

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) _____ ☐ 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 POWERS & SONS CONSTRUCTION CO. PROFIT SHARING & 401(K) PLAN
1b	Three-digit plan number (PN) ▶ 003
1c	Effective date of plan 04/01/1984
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) POWERS & SONS CONSTRUCTION CO. 2636 W. 15TH AVENUE GARY, IN 46404
2b	Employer Identification Number (EIN) 35-1132323
2c	Plan Sponsor's telephone number 317-269-2550
2d	Business code (see instructions) 236200

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.	10/15/2024	KENNETH BIRKLE
	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	5 117
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) 80 6a(2) 79 6b 2 6c 41 6d 122 6e 1 6f 123 6g(1) 103 6g(2) 106 6h 19
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:

2A 2E 2G 2J 2K 2R 2T 3B 3D

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

9a Plan funding arrangement (check all that apply) (1) ☐ 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 POWERS & SONS CONSTRUCTION CO. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 POWERS & SONS CONSTRUCTION CO.	D Employer Identification Number (EIN) 35-1132323

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)

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

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

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)

EMPOWER ANNUITY INSURANCE COMPANY

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
64	RECORDKEEPER	17729	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

FIFTH THIRD BANK

38 FOUNTAIN SQ PLZ
CINCINNATI, OH 45263

(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	14511	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

EMPOWER ADVISORY GROUP, LLC

8515 EAST ORCHARD ROAD
GREENWOOD VILLAGE, CO 80111

(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?
28	INVESTMENT MGMT	5075	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
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For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan POWERS & SONS CONSTRUCTION CO. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ▶	003
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 POWERS & SONS CONSTRUCTION CO.	D Employer Identification Number (EIN) 35-1132323	

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: GOLDMAN SACHS STABLE VALUE CIT INV			
b Name of sponsor of entity listed in (a): GOLDMAN SACHS STABLE VALUE			
c EIN-PN 13-4166989-025	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0	
a Name of MTIA, CCT, PSA, or 103-12 IE: GOLDMAN SACHS STABLE VALUE CIT INV			
b Name of sponsor of entity listed in (a): GOLDMAN SACHS STABLE VALUE			
c EIN-PN 13-4166989-025	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1616484	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	
a Name of MTIA, CCT, PSA, or 103-12 IE:			
b Name of sponsor of entity listed in (a):			
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)	

a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
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103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, other than DCGs)**

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

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
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plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**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
		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 POWERS & SONS CONSTRUCTION CO. PROFIT SHARING & 401(K) PLAN	B Three-digit plan number (PN) ►	003
C Plan sponsor's name as shown on line 2a of Form 5500 POWERS & SONS CONSTRUCTION CO.	D Employer Identification Number (EIN) 35-1132323	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	1886372	1616484
(10) Value of interest in pooled separate accounts	1c(10)		
(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)	10395557	13372768
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	44908	45291

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(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	12326837	15034543
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h		
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	12326837	15034543

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)	491336	
(B) Participants	2a(1)(B)	329246	
(C) Others (including rollovers)	2a(1)(C)	862	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		821444
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	341519	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		341519
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		36600
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(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)		2044169
c Other income	2c		2745
d Total income. Add all income amounts in column (b) and enter total	2d		3246477

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	501456	
(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)		501456
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Recordkeeping fees.....	2i(3)	17729	
(4) IQPA audit fees.....	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	19586	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		37315
j Total expenses. Add all expense amounts in column (b) and enter total	2j		538771

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2707706
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: MITCHELL & TITUS, LLP

(2) EIN: 13-2781641

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 POWERS & SONS CONSTRUCTION CO. PROFIT SHARING & 401(K) PLAN		B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 POWERS & SONS CONSTRUCTION CO.		D Employer Identification Number (EIN) 35-1132323
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): 84-1455663		
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)	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) 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
-----------------	---------------------------------

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 11 / 14 / 2022 (MM/DD/YYYY) and the Opinion Letter serial number Q702518A.

POWERS & SONS CONSTRUCTION CO.

