

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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN
1b	Three-digit plan number (PN) ▶ 002
1c	Effective date of plan 10/18/1987
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) YOUTH CONSULTATION SERVICE 284 BROADWAY NEWARK, NJ 07104-4003
2b	Employer Identification Number (EIN) 22-1487560
2c	Plan Sponsor's telephone number 973-482-8411
2d	Business code (see instructions) 611000

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	FRANK BOCKOWSKI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2024	FRANK BOCKOWSKI
	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 1396
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) 818 6a(2) 945 6b 211 6c 6d 1156 6e 2 6f 1158 6g(1) 791 6g(2) 492 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2F 2T 2G 3D 2L 2M

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 3
- (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 A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE	D Employer Identification Number (EIN) 22-1487560	

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

(a) Name of insurance carrier THE PRUDENTIAL INSURANCE COMPANY OF AMERICA					
(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	524292-01	4	01/01/2023	12/31/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	98404
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	38628

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year.....**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
 (3) ☐ guaranteed investment (4) ☒ other ▶ **GROUP ANNUITY CONTRACT**

b Balance at the end of the previous year**7b**

106605

c Additions: (1) Contributions deposited during the year**7c(1)**

0

(2) Dividends and credits

7c(2)

0

(3) Interest credited during the year

7c(3)

3059

(4) Transferred from separate account.....

7c(4)

0

(5) Other (specify below)

7c(5)

0

(6) Total additions

7c(6)

3059

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

109664

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

3839

(2) Administration charge made by carrier

7e(2)

0

(3) Transferred to separate account.....

7e(3)

0

(4) Other (specify below)

7e(4)

7421

▶ **TRANSFERS OUT**

(5) Total deductions

7e(5)

11260

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)**7f**

98404

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE	D Employer Identification Number (EIN) 22-1487560	

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

(a) Name of insurance carrier
STANDARD INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
93-0242990	69019	810354	160	01/01/2023	12/31/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end **4** 3181567**5** Current value of plan's interest under this contract in separate accounts at year end **5****6** Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier **6b****c** Premiums due but unpaid at the end of the year **6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶**e** Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☒ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year **7b** 2326837**c** Additions: (1) Contributions deposited during the year **7c(1)** 110952
(2) Dividends and credits **7c(2)**
(3) Interest credited during the year **7c(3)** 71755
(4) Transferred from separate account **7c(4)**
(5) Other (specify below) **7c(5)** 3488461

▶ LOAN PAYMENTS TRANSFERS IN FORFEITURES RESTATED

(6) Total additions **7c(6)** 3671168**d** Total of balance and additions (add lines **7b** and **7c(6)**) **7d** 5998005**e** Deductions:(1) Disbursed from fund to pay benefits or purchase annuities during year **7e(1)** 500510(2) Administration charge made by carrier **7e(2)** 6742(3) Transferred to separate account **7e(3)**(4) Other (specify below) **7e(4)** 2309186

▶ NEW LOANS

(5) Total deductions **7e(5)** 2816438**f** Balance at the end of the current year (subtract line **7e(5)** from line **7d**) **7f** 3181567

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE	D Employer Identification Number (EIN) 22-1487560	

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

(a) Name of insurance carrier
TIAA-CREF

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1624203	69345	367549	76	01/01/2023	12/31/2023

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	0

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	944439
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	4979913

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year.....**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee(3) ☒ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year**7b**

945229

c Additions: (1) Contributions deposited during the year**7c(1)**

2271

(2) Dividends and credits

7c(2)

0

(3) Interest credited during the year

7c(3)

44368

(4) Transferred from separate account.....

7c(4)

0

(5) Other (specify below)

7c(5)

0

(6) Total additions.....

7c(6)

46639

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

991868

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

25590

(2) Administration charge made by carrier

7e(2)

(3) Transferred to separate account.....

7e(3)

21839

(4) Other (specify below)

7e(4)

(5) Total deductions.....

7e(5)

47429

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**)**7f**

944439

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount	10b	

Specify nature of costs.

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A?..... ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) 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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE	D Employer Identification Number (EIN) 22-1487560	

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 ☐ 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
PRUDENTIAL INSURANCE OF AMERICA
06-1050034

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
TIAA
13-1624203

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
EMPOWER ANNUITY INSURANCE CO.	8515 EAST ORCHARD ROAD GREENWOOD VILLAGE, CO 80111

(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

(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)

PRINCIPAL LIFE INSURANCE COMPANY

42-0127290

(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?
13 37 50 64	NONE	33385	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

NEWPORT RETIREMENT SERVICES, INC.

62-1868111

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 60	NONE	13235	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 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 <u>YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN</u>	B Three-digit plan number (PN) ▶ <u>002</u>
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C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>YOUTH CONSULTATION SERVICE</u>	D Employer Identification Number (EIN) <u>22-1487560</u>
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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: TIAA REAL ESTATE

b Name of sponsor of entity listed in (a): TIAA-CREF

c EIN-PN <u>13-1624203-004</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>243093</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MEDLEY PSF PGIM FLEXIBLE MANAGED PO

b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

c EIN-PN <u>22-1211670-086</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>5248</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MEDLEY PRUDENTIAL CAPITAL GROWTH AC

b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

c EIN-PN <u>22-1211670-005</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>9407</u>
---------------------------------------	-------------------------------	---

a Name of MTIA, CCT, PSA, or 103-12 IE: MEDLEY PSF PGIM 50/50 BALANCED PORT

b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

c EIN-PN <u>22-1211670-087</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>3688</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MEDLEY PSF PGIM JENNISON BLEND PORT

b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

c EIN-PN <u>22-1211670-069</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>18016</u>
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a Name of MTIA, CCT, PSA, or 103-12 IE: MEDLEY PSF PGIM TOTAL RET BOND PORT

b Name of sponsor of entity listed in (a): THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

c EIN-PN <u>22-1211670-083</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2269</u>
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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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)**a** Name of MTIA, CCT, PSA, or 103-12 IE:**b** Name of sponsor of entity listed in (a):**c** EIN-PN**d** Entity
code**e** Dollar value of interest in MTIA, CCT, PSA, or
103-12 IE at end of year (see instructions)

