

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 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide 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 SPITZER MANAGEMENT INC PROFIT SHARING AND SAVINGS PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 01/01/1973
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) SPITZER MANAGEMENT, INC. 150 EAST BRIDGE STREET ELYRIA, OH 44035-5219
2b	Employer Identification Number (EIN) 34-0795747
2c	Plan Sponsor's telephone number 440-323-4671
2d	Business code (see instructions) 541600

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.	10/03/2024	JOE MASTRODONATO
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 1332
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 712 6a(2) 744 6b 13 6c 614 6d 1371 6e 13 6f 1384 6g(1) 1143 6g(2) 1258 6h 16
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2E 2F 2H 2J 2K 2S 2T 3D 3H

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

9a Plan funding arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) ☐ Insurance (2) ☐ Code section 412(e)(3) insurance contracts (3) ☒ Trust (4) ☐ General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules

- (1) ☒ **R** (Retirement Plan Information)
- (2) ☐ **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary
- (3) ☐ **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary
- (4) ☐ **DCG** (Individual Plan Information) – Number Attached _____
- (5) ☐ **MEP** (Multiple-Employer Retirement Plan Information)

b General Schedules

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

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2023 Form M-1 annual report. If the plan was not required to file the 2023 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2023
		This Form is Open to Public Inspection.

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

A Name of plan SPITZER MANAGEMENT INC PROFIT SHARING AND SAVINGS PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SPITZER MANAGEMENT, INC.	D Employer Identification Number (EIN) 34-0795747

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).....

Yes

x

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

(b)

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

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

SPIRA BENEFITS, LLC

45-4211533

(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 64 57	N/A	169056	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

STRATEGIC WEALTH PARTNERS

26-2328809

(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	N/A	100000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

FIRST NATIONAL BANK

20-0433578

(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	N/A	88365	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

HOBE & LUCAS, CPA'S

31-1488076

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
10	N/A	19000	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MCDONALD HOPKINS

34-1059058

(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	N/A	11305	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

MARIOTTI PRINTING

85-4264351

(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?
36	N/A	7016	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

SOMERS AGENCY

45-4747357

(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?
22	N/A	5350	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE 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
		2023
		This Form is Open to Public Inspection

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan SPITZER MANAGEMENT INC PROFIT SHARING AND SAVINGS PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SPITZER MANAGEMENT, INC.		
D Employer Identification Number (EIN) 34-0795747		

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	1214717	707337
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	180907	196767
(2) Participant contributions	1b(2)	254366	256408
(3) Other	1b(3)	12724	15126
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1845273	1232470
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	36087319	25574765
(5) Partnership/joint venture interests	1c(5)	4136766	3407487
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	404429	576569
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	32085864	57224458
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	619902	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)		
(2) Employer real property	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	76842267	89191387
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h	344945	362144
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	344945	362144
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	76497322	88829243

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)	2206662	
(B) Participants	2a(1)(B)	3011535	
(C) Others (including rollovers)	2a(1)(C)	234611	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		5452808
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	4215	
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)	32457	
(E) Participant loans	2b(1)(E)		
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		36672
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)	1422314	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	697324	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2119638
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	38435719	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	38961370	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		-525651
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)	4444007	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		8403657
c Other income	2c		1850
d Total income. Add all income amounts in column (b) and enter total	2d		19932981

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	7199688	
(2) To insurance carriers for the provision of benefits.....	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		7199688
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)	169055	
(4) IQPA audit fees.....	2i(4)	19000	
(5) Investment advisory and investment management fees	2i(5)	188365	
(6) Bank or trust company trustee/custodial fees	2i(6)	765	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)	11305	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	12882	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		401372
j Total expenses. Add all expense amounts in column (b) and enter total	2j		7601060

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		12331921
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

(1) ☒ Unmodified (2) ☐ Qualified (3) ☐ Disclaimer (4) ☐ Adverse

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

(1) ☐ DOL Regulation 2520.103-8 (2) ☐ DOL Regulation 2520.103-12(d) (3) ☒ neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

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

(1) Name: **HOBE & LUCAS, CPA'S**

(2) EIN: **31-1488076**

d The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1) ☐ This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

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.)		☒	
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.)		☒	
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.)		☒	
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.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
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?		☒	
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?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
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.)	☒		
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
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.			