PROFIT SHARING & 401(K) PLAN

FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULE

AS OF DECEMBER 31, 2023 AND 2022

WITH INDEPENDENT AUDITOR'S REPORT

(EIN: 35-01132323, PLAN #: 003)

POWERS & SONS CONSTRUCTION CO.

PROFIT SHARING & 401(K) PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2023

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator and the
Participants of the Powers & Sons Construction Co.
Profit Sharing & 401(k) Plan

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

We have performed audits of the financial statements of the Powers & Sons Construction Co. Profit Sharing & 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2023 and 2022, the related statement of changes in net assets available for benefits for the year ended December 31, 2023, and the related notes to the financial statements.

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

Management has obtained certifications from Great West Trust Company, LLC, the trustee of the Plan and a qualified institution, as of December 31, 2023 and 2022, and for the year ended December 31, 2023, stating that the certified investment information, as described in Note C to the financial statements is complete and accurate.

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for one year after the date that the financial statements are issued or 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 it is not absolute assurance and, therefore, is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists.



The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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



Other Matters - Supplemental Schedules Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2023, and schedule of reportable transactions for the year ended December 31, 2023 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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 Disclosure 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).

Mitchell Titus, LLP

October 14, 2024

POWERS & SONS CONSTRUCTION CO.

PROFIT SHARING & 401(K) PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31,

	<u>2023</u>	<u>2022</u>
ASSETS		
Investments, at fair value	\$ 14,973,395	\$ 12,209,486
Non-interest-bearing cash	<u>61,148</u>	<u>117,351</u>
	15,034,543	12,326,837
Receivables:		
Employer contributions	<u>1,150,147</u>	<u>490,191</u>
Total receivables	1,150,147	490,191
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 16,184,690</u>	<u>\$ 12,817,028</u>

See Notes to Financial Statements.

POWERS & SONS CONSTRUCTION CO.

PROFIT SHARING & 401(k) PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

FOR THE YEAR ENDED DECEMBER 31, 2023

ADDITIONS

Investment income:

Net appreciation in fair value of investments	\$ 2,046,913
Dividends and interest	378,120
Net investment loss	<u>2,425,033</u>

Contributions:

Employer	1,151,292
Participants	329,246
Rollovers	862
Total contributions	<u>1,481,400</u>

Total additions	<u>3,906,433</u>
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DEDUCTIONS

Benefits paid to participants	501,456
Administrative expenses	37,315
Total deductions	<u>538,771</u>

Net increase	3,367,662
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NET ASSETS AVAILABLE FOR BENEFITS:

BEGINNING OF YEAR	<u>12,817,028</u>
--------------------------	-------------------

END OF YEAR	<u><u>\$ 16,184,690</u></u>
--------------------	-----------------------------

See Notes to Financial Statements.

Powers & Sons Construction Co.
Profit Sharing & 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2023

NOTE A - DESCRIPTION OF PLAN

The following description of the Powers & Sons Construction Co. Profit Sharing & 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan that was established on April 1, 1984, which covers all eligible regular employees of Powers & Sons Construction Company (the Company) who have six months of service and are age 21 or older. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended.

Contributions

Subject to certain Internal Revenue Service (IRS) limitations (\$22,500 in 2023), participants may contribute up to 100% of pretax compensation, as defined by the Plan. Participants may also make after tax Roth deferrals. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Employee rollover contributions are considered 100% vested regardless of years of service.

The Company may make an annual discretionary employer matching contribution as well as a nonelective profit sharing match. The profit-sharing match is based on specified performance goals achieved by the Company, as determined by management. For fiscal year 2023, the Company approved an employer matching contribution of \$43,897 and a profit-sharing contribution of \$1,106,250. These contributions were received by the Plan after each fiscal year end. Contributions are not to exceed the maximum amount deductible under the Internal Revenue Code of 1986 (IRC). Participants direct the investment of their contributions and the Company's contributions into various investment options offered by the Plan.

Participant Accounts

Each participant's account is credited with the participant's contributions, including rollover contributions, and the Company's contribution, if any, and an allocation of Plan earnings or losses. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are principally based on participant account balances.

