9,856.41) |
| | 70462GAB4 | 95,000 | | | |
| | PERKINELMER INC 1.9% 09/15/2028 | 99.928 | | | |
| | SEMI-ANN. 1.900% 09/15/2028 | 82.8143 | 289,791.20 | 240,161.52 | (49,629.68) |
| | 714046AM1 | 290,000 | | | |
| | PERNOD RICARD INTERNATIONAL FINANCE LLC | 99.594 | | | |
| | SEMI-ANN. 1.250% 04/01/2028 | 82.5201 | 189,228.60 | 156,788.25 | (32,440.35) |
| | 71427QAA6 | 190,000 | | | |
| | PHEAA STUDENT LOAN TRUST 2016-1 1ML+115 | 101.0625 | | | |
| | MONTHLY FLOATING 09/25/2065 | 98.9075 | 612,478.92 | 599,418.58 | (13,060.34) |
| | 69343FAA5 | 606,039.7500 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | PHILLIPS 66 1.3% 02/15/2026 | 99.96 | | | |
| | SEMI-ANN. 1.300% 02/15/2026 | 89.5860 | 119,952.00 | 107,503.21 | (12,448.79) |
| | 718546AZ7 | 120,000 | | | |
| | PHILLIPS 66 3.85% 04/09/2025 | 105.9062 | | | |
| | SEMI-ANN. 3.850% 04/09/2025 | 97.5422 | 275,356.00 | 253,609.71 | (21,746.29) |
| | 718546AV6 | 260,000 | | | |
| | PIONEER NATURAL RESOURCES CO 1.125% 01/1 | 98.7565 | | | |
| | SEMI-ANN. 1.125% 01/15/2026 | 89.1307 | 464,155.50 | 418,914.25 | (45,241.25) |
| | 723787AT4 | 470,000 | | | |
| | PNC FINANCIAL SERVICES GRP INC SFRIX 5.6 | 100.00 | | | |
| | SEMI-ANN. FLOATING 10/28/2025 | 101.0636 | 260,000.00 | 262,765.46 | 2,765.46 |
| | 693475BH7 | 260,000 | | | |
| | PNC FINANCIAL SERVICES GRP INC SOFR+ 12/ | 100.00 | | | |
| | SEMI-ANN. FLOATING 12/02/2028 | 100.7870 | 270,000.00 | 272,125.02 | 2,125.02 |
| | 693475BK0 | 270,000 | | | |
| | PPG INDUSTRIES INC 1.2% 03/15/2026 | 99.432 | | | |
| | SEMI-ANN. 1.200% 03/15/2026 | 88.6386 | 318,182.40 | 283,643.36 | (34,539.04) |
| | 693506BU0 | 320,000 | | | |
| | PPG INDUSTRIES INC 2.4% 08/15/2024 | 99.827 | | | |
| | SEMI-ANN. 2.400% 08/15/2024 | 95.6659 | 269,532.90 | 258,297.93 | (11,234.97) |
| | 693506BQ9 | 270,000 | | | |
| | PRICOA GLOBAL FDG I 1.2% 09/01/2026 144A | 99.773 | | | |
| | SEMI-ANN. 1.200% 09/01/2026 | 87.9047 | 638,547.20 | 562,590.24 | (75,956.96) |
| | 74153WCP2 | 640,000 | | | |
| | PROGRESSIVE CORP OHIO 2.5% 03/15/2027 | 99.962 | | | |
| | SEMI-ANN. 2.500% 03/15/2027 | 92.0624 | 129,950.60 | 119,681.12 | (10,269.48) |
| | 743315AY9 | 130,000 | | | |
| | PROLOGIS LP 3.25% 06/30/2026 | 102.404 | | | |
| | SEMI-ANN. 3.250% 06/30/2026 | 94.8854 | 215,048.40 | 199,259.25 | (15,789.15) |
| | 74340XBU4 | 210,000 | | | |
| | PROTECTIVE LIFE GLOBAL FUNDING 4.714% 07 | 100.00 | | | |
| | SEMI-ANN. 4.714% 07/06/2027 | 97.0442 | 150,000.00 | 145,566.31 | (4,433.69) |
| | 74368CBP8 | 150,000 | | | |
| | PUBLIC SERVICE ELEC & GAS CO 3.65% 09/01 | 102.1287 | | | |
| | SEMI-ANN. 3.650% 09/01/2028 | 94.1101 | 607,665.80 | 559,955.07 | (47,710.73) |
| | 74456QBX3 | 595,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | RABOBANK NEDERLAND COOP CENTL 1.004%/VAR | 100.00 | | | |
| | SEMI-ANN. FLOATING 09/24/2026 | 88.3392 | 250,000.00 | 220,848.12 | (29,151.88) |
| | 74977RDJ0 | 250,000 | | | |
| | RABOBANK NEDERLAND COOP CENTL 3.649%/VAR | 100.00 | | | |
| | SEMI-ANN. FLOATING 04/06/2028 | 92.1322 | 480,000.00 | 442,234.33 | (37,765.67) |
| | 74977RDN1 | 480,000 | | | |
| | RAYTHEON TECHNOLOGIES CORP 3.65% 08/16/2 | 99.814 | | | |
| | SEMI-ANN. 3.650% 08/16/2023 | 99.1582 | 16,968.38 | 16,856.90 | (111.48) |
| | 913017DB2 | 17,000 | | | |
| | RAYTHEON TECHNOLOGIES CORP 3.95% 08/16/2 | 111.47 | | | |
| | SEMI-ANN. 3.950% 08/16/2025 | 97.6941 | 312,116.00 | 273,543.42 | (38,572.58) |
| | 913017DD8 | 280,000 | | | |
| | RAYTHEON TECHNOLOGIES CORP 4.125% 11/16/ | 114.235 | | | |
| | SEMI-ANN. 4.125% 11/16/2028 | 95.7108 | 148,505.50 | 124,424.00 | (24,081.50) |
| | 913017CY3 | 130,000 | | | |
| | REALTY INCOME CORP 3% 01/15/2027 | 101.508 | | | |
| | SEMI-ANN. 3.000% 01/15/2027 | 92.4450 | 162,412.80 | 147,911.94 | (14,500.86) |
| | 756109AS3 | 160,000 | | | |
| | REALTY INCOME CORP 4.125% 10/15/2026 | 100.161 | | | |
| | SEMI-ANN. 4.125% 10/15/2026 | 97.2004 | 210,338.10 | 204,120.84 | (6,217.26) |
| | 756109AR5 | 210,000 | | | |
| | REGIONS FINL CORP NEW 1.8% 08/12/2028 | 99.745 | | | |
| | SEMI-ANN. 1.800% 08/12/2028 | 84.8345 | 329,158.50 | 279,953.70 | (49,204.80) |
| | 7591EPAT7 | 330,000 | | | |
| | RELX CAPITAL INC 3.5% 03/16/2023 | 98.87 | | | |
| | SEMI-ANN. 3.500% 03/16/2023 | 99.5958 | 247,175.00 | 248,989.41 | 1,814.41 |