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 2023 This Form is Open to Public Inspection.
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan SPITZER MANAGEMENT INC PROFIT SHARING AND SAVINGS PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SPITZER MANAGEMENT, INC.		D Employer Identification Number (EIN) 34-0795747
Part I	Distributions	
All references to distributions relate only to payments of benefits during the plan year.		
1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....		1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 34-6700509		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A		
If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____		
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2023 v. 230707		

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) 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) 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)	14a 14b 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 b The corresponding number for the second preceding plan year	15a 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 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	16a 16b	
17 If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐		

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
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. _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☒ Design-based safe harbor method ☐ "Prior year" ADP test ☐ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter <u>06 / 30 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q702331A</u> .	

SPITZER MANAGEMENT, INC.
PROFIT SHARING & SAVINGS PLAN
FINANCIAL STATEMENTS
AS OF AND FOR THE YEARS ENDED
DECEMBER 31, 2023 AND 2022

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
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INDEPENDENT AUDITORS' REPORT

To the Trustees and Participants of the
Spitzer Management, Inc. Profit Sharing & Savings Plan
Elyria, OH

Opinion

We have audited the accompanying financial statements of Spitzer Management, Inc. Profit Sharing & Savings Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Spitzer Management, Inc. Profit Sharing & Savings Plan as of December 31, 2023 and 2022, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Spitzer Management, Inc. Profit Sharing & Savings Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note 2; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements 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.

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 Spitzer Management, Inc. Profit Sharing & Savings Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Spitzer Management, Inc. Profit Sharing & Savings 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 Spitzer Management, Inc. Profit Sharing & Savings Plan's ability to continue as a going concern for a reasonable period of time.

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.

Basis of Accounting

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

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) as of December 31, 2023 is presented for the purpose of additional analysis and is not a required part of the financial statements but is supplemental information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, 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 information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Hobe & Lucas
Certified Public Accountants, Inc.

Independence, Ohio
September 30, 2024

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
<u>ASSETS</u>		
<u>Investments, At Fair Value</u>		
Cash and money market funds	\$ 1,939,807	\$ 3,059,990
Common and preferred stock	25,574,765	36,087,319
Mutual funds	57,224,458	32,085,864
Real estate investment trusts	-	619,902
Limited partnerships	3,407,487	4,136,766
Total Investments	<u>88,146,517</u>	<u>75,989,841</u>
<u>Receivables</u>		
Participant contributions	271,534	267,090
Employer contributions	196,767	180,907
Notes receivable from participants	576,569	404,429
Total Receivables	<u>1,044,870</u>	<u>852,426</u>
Total Assets	<u>89,191,387</u>	<u>76,842,267</u>
<u>LIABILITIES</u>		
Accounts payable	333,787	290,281
Accrued expenses	<u>28,357</u>	<u>54,664</u>
Total Liabilities	<u>362,144</u>	<u>344,945</u>
Net Assets Available For Benefits	<u><u>\$ 88,829,243</u></u>	<u><u>\$ 76,497,322</u></u>

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEARS ENDED DECEMBER 31, 2023 AND 2022

	<u>2023</u>	<u>2022</u>
<u>Additions</u>		
Additions to net assets attributed to:		
Interest on note receivable from participants	\$ 32,457	\$ 19,347
Investment Income:		
Interest	4,215	2,209
Dividends	2,119,638	900,975
Miscellaneous	1,850	1,650
Net appreciation (depreciation) in fair value of investments	12,322,013	(31,987,181)
	<u>14,447,716</u>	<u>(31,082,347)</u>
Contributions:		
Employee	3,011,535	2,723,655
Employer	2,206,662	1,930,250
Rollovers	234,611	344,928
	<u>5,452,808</u>	<u>4,998,833</u>
Total Additions	<u>19,932,981</u>	<u>(26,064,167)</u>
<u>Deductions</u>		
Deductions from net assets attributed to:		
Distributions to participants	7,199,688	6,532,862
Administrative expenses	401,372	369,389
	<u>7,601,060</u>	<u>6,902,251</u>
<u>Net Increase (Decrease) in Net Assets Available for Benefits</u>	12,331,921	(32,966,418)
<u>Net Assets Available for Benefits, Beginning of Year</u>	<u>76,497,322</u>	<u>109,463,740</u>
<u>Net Assets Available for Benefits, End of Year</u>	<u>\$ 88,829,243</u>	<u>\$ 76,497,322</u>