Vesting

Participant contributions are considered 100% vested regardless of years of service. Vesting in the Company's contributions is based on years of continuous service, on a six-year graded schedule, as follows:

<u>Vesting service</u>	<u>Vested percentage</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years	100%

Notes Receivable from Participants

Participants are not allowed to borrow from their fund accounts under the Plan.

Powers & Sons Construction Co.
Profit Sharing & 401(k) Plan
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Payment of Benefits

The Plan provides for the distribution of participants' accounts upon normal or early retirement, disability, death or hardship. Distributions will be made in the form of a single lump-sum payment upon consent by the participant, unless a distribution is required to be made sooner under the IRC.

Upon a participant's termination of employment with the Company prior to normal or early retirement, vested benefits will be paid in a lump sum upon consent by the participant, unless the participant's balance is less than \$5,000 and the participant does not consent within 30 days of notification.

Normal retirement is the date on which a participant attains age 65 and has completed a five-year period of service. Early retirement is permitted at age 55 or after, if a participant has completed a five-year period of service.

Forfeited Accounts

At December 31, 2023, forfeited non-vested accounts totaled \$61,148. These accounts will be used to offset administrative expenses and employer contributions.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

The preparation of financial statements in conformity with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

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

Payment of Benefits

Benefits are recorded when paid.

Investments

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note D for discussion of fair value measurements.

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

Notes Receivable from Participants

Participants are not allowed to borrow from their fund accounts under the Plan.

Powers & Sons Construction Co.
Profit Sharing & 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
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Administrative Expenses

Certain administrative expenses relating to the operations of the Plan, such as trustee, accounting, legal and other fees, are paid directly by the Plan. These may be allocated to participant accounts or offset by forfeitures, as permitted by the Plan.

NOTE C - INFORMATION CERTIFIED BY TRUSTEE

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Great-West Trust Company, LLC, the trustee of the Plan, has certified that the following data included in the accompanying financial statements and supplemental schedule are complete and accurate:

- Investments and notes receivable from participants, as shown in the statements of net assets available for benefits as of December 31, 2023 and 2022.
- Investment (loss) income (other than other income) and interest income on notes receivable from participants, as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2023.
- The supplemental schedule of assets (held at end of year) as of December 31, 2023.

NOTE D - FAIR VALUE MEASUREMENTS

The Financial Accounting Standards Board (FASB) has issued guidance that defines fair value, establishes a framework for measuring fair value under current accounting pronouncements that require or permit fair value measurements, and enhances disclosures about fair value measurements. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The fair value 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 the FASB guidance are described as follows:

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

Level 2 - Inputs to the valuation methodology include the following:

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

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

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

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.

Powers & Sons Construction Co.
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NOTES TO FINANCIAL STATEMENTS
December 31, 2023

The following is a description of the valuation methodologies used for assets measured at fair value as December 31, 2023.

Stable value fund - Valued at the net asset value (NAV) of units of the collective trust fund. The NAV, as provided by the trustee, is used as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different from the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective trust, the investment adviser reserves the right to temporarily delay withdrawal from the trust in order to ensure that the securities liquidations will be carried out in an orderly business manner.

Mutual funds - Valued at the quoted NAV of shares held by the Plan at year-end.

Self-directed brokerage accounts – The investments in these accounts include common stocks that are valued on the basis of readily determinable market prices. These investments also include cash and short-term interest-bearing investments, with initial maturities of three months or less.

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

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

	2023			
	Level 1	Level 2	Not subject to leveling	Total
Mutual Funds	\$ 13,311,620	\$ -	\$ -	\$ 13,311,620
Self-directed brokerage accounts	45,291	-	-	45,291
Collective Fund	-	-	1,616,484	1,616,484
Total investments at fair value	<u>\$ 13,356,911</u>	<u>\$ -</u>	<u>\$ 1,616,484</u>	<u>\$ 14,973,395</u>
	2022			
	Level 1	Level 2	Not subject to leveling	Total
Mutual Funds	\$ 10,278,206	\$ -	\$ -	\$ 10,278,206
Self-directed brokerage accounts	44,908	-	-	44,908
Collective Fund	-	-	1,886,372	1,886,372
Total investments at fair value	<u>\$ 10,323,114</u>	<u>\$ -</u>	<u>\$ 1,886,372</u>	<u>\$ 12,209,486</u>

NOTE E - PLAN TERMINATION

Although it has not expressed any such intent, 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. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Company may determine, subject to the provisions under ERISA.