Part II **Information on Participating Plans (to be completed by DFEs, 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
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE		
		D Employer Identification Number (EIN) 22-1487560

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
	Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	27914	32414
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	420133	377132
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	337403	281721
(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)	24374847	26320192
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	3381551	4224410
(15) Other	1c(15)		

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	28541848	31235869
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j		
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	28541848	31235869

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)		
(B) Participants	2a(1)(B)	879558	
(C) Others (including rollovers)	2a(1)(C)	334563	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B), (C), and line 2a(2)	2a(3)		1214121
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)		
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans	2b(1)(E)	24144	
(F) Other	2b(1)(F)	4090	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		28234
(2) Dividends: (A) Preferred stock	2b(2)(A)		
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	977576	
(D) Total dividends. Add lines 2b(2)(A) , (B), and (C)	2b(2)(D)		977576
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		
(B) Aggregate carrying amount (see instructions)	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		0
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		-34838
(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)		4013075
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		6198168

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3457242	
(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)		3457242
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)	46620	
(3) Recordkeeping fees.....	2i(3)	285	
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		46905
j Total expenses. Add all expense amounts in column (b) and enter total	2j		3504147

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2694021
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: **INSERO & CO CPAS, LLP**

(2) EIN: **47-5324570**

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.
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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 YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 YOUTH CONSULTATION SERVICE	D Employer Identification Number (EIN) 22-1487560

Part I	Distributions
--------	---------------

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1 0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 42-0127290 27-4411131	
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	3 340

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
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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>03 / 31 / 2017</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>J300864A</u> .	

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

FINANCIAL REPORT

**For the Year Ended
December 31, 2023**



YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

TABLE OF CONTENTS

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INDEPENDENT AUDITOR'S REPORT

To the Trustees and Participants of the
Youth Consultation Service Tax Sheltered Annuity Plan

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

We were engaged to perform audits of the financial statements of Youth Consultation Service Tax Sheltered Annuity 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 (DOL) 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from qualified institutions 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 7 to the financial statements, is complete and accurate.

Disclaimer of Opinion

We do not express an opinion on the accompanying financial statements of the Plan. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section of our report, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements.

Basis for Disclaimer of Opinion

The Plan has not maintained sufficient accounting records and supporting documents relating to certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009. Accordingly, we were unable to apply auditing procedures sufficient to determine the extent to which the accompanying financial statements may have been affected by these conditions.

Further, as described in Note 3 to the financial statements, the Plan has excluded from investments in the accompanying statements of net assets available for benefits certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009, as permitted by the DOL's Field Assistance Bulletin No. 2009-02, Annual Reporting Requirements for 403(b) Plans. The investment income and distributions related to such accounts have also been excluded in the accompanying statement of changes in net assets available for benefits. The amount of these excluded annuity contracts and custodial accounts and the related income and distributions are not reasonably determinable. Accounting principles generally accepted in the United States of America (U.S. GAAP) require that these accounts and the related income and distributions be included in the accompanying financial statements.

Responsibilities of Management for the Financial Statements

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

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

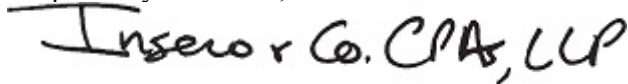
Our responsibility is to conduct an audit of the Plan's financial statements in accordance with auditing standards generally accepted in the United States of America and to issue an auditor's report. However, because of the matters described in the Basis for Disclaimer of Opinion section of our report, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

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.

Other Matter—Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2023 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL'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. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section of our report, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

Respectfully submitted,



Inero & Co. CPAs, LLP
Certified Public Accountants

Rochester, New York
October 11, 2024

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31,

	<u>2023</u>	<u>2022</u>
ASSETS		
Investments, at Fair Value		
Fixed Annuity Contracts – Non Fully Benefit Responsive	\$ 944,439	\$ 945,229
Insurance Company Separate Account	243,093	305,224
Variable Annuity Contracts	3,970,452	4,111,096
Pooled Separate Accounts	38,628	32,179
Registered Investment Companies	22,349,740	20,263,751
Total Investments, at Fair Value	<u>27,546,352</u>	<u>25,657,479</u>
Guaranteed Interest Accounts, at Contract Value	<u>3,279,971</u>	<u>2,436,322</u>
Receivables:		
Notes Receivable from Participants	377,132	420,133
Participant Contributions	32,414	27,914
Total Receivables	<u>409,546</u>	<u>448,047</u>
Net Assets Available for Benefits	<u><u>\$ 31,235,869</u></u>	<u><u>\$ 28,541,848</u></u>

See Notes to Financial Statements

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2023

Additions to Net Assets Attributed to:

Investment Income

Net Appreciation in Fair Value of Investments	\$ 3,978,237
Interest and Dividends	<u>981,666</u>

Total Investment Income	<u>4,959,903</u>
--------------------------------	------------------