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 1 - DESCRIPTION OF PLAN

The following brief description of the Spitzer Management, Inc. Profit Sharing & Savings Plan (the Plan), is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan is a 401(K) plan established by Spitzer Management, Inc. on January 1, 1973 to provide retirement benefits for all employees of Spitzer Management, Inc. (the Company). All full-time, non-union employees are eligible to participate in the Plan upon completion of one year of service. The plan entry date is the first day of the plan quarter following attainment of the service requirement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Each year, plan participants may contribute to the Plan, on a pretax basis, an amount not to exceed 100% of their compensation, subject to a limit of \$22,500 for 2023 and \$20,500 for 2022. Eligible employees may elect to make additional “catch up” contributions, subject to a limit of \$7,500 for 2023 and \$6,500 for 2022. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. The Company makes a safe-harbor matching contribution of 100% of participant deferrals up to 5% of the participant's compensation. The Company may also make discretionary profit sharing contributions.

Participant Accounts

Each participant's account is credited with (a) the participant's contributions, (b) the Company's matching contributions, (c) Plan earnings and (d) charged with an allocation of administrative expenses. Earnings are allocated by fund based on the ratio of a participant's account invested in a particular fund to all participants' investments in that fund. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their elective contributions plus actual earnings thereon. Employer QACA safe harbor matching contributions are 100% vested after two years of service.

Forfeited non-vested accounts

At December 31, 2023 and 2022, forfeited non-vested accounts totaled \$9,231 and \$3, respectively. These amounts were used to pay plan expenses.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

Payment of Benefits

In case of a normal retirement, retirement due to permanent disability or termination of employment, participants may elect to receive the value of their account balance in a lump sum distribution, or as a rollover in whole or in part to an eligible retirement plan, in accordance with the provisions of the Plan. In the event that a participant dies before retirement, the beneficiary will receive the value of the participant's account balance in either a lump-sum distribution or, if the beneficiary is a surviving spouse, as a rollover in whole or in part to an eligible retirement plan. If a participant's vested balance is greater than \$1,000 and less than \$5,000, and the participant does not make an election to either receive or to rollover the distribution, the distribution can be rolled over to an Individual Retirement Account.

Investment Options

Upon enrollment in the Plan, a participant may currently direct contributions among any of the following investment options:

- Spitzer 401(k) Account - Funds are invested in various marketable securities as selected by the trustees of the plan.
- Dodge and Cox Income Fund - The fund seeks a high and stable rate of current income, consistent with long-term preservation of capital. The fund invests in a diversified portfolio of high quality bonds and other debt securities.
- T. Rowe Price Growth Stock Fund - The fund seeks long-term capital growth through investments in stocks. The fund invests at least 80% in the common stocks of a diversified group of growth funds.
- American New Perspective Fund - Funds are invested primarily in common stocks, including growth-oriented stocks, on a global basis.
- T. Rowe Price Mid-Cap Growth Fund - The fund seeks long-term capital appreciation. The fund invests at least 80% in a diversified portfolio of common stocks of mid-cap companies whose earnings T. Rowe Price expects to grow at a faster rate than the average company.
- Vanguard International Growth Fund - The fund seeks to provide long-term capital appreciation. The fund invests predominantly in the stocks of companies located outside the United States and is expected to diversify its assets in countries across developed and emerging markets.
- American Balanced Fund - Funds are invested in stocks, bonds, and other fixed-income securities to provide conservation of capital, current income, and long-term growth of capital.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

Investment Options (Continued)