Powers & Sons Construction Co.
Profit Sharing & 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
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NOTE F - TAX STATUS

The Internal Revenue Service issued an opinion letter dated June 30, 2020, indicating that the Non-Standard Pre-Approved Profit Sharing form adopted by the Plan, as then designed, was in compliance with applicable sections of the IRC. Although the Plan has been amended since the adoption of the Non-Standard Pre-Approved Profit Sharing form, the Plan administrator believes that the Plan is designed and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified, and the related trust is tax exempt.

U.S. GAAP require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain tax position that more-likely-than-not would not be sustained upon examination by the applicable authorities. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE G - SUBSEQUENT EVENTS

The Company evaluated the Plan's December 31, 2023, financial statements for subsequent events through October 14, 2024, the date the financial statements were available to be issued.

SUPPLEMENTAL SCHEDULES

POWERS & SONS CONSTRUCTION CO.**PROFIT SHARING & 401(K) PLAN****Schedule H, Item 4i: SCHEDULE OF ASSETS HELD (AT END OF YEAR)****AS OF DECEMBER 31, 2023**

(a)	Identity of Issuer (b)	Description of Security (c)	** Cost (d)	Current Value (e)
		Mutual Funds		
	AllianceBernstein	AB Small Cap Growth Z		146,767
	Allspring Global Investments	Allspring Special Mid Cap Value R6		238,858
	ALPS	Alps Smith Short Duration Bond I		12,951
	American Funds	American Funds 2025 Target Date Fund R6		57,515
	American Funds	American Funds 2030 Target Date Fund R6		635,132
	American Funds	American Funds 2035 Target Date Fund R6		55,410
	American Funds	American Funds 2040 Target Date Fund R6		5,513
	American Funds	American Funds 2045 Target Date Fund R6		46,209
	American Funds	American Funds 2050 Target Date Fund R6		1,180
	American Funds	American Funds 2060 Target Date Fund R6		4,817
	American Funds	American Funds 2065 Target Date Fund R6		13,827
	American Funds	American Funds New World R6		\$ 154,352
	Cohen & Steers	Cohen & Steers Realty Shares I		21,177
	Dodge & Cox	Dodge & Cox Income X		394,190
	Fidelity	Fidelity 500 Index		3,221,578
	Fidelity	Fidelity International Index		405,314
	Fidelity	Fidelity Mid Cap Index		576,497
	Fidelity	Fidelity Small Cap Index		340,426
	Fidelity	Fidelity US Bond Index		677,866
	Harbor	Harbor Capital Appreciation Retirement		2,950,093
	Invesco	Invesco International Bond R6		12,297
	Janus	Janus Henderson Enterprise N		1,341,032
	Lord, Abnett & Co LLC	Lord Abnett Bond Debenture R6		15,340
	Manning & Napier	Manning & Napier Pro-Blend Cons. Term S		616,437
	MFS	MFS Intl Diversification R6		311,204
	MFS	MFS Value R6		865,627
	T. Rowe Price	Undiscovered Mgrs Behavioral Value R6		190,011
				<u>13,311,620</u>
		Collective Fund		
	Goldman Sachs	Goldman Sachs Stable Value CIT Inv CL 3		1,616,484
		Self-directed brokerage accounts		
	Charles Schwab	Schwab SDB		<u>45,291</u>
				<u><u>\$ 14,973,395</u></u>