Interest on Notes Receivable from Participants	<u>24,144</u>
---	---------------

Contributions

Participants	879,558
Rollovers	<u>334,563</u>

Total Contributions	<u>1,214,121</u>
----------------------------	------------------

Total Additions	<u>6,198,168</u>
------------------------	------------------

Deductions from Net Assets Attributed to:

Benefits Paid to Participants	3,457,242
Administrative Expenses	<u>46,905</u>

Total Deductions	<u>3,504,147</u>
-------------------------	------------------

Net Increase	2,694,021
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Net Assets Available for Benefits:

Beginning of Year	<u>28,541,848</u>
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End of Year	<u><u>\$ 31,235,869</u></u>
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See Notes to Financial Statements

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 1 **Description of the Plan**

The following brief description of the Youth Consultation Service Tax Sheltered Annuity Plan (the Plan) is provided for general information purposes only. 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 covering all full-time employees of Youth Consultation Service, Inc. (the Organization). The Plan does not have a minimum age or service requirement. Employees, who are nonresident aliens, work less than 20 hours per week, or are enrolled students, are not covered by the Plan. Employees who have been employed by the Organization for one year and completed 1,000 hours of service are eligible to receive employer matching contributions. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA) and all the requirements of Sections 403(b) of the Internal Revenue Code (IRC).

The Plan assets are currently held by DWS Trust Company, TIAA and CREF, Principal Trust Company, and Empower Annuity Insurance Company of America (Empower), the Custodians of the Plan.

Prior to May 2023, Newport Trust Company was also a custodian of the Plan. During May 2023, substantially all Plan assets held by Newport Trust Company were transferred to Principal Trust Company.

Empower is a current recordkeeper for the Plan and a custodian of certain Plan assets. Prudential Insurance Company of America (Prudential) was a former recordkeeper and custodian of the Plan assets. During 2022, Empower acquired Prudential's retirement business. Empower administered services being performed by Prudential and its affiliates during the temporary transition period. As of October 21, 2023, Empower has assumed all custodial and administrative responsibilities.

Contributions

Eligible employees may elect to contribute up to 100% of pre-tax annual compensation, subject to certain limitations as defined by the Plan and the IRC. Participants age 50 and over are also eligible to make catch-up contributions. The Plan will accept direct rollovers of eligible rollover distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Organization, at its discretion, may also make matching contributions. Such matching contributions are determined by the Board of Directors. During 2023, no employer matching contributions were made. All employee and employer contributions are invested in participant directed accounts chosen by the participant. Contributions are subject to certain limitations. Pre-tax employee contributions are made pursuant to salary deferral agreements.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 1* Description of the Plan - Continued**

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Plan earnings (losses) and charged with withdrawals and an allocation of administrative expenses, if any. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are 100% vested immediately in their elective deferral amounts and rollover contributions, plus actual earnings thereon.

Vesting in the Organization's discretionary contribution is based on years of continuous service. A participant is 100% vested upon: (1) disability; (2) death; (3) normal retirement at age 65; or (4) termination of the Plan. If a participant's employment with the Organization is terminated before age 65 for any reason other than disability or death, the participant shall be entitled to an amount equal to the "vested percentage" of his or her account balance. A participant shall have a vested and non-forfeitable interest in the employer's discretionary contribution portion of his or her account balance determined by the number of years of credited service as follows:

<u>Years of Credited Service</u>	<u>Vesting %</u>
Less than 3	0%
3 or more	100%

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 reduced by the highest outstanding loan balance of any previous loans made in the previous 12 months, or 50 percent of their vested account balance. Participant notes are secured by the balance in the participant's account and bear interest at a rate which is established at the inception of the loan set at 1% higher than the prime lending rate of a commercial U.S. bank available within reasonable geographic vicinity. Principal and interest are paid ratably through bi-weekly payroll deductions. In general, loans must be repaid within five years unless the loan is used to purchase a principal residence. The Plan allows for one outstanding loan per participant at any point in time.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 1* Description of the Plan - Continued**

Payment of Benefits

A distribution of benefits can only be made upon a participant incurring a disability, death, incurring a financial hardship, obtaining age 59½ or having a severance from employment. Hardship withdrawals are only allowed from certain assets. A participant may elect to receive a lump-sum payment, partial payment, installment payments or an annuity contract.

Forfeited Accounts

Forfeited non-vested accounts can be used to reduce employer matching contributions and for administrative expenses of the Plan. During 2023, \$24,793 were used to pay administrative expenses.

At December 31, 2023 and 2022, forfeited non-vested accounts totaled \$55,746 and \$14,568, respectively.

***Note 2* Summary of Significant Accounting Policies**

Basis of Accounting

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

Subsequent Events

In preparing the financial statements, management has evaluated events and transactions for potential recognition or disclosure through October 11, 2024, the date that the financial statements were available to be issued.

Use of Estimates

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

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Expenses of the Plan can be paid by the Plan or the Organization.

Notes Receivable from Participants

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

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 2* Summary of Significant Accounting Policies - Continued**

Risks and Uncertainties

The Plan invests in investment securities which are exposed to various risks such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with these securities, it is at least reasonably possible that changes in their values will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

***Note 3* Investment Valuation and Income Recognition**

Except for certain contracts described in Note 5, 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.

The Plan follows the fair value measurement guidance required by accounting principles generally accepted in the United States of America for financial and non-financial assets and liabilities. That guidance defines fair value and 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 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 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 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.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 3* Investment Valuation and Income Recognition - Continued**

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.

Registered Investment Companies: These investments are valued using the Net Asset Value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. The NAV is a quoted price in an active market.