- Vanguard Equity-Income Fund - The fund seeks to provide an above average level of current income and reasonable long-term capital appreciation. The fund invests mainly in common stocks of mid-size and large companies whose stocks typically pay above-average levels of dividend income and are undervalued relative to other such stocks.
- Vanguard Explorer Fund - The fund seeks to provide long-term capital appreciation. The fund invests mainly in the stocks of small companies that are considered to have superior growth potential.
- Vanguard Mid-Cap Index Fund - The fund seeks to track the performance of a benchmark index that measures the investment return of mid-capitalization stocks. The fund invests in the same stocks and at approximately the same proportion as the CRSP US Mid Cap index.
- Vanguard Small-Cap Index Fund - The fund seeks to track the performance of a benchmark index that measures the investment return of small-capitalization stocks. The fund invests in the same stocks and at approximately the same proportion as the CRSP US Small Cap index.
- Vanguard 500 Index Fund - The fund seeks to track the performance of a benchmark index that measures the investment return of large-capitalization stocks. The fund invests in the same stocks and at approximately the same proportion as the Standard & Poor's 500 index.
- Vanguard Target Retirement Income Fund – Designed for investors already in retirement, the fund seeks to provide current income and some capital appreciation by investing in Vanguard Index Funds.
- Vanguard Target Retirement Funds for 2025, 2030, 2035, 2040, 2045, 2050, 2055, 2060 and 2065 – These funds seek to build appropriate asset allocation from preselected stock and bond portfolios. The allocation between funds and asset classes becomes more conservative over time. 100% of the assets are invested in index funds.
- Federated Institutional Prime Obligations Fund - The fund seeks to provide current income consistent with stability of principal. The fund invests primarily in a portfolio of high quality, dollar denominated fixed-income securities which: (1) are issued by banks, corporations, and the U.S. government; and (2) mature in 397 days or less.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 1 - DESCRIPTION OF PLAN (CONTINUED)

Investment Options (Continued)

- JP Morgan Large Cap Growth Fund - The fund seeks to provide long-term capital appreciation. The fund invests mainly in the stocks of large companies that are considered to have superior growth potential.

Participants may change their investment options on a quarterly basis.

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements of the Plan are prepared on the modified cash basis of accounting. Contributions are recorded on the accrual basis; all other investment earnings are recognized when received rather than earned. Certain expenses, distributions, and purchases of assets are recognized when cash is disbursed rather than when the obligation is incurred.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires the Plan administrator and management to make estimates and assumptions that affect certain reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

Benefit Distributions

Benefit distributions are recorded when paid to participants.

Valuation of Investments

The Plan's investments are administered by FNB Wealth Management and Charles Schwab and are stated at fair value. Units held in mutual funds are valued at the daily closing prices as reported by the funds. Units held in common/preferred stock are valued at the closing price reported on the active market on which the individual security is traded. Units held in real estate investment trusts are valued at the daily NAV as reported by the fund. Units held in the limited partnership is based on the ending capital account as reported by the partnership. Units held in cash and money markets is valued at its carrying value. Participant loans are valued at cost, which approximates fair value.

Administrative Services

The expenses necessary to administer the Plan are paid by the Plan including, but not limited to, those involved in retaining necessary professional assistance from an attorney, an accountant, or an investment adviser. Investment related expenses are included in net appreciation of fair value of investments.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 2 - SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Risk and Uncertainties

The Plan provides for various investment options. Investment securities are exposed to various risks, such as interest rate, market and credit. Due to the level of risk associated with certain investment securities and the level of uncertainty related to changes in the value of investment securities, it is at least reasonably possible that changes in the value in the near term would materially affect participant account balances and the amounts reported in the statements of Net Assets Available for Benefits and the Statements of Changes in Net Assets Available for Benefits.

The Plan typically maintains cash and cash equivalents in a local bank, which may, at times, exceed the Federal Deposit Insurance Corporation limits.

Notes Receivable from Participants

Loans are made available to all participants in accordance with the specific provisions set forth in the Plan. The amount of a loan cannot exceed the lesser of \$50,000 or one-half of a participant's total vested account balance. Loan terms range from one to five years. Loan terms range from one to thirty years when used to construct or acquire a principal residence. The loans are secured by the balance in the participant's account. Participants with loan balances had interest rates ranging from 4.25% to 9.50% during the plan year ending December 31, 2023. All loans are subject to specific repayment plans and are secured by the participant's non-forfeitable interest in his/her account equivalent to the principal amount of the loan. Loan origination fees of \$100 and yearly loan servicing fees of \$50 are paid by the participant requesting the loan and are expensed as incurred.

Notes receivable from participants are measured at their unpaid principal balance plus any accrued, but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2023 or 2022.

NOTE 3 - TAX STATUS

The Plan uses a non-standardized pre-approved plan document sponsored by McDonald Hopkins LLC, which received an opinion from the IRS dated June 30, 2020 which states that the pre-approved document satisfies the provisions of Section 401 of the IRC. The Plan itself has not received a determination letter from the IRS. However, the Plan's management believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2020.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 4 - PLAN TERMINATION

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

NOTE 5 - TRANSACTIONS WITH PARTIES IN INTEREST

Fees paid during the year for custodial, administrative and recordkeeping services provided by parties in interest were based on customary and reasonable rates for such services and are paid by the plan.