** Column (d) cost amounts not required with rest to participant-directed transactions.

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

Powers & Sons Construction Co. Profit Sharing & 401(k) Plan

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
3EXDAX	50,905.70	4,063.071442	64	(121,970.35)	(9,564.338387)	4	(120,380.48)	SERIES
4EXDAX	2,536.02	202.495788	8	0.00	0.000000	0	0.00	SERIES
5EXDAX	4,920.99	395.371368	14	0.00	0.000000	8	0.00	SERIES
6EXDAX	5.82	0.462884	2	0.00	0.000000	0	0.00	SERIES
1RFDTX	409,252.53	28,897.285138	65	(347,257.43)	(24,971.313444)	58	(353,612.02)	SERIES
1RFETX	700,800.73	45,511.212176	125	(96,805.26)	(6,353.904861)	92	(97,658.72)	SERIES
1RFFTX	53,158.80	3,145.126861	54	(95.24)	(5.747775)	20	(96.11)	SERIES
1RFGTX	6,568.93	366.763984	24	(1,210.58)	(70.058440)	22	(1,249.84)	SERIES
1RFHTX	43,430.96	2,425.744136	39	(47.35)	(2.624027)	12	(46.85)	SERIES
1RFITX	3,802.58	210.940204	10	(2,667.88)	(148.005262)	7	(2,667.80)	SERIES
1RFUTX	4,622.88	300.452441	18	3.85	0.247730	5	1.11	SERIES
1RFVTX	43,901.58	3,114.289883	94	(31,500.26)	(2,224.544447)	90	(31,204.34)	SERIES
1EXBAX	608.13	46.354252	9	(373,933.15)	(27,781.964743)	31	(393,475.49)	SERIES
1EXDAX	196,792.48	15,679.524944	503	(290,911.96)	(23,322.183130)	693	(310,126.13)	SERIES
1MNBAX	24,954.07	1,399.797543	20	(665,822.26)	(36,953.402640)	31	(651,300.47)	SERIES
1EXHAX	456.12	21.151757	11	(38,293.38)	(1,716.421931)	13	(35,394.57)	SERIES
1RNWGX	175,090.80	2,411.278237	1431	(25,408.10)	(352.157601)	656	(25,285.08)	SERIES
1DODFX	39,243.93	852.045989	425	(249,908.76)	(5,381.691658)	621	(237,931.10)	SERIES
1FSPSX	404,083.49	8,819.624290	1902	(11,934.48)	(259.664710)	627	(11,836.34)	SERIES
1HIINX	22,561.66	534.490269	369	(336,825.67)	(7,789.056887)	574	(370,767.02)	SERIES
1MDIZX	384,786.35	17,330.056818	1029	(73,321.74)	(3,324.476886)	1341	(73,860.59)	SERIES
1PRMSX	7,219.26	198.653735	229	(100,443.41)	(2,857.992499)	454	(109,299.26)	SERIES
1CSJIX	37,793.10	645.356753	1236	(18,658.25)	(311.492613)	1146	(18,234.82)	SERIES
1QUAZX	184,664.22	3,221.107923	363	(49,793.59)	(859.985685)	735	(49,310.46)	SERIES
1ACWDX	27,638.61	1,985.279675	511	(198,201.35)	(14,575.644923)	394	(226,243.11)	SERIES
1COVAX	3,348.06	210.736330	83	(164,447.92)	(10,830.140508)	41	(203,691.82)	SERIES
1DISSX	34,045.49	1,255.722024	406	(243,447.53)	(10,081.114197)	584	(286,319.46)	SERIES
1FSSNX	343,695.58	15,549.731998	1483	(44,741.99)	(1,954.439095)	1117	(42,924.26)	SERIES
1OEGAX	38,441.45	1,768.725532	380	(636,388.79)	(29,671.965929)	419	(683,201.49)	SERIES
1UBVFX	185,313.77	2,535.037047	795	(12,143.57)	(157.528487)	498	(11,713.17)	SERIES
1CA-APP	322.87	8.270020	9	(174,938.09)	(4,693.608160)	25	(223,435.37)	SERIES
1BGRFX	37,441.30	395.900434	68	(646,270.18)	(7,098.414530)	298	(696,663.02)	SERIES
1CPXRX	78,114.87	5,536.176433	520	(423,679.99)	(30,552.636239)	315	(497,733.08)	SERIES
1NATMCV	49,259.18	3,974.993260	466	(122,597.86)	(10,442.712735)	522	(127,607.10)	SERIES
1FSMDX	553,406.98	20,714.552402	1502	(40,916.23)	(1,465.900000)	1061	(39,088.46)	SERIES
1JDMNX	1,350,144.57	10,527.483267	1273	(58,355.54)	(440.745225)	912	(56,740.59)	SERIES
1WFPRX	314,843.80	7,025.674166	505	(83,099.03)	(1,834.246436)	1003	(82,237.67)	SERIES
1NINDEX	77,288.04	1,620.331385	719	(1,957,580.52)	(40,470.706901)	408	(1,815,562.77)	SERIES
1DHLAX	8,001.58	275.044764	205	(340,740.50)	(11,891.208975)	76	(393,163.13)	SERIES
1FXAIX	2,911,297.04	19,982.973341	1813	(77,568.97)	(516.068572)	1520	(74,375.27)	SERIES
1FMIHX	5,585.69	391.522526	145	(211,569.70)	(14,692.341445)	49	(257,712.46)	SERIES
1HRCAX	8,139.01	120.049309	192	(2,330,421.21)	(31,849.884003)	84	(2,350,118.85)	SERIES
1HNACX	2,379,370.80	30,957.742058	436	(40,671.30)	(468.978318)	563	(36,173.14)	SERIES
1MEIKX	918,438.07	19,600.327766	1407	(59,299.44)	(1,272.426224)	775	(59,624.01)	SERIES
1MEIAX	3,643.72	78.540803	124	(452,994.79)	(9,680.262125)	304	(336,922.20)	SERIES
1SMDSX	16,481.22	1,641.311438	587	(3,698.74)	(369.079204)	128	(3,705.13)	SERIES
1DC-INC	39,353.21	3,166.209698	712	(542,897.91)	(43,436.530647)	340	(595,173.56)	SERIES
1DOXIX	590,416.76	47,285.400781	1182	(195,590.65)	(16,074.757022)	1422	(200,951.69)	SERIES
1FXNAX	720,684.97	69,257.354492	1609	(42,737.54)	(4,265.406234)	426	(43,946.19)	SERIES
1GSOIX	7,389.65	565.590072	265	(636,232.92)	(48,386.988209)	201	(747,944.42)	SERIES
1LBNVX	19,460.53	2,847.202327	631	(4,489.78)	(668.186751)	126	(4,542.66)	SERIES
1OIBAX	4,497.66	1,043.170499	503	(20,019.42)	(4,589.074755)	310	(20,637.53)	SERIES
1OIBIX	23,862.40	5,488.835676	954	(11,723.60)	(2,719.279349)	546	(11,814.79)	SERIES