| | 74949LAB8 | 250,000 | | | |
| | ROCHE HLDGS INC 1.93% 12/13/2028 144A | 100.00 | | | |
| | SEMI-ANN. 1.930% 12/13/2028 | 85.4585 | 745,000.00 | 636,665.47 | (108,334.53) |
| | 771196BW1 | 745,000 | | | |
| | ROCHESTER GAS & ELECTRIC CORP 3.1% 06/01 | 110.774 | | | |
| | SEMI-ANN. 3.100% 06/01/2027 | 91.6849 | 321,244.60 | 265,886.31 | (55,358.29) |
| | 771367CD9 | 290,000 | | | |
| | ROGERS COMMUNICATIONS INC 3.2% 03/15/202 | 99.991 | | | |
| | SEMI-ANN. 3.200% 03/15/2027 | 92.5266 | 189,982.90 | 175,800.53 | (14,182.37) |
| | 775109CB5 | 190,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| ROGERS COMMUNICATIONS INC 3.625% 12/15/2 | | 97.987 | | | |
| SEMI-ANN. 3.625% 12/15/2025 | | 95.7951 | 489,935.00 | 478,975.55 | (10,959.45) |
| 775109BE0 | | 500,000 | | | |
| ROPER TECHNOLOGIES INC 1% 09/15/2025 | | 99.868 | | | |
| SEMI-ANN. 1.000% 09/15/2025 | | 89.5963 | 59,920.80 | 53,757.77 | (6,163.03) |
| 776743AM8 | | 60,000 | | | |
| ROPER TECHNOLOGIES INC 2.95% 09/15/2029 | | 96.409 | | | |
| SEMI-ANN. 2.950% 09/15/2029 | | 86.968 | 144,613.50 | 130,452.00 | (14,161.50) |
| 776743AG1 | | 150,000 | | | |
| ROPER TECHNOLOGIES INC 3.85% 12/15/2025 | | 110.443 | | | |
| SEMI-ANN. 3.850% 12/15/2025 | | 97.0159 | 132,531.60 | 116,419.02 | (16,112.58) |
| 776743AB2 | | 120,000 | | | |
| ROYAL BANK OF CANADA 2.05% 01/21/2027 | | 99.934 | | | |
| SEMI-ANN. 2.050% 01/21/2027 | | 90.3135 | 109,927.40 | 99,344.88 | (10,582.52) |
| 78016EYV3 | | 110,000 | | | |
| ROYAL BANK OF CANADA 2.55% 07/16/2024 | | 101.418 | | | |
| SEMI-ANN. 2.550% 07/16/2024 | | 96.4769 | 170,382.24 | 162,081.25 | (8,300.99) |
| 78013XZU5 | | 168,000 | | | |
| ROYAL BANK OF CANADA 3.625% 05/04/2027 | | 99.943 | | | |
| SEMI-ANN. 3.625% 05/04/2027 | | 95.0398 | 179,897.40 | 171,071.71 | (8,825.69) |
| 78016EZD2 | | 180,000 | | | |
| ROYAL BANK OF CANADA 4.24% 08/03/2027 | | 99.999 | | | |
| SEMI-ANN. 4.240% 08/03/2027 | | 97.4070 | 699,993.00 | 681,849.04 | (18,143.96) |
| 78016FZS6 | | 700,000 | | | |
| ROYAL BANK OF CANADA 4.784% 12/12/2025 1 | | 100.00 | | | |
| SEMI-ANN. 4.784% 12/12/2025 | | 99.5100 | 430,000.00 | 427,893.08 | (2,106.92) |
| 780082AM5 | | 430,000 | | | |
| RYDER SYSTEM INC 1.75% 09/01/2026 | | 99.876 | | | |
| SEMI-ANN. 1.750% 09/01/2026 | | 87.8797 | 249,690.00 | 219,699.24 | (29,990.76) |
| 78355HKS7 | | 250,000 | | | |
| RYDER SYSTEM INC 3.65% 03/18/2024 | | 99.906 | | | |
| SEMI-ANN. 3.650% 03/18/2024 | | 97.9498 | 359,661.60 | 352,619.37 | (7,042.23) |
| 78355HKL2 | | 360,000 | | | |
| RYDER SYSTEM INC 4.3% 06/15/2027 | | 99.969 | | | |
| SEMI-ANN. 4.300% 06/15/2027 | | 95.7751 | 189,941.10 | 181,972.78 | (7,968.32) |
| 78355HKU2 | | 190,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | SABINE PASS LIQUEFACTION LLC 5% 03/15/20 | 109.366 | | | |
| | SEMI-ANN. 5.000% 03/15/2027 | 98.0524 | 153,112.40 | 137,273.35 | (15,839.05) |
| | 785592AS5 | 140,000 | | | |
| | SAN DIEG CA USD 1.984% 7/1/2031 | 96.371 | | | |
| | SEMI-ANN. 1.984% 07/01/2031 | 79.9362 | 515,584.85 | 427,658.56 | (87,926.29) |
| | 797356DL3 | 535,000 | | | |
| | SAN DIEGO CA CC 2.013% 8/1/2030 | 100.00 | | | |
| | SEMI-ANN. 2.013% 08/01/2030 | 81.6844 | 955,000.00 | 780,086.21 | (174,913.79) |
| | 797272RS2 | 955,000 | | | |
| | SAN RAMON CA SD 1.67% 8/1/2028 | 100.00 | | | |
| | SEMI-ANN. 1.670% 08/01/2028 | 84.6831 | 395,000.00 | 334,498.44 | (60,501.56) |
| | 7994082H1 | 395,000 | | | |
| | SANTA BARBA U 1.438% 8/1/2027 | 100.00 | | | |
| | SEMI-ANN. 1.438% 08/01/2027 | 86.2517 | 500,000.00 | 431,258.70 | (68,741.30) |
| | 801315KS0 | 500,000 | | | |
| | SANTA-MONIC USD 1.197% 8/1/2028 | 86.387 | | | |
| | SEMI-ANN. 1.197% 08/01/2028 | 81.7918 | 388,741.50 | 368,062.97 | (20,678.53) |
| | 802498ZC2 | 450,000 | | | |
| | SANTAMONICA CCD 3.811% 8/1/2030 | 100.00 | | | |
| | SEMI-ANN. 3.811% 08/01/2030 | 92.6313 | 350,000.00 | 324,209.52 | (25,790.48) |
| | 802385SQ8 | 350,000 | | | |
| | SANTANDER RETAIL AUTO LEASE TR 2022-A A3 | 99.9923 | | | |
| | MONTHLY 1.340% 07/21/2025 | 94.6204 | 634,951.04 | 600,839.29 | (34,111.75) |
| | 80287CAC3 | 635,000 | | | |
| | SANTANDER RETAIL AUTO LEASE TR 2022-B A3 | 99.9967 | | | |
| | MONTHLY 3.280% 11/20/2025 | 97.2407 | 784,974.10 | 763,339.18 | (21,634.92) |