NOTE 6 - INVESTMENTS

The Plan's investments are held in trust funds administered by two brokerage houses. The employee elective deferrals and matching contributions are participant-directed to the investment options described in Note 1. Employer profit sharing contributions are invested in a diversified fund of stocks, mutual funds, real estate investment trusts, corporate bonds, and limited partnerships that are selected and managed by the trustees and their investment advisors.

Net Appreciation (depreciation) at fair market value as determined by quoted market price:

	<u>2023</u>	<u>2022</u>
Common and preferred stock	\$ 5,476,873	\$(23,698,492)
Mutual funds	6,379,593	(8,678,990)
Real estate investment trusts	(182,831)	(330,365)
Limited partnerships	648,378	720,666
	<u>\$ 12,322,013</u>	<u>\$(31,987,181)</u>

NOTE 7 - NON-PARTICIPANT DIRECTED INVESTMENTS

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

	<u>2023</u>	<u>2022</u>
Investments:		
Cash and money market funds	\$ 363,233	\$ 1,187,418
Common and preferred stock	20,397,016	29,630,490
Mutual funds	12,557,073	402,990
Real estate investment trusts	-	508,988
Limited partnerships	2,717,623	3,396,606
	<u>\$ 36,034,945</u>	<u>\$ 35,126,492</u>

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 7 - NON-PARTICIPANT DIRECTED INVESTMENTS (CONTINUED)

Change in Net Assets:	<u>2023</u>	<u>2022</u>
Beginning balance	\$ 35,126,492	\$ 58,224,410
Interest	3,362	1,814
Dividends	1,305,537	343,442
Net appreciation (depreciation)	4,899,782	(19,210,198)
Administrative expenses	(401,372)	(369,389)
Benefits paid	<u>(4,898,856)</u>	<u>(3,863,587)</u>
	<u>\$ 36,034,945</u>	<u>\$ 35,126,492</u>

NOTE 8 - PARTICIPANTS SEPARATED FROM SERVICE WITH A DEFERRED VESTED INTEREST

As of December 31, 2023, six hundred and forty-nine participants with account balances totaling \$41,143,717 have separated from service and have not been paid.

NOTE 9 - FAIR VALUE MEASUREMENTS

Financial Accounting Standards Board *Accounting Standards Codification (ASC) 820, Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy under FASB Statement ASC 820 are described below:

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

Level 2: Inputs to the valuation methodology include:

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

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

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 9 - FAIR VALUE MEASUREMENTS (CONTINUED)

Level 3: Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

The asset's or liability's fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2023 and 2022.

Cash and money market funds: Valued at carrying value.

Mutual funds: Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common and preferred stock: Valued at the closing price reported on the active market on which the individual securities are traded.

Limited Partnerships: Valued based on the ending capital account as reported by the partnership.

Real Estate Investment Trusts (REITS): Valued at the daily closing price as reported by the Trust. REITS held by the Plan are registered with the Securities and Exchange Commission. These REITS are required to publish their daily NAV and to transact at that price. The REITS held by the Plan are deemed to be actively traded.

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

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 9 - FAIR VALUE MEASUREMENTS (CONTINUED)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2023:

Assets at Fair Value as of December 31, 2023

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and money market funds	\$ 1,939,807	\$	\$	\$ 1,939,807
Common and preferred stock	25,574,765			25,574,765
Mutual funds	57,224,458			57,224,458
Limited partnerships			<u>3,407,487</u>	<u>3,407,487</u>
Total Assets at Fair Value	<u>\$ 84,739,030</u>	<u>\$ -</u>	<u>\$ 3,407,487</u>	<u>\$ 88,146,517</u>

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

Assets at Fair Value as of December 31, 2022

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Cash and money market funds	\$ 3,059,990	\$	\$	\$ 3,059,990
Common and preferred stock	36,087,319			36,087,319
Mutual funds	32,085,864			32,085,864
REITS	619,902			619,902
Limited partnerships			<u>4,136,766</u>	<u>4,136,766</u>
Total Assets at Fair Value	<u>\$ 71,853,075</u>	<u>\$ -</u>	<u>\$ 4,136,766</u>	<u>\$ 75,989,841</u>