TRANSACTIONS FOR REVIEW (5% REPORTABLE)

Powers & Sons Construction Co. Profit Sharing & 401(k) Plan

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INVESTMENT OPTION	PURCHASE AMOUNT	PURCHASE UNITS/SHARES	PURCHASE COUNT	SALES AMOUNT	SALES UNITS/SHARES	SALES COUNT	COST OF SALES	TRANSACTION DATE
1GSSV1	1,938,160.87	1,938,160.870000	1802	(321,677.19)	(321,677.170000)	971	(321,677.19)	SERIES
1GSSV3	83,368.79	83,368.790000	986	(1,969,740.29)	(1,969,740.301025)	506	(1,969,740.31)	SERIES
1SDBSCH	42,214.12	0.000000	6	0.00	0.000000	0	0.00	SERIES
1SDBTDA	0.00	0.000000	0	(42,214.12)	0.000000	6	(42,214.12)	SERIES
5% TRANSACTIONS								
1RFETX	664,185.00	43,213.077425	28	0.00	0.000000	0	0.00	10-MAY-23
1MNBAX	0.00	0.000000	0	(664,185.00)	(36,858.213105)	28	(649,636.26)	10-MAY-23
1JDMNX	1,219,381.78	9,502.663497	74	0.00	0.000000	0	0.00	10-MAY-23
1NINDX	0.00	0.000000	0	(1,936,841.71)	(40,025.660841)	110	(1,792,765.97)	10-MAY-23
1FXAIX	2,148,408.47	14,948.569929	149	0.00	0.000000	0	0.00	10-MAY-23
1HRCAX	0.00	0.000000	0	(2,280,151.52)	(31,111.359127)	42	(2,280,191.15)	10-MAY-23
1HNACX	2,280,151.52	29,782.543364	42	0.00	0.000000	0	0.00	10-MAY-23
1MEIKX	771,082.33	16,486.686552	71	0.00	0.000000	0	0.00	10-MAY-23
1GSSV1	1,787,023.03	1,787,023.030000	123	0.00	0.000000	0	0.00	10-MAY-23
1GSSV3	1,053.49	1,053.490000	110	(1,787,023.03)	(1,787,023.041025)	123	(1,787,023.05)	10-MAY-23