| | 80287UAC3 | 785,000 | | | |
| | SANTANDER RETAIL AUTO LEASE TRUST 2021-B | 99.9874 | | | |
| | MONTHLY 0.510% 08/20/2024 | 96.6621 | 754,904.64 | 729,799.16 | (25,105.48) |
| | 80286DAC2 | 755,000 | | | |
| | SEASONED CREDIT RISK TRANSFER TRUST SERI | 103.0383 | | | |
| | MONTHLY 2.000% 11/25/2059 | 82.5469 | 618,721.93 | 495,675.64 | (123,046.29) |
| | 35563PQN2 | 600,477.7400 | | | |
| | SEASONED CREDIT RISK TRANSFER TRUST SERI | 106.2718 | | | |
| | MONTHLY 2.500% 05/25/2060 | 85.3969 | 597,406.81 | 480,058.70 | (117,348.11) |
| | 35563PSE0 | 562,149.9000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | SEASONED CREDIT RISK TRANSFER TRUST SERI<br>MONTHLY 2.000% 11/25/2060<br>35563P3S6 | 102.3372<br>88.5668<br>570,317.3000 | 583,646.52 | 505,111.55 | (78,534.97) |
| | SEASONED CREDIT RISK TRANSFER TRUST SERI<br>MONTHLY 4.000% 03/25/2058<br>35563PHK8 | 101.8242<br>93.3740<br>764,625.8900 | 778,574.33 | 713,961.47 | (64,612.86) |
| | SEASONED CREDIT RISK TRANSFER TRUST SERI<br>MONTHLY 3.500% 10/25/2058<br>35563PLH0 | 104.5267<br>93.9205<br>642,447.7900 | 671,529.75 | 603,389.86 | (68,139.89) |
| | SEMPRA ENERGY 3.3% 04/01/2025<br>SEMI-ANN. 3.300% 04/01/2025<br>816851BN8 | 99.823<br>95.8950<br>250,000 | 249,557.50 | 239,737.39 | (9,820.11) |
| | SHERWIN WILLIAMS CO 2.95% 08/15/2029<br>SEMI-ANN. 2.950% 08/15/2029<br>824348BJ4 | 100.523<br>87.5385<br>280,000 | 281,464.40 | 245,107.92 | (36,356.48) |
| | SHERWIN WILLIAMS CO 4.25% 08/08/2025<br>SEMI-ANN. 4.250% 08/08/2025<br>824348BR6 | 99.989<br>98.2549<br>170,000 | 169,981.30 | 167,033.30 | (2,948.00) |
| | SIEMENS FINANCIERINGSMAATSCHAPPIJ NV 1.2<br>SEMI-ANN. 1.200% 03/11/2026<br>82620KAZ6 | 99.898<br>89.1093<br>250,000 | 249,745.00 | 222,773.31 | (26,971.69) |
| | SIEMENS FINANCIERINGSMAATSCHAPPIJ NV 2.3<br>SEMI-ANN. 2.350% 10/15/2026<br>82620KAL7 | 99.428<br>90.9849<br>250,000 | 248,570.00 | 227,462.36 | (21,107.64) |
| | SIMON PROPERTY GROUP LP 1.375% 01/15/202<br>SEMI-ANN. 1.375% 01/15/2027<br>828807DP9 | 99.871<br>87.2765<br>440,000 | 439,432.40 | 384,016.62 | (55,415.78) |
| | SLM STUDENT LN TR 3ML+67 12/17/2068 144A<br>QUARTERLY FLOATING 12/17/2068<br>78442GJH0 | 100.00<br>96.8563<br>664,155.2200 | 664,155.22 | 643,276.50 | (20,878.72) |
| | SMALL BUS ADMIN GTD DEV PARTN 1.034% 09/<br>SEMI-ANN. 1.034% 09/10/2030<br>831641FQ3 | 100.00<br>86.0000<br>1,008,675.7600 | 1,008,675.76 | 867,461.36 | (141,214.40) |
| | SMALL BUS ADMIN GTD DEV PARTN 1.304% 09/<br>SEMI-ANN. 1.304% 09/10/2031<br>831641FS9 | 100.00<br>86.4954<br>983,298.4200 | 983,298.42 | 850,508.10 | (132,790.32) |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | SMALL BUS ADMIN GTD DEV PARTN 1.667% 03/ | 100.00 | | | |
| | SEMI-ANN. 1.667% 03/10/2031 | 84.7053 | 564,451.32 | 478,120.35 | (86,330.97) |
| | 831641FR1 | 564,451.3200 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 2.078% 03/ | 100.00 | | | |
| | SEMI-ANN. 2.078% 03/10/2030 | 89.7163 | 846,190.07 | 759,170.34 | (87,019.73) |
| | 831641FP5 | 846,190.0700 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 2.938% 03/ | 100.00 | | | |
| | SEMI-ANN. 2.938% 03/10/2032 | 90.8591 | 3,455,828.26 | 3,139,934.45 | (315,893.81) |
| | 831641FT7 | 3,455,828.2600 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 2.98% 06/0 | 102.3398 | | | |
| | SEMI-ANN. 2.980% 06/01/2035 | 92.8123 | 432,889.48 | 392,588.76 | (40,300.72) |
| | 83162CXB4 | 422,992.1200 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 22-25K 1 5 | 100.00 | | | |
| | SEMI-ANN. 5.130% 11/01/2047 | 100.2713 | 930,000.00 | 932,522.81 | 2,522.81 |
| | 83162CR47 | 930,000 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 3.37% 01/0 | 100.00 | | | |
| | SEMI-ANN. 3.370% 01/01/2039 | 93.9867 | 1,108,739.28 | 1,042,067.79 | (66,671.49) |
| | 83162CA60 | 1,108,739.2800 | | | |
| | SMALL BUS ADMIN GTD DEV PARTN 3.62% 09/0 | 101.1900 | | | |
| | SEMI-ANN. 3.620% 09/01/2033 | 96.1725 | 231,759.64 | 220,267.76 | (11,491.88) |
| | 83162CVU4 | 229,034.1300 | | | |
| | SOUTHWESTERN PUBLIC SERVICE CO 3.3% 06/1 | 102.03 | | | |
| | SEMI-ANN. 3.300% 06/15/2024 | 97.7399 | 295,887.00 | 283,445.73 | (12,441.27) |
| | 845743BP7 | 290,000 | | | |
| | STANFORD HEALTHCARE 3.31% 08/15/2030 | 100.75 | | | |