The tables below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2023:

Changes in the fair value December 31, 2023:

	<u>Limited Partnerships</u>
Balance, beginning of year	\$4,136,766
Purchases	-
Withdrawals	(1,377,657)
Net appreciation (depreciation)	<u>648,378</u>
Balance, end of year	<u>\$3,407,487</u>

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023 AND 2022

NOTE 9 - FAIR VALUE MEASUREMENTS (CONTINUED)

The tables below sets forth a summary of changes in the fair value of the Plan's level 3 assets for the year ended December 31, 2022:

Changes in the fair value December 31, 2022:

	<u>Limited Partnerships</u>
Balance, beginning of year	\$3,416,100
Purchases	-
Withdrawals	(139,000)
Net appreciation (depreciation)	<u>859,666</u>
Balance, end of year	<u>\$4,136,766</u>

NOTE 10 – PLAN AMENDMENTS

Effective January 1, 2022, the plan was restated to bring the plan into compliance with legislative and regulatory changes set forth by the IRS.

NOTE 11 - SUBSEQUENT EVENTS

Subsequent events were reviewed through September 30, 2024, the date the financial statements were available for issuance. There were no subsequent events to report as of that date.

SUPPLEMENTAL SCHEDULES

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS - HELD AT YEAR END
PLAN NUMBER - 001
EIN:34-0795747
DECEMBER 31, 2023

(a) Party In Interest	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par of maturity value	(e) Fair Value
	<u>Cash and Money Market Funds</u>		
	Huntington Bank	Non-interest bearing cash	\$ 659,452
	Charles Schwab	Non-interest bearing cash	47,885
	Charles Schwab Sweep Account	Interest bearing cash	81,950
	Federal Prime Obligations	Money Market Fund	1,150,520
		Total Cash and Money Market Funds	<u>1,939,807</u>
	<u>Common and Preferred Stock</u>		
	American Airlines Group Inc.	Corporate Stock	\$ 4,177
	Alphabet Inc.	Corporate Stock	2,113,950
	Ares Capital Corp	Corporate Stock	320,480
	BlackRock Debt Strat Fd	Corporate Stock	1,143,600
	Blue Owl Cap Corp	Corporate Stock	324,720
	Blue Owl Cap Inc.	Corporate Stock	2,197,273
	Brookfield Asset Management	Corporate Stock	1,119,176
	Brookfield Infrastructure	Corporate Stock	270,470
	Brookfield RE 5.25% PDF	Corporate Stock	37,698
	Charles Schwab Corp.	Corporate Stock	481,600
	City Office 6.625% PDF	Corporate Stock	628,635
	Cohen and Steers Infrastructure	Corporate Stock	2,442,600
	Discover FINL S	Corporate Stock	1,180,200
	Doubleline Income Solution	Corporate Stock	526,222
	Doubline Opportunistic	Corporate Stock	1,291,795
	Elevance Health Inc.	Corporate Stock	1,144,476
	Fleetcor Technologies	Corporate Stock	847,830
	FS KKR Capital Corp.	Corporate Stock	893,658
	KKR Real Estate 6.5%	Corporate Stock	529,653
	Nextera Energy Partners	Corporate Stock	2,311,677
	Pimpcor Corporate Opportunity	Corporate Stock	1,562,320
	Synchrony FI 5.625%	Corporate Stock	983,250
	Synchrony Financial	Corporate Stock	401,988
	Union Pacific Corp	Corporate Stock	736,860
	Visa Inc.	Corporate Stock	2,080,457
		Total Common and Preferred Stock	<u>25,574,765</u>

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS - HELD AT YEAR END (CONTINUED)
PLAN NUMBER - 001
EIN:34-0795747
DECEMBER 31, 2023