Fixed Annuity Contracts - Non Fully Benefit Responsive: These contracts are reported at contract value, which approximates fair value (see Note 4). This determination is based on TIAA's credit rating and yield during 2023 and 2022 being comparable to similar alternative investments and the interest rate which resets annually being comparable to a ten year treasury bond. In subsequent periods, if market conditions change, such as insurance company credit rating or interest rate environment, the difference between contract value and fair value could become significant.

Insurance Company Separate Account: The Insurance Company Separate Account is a pooled separate account in which daily unit values are published on NASDAQ. The fund is not traded on this exchange. The value of the unit holder's investment rises and falls with the returns on the underlying assets in the fund.

Variable Annuity Contracts: Valued at the daily unit value published on NASDAQ. The funds are not traded on this exchange. The value of the unit holder's investment rises and falls with the returns on the underlying assets in the fund. The underlying investments consist principally of equity securities, fixed-income instruments and short-term investments.

Pooled Separate Accounts: These investments are valued based on NAV, as a practical expedient, of the underlying investments provided by the administrator of the fund.

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.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 3* Investment Valuation and Income Recognition - Continued**

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

Investments, at Fair Value as of December 31, 2023			
	Level 1	Level 3	Total
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ -	\$ 944,439	\$ 944,439
Insurance Company Separate Account	243,093	-	243,093
Variable Annuity Contracts	3,970,452	-	3,970,452
Registered Investment Companies	22,349,740	-	22,349,740
			27,507,724
Pooled Separate Accounts (a)			38,628
	\$26,563,285	\$ 944,439	\$ 27,546,352

Investments, at Fair Value as of December 31, 2022			
	Level 1	Level 3	Total
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ -	\$ 945,229	\$ 945,229
Insurance Company Separate Account	305,224	-	305,224
Variable Annuity Contracts	4,111,096	-	4,111,096
Registered Investment Companies	20,263,751	-	20,263,751
			25,625,300
Pooled Separate Accounts (a)			32,179
	\$24,680,071	\$ 945,229	\$ 25,657,479

(a) In accordance with Subtopic 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Purchases of Level 3 investments totaled \$2,271 for the year ended December 31, 2023.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 3 Investment Valuation and Income Recognition - Continued

The following table presents information about significant unobservable inputs related to the Plan's investment in assets categorized as Level 3 in the Accounting Standards Codification (ASC) 820 fair value hierarchy at December 31, 2023:

Type	Fair Value	Valuation Method	Significant Unobservable Inputs	Discount Rate Range
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ 944,439	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate	GRA - 4.00% - 6.75%

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

Note 4 Investment Contracts with TIAA

The Plan holds fixed annuity investment contracts with TIAA. Under these contracts are sub-contracts, some of which are fully benefit responsive while others are not. TIAA maintains the contributions into these contracts in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Each premium allocated to the fixed annuity investment contract buys a guaranteed minimum amount of lifetime income based on the rate schedule in effect at the time the premium is credited.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than an effective rate of 3.00%. Such interest rates are reviewed and re-set by the issuer on an annual basis. The crediting interest rate for Group Retirement Annuity (GRA) contracts was 6.75% as of December 31, 2023.

The GRA contracts may be withdrawn in a single lump sum within 120 days of termination, subject to a 2.5% surrender charge. All other withdrawals and transfers must be spread over 10 annual installments (or five annual installments for withdrawals after termination of employment).

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 5* **Guaranteed Interest Contracts with Empower and Standard Insurance Company*

The Plan participates in an investment contract with Empower and Standard Insurance Company. Empower and Standard Insurance Company maintain the contributions in a general account. All transactions are at contract value, including discontinuance of the contract. Since the guaranteed investment contract is fully benefit responsive, it is required to be presented at contract value. Contract value as reported to the Plan by Empower and Standard Insurance Company represents contributions made under the contract, plus earnings at guaranteed crediting rates, less participant withdrawals and administrative fees. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their account balances at contract value. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than an effective rate of 3.00% for Empower and 1.00% for Standard Insurance Company. Such interest rates are reviewed and re-set by the issuer on a quarterly basis. The guaranteed crediting rate at December 31, 2023 for Empower and Standard Insurance Company was 3.75% and 2.70%, respectively. The guaranteed crediting rate at December 31, 2022 for Empower and Standard Insurance Company was 3.00% and 2.35%, respectively.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity provisions; (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan Administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

Note 6* **Income Tax Status*

The Plan adopted a volume submitter 403(b) plan sponsored by Principal Life Insurance Company. The volume submitter plan has received an opinion letter dated March 31, 2017 from the Internal Revenue Service (IRS) as to the volume submitter plan's qualified status. The volume submitter plan opinion letter has been relied upon by this Plan. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable provision of the IRC.

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 (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 7* **Certified Financial Information*

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Principal Trust Company, Newport Trust Company, TIAA and CREF, DWS Trust Company, and Empower have certified to the completeness and accuracy of the investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefits as of December 31, 2023 and 2022, the schedule of assets (held at end of year) as of December 31, 2023, and the related investment activity (including interest and dividends and net appreciation in fair value of investments) and interest on notes receivable from participants reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2023.

The following information was certified as accurate and complete by the custodians and is included in the accompanying financial statements and schedule:

		<u>Assets</u>	<u>Investment</u> <u>Income</u>
2023	\$	31,203,455	\$ 4,984,047
2022		28,513,934	

Note 8* **Plan Termination*

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

Note 9* **Party-in-Interest Transactions*

Certain Plan investments are managed by entities related to TIAA and CREF, DWS Trust Company, Principal Life Insurance, and Empower Annuity Insurance Company of America, the Custodians of the Plan, and therefore, transactions involving these investments qualify as party-in-interest transactions. Notes receivable from participants also qualify as party-in-interest transactions.