| | SEMI-ANN. 3.310% 08/15/2030 | 89.3592 | 226,687.50 | 201,058.22 | (25,629.28) |
| | 85434VAB4 | 225,000 | | | |
| | STANLEY BLACK & DECKER INC 3.4% 03/01/20 | 99.9435 | | | |
| | SEMI-ANN. 3.400% 03/01/2026 | 95.3671 | 219,875.60 | 209,807.62 | (10,067.98) |
| | 854502AK7 | 220,000 | | | |
| | STARBUCKS CORP 2.25% 03/12/2030 | 95.378 | | | |
| | SEMI-ANN. 2.250% 03/12/2030 | 83.0737 | 76,302.40 | 66,458.98 | (9,843.42) |
| | 855244AW9 | 80,000 | | | |
| | STARBUCKS CORP 3.5% 03/01/2028 | 104.443 | | | |
| | SEMI-ANN. 3.500% 03/01/2028 | 93.7427 | 177,553.10 | 159,362.63 | (18,190.47) |
| | 855244AP4 | 170,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | STATE STREET CORP 2.203%/VAR 02/07/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 02/07/2028 | 89.8236 | 730,000.00 | 655,712.22 | (74,287.78) |
| | 857477BS1 | 730,000 | | | |
| | STATE STREET CORP 2.354%/VAR 11/01/2025 | 100.00 | | | |
| | SEMI-ANN. FLOATING 11/01/2025 | 95.3756 | 110,000.00 | 104,913.18 | (5,086.82) |
| | 857477BE2 | 110,000 | | | |
| | STATE STREET CORP 5.82%/VAR 11/04/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 11/04/2028 | 103.2675 | 190,000.00 | 196,208.25 | 6,208.25 |
| | 857477BY8 | 190,000 | | | |
| | SUMITOMO MITSUI FINL GRP INC 1.402% 09/1 | 100.00 | | | |
| | SEMI-ANN. 1.402% 09/17/2026 | 87.0817 | 300,000.00 | 261,245.22 | (38,754.78) |
| | 86562MCH1 | 300,000 | | | |
| | SUMITOMO MITSUI FINL GRP INC 1.474% 07/0 | 100.00 | | | |
| | SEMI-ANN. 1.474% 07/08/2025 | 91.1168 | 200,000.00 | 182,233.50 | (17,766.50) |
| | 86562MCA6 | 200,000 | | | |
| | SUMITOMO MITSUI FINL GRP INC 2.174% 01/1 | 100.00 | | | |
| | SEMI-ANN. 2.174% 01/14/2027 | 88.6443 | 200,000.00 | 177,288.53 | (22,711.47) |
| | 86562MCM0 | 200,000 | | | |
| | SUNNYVALE CA SD 1.824% 9/1/2029 | 100.00 | | | |
| | SEMI-ANN. 1.824% 09/01/2029 | 82.6546 | 530,000.00 | 438,069.17 | (91,930.83) |
| | 867578VK9 | 530,000 | | | |
| | TAKE-TWO INTERACTV SOFTWR INC 3.55% 04/1 | 99.958 | | | |
| | SEMI-ANN. 3.550% 04/14/2025 | 96.2359 | 69,970.60 | 67,365.15 | (2,605.45) |
| | 874054AF6 | 70,000 | | | |
| | TAKE-TWO INTERACTV SOFTWR INC 3.7% 04/14 | 99.995 | | | |
| | SEMI-ANN. 3.700% 04/14/2027 | 94.1022 | 49,997.50 | 47,051.12 | (2,946.38) |
| | 874054AG4 | 50,000 | | | |
| | TAUBMAN CENTERS COMMERCIAL MORTGAGE TRUS | 98.9986 | | | |
| | MONTHLY FLOATING 05/15/2037 | 97.0990 | 653,390.76 | 640,853.33 | (12,537.43) |
| | 87666YAA5 | 660,000 | | | |
| | TEXAS ELECTRIC MARKET STABILIZATION FUND | 99.9986 | | | |
| | SEMI-ANN. 4.265% 08/01/2036 | 94.9170 | 704,990.06 | 669,164.82 | (35,825.24) |
| | 88240TAA9 | 705,000 | | | |
| | THERMO FISHER SCIENTIFIC INC 1.215% 10/1 | 100.00 | | | |
| | SEMI-ANN. 1.215% 10/18/2024 | 93.8510 | 420,000.00 | 394,174.27 | (25,825.73) |
| | 883556CS9 | 420,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | TORONTO DOMINION BANK 0.75% 06/12/2023 | 99.926 | | | |
| | SEMI-ANN. 0.750% 06/12/2023 | 98.1994 | 119,911.20 | 117,839.30 | (2,071.90) |
| | 89114QCG1 | 120,000 | | | |
| | TORONTO DOMINION BANK 1.95% 01/12/2027 | 99.891 | | | |
| | SEMI-ANN. 1.950% 01/12/2027 | 89.1020 | 229,749.30 | 204,934.63 | (24,814.67) |
| | 89114TZN5 | 230,000 | | | |
| | TORONTO DOMINION BANK 2.8% 03/10/2027 | 99.801 | | | |
| | SEMI-ANN. 2.800% 03/10/2027 | 91.7098 | 818,368.20 | 752,020.34 | (66,347.86) |
| | 89114TZT2 | 820,000 | | | |
| | TORONTO DOMINION BANK 4.108% 06/08/2027 | 100.00 | | | |
| | SEMI-ANN. 4.108% 06/08/2027 | 96.6650 | 160,000.00 | 154,664.06 | (5,335.94) |
| | 89115A2C5 | 160,000 | | | |
| | TORONTO DOMINION BANK 4.693% 09/15/2027 | 100.00 | | | |
| | SEMI-ANN. 4.693% 09/15/2027 | 98.8572 | 160,000.00 | 158,171.49 | (1,828.51) |
| | 89115A2H4 | 160,000 | | | |
| | TOWD POINT MORTGAGE TRUST 2019-HY2 1ML+1 | 100.2036 | | | |
| | MONTHLY FLOATING 05/25/2058 | 99.0612 | 240,487.32 | 237,745.55 | (2,741.77) |
| | 89177HAA0 | 239,998.6800 | | | |
| | TOWD POINT MORTGAGE TRUST 2021-1 VAR 11/ | 101.6521 | | | |
| | MONTHLY FLOATING 11/25/2061 | 88.0094 | 660,850.04 | 572,157.22 | (88,692.82) |
| | 89179YAR4 | 650,109.4400 | | | |
| | TOWD POINT MORTGAGE TRUST 22-4 A1 3.75% | 94.7936 | | | |
| | MONTHLY 3.750% 09/25/2062 | 92.9714 | 668,746.79 | 655,891.39 | (12,855.40) |
| | 89180YAA8 | 705,476.8900 | | | |