(a) Party In Interest	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par of maturity value	(e) Fair Value
	<u>Mutual Funds</u>		
	SPDR S&P Regional Banking ETF	Mutual Fund	\$ 2,851,860
	INVS QQQ Trust ETF	Mutual Fund	4,756,165
	Schwab US Dividend ETF	Mutual Fund	1,030,420
	SPDR Portfolio S&P 600 ETF	Mutual Fund	3,750,603
	Doubleline Shiller Enhanced CAPE	Mutual Fund	3,266,696
	American Europacific Growth Fund	Mutual Fund	88,921
	Vanguard Target Retirement Income Fd	Mutual Fund	39,468
	Vanguard Target Retirement 2025 Fund	Mutual Fund	62,699
	Vanguard Target Retirement 2030 Fund	Mutual Fund	272,799
	Vanguard Target Retirement 2035 Fund	Mutual Fund	337,737
	Vanguard Target Retirement 2040 Fund	Mutual Fund	153,582
	Vanguard Target Retirement 2045 Fund	Mutual Fund	107,989
	Vanguard Target Retirement 2050 Fund	Mutual Fund	299,758
	Vanguard Target Retirement 2055 Fund	Mutual Fund	343,021
	Vanguard Target Retirement 2060 Fund	Mutual Fund	155,907
	Vanguard Target Retirement 2065 Fund	Mutual Fund	144,415
	American Balanced Fund	Mutual Fund	3,347,588
	American New Perspective Fund	Mutual Fund	7,758,877
	Dodge & Cox Income Fund	Mutual Fund	2,328,642
	JP Morgan Large Cap Growth Fund	Mutual Fund	6,355,804
	T Row Price Mid-Cap Growth Institutional Fund	Mutual Fund	2,790,898
	Vanguard International Fund	Mutual Fund	1,094,440
	Vanguard Equity Income Fund	Mutual Fund	6,461,044
	Vanguard Explorer Fund	Mutual Fund	1,319,924
	Vanguard Mid-Cap Fund	Mutual Fund	1,366,242
	Vanguard Small-Cap Fund	Mutual Fund	1,173,221
	Vanguard 500 Fund	Mutual Fund	5,565,738
		Total Mutual Funds	57,224,458

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS - HELD AT YEAR END (CONTINUED)
PLAN NUMBER - 001
EIN:34-0795747
DECEMBER 31, 2023

(a) Party In Interest	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral par of maturity value	(e) Fair Value
		<u>Limited Partnerships</u>	
	Strategic Value Investors LP	Limited Partnership	\$ 2,042,774
	Strategic Value FNBA Investors LP	Limited Partnership	1,364,713
		Total Limited Partnerships	<u>3,407,487</u>
		Total Investments	88,146,517
		<u>Note Receivable from Participants</u>	
*	Notes Receivable From Participants	Notes Receivable from Participants (interest rate of 4.25%-9.50%)	<u>576,569</u>
			<u>\$ 88,723,086</u>

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN
SCHEDULE H, LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS
PLAN NUMBER - 001
EIN:34-0795747
DECEMBER 31, 2023

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of party involved	Description of asset (including interest rate and maturity in case of a loan)	Purchase Price	Selling Price	Lease Rental	Expenses incurred with transaction	Cost of Asset	Current value of asset on transaction date	Net gain or (loss)

Series of transactions in excess of 5% of Plan Assets:

Alphabet Inc. (GOOG)			\$ 4,349,841			\$ 3,931,200	\$ 4,349,841	\$ 418,641
Amazon.com Inc. (AMZN)			\$ 4,442,801			\$ 4,096,642	\$ 4,442,801	\$ 346,159

See accompanying notes to financial statements.

SPITZER MANAGEMENT, INC. PROFIT SHARING & SAVINGS PLAN

Schedule H, Line 4j - Schedule of Reportable Transactions

Employer Identification Number 34-0795747
Plan Number 001

December 31, 2023

(a)	(b)	(c)	(d)	(e)	(f)	(g)	(h)	(i)
Identity of party involved	Description of asset (include interest rate and maturity in case of a loan)	Purchase price	Selling price	Lease rental	Expense incurred with transaction	Cost of asset	Current value of asset on transaction date	Net gain or (loss)
Category (iii) - Series of transactions in excess of 5% of Plan Assets								
	Alphabet Inc (GOOG) Amazon.com Inc (AMZN)		4,349,841 4,442,801			3,931,200 4,096,642	4,349,841 4,442,801	418,641 346,159