Note 10* **Subsequent Event*

Effective April 1, 2024, the Plan was amended and restated to remove the one year and completion of 1,000 hours of service requirement and quarterly entry date to be eligible to receive employer matching contributions.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2023 EIN: 22-1487560 Plan Number: 002

<u>Identity of Issue</u>	<u>Description of Investment</u>	<u>Current Value</u>
Fixed Annuity Contracts:		
* TIAA	Non Fully Benefit Responsive Traditional Annuity	\$ 944,439
Insurance Company Separate Account:		
* TIAA	Real Estate	243,093
Variable Annuity Contracts:		
* CREF	Equity Index	1,098,022
* CREF	Stock	740,838
* CREF	Social Choice	664,006
* CREF	Growth	521,955
* CREF	Core Bond	387,098
* CREF	Global Equities	276,778
* CREF	Money Market	198,548
* CREF	Inflation-Linked Bond	83,207
Total Variable Annuity Contracts		3,970,452
Pooled Separate Accounts:		
* Prudential	Medley Jennison Blend Portfolio	18,016
* Prudential	Medley Capital Growth Portfolio	9,407
* Prudential	Medley Flexible Managed Portfolio	5,248
* Prudential	Medley 50/50 Balanced Portfolio	3,688
* Prudential	Medley Total Return Bond Portfolio	2,269
Total Pooled Separate Accounts		38,628
Guaranteed Interest Accounts		
Standard Insurance Company	Stable Asset Fund II	3,181,567
* Prudential	Guaranteed Interest Account	98,404
Total Guaranteed Interest Accounts		3,279,971
Registered Investment Companies:		
Vanguard	Wellington Fund Admiral Shares	3,802,912
Fidelity	Advisor New Insights	3,610,439
BlackRock	Equity Dividend Institutional	2,874,703
Vanguard	500 Index Fund Admiral Shares	1,604,108
Western Asset	Core Plus Bond Fund Class I	1,056,496
JPMorgan	Mid Cap Growth R6	1,003,167
PIMCO	Income Fund Institutional Class	921,849
JPMorgan	Large Cap Growth R6	898,120
Hartford	MidCap Fund Class Y	870,395
Vanguard	Target Retirement 2045 Fund	832,614
Vanguard	Target Retirement 2020 Fund	713,566
Vanguard	Target Retirement 2040 Fund	493,271
American Funds	EuroPacific Growth R6	476,089
* TIAA	Access Lifecycle 2035 T4	317,339
Vanguard	Target Retirement 2025 Fund	311,339
Vanguard	Target Retirement 2030 Fund	284,493
Vanguard	Target Retirement 2035 Fund	269,662

(Continued)

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2023 EIN: 22-1487560 PLAN NUMBER: 002

<u>Identity of Issue</u>	<u>Description of Investment</u>	<u>Current Value</u>
Oakmark	International Fund Investor Class	262,065
BlackRock	Health Sciences Ops	188,285
PIMCO	Real Return Fund Institutional Class	164,838
Vanguard	Target Retirement 2050 Fund	140,140
Vanguard	Target Retirement 2055 Fund	138,390
* DWS	Total Return Bond Fund	136,442
* TIAA	Access Lg-Cap Val T4	124,700
Voya	Small Cap Growth Fund	114,186
* DWS	Large Cap Focus Fund	114,113
Fidelity	Natural Resources Fund	89,267
* TIAA	Access Intl Equity T4	84,424
* TIAA	Access Sml Cp Eq T4	83,116
* TIAA	Access Lifecycle 2030 T4	63,987
* PGIM	Global Real Estate Fund R6	37,777
* DWS	Core Equity Fund	34,255
* DWS	Croci US S Fund	33,721
* TIAA	Access Sm-Cap Bl Idx T4	31,107
* TIAA	Access Social Ch Eq T4	30,483
* DWS	Global Macro Fund	21,696
* DWS	International Growth Fund	21,483
* TIAA	Access Growth & Income T4	20,960
Vanguard	Target Retirement 2060 Fund	13,115
Vanguard	Target Retirement 2065 Fund	12,923
* DWS	Govt & Agency Money Fund	10,984
* DWS	Croci International Fund	9,479
* TIAA	Access Real Est Secs T4	8,024
Vanguard	Target Retirement Income Fund	7,621
* DWS	Capital Growth Fund	6,566
* DWS	ESG Core Equity Fund	2,802
* TIAA	Access Mid-Cap Val T4	1,224
* TIAA	Access Mid-Cap Growth T4	783
* TIAA	Access Core Bond Plus T4	212
* TIAA	Access Lifecycle 2025 T4	10
Total Registered Investment Companies		22,349,740
* Participant Loans		
	Interest rates range from 4.25%-9.50%. Maturity Dates ranging from 2024 to 2028	377,132
Total Investments		\$ 31,203,455
* Denotes party-in-interest		

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

FINANCIAL REPORT

**For the Year Ended
December 31, 2023**



YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

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INDEPENDENT AUDITOR'S REPORT

To the Trustees and Participants of the
Youth Consultation Service Tax Sheltered Annuity Plan

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

We were engaged to perform audits of the financial statements of Youth Consultation Service Tax Sheltered Annuity 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 (DOL) 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from qualified institutions 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 7 to the financial statements, is complete and accurate.