| | TOWD PT MTG TR 2019-HY1 1ML+100 10/25/20 | 99.8821 | | | |
| | MONTHLY FLOATING 10/25/2048 | 99.1949 | 212,567.13 | 211,104.56 | (1,462.57) |
| | 89177EAA7 | 212,817.9800 | | | |
| | TOWD PT MTG TR 2019-4 2.9% 10/25/2059 14 | 100.9695 | | | |
| | MONTHLY 2.900% 10/25/2059 | 90.2591 | 431,395.14 | 385,634.60 | (45,760.54) |
| | 89178BAA2 | 427,252.9700 | | | |
| | TOWD PT MTG TR 2022 3.75% 07/25/2062 144 | 95.7700 | | | |
| | MONTHLY 3.750% 07/25/2062 | 90.3239 | 722,058.21 | 680,997.32 | (41,060.89) |
| | 89170VAA6 | 753,950.3000 | | | |
| | TOYOTA AUTO LN EXTD NT TR 2019-1 2.56% 1 | 106.4883 | | | |
| | MONTHLY 2.560% 11/25/2031 | 96.3910 | 457,899.61 | 414,481.34 | (43,418.27) |
| | 89231XAA9 | 430,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | TOYOTA AUTO LN EXTD NT TR 2020-1 1.35% 0 | 99.9942 | | | |
| | MONTHLY 1.350% 05/25/2033 | 91.5490 | 814,952.97 | 746,124.51 | (68,828.46) |
| | 89237JAA4 | 815,000 | | | |
| | TOYOTA AUTO LN EXTD NT TR 2021-1 STEP 02 | 99.9922 | | | |
| | MONTHLY FLOATING 02/27/2034 | 88.7258 | 1,269,901.07 | 1,126,817.79 | (143,083.28) |
| | 89237MAA7 | 1,270,000 | | | |
| | TOYOTA AUTO LOAN EXTENDED NOTE TRUST 202 | 99.958 | | | |
| | MONTHLY 3.820% 04/25/2035 | 94.8672 | 964,594.70 | 915,468.48 | (49,126.22) |
| | 89231EAA1 | 965,000 | | | |
| | TOYOTA AUTO RECEIVABLES 2022-D OWNER TRU | 99.9901 | | | |
| | MONTHLY 5.300% 09/15/2027 | 101.2164 | 664,934.36 | 673,089.13 | 8,154.77 |
| | 89239HAD0 | 665,000 | | | |
| | TOYOTA MOTOR CREDIT CORP 1.9% 01/13/2027 | 99.896 | | | |
| | SEMI-ANN. 1.900% 01/13/2027 | 89.2317 | 429,552.80 | 383,696.35 | (45,856.45) |
| | 89236TJV8 | 430,000 | | | |
| | TOYOTA MOTOR CREDIT CORP 3.05% 03/22/202 | 99.991 | | | |
| | SEMI-ANN. 3.050% 03/22/2027 | 93.2350 | 309,972.10 | 289,028.48 | (20,943.62) |
| | 89236TJZ9 | 310,000 | | | |
| | TOYOTA MOTOR CREDIT CORP 3.95% 06/30/202 | 99.905 | | | |
| | SEMI-ANN. 3.950% 06/30/2025 | 97.8958 | 149,857.50 | 146,843.73 | (3,013.77) |
| | 89236TKC8 | 150,000 | | | |
| | TOYOTA MOTOR CREDIT CORP 4.45% 06/29/202 | 99.988 | | | |
| | SEMI-ANN. 4.450% 06/29/2029 | 97.9065 | 369,955.60 | 362,253.87 | (7,701.73) |
| | 89236TKD6 | 370,000 | | | |
| | TRANS-ALLEGHENY INTST LINE CO 3.85% 06/0 | 100.5058 | | | |
| | SEMI-ANN. 3.850% 06/01/2025 | 96.5268 | 356,795.50 | 342,670.05 | (14,125.45) |
| | 893045AE4 | 355,000 | | | |
| | TRANSCONTINENTAL GAS LINE LLC 4% 03/15/2 | 105.478 | | | |
| | SEMI-ANN. 4.000% 03/15/2028 | 93.8253 | 137,121.40 | 121,972.90 | (15,148.50) |
| | 893574AK9 | 130,000 | | | |
| | TRUIST BANK 3.625% 09/16/2025 | 99.461 | | | |
| | SEMI-ANN. 3.625% 09/16/2025 | 96.0224 | 497,305.00 | 480,112.01 | (17,192.99) |
| | 07330MAB3 | 500,000 | | | |
| | TRUIST FINANCIAL CORP 4.123%/VAR 06/06/2 | 100.00 | | | |
| | SEMI-ANN. FLOATING 06/06/2028 | 95.7075 | 440,000.00 | 421,112.78 | (18,887.22) |
| | 89788MAG7 | 440,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | TRUIST FINANCIAL CORP 4.26%/VAR 07/28/20 | 100.0037 | | | |
| | SEMI-ANN. FLOATING 07/28/2026 | 98.2556 | 90,003.30 | 88,430.06 | (1,573.24) |
| | 89788MAH5 | 90,000 | | | |
| | TSMC ARIZONA CORPORATION 3.875% 04/22/20 | 99.829 | | | |
| | SEMI-ANN. 3.875% 04/22/2027 | 95.5813 | 319,452.80 | 305,860.00 | (13,592.80) |
| | 872898AF8 | 320,000 | | | |
| | TSMC ARIZONA CORPORATION 4.125% 04/22/20 | 99.843 | | | |
| | SEMI-ANN. 4.125% 04/22/2029 | 95.176 | 239,623.20 | 228,422.40 | (11,200.80) |
| | 872898AG6 | 240,000 | | | |
| | TSMC GLOBAL LTD 1.25% 04/23/2026 144A | 99.759 | | | |
| | SEMI-ANN. 1.250% 04/23/2026 | 88.584 | 289,301.10 | 256,893.60 | (32,407.50) |
| | 872882AH8 | 290,000 | | | |
| | TSMC GLOBAL LTD 1% 09/28/2027 144A | 99.603 | | | |
| | SEMI-ANN. 1.000% 09/28/2027 | 82.779 | 298,809.00 | 248,337.00 | (50,472.00) |
| | 872882AF2 | 300,000 | | | |
| | UBS COML MTG TR 2017-C3 3.167% 08/15/205 | 90.1523 | | | |
| | MONTHLY 3.167% 08/15/2050 | 92.3290 | 292,995.12 | 300,069.28 | 7,074.16 |
| | 90276GAR3 | 325,000 | | | |
| | UBS GROUP AG 1.494%/VAR 08/10/2027 144A | 98.1234 | | | |
| | SEMI-ANN. FLOATING 08/10/2027 | 86.0360 | 608,365.00 | 533,423.05 | (74,941.95) |
| | 902613AH1 | 620,000 | | | |
| | UBS GROUP AG 4.703%/VAR 08/05/2027 144A | 100.00 | | | |