LEGEND

INVESTMENT OPTION:

3EXDAX	Manning & Napier Pro-Blend Cons. Term S	4EXDAX	Manning & Napier Pro-Blend Cons. Term S
5EXDAX	Plan Expense Account	6EXDAX	UNALLOCATED PLAN ASSETS
1RFDTX	American Funds 2025 Target Date Fund R6	1RFETX	American Funds 2030 Target Date Fund R6
1RFFTX	American Funds 2035 Target Date Fund R6	1RFGTX	American Funds 2040 Target Date Fund R6
1RFHTX	American Funds 2045 Target Date Fund R6	1RFITX	American Funds 2050 Target Date Fund R6
1RFUTX	American Funds 2060 Target Date Fund R6	1RFVTX	American Funds 2065 Target Date Fund R6
1EXBAX	Manning & Napier Pro-Blend Mod Term S	1EXDAX	Manning & Napier Pro-Blend Cons. Term S
1MNBAX	Manning & Napier Pro-Blend Extend Term S	1EXHAX	Manning & Napier Pro-Blend Max Term S
1RNWGX	American Funds New World R6	1DODFX	Dodge & Cox International Stock - I
1FSPSX	Fidelity International Index	1HIINX	Harbor International Fund - Inv
1MDIZX	MFS Intl Diversification R6	1PRMSX	T. Rowe Price Emerging Markets Stock
1CSJIX	Cohen & Steers Realty Shares I	1QUAZX	AB Small Cap Growth Z
1ACWDX	AMG GW&K Small Cap Fund II-N	1COVAX	Columbia Small Cap Value Fund II A
1DISSX	BNY Mellon Smallcap Stock Index Inv	1FSSNX	Fidelity Small Cap Index
1OEGAX	Invesco Discovery Mid Cap Growth A	1UBVFX	Undiscovered Mgrs Behavioral Value R6
1CA-APP	Ariel Appreciation Fund	1BGRFX	Baron Growth Fund
1CPXRX	Columbia Mid Cap Index Instl 2	1NATMCV	Columbia Select Mid Cap Value A
1FSMDX	Fidelity Mid Cap Index	1JDMNX	Janus Henderson Enterprise N
1WFPRX	Allspring Special Mid Cap Value R6	1NINDX	Columbia Large Cap Index Instl
1DHLAX	Diamond Hill Large Cap Inv	1FXAIX	Fidelity 500 Index
1FMIHX	FMI Large Cap	1HRCAX	Harbor Capital Appreciation Adm
1HNACX	Harbor Capital Appreciation Retirement	1MEIKX	MFS Value R6
1MEIAX	MFS Value A	1SMDSX	ALPS Smith Short Duration Bond I
1DC-INC	Dodge & Cox Income Fund - I	1DOXIX	Dodge & Cox Income X
1FXNAX	Fidelity US Bond Index	1GSOIX	Goldman Sachs Government Income Instl
1LBNVX	Lord Abbett Bond Debenture R6	1OIBAX	Invesco International Bond A
1OIBIX	Invesco International Bond R6	1GSSV1	Goldman Sachs Stable Value CIT Inv Cl 1
1GSSV3	Goldman Sachs Stable Value CIT Inv Cl 3	1SDBSCH	Schwab SDB
1SDBTDA	TD Ameritrade SDB		