Disclaimer of Opinion

We do not express an opinion on the accompanying financial statements of the Plan. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section of our report, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the financial statements.

Basis for Disclaimer of Opinion

The Plan has not maintained sufficient accounting records and supporting documents relating to certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009. Accordingly, we were unable to apply auditing procedures sufficient to determine the extent to which the accompanying financial statements may have been affected by these conditions.

Further, as described in Note 3 to the financial statements, the Plan has excluded from investments in the accompanying statements of net assets available for benefits certain annuity contracts and custodial accounts issued to current and former employees prior to January 1, 2009, as permitted by the DOL's Field Assistance Bulletin No. 2009-02, Annual Reporting Requirements for 403(b) Plans. The investment income and distributions related to such accounts have also been excluded in the accompanying statement of changes in net assets available for benefits. The amount of these excluded annuity contracts and custodial accounts and the related income and distributions are not reasonably determinable. Accounting principles generally accepted in the United States of America (U.S. GAAP) require that these accounts and the related income and distributions be included in the accompanying financial statements.

Responsibilities of Management for the Financial Statements

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

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

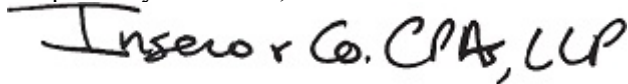
Our responsibility is to conduct an audit of the Plan's financial statements in accordance with auditing standards generally accepted in the United States of America and to issue an auditor's report. However, because of the matters described in the Basis for Disclaimer of Opinion section of our report, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on these financial statements.

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.

Other Matter—Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2023 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL'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. Because of the significance of the matters described in the Basis for Disclaimer of Opinion section of our report, it is inappropriate to and we do not express an opinion on the supplemental schedule referred to above.

Respectfully submitted,



Inero & Co. CPAs, LLP
Certified Public Accountants

Rochester, New York
October 11, 2024

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS DECEMBER 31,

ASSETS	<u>2023</u>	<u>2022</u>
Investments, at Fair Value		
Fixed Annuity Contracts – Non Fully Benefit Responsive	\$ 944,439	\$ 945,229
Insurance Company Separate Account	243,093	305,224
Variable Annuity Contracts	3,970,452	4,111,096
Pooled Separate Accounts	38,628	32,179
Registered Investment Companies	22,349,740	20,263,751
Total Investments, at Fair Value	<u>27,546,352</u>	<u>25,657,479</u>
Guaranteed Interest Accounts, at Contract Value	<u>3,279,971</u>	<u>2,436,322</u>
Receivables:		
Notes Receivable from Participants	377,132	420,133
Participant Contributions	32,414	27,914
Total Receivables	<u>409,546</u>	<u>448,047</u>
Net Assets Available for Benefits	<u>\$ 31,235,869</u>	<u>\$ 28,541,848</u>

See Notes to Financial Statements

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEAR ENDED DECEMBER 31, 2023

Additions to Net Assets Attributed to:

Investment Income

Net Appreciation in Fair Value of Investments	\$ 3,978,237
Interest and Dividends	<u>981,666</u>

Total Investment Income	<u>4,959,903</u>
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Interest on Notes Receivable from Participants	<u>24,144</u>
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Contributions

Participants	879,558
Rollovers	<u>334,563</u>

Total Contributions	<u>1,214,121</u>
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Total Additions	<u>6,198,168</u>
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Deductions from Net Assets Attributed to:

Benefits Paid to Participants	3,457,242
Administrative Expenses	<u>46,905</u>

Total Deductions	<u>3,504,147</u>
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Net Increase	2,694,021
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Net Assets Available for Benefits:

Beginning of Year	<u>28,541,848</u>
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End of Year	<u><u>\$ 31,235,869</u></u>
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See Notes to Financial Statements

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 1 **Description of the Plan**

The following brief description of the Youth Consultation Service Tax Sheltered Annuity Plan (the Plan) is provided for general information purposes only. 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 covering all full-time employees of Youth Consultation Service, Inc. (the Organization). The Plan does not have a minimum age or service requirement. Employees, who are nonresident aliens, work less than 20 hours per week, or are enrolled students, are not covered by the Plan. Employees who have been employed by the Organization for one year and completed 1,000 hours of service are eligible to receive employer matching contributions. The Plan is subject to the Employee Retirement Income Security Act of 1974 (ERISA) and all the requirements of Sections 403(b) of the Internal Revenue Code (IRC).

The Plan assets are currently held by DWS Trust Company, TIAA and CREF, Principal Trust Company, and Empower Annuity Insurance Company of America (Empower), the Custodians of the Plan.

Prior to May 2023, Newport Trust Company was also a custodian of the Plan. During May 2023, substantially all Plan assets held by Newport Trust Company were transferred to Principal Trust Company.

Empower is a current recordkeeper for the Plan and a custodian of certain Plan assets. Prudential Insurance Company of America (Prudential) was a former recordkeeper and custodian of the Plan assets. During 2022, Empower acquired Prudential's retirement business. Empower administered services being performed by Prudential and its affiliates during the temporary transition period. As of October 21, 2023, Empower has assumed all custodial and administrative responsibilities.