| | SEMI-ANN. FLOATING 08/05/2027 | 96.6488 | 270,000.00 | 260,951.63 | (9,048.37) |
| | 902613AS7 | 270,000 | | | |
| | UBS GROUP AG 4.751%/VAR 05/12/2028 144A | 100.00 | | | |
| | SEMI-ANN. FLOATING 05/12/2028 | 95.6976 | 200,000.00 | 191,395.16 | (8,604.84) |
| | 902613AP3 | 200,000 | | | |
| | UDR INC 3.5% 01/15/2028 | 107.858 | | | |
| | SEMI-ANN. 3.500% 01/15/2028 | 90.8557 | 312,788.20 | 263,481.54 | (49,306.66) |
| | 90265EAN0 | 290,000 | | | |
| | UNION ELECTRIC CO 2.95% 06/15/2027 | 101.777 | | | |
| | SEMI-ANN. 2.950% 06/15/2027 | 93.0917 | 284,975.60 | 260,656.66 | (24,318.94) |
| | 906548CM2 | 280,000 | | | |
| | UNION PACIFIC CORP 3.5% 06/08/2023 | 100.3888 | | | |
| | SEMI-ANN. 3.500% 06/08/2023 | 99.2773 | 759,943.03 | 751,529.02 | (8,414.01) |
| | 907818EU8 | 757,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i – Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower, Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | UNION PACIFIC CORP 3.95% 09/10/2028 | 107.901 | | | |
| | SEMI-ANN. 3.950% 09/10/2028 | 96.1259 | 258,962.40 | 230,702.17 | (28,260.23) |
| | 907818EY0 | 240,000 | | | |
| | UNITED STATES INTERNATIONAL DEVELOPMENT | 100.00 | | | |
| | ANNUAL 3.600% 03/15/2035 | 93.6490 | 1,000,000.00 | 936,490.10 | (63,509.90) |
| | 90376PFH9 | 1,000,000 | | | |
| | UNITEDHEALTH GROUP INC 3.85% 06/15/2028 | 106.486 | | | |
| | SEMI-ANN. 3.850% 06/15/2028 | 95.7650 | 159,729.00 | 143,647.43 | (16,081.57) |
| | 91324PDK5 | 150,000 | | | |
| | UNIV MICH REVS 3.216% 4/1/2027 | 100.00 | | | |
| | SEMI-ANN. 3.216% 04/01/2027 | 94.3605 | 355,000.00 | 334,979.92 | (20,020.08) |
| | 914455VA5 | 355,000 | | | |
| | UNIVERSITY A R 3.333% 4/1/2028 | 100.00 | | | |
| | SEMI-ANN. 3.333% 04/01/2028 | 92.6963 | 280,000.00 | 259,549.72 | (20,450.28) |
| | 914073DY4 | 280,000 | | | |
| | US BANCORP DEL 4.548%/VAR 07/22/2028 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/22/2028 | 97.6610 | 560,000.00 | 546,901.57 | (13,098.43) |
| | 91159HJF8 | 560,000 | | | |
| | US BANCORP DEL 5.727%/VAR 10/21/2026 | 100.00 | | | |
| | SEMI-ANN. FLOATING 10/21/2026 | 101.8509 | 510,000.00 | 519,439.40 | 9,439.40 |
| | 91159HJH4 | 510,000 | | | |
| | USAA CAPITAL CORP 3.375% 05/01/2025 144A | 99.673 | | | |
| | SEMI-ANN. 3.375% 05/01/2025 | 96.4586 | 398,692.00 | 385,834.50 | (12,857.50) |
| | 90327QD89 | 400,000 | | | |
| | UST NOTES 0.25% 11/15/2023 | 100.0647 | | | |
| | SEMI-ANN. 0.250% 11/15/2023 | 96.1563 | 2,326,504.42 | 2,235,632.81 | (90,871.61) |
| | 91282CAW1 | 2,325,000 | | | |
| | UST NOTES 0.375% 04/15/2024 | 100.2621 | | | |
| | SEMI-ANN. 0.375% 04/15/2024 | 94.625 | 1,503,930.81 | 1,419,375.00 | (84,555.81) |
| | 91282CBV2 | 1,500,000 | | | |
| | UST NOTES 0.875% 01/31/2024 | 99.0016 | | | |
| | SEMI-ANN. 0.875% 01/31/2024 | 95.9492 | 8,910,147.34 | 8,635,429.71 | (274,717.63) |
| | 91282CDV0 | 9,000,000 | | | |
| | UST NOTES 1.5% 02/29/2024 | 100.3714 | | | |
| | SEMI-ANN. 1.500% 02/29/2024 | 96.3906 | 3,011,142.86 | 2,891,718.75 | (119,424.11) |
| | 91282CEA5 | 3,000,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| | **** * SECURITIES * **** | ***UNIT COST MARKET PRICE SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | UST NOTES 2.25% 03/31/2024 | 99.4808 | | | |
| | SEMI-ANN. 2.250% 03/31/2024 | 97.0234 | 2,909,813.51 | 2,837,935.56 | (71,877.95) |
| | 91282CEG2 | 2,925,000 | | | |
| | UST NOTES 2.5% 04/30/2024 | 99.7230 | | | |
| | SEMI-ANN. 2.500% 04/30/2024 | 97.1563 | 5,858,725.74 | 5,707,929.69 | (150,796.05) |
| | 91282CEK3 | 5,875,000 | | | |
| | UST NOTES 2.5% 05/31/2024 | 100.0394 | | | |
| | SEMI-ANN. 2.500% 05/31/2024 | 97.0195 | 5,977,354.00 | 5,796,916.98 | (180,437.02) |
| | 91282CER8 | 5,975,000 | | | |
| | UST NOTES 2.75% 08/15/2032 | 87.9652 | | | |
| | SEMI-ANN. 2.750% 08/15/2032 | 91.0625 | 725,713.26 | 751,265.63 | 25,552.37 |
| | 91282CFF3 | 825,000 | | | |
| | UST NOTES 2.875% 06/15/2025 | 99.1117 | | | |
| | SEMI-ANN. 2.875% 06/15/2025 | 96.6523 | 11,819,076.08 | 11,525,792.02 | (293,284.06) |
| | 91282CEU1 | 11,925,000 | | | |
| | UST NOTES 3.875% 09/30/2029 | 99.1332 | | | |
| | SEMI-ANN. 3.875% 09/30/2029 | 99.2930 | 1,536,564.79 | 1,539,041.02 | 2,476.23 |
| | 91282CFL0 | 1,550,000 | | | |
| | UST NOTES 3.875% 11/30/2029 | 100.2248 | | | |
| | SEMI-ANN. 3.875% 11/30/2029 | 99.3281 | 1,653,709.73 | 1,638,914.06 | (14,795.67) |
| | 91282CFY2 | 1,650,000 | | | |
| | UST NOTES 4.125% 11/15/2032 | 105.4535 | | | |
| | SEMI-ANN. 4.125% 11/15/2032 | 102.0469 | 790,901.44 | 765,351.56 | (25,549.88) |
| | 91282CFV8 | 750,000 | | | |
| | UST NOTES 4.25% 10/15/2025 | 99.4777 | | | |
| | SEMI-ANN. 4.250% 10/15/2025 | 99.9219 | 3,780,152.64 | 3,797,031.25 | 16,878.61 |
| | 91282CFP1 | 3,800,000 | | | |
| | UST NOTES 4% 10/31/2029 | 100.0271 | | | |
| | SEMI-ANN. 4.000% 10/31/2029 | 100.0313 | 1,385,375.66 | 1,385,432.81 | 57.15 |
| | 91282CFT3 | 1,385,000 | | | |
| | UTAH ST BUILD AMERICA BONDS-SER B | 102.6190 | | | |
| | SEMI-ANN. 3.539% 07/01/2025 | 98.0894 | 564,968.90 | 540,031.19 | (24,937.71) |
| | 917542QV7 | 550,550 | | | |
| | VERIZON COMMUNICATIONS INC 2.1% 03/22/20 | 87.051 | | | |
| | SEMI-ANN. 2.100% 03/22/2028 | 86.7878 | 330,793.80 | 329,793.72 | (1,000.08) |
| | 92343VGH1 | 380,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| * * SECURITIES * * | | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| VERIZON COMMUNICATIONS INC 2.355% 03/15/ | | 100.382 | | | |
| SEMI-ANN. 2.355% 03/15/2032 | | 79.2702 | 570,169.76 | 450,254.78 | (119,914.98) |
| 92343VGN8 | | 568,000 | | | |
| VERIZON MASTER TRUST STEP 01/22/2029 | | 99.9948 | | | |
| MONTHLY FLOATING 01/22/2029 | | 96.9076 | 734,961.85 | 712,271.15 | (22,690.70) |
| 92348KAZ6 | | 735,000 | | | |
| VERIZON MASTER TRUST 2021-1 A STEP 07/20 | | 99.9765 | | | |
| MONTHLY FLOATING 07/20/2028 | | 93.5186 | 864,796.64 | 808,936.06 | (55,860.58) |
| 92348KAH6 | | 865,000 | | | |
| VERIZON MASTER TRUST 2021-1 A 0.5% 05/20 | | 99.9927 | | | |
| MONTHLY 0.500% 05/20/2027 | | 93.949 | 1,284,905.68 | 1,207,244.65 | (77,661.03) |
| 92348KAA1 | | 1,285,000 | | | |
| VERIZON MASTER TRUST 2021-1 A 0.99% 04/2 | | 99.9856 | | | |
| MONTHLY 0.990% 04/20/2028 | | 93.2540 | 1,329,808.21 | 1,240,278.73 | (89,529.48) |
| 92348KAD5 | | 1,330,000 | | | |
| VERIZON OWNER TR 2020-C 0.41% 04/21/2025 | | 99.9838 | | | |
| MONTHLY 0.410% 04/21/2025 | | 98.3504 | 339,800.47 | 334,249.51 | (5,550.96) |
| 92348CAA9 | | 339,855.6300 | | | |
| VIRGINIA ELECTRIC AND POWER CO 3.75% 05/ | | 99.688 | | | |
| SEMI-ANN. 3.750% 05/15/2027 | | 95.4326 | 169,469.60 | 162,235.35 | (7,234.25) |
| 927804GH1 | | 170,000 | | | |
| VIRGINIA HOUSIN 3.125% 11/25/2039 | | 99.9702 | | | |
| MONTHLY 3.125% 11/25/2039 | | 94.6906 | 372,305.08 | 352,643.02 | (19,662.06) |
| 92812VMA1 | | 372,415.9200 | | | |
| VOLKSWAGEN GROUP AMER FIN LLC 3.35% 05/1 | | 106.275 | | | |
| SEMI-ANN. 3.350% 05/13/2025 | | 95.5009 | 212,550.00 | 191,001.81 | (21,548.19) |
| 928668BE1 | | 200,000 | | | |
| VOLKSWAGEN GROUP AMER FIN LLC 4.35% 06/0 | | 99.929 | | | |
| SEMI-ANN. 4.350% 06/08/2027 | | 95.8532 | 239,829.60 | 230,047.58 | (9,782.02) |
| 928668BS0 | | 240,000 | | | |
| VOLVO FINL EQUIP LLC SER 2020-1 0.51% 10 | | 99.9990 | | | |
| MONTHLY 0.510% 10/15/2024 | | 97.9524 | 921,706.37 | 902,842.72 | (18,863.65) |
| 92888EAC7 | | 921,715.6800 | | | |
| VT STUD LOAN .811% 7/28/2034 | | 98.8516 | | | |
| MONTHLY FLOATING 07/28/2034 | | 99.5099 | 522,151.12 | 525,628.63 | 3,477.51 |
| 924279AC6 | | 528,217.3695 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) Identify of Issue, borrower, Lessor or Similar Party | (c) Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | (d) Cost*** | (e) Current Value | |
|---|---|---|---|---|---|
| | ** SECURITIES ** | UNIT COST<br>MARKET PRICE<br>SHARES/PAR | COST | MARKET VALUE | UNREALIZED GAIN(LOSS) |
| | WEC ENERGY GROUP INC 3.55% 06/15/2025 | 105.819 | | | |
| | SEMI-ANN. 3.550% 06/15/2025 | 95.8343 | 285,711.30 | 258,752.61 | (26,958.69) |
| | 976657AL0 | 270,000 | | | |
| * | WELLS FARGO & CO NEW 3.35%/VAR 3/02/2033 | 100.00 | | | |
| | SEMI-ANN. FLOATING 03/02/2033 | 84.2398 | 240,000.00 | 202,175.47 | (37,824.53) |
| | 95000U2U6 | 240,000 | | | |
| * | WELLS FARGO & CO NEW 3.526%/VAR 03/24/20 | 100.00 | | | |
| | SEMI-ANN. FLOATING 03/24/2028 | 92.6001 | 710,000.00 | 657,460.70 | (52,539.30) |
| | 95000U2V4 | 710,000 | | | |
| * | WELLS FARGO & CO NEW 3.908%/VAR 04/25/20 | 100.00 | | | |
| | SEMI-ANN. FLOATING 04/25/2026 | 97.1907 | 100,000.00 | 97,190.72 | (2,809.28) |