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SCHEDULE OF ASSETS (HELD AT END OF YEAR)
Powers & Sons Construction Co. Profit Sharing & 401(k) Plan
01-JAN-23 to 31-DEC-23

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INVESTMENT OPTION	MATURITY DATE	INTEREST RATE	COST OF ASSETS	CURRENT VALUE
IRFDTX			55,640.51	57,515.49
IRFETX			603,142.01	635,131.52
IRFFTX			53,062.70	55,410.04
IRFGTX			5,319.10	5,512.79
IRFHTX			43,384.11	46,208.90
IRFITX			1,134.78	1,180.03
IRFUTX			4,623.99	4,817.21
IRFVTX			12,697.23	13,826.64
IEXDAX			640,050.29	616,437.02
IRNWGX			149,805.82	154,351.73
IFSPSX			392,247.08	405,314.04
IMDIZX			310,925.89	311,204.04
ICSJIX			19,558.48	21,177.03
IQUAZX			135,353.71	146,767.37
IFSSNX			300,771.28	340,426.16
IUBVFX			173,600.63	190,010.50
IFSM DX			514,318.59	576,497.12
IJDMNX			1,293,404.02	1,341,031.84
IWFPRX			232,606.36	238,857.59
IFXAIX			2,836,921.46	3,221,578.11
IHNACX			2,343,197.76	2,950,092.77
IMEIKX			858,813.89	865,626.85
ISMDSX			12,776.05	12,951.34
IDOXIX			389,464.84	394,190.41
IFXNAX			676,738.70	677,866.01
ILBNVX			14,917.78	15,340.25
IOIBIX			12,047.49	12,296.80
IGSSV1			1,616,483.70	1,616,483.70
ISDBSCH			45,291.36	45,291.36
			13,748,299.61	14,973,394.66
FORFEITURES			60,809.61	61,148.39

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SCHEDULE OF ASSETS (HELD AT END OF YEAR)

Powers & Sons Construction Co. Profit Sharing & 401(k) Plan
01-JAN-23 to 31-DEC-23

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INVESTMENT OPTION

MATURITY DATE

INTEREST RATE

COST OF ASSETS

CURRENT VALUE

LEGEND

INVESTMENT OPTION:

1RFDTX American Funds 2025 Target Date Fund R6
1RFFTX American Funds 2035 Target Date Fund R6
1RFHTX American Funds 2045 Target Date Fund R6
1RFUTX American Funds 2060 Target Date Fund R6
1EXDAX Manning & Napier Pro-Blend Cons. Term S
1FSPSX Fidelity International Index
1CSJIX Cohen & Steers Realty Shares I
1FSSNX Fidelity Small Cap Index
1FSMDX Fidelity Mid Cap Index
1WFPRX Allspring Special Mid Cap Value R6
1HNACX Harbor Capital Appreciation Retirement
1SMDSX ALPS Smith Short Duration Bond I
1FXNAX Fidelity US Bond Index
1OIBIX Invesco International Bond R6
1SDBSCH Schwab SDB

1RFETX American Funds 2030 Target Date Fund R6
1RFGTX American Funds 2040 Target Date Fund R6
1RFITX American Funds 2050 Target Date Fund R6
1RFVTX American Funds 2065 Target Date Fund R6
1RNWGX American Funds New World R6
1MDIZX MFS Intl Diversification R6
1QUAZX AB Small Cap Growth Z
1UBVFX Undiscovered Mgrs Behavioral Value R6
1JDMNX Janus Henderson Enterprise N
1FXAIX Fidelity 500 Index
1MEIKX MFS Value R6
1DOXIX Dodge & Cox Income X
1LBNVX Lord Abbett Bond Debenture R6
1GSSV1 Goldman Sachs Stable Value CIT Inv CI I

COST OF ASSETS: The original cost of the assets in each investment option as of the last day of the plan year
CURRENT VALUE: The value of all assets in each investment option as of the last day of the plan year