Contributions

Eligible employees may elect to contribute up to 100% of pre-tax annual compensation, subject to certain limitations as defined by the Plan and the IRC. Participants age 50 and over are also eligible to make catch-up contributions. The Plan will accept direct rollovers of eligible rollover distributions from other qualified plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Organization, at its discretion, may also make matching contributions. Such matching contributions are determined by the Board of Directors. During 2023, no employer matching contributions were made. All employee and employer contributions are invested in participant directed accounts chosen by the participant. Contributions are subject to certain limitations. Pre-tax employee contributions are made pursuant to salary deferral agreements.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 1* Description of the Plan - Continued**

Participant Accounts

Each participant's account is credited with the participant's contribution and allocations of the Plan earnings (losses) and charged with withdrawals and an allocation of administrative expenses, if any. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are 100% vested immediately in their elective deferral amounts and rollover contributions, plus actual earnings thereon.

Vesting in the Organization's discretionary contribution is based on years of continuous service. A participant is 100% vested upon: (1) disability; (2) death; (3) normal retirement at age 65; or (4) termination of the Plan. If a participant's employment with the Organization is terminated before age 65 for any reason other than disability or death, the participant shall be entitled to an amount equal to the "vested percentage" of his or her account balance. A participant shall have a vested and non-forfeitable interest in the employer's discretionary contribution portion of his or her account balance determined by the number of years of credited service as follows:

<u>Years of Credited Service</u>	<u>Vesting %</u>
Less than 3	0%
3 or more	100%

Notes Receivable from Participants

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 reduced by the highest outstanding loan balance of any previous loans made in the previous 12 months, or 50 percent of their vested account balance. Participant notes are secured by the balance in the participant's account and bear interest at a rate which is established at the inception of the loan set at 1% higher than the prime lending rate of a commercial U.S. bank available within reasonable geographic vicinity. Principal and interest are paid ratably through bi-weekly payroll deductions. In general, loans must be repaid within five years unless the loan is used to purchase a principal residence. The Plan allows for one outstanding loan per participant at any point in time.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 1* Description of the Plan - Continued**

Payment of Benefits

A distribution of benefits can only be made upon a participant incurring a disability, death, incurring a financial hardship, obtaining age 59½ or having a severance from employment. Hardship withdrawals are only allowed from certain assets. A participant may elect to receive a lump-sum payment, partial payment, installment payments or an annuity contract.

Forfeited Accounts

Forfeited non-vested accounts can be used to reduce employer matching contributions and for administrative expenses of the Plan. During 2023, \$24,793 were used to pay administrative expenses.

At December 31, 2023 and 2022, forfeited non-vested accounts totaled \$55,746 and \$14,568, respectively.

***Note 2* Summary of Significant Accounting Policies**

Basis of Accounting

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

Subsequent Events

In preparing the financial statements, management has evaluated events and transactions for potential recognition or disclosure through October 11, 2024, the date that the financial statements were available to be issued.

Use of Estimates

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

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Expenses of the Plan can be paid by the Plan or the Organization.

Notes Receivable from Participants

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

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 2* Summary of Significant Accounting Policies - Continued**

Risks and Uncertainties

The Plan invests in investment securities which are exposed to various risks such as interest rate, market and credit risks. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with these securities, it is at least reasonably possible that changes in their values will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

***Note 3* Investment Valuation and Income Recognition**

Except for certain contracts described in Note 5, 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.

The Plan follows the fair value measurement guidance required by accounting principles generally accepted in the United States of America for financial and non-financial assets and liabilities. That guidance defines fair value and 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 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 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 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.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 3* Investment Valuation and Income Recognition - Continued**

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.

Registered Investment Companies: These investments are valued using the Net Asset Value (NAV) provided by the administrator of the fund. The NAV is based on the value of the underlying assets owned by the fund, minus its liabilities, and then divided by the number of shares outstanding. The NAV is a quoted price in an active market.

Fixed Annuity Contracts - Non Fully Benefit Responsive: These contracts are reported at contract value, which approximates fair value (see Note 4). This determination is based on TIAA's credit rating and yield during 2023 and 2022 being comparable to similar alternative investments and the interest rate which resets annually being comparable to a ten year treasury bond. In subsequent periods, if market conditions change, such as insurance company credit rating or interest rate environment, the difference between contract value and fair value could become significant.

Insurance Company Separate Account: The Insurance Company Separate Account is a pooled separate account in which daily unit values are published on NASDAQ. The fund is not traded on this exchange. The value of the unit holder's investment rises and falls with the returns on the underlying assets in the fund.

Variable Annuity Contracts: Valued at the daily unit value published on NASDAQ. The funds are not traded on this exchange. The value of the unit holder's investment rises and falls with the returns on the underlying assets in the fund. The underlying investments consist principally of equity securities, fixed-income instruments and short-term investments.

Pooled Separate Accounts: These investments are valued based on NAV, as a practical expedient, of the underlying investments provided by the administrator of the fund.

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.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

***Note 3* Investment Valuation and Income Recognition - Continued**

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

Investments, at Fair Value as of December 31, 2023			
	Level 1	Level 3	Total
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ -	\$ 944,439	\$ 944,439
Insurance Company Separate Account	243,093	-	243,093
Variable Annuity Contracts	3,970,452	-	3,970,452
Registered Investment Companies	22,349,740	-	22,349,740
			27,507,724
Pooled Separate Accounts (a)			38,628
	\$26,563,285	\$ 944,439	\$ 27,546,352

Investments, at Fair Value as of December 31, 2022			
	Level 1	Level 3	Total
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ -	\$ 945,229	\$ 945,229
Insurance Company Separate Account	305,224	-	305,224
Variable Annuity Contracts	4,111,096	-	4,111,096
Registered Investment Companies	20,263,751	-	20,263,751
			25,625,300
Pooled Separate Accounts (a)			32,179
	\$24,680,071	\$ 945,229	\$ 25,657,479

(a) In accordance with Subtopic 820-10, certain investments that are measured at fair value using the net asset value per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

Purchases of Level 3 investments totaled \$2,271 for the year ended December 31, 2023.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 3 Investment Valuation and Income Recognition - Continued

The following table presents information about significant unobservable inputs related to the Plan's investment in assets categorized as Level 3 in the Accounting Standards Codification (ASC) 820 fair value hierarchy at December 31, 2023:

Type	Fair Value	Valuation Method	Significant Unobservable Inputs	Discount Rate Range
Fixed Annuity Contracts - Non Fully Benefit Responsive	\$ 944,439	Discounted cash flow Theoretical transfer (exit value)	Risk-adjusted discount rate	GRA - 4.00% - 6.75%

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

Note 4 Investment Contracts with TIAA

The Plan holds fixed annuity investment contracts with TIAA. Under these contracts are sub-contracts, some of which are fully benefit responsive while others are not. TIAA maintains the contributions into these contracts in a general account. The account is credited with earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Each premium allocated to the fixed annuity investment contract buys a guaranteed minimum amount of lifetime income based on the rate schedule in effect at the time the premium is credited.

There are no reserves against contract value for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than an effective rate of 3.00%. Such interest rates are reviewed and re-set by the issuer on an annual basis. The crediting interest rate for Group Retirement Annuity (GRA) contracts was 6.75% as of December 31, 2023.

The GRA contracts may be withdrawn in a single lump sum within 120 days of termination, subject to a 2.5% surrender charge. All other withdrawals and transfers must be spread over 10 annual installments (or five annual installments for withdrawals after termination of employment).

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 5* **Guaranteed Interest Contracts with Empower and Standard Insurance Company*

The Plan participates in an investment contract with Empower and Standard Insurance Company. Empower and Standard Insurance Company maintain the contributions in a general account. All transactions are at contract value, including discontinuance of the contract. Since the guaranteed investment contract is fully benefit responsive, it is required to be presented at contract value. Contract value as reported to the Plan by Empower and Standard Insurance Company represents contributions made under the contract, plus earnings at guaranteed crediting rates, less participant withdrawals and administrative fees. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their account balances at contract value. The crediting interest rate is based on a formula agreed upon with the issuer, but it may not be less than an effective rate of 3.00% for Empower and 1.00% for Standard Insurance Company. Such interest rates are reviewed and re-set by the issuer on a quarterly basis. The guaranteed crediting rate at December 31, 2023 for Empower and Standard Insurance Company was 3.75% and 2.70%, respectively. The guaranteed crediting rate at December 31, 2022 for Empower and Standard Insurance Company was 3.00% and 2.35%, respectively.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include the following: (1) amendments to the Plan documents (including complete or partial plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity provisions; (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan Administrator does not believe that the occurrence of any such value event, which would limit the Plan's ability to transact at contract value with participants, is probable.

Note 6* **Income Tax Status*

The Plan adopted a volume submitter 403(b) plan sponsored by Principal Life Insurance Company. The volume submitter plan has received an opinion letter dated March 31, 2017 from the Internal Revenue Service (IRS) as to the volume submitter plan's qualified status. The volume submitter plan opinion letter has been relied upon by this Plan. The Plan Administrator believes that the Plan is designed and is currently being operated in compliance with the applicable provision of the IRC.

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 (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2023, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2023 AND 2022

Note 7* **Certified Financial Information*

The Plan Administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the United States Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Principal Trust Company, Newport Trust Company, TIAA and CREF, DWS Trust Company, and Empower have certified to the completeness and accuracy of the investments and notes receivable from participants reflected on the accompanying statements of net assets available for benefits as of December 31, 2023 and 2022, the schedule of assets (held at end of year) as of December 31, 2023, and the related investment activity (including interest and dividends and net appreciation in fair value of investments) and interest on notes receivable from participants reflected in the statement of changes in net assets available for benefits for the year ended December 31, 2023.

The following information was certified as accurate and complete by the custodians and is included in the accompanying financial statements and schedule:

		<u>Assets</u>	<u>Investment</u> <u>Income</u>
2023	\$	31,203,455	\$ 4,984,047
2022		28,513,934	

Note 8* **Plan Termination*

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

Note 9* **Party-in-Interest Transactions*

Certain Plan investments are managed by entities related to TIAA and CREF, DWS Trust Company, Principal Life Insurance, and Empower Annuity Insurance Company of America, the Custodians of the Plan, and therefore, transactions involving these investments qualify as party-in-interest transactions. Notes receivable from participants also qualify as party-in-interest transactions.

Note 10* **Subsequent Event*

Effective April 1, 2024, the Plan was amended and restated to remove the one year and completion of 1,000 hours of service requirement and quarterly entry date to be eligible to receive employer matching contributions.

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2023 EIN: 22-1487560 Plan Number: 002

<u>Identity of Issue</u>	<u>Description of Investment</u>	<u>Current Value</u>
Fixed Annuity Contracts:		
* TIAA	Non Fully Benefit Responsive Traditional Annuity	\$ 944,439
Insurance Company Separate Account:		
* TIAA	Real Estate	243,093
Variable Annuity Contracts:		
* CREF	Equity Index	1,098,022
* CREF	Stock	740,838
* CREF	Social Choice	664,006
* CREF	Growth	521,955
* CREF	Core Bond	387,098
* CREF	Global Equities	276,778
* CREF	Money Market	198,548
* CREF	Inflation-Linked Bond	83,207
Total Variable