| | 95000U2X0 | 100,000 | | | |
| * | WELLS FARGO & CO NEW 4.54%/VAR 08/15/202 | 100.00 | | | |
| | SEMI-ANN. FLOATING 08/15/2026 | 97.9959 | 420,000.00 | 411,582.91 | (8,417.09) |
| | 95000U3C5 | 420,000 | | | |
| * | WELLS FARGO & CO NEW 4.808%/VAR 07/25/20 | 100.00 | | | |
| | SEMI-ANN. FLOATING 07/25/2028 | 97.6696 | 550,000.00 | 537,182.96 | (12,817.04) |
| | 95000U3A9 | 550,000 | | | |
| * | WELLS FARGO COML MTG TR 2017-C39 3.157% | 95.5859 | | | |
| | MONTHLY 3.157% 09/15/2050 | 91.4069 | 573,515.63 | 548,441.58 | (25,074.05) |
| | 95000XAE7 | 600,000 | | | |
| * | WELLS FARGO COML MTG TR 2017-C41 3.472% | 96.9492 | | | |
| | MONTHLY 3.472% 11/15/2050 | 92.1491 | 770,746.29 | 732,585.42 | (38,160.87) |
| | 95001ABD7 | 795,000 | | | |
| | WELLTOWER INC 2.05% 01/15/2029 | 99.715 | | | |
| | SEMI-ANN. 2.050% 01/15/2029 | 81.2190 | 229,344.50 | 186,803.61 | (42,540.89) |
| | 95040QAN4 | 230,000 | | | |
| | WELLTOWER INC 3.625% 03/15/2024 | 99.657 | | | |
| | SEMI-ANN. 3.625% 03/15/2024 | 97.8583 | 239,176.80 | 234,859.81 | (4,316.99) |
| | 95040QAG9 | 240,000 | | | |
| | WFRBS COML MTG TR 2014-C19 4.101% 03/15/ | 103.5422 | | | |
| | MONTHLY 4.101% 03/15/2047 | 97.7732 | 1,553,132.81 | 1,466,598.15 | (86,534.66) |
| | 92938VAQ8 | 1,500,000 | | | |
| | WFRBS 2013-C17 A4 4.023% 12/15/2046 | 103.0859 | | | |
| | MONTHLY 4.023% 12/15/2046 | 98.2788 | 551,509.77 | 525,791.47 | (25,718.30) |
| | 92938GAD0 | 535,000 | | | |

QUALCOMM Incorporated
Employee Savings and Retirement Plan
Schedule H, Line 4i - Schedule of Assets (Held at End of Year) **
December 31, 2022

| (a) | (b) | (c) | (d) | (e) |
|---|---|---|---|---|
| | Identify of Issue, borrower,Lessor or Similar Party | Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value | Cost*** | Current Value |
| | **** * SECURITIES * *** | ***UNIT COST MARKET PRICE SHARES/PAR*** | ***COST*** | ***MARKET VALUE*** | ***UNREALIZED GAIN(LOSS)*** |
| | WI ST 1.402% 5/1/2029 | 100.00 | | | |
| | SEMI-ANN. 1.402% 05/01/2029 | 81.4646 | 240,000.00 | 195,515.11 | (44,484.89) |
| | 97705MVN2 | 240,000 | | | |
| | WI ST 2.444% 5/1/2030 | 100.00 | | | |
| | SEMI-ANN. 2.444% 05/01/2030 | 85.0412 | 315,000.00 | 267,879.91 | (47,120.09) |
| | 97705MXD2 | 315,000 | | | |
| | WILLIAMS COS INC 3.9% 01/15/2025 | 108.577 | | | |
| | SEMI-ANN. 3.900% 01/15/2025 | 97.3830 | 304,015.60 | 272,672.49 | (31,343.11) |
| | 96950FAQ7 | 280,000 | | | |
| | WORLD OMNI AUTO RECEIVABLES TR 2022-B A3 | 95.9531 | | | |
| | MONTHLY 3.250% 07/15/2027 | 96.7210 | 224,530.31 | 226,327.21 | 1,796.90 |
| | 98163QAD1 | 234,000 | | | |
| | WRKCO INC 3.75% 03/15/2025 | 109.131 | | | |
| | SEMI-ANN. 3.750% 03/15/2025 | 96.7129 | 294,653.70 | 261,124.84 | (33,528.86) |
| | 96145DAF2 | 270,000 | | | |
| | 7 ELEVEN INC 0.95% 02/10/2026 144A | 99.762 | | | |
| | SEMI-ANN. 0.950% 02/10/2026 | 87.5794 | 139,666.80 | 122,611.18 | (17,055.62) |
| | 817826AC4 | 140,000 | | | |
| | TOTAL FIXED INCOME | | 319,104,156.52 | 299,074,905.09 | (20,029,251.43) |
| | CASH EQUIVALENTS | | | | |
| | FID BANK TRST ST INV FUND | 1.00 | | | |
| | 388996472 | 1.00 | 4,165,744.99 | 4,165,744.99 | 0.00 |
| | | 4,165,744.9900 | | | |
| | KEYBANK NATL ASSN 5.85% 11/15/2027 | 99.833 | | | |
| | SEMI-ANN. 5.850% 11/15/2027 | 103.2180 | 249,582.50 | 258,045.07 | 8,462.57 |
| | 49327M3F9 | 250,000 | | | |
| | TOTAL CASH EQUIVALENTS | | 4,415,327.49 | 4,423,790.06 | 8,462.57 |

* Represents a party-in-interest.
** Information certified as complete and accurate by Fidelity Management Trust Company, the Trustee.
*** All investments are Participant Directed; therefore, disclosure of cost is not required.

# QUALCOMM Incorporated
# Employee Savings and Retirement Plan
## Schedule H, Line 4a – Schedule of Delinquent Participant Contributions
## Year Ended December 31, 2022

| | Participant Contributions Transferred Late to the Plan | Total that Constitutes Nonexempt Prohibited Transactions | | | |
|---|---|---|---|---|---|
| | Check Here if Late Participant Loan Repayments are Included | Contributions Not Corrected | Contributions Corrected Outside VFCP | Contributions Pending In VFCP | Total Fully Corrected Under VFCP and PTE 2002-51 |
| 2022 | ☒ | $ — | $ 227,633 | $ — | $ — |
| | ☐ | $ — | $ | $ — | $ — |