SPITZER MANAGEMENT, INC. PROFIT SHARING AND SAVINGS PLAN

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

Employer Identification Number 34-0795747

Plan Number 001

December 31, 2023

(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
	CASH			
	Huntington Bank	Non-Interest Bearing Cash		659,452
	Charles Schwab	Non-Interest Bearing Cash		47,885
	Charles Schwab Bank Sweep	Money Market		81,950
	Fed Hermes Govt Obligations Fund	Money Market		1,150,521
	CORPORATE STOCK			
	Alphabet Inc	Common Stock		2,113,950
	American Airlines Group Inc	Common Stock		4,177
	Ares Capital Corp	Common Stock		320,480
	Blackrock Debt Strategies Fund Inc.	Common Stock		1,143,600
	Blue Owl Capital Corp	Common Stock		324,720
	Blue Owl Capital Inc	Common Stock		2,197,273
	Brookfield Asset Management Ltd	Common Stock		1,119,176
	Brookfield Infrastructure Partners PFD	Common Stock		270,470
	Brookfield Renewable Perp PFD	Common Stock		37,698
	Charles Schwab Corp	Common Stock		481,600
	City Office PFD	Common Stock		628,635
	Cohen and Steers Infrastructure	Common Stock		2,442,600
	Discover Financial	Common Stock		1,180,200
	Doubleline Income Solutions Fund	Common Stock		526,222
	Doubleline Opportunistic Credit Fund	Common Stock		1,291,795
	Elevance Health Inc	Common Stock		1,144,476
	Fleetcor Technologie	Common Stock		847,830
	FS KKR Capital Corp	Common Stock		893,658
	KKR Real Estate PFD	Common Stock		529,653
	Nextera Energy Partners LP	Common Stock		2,311,677
	Pimco Corporate & Income Opportunity Fund	Common Stock		1,562,320
	Synchrony Financial PFD	Common Stock		983,250
	Synchrony Financial	Common Stock		401,988
	Union Pacific Corp	Common Stock		736,860
	Visa Inc	Common Stock		2,080,457
	MUTUAL FUNDS AND UNIT TRUSTS			
	Doubleline Shiller Enhanced	Mutual Fund		3,266,697
	Invesco QQQ Trust	Mutual Fund		4,756,165

SPITZER MANAGEMENT, INC. PROFIT SHARING AND SAVINGS PLAN

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

Employer Identification Number 34-0795747

Plan Number 001

December 31, 2023

(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
	Schwab US Dividend Equity	Mutual Fund		1,030,420
	SPDR Portfolio S&P 600	Mutual Fund		3,750,603
	SPDR S&P 500	Mutual Fund		2,851,860
	Dodge & Cox Income Fund	Mutual Fund		2,328,642
	American Balanced Fund	Mutual Fund		3,347,588
	American EuroPacific Growth Class A	Mutual Fund		88,921
	American New Perspective	Mutual Fund		7,758,877
	JP Morgan Large Cap Growth Fund	Mutual Fund		6,355,804
	T Rowe Price Mid-Cap Growth Institutional	Mutual Fund		2,790,898
	Vanguard Equity Income Fund	Mutual Fund		6,461,044
	Vanguard Explorer Fund	Mutual Fund		1,319,924
	Vanguard International Growth	Mutual Fund		1,094,440
	Vanguard Mid-Cap Index Fund	Mutual Fund		1,366,242
	Vanguard Small-Cap Index Fund	Mutual Fund		1,173,221
	Vanguard Target Retirement Income Fund	Mutual Fund		39,468
	Vanguard Target Retirement 2025 Fund	Mutual Fund		62,699
	Vanguard Target Retirement 2030 Fund	Mutual Fund		272,799
	Vanguard Target Retirement 2035 Fund	Mutual Fund		337,737
	Vanguard Target Retirement 2040 Fund	Mutual Fund		153,582
	Vanguard Target Retirement 2045 Fund	Mutual Fund		107,989
	Vanguard Target Retirement 2050 Fund	Mutual Fund		299,758
	Vanguard Target Retirement 2055 Fund	Mutual Fund		343,021
	Vanguard Target Retirement 2060 Fund	Mutual Fund		155,907
	Vanguard Target Retirement 2065 Fund	Mutual Fund		144,415
	Vanguard 500 Index Fund	Mutual Fund		5,565,738
	PARTNERSHIP			
	Strategic Value Investors LP	Limited Partnership		2,042,774
	Strategic Value FNBA Inestors LP	Limited Partnership		1,364,713
	PARTICIPANT LOANS			
*	Participant Loans	Interest Rates (4.25% - 9.50%)		576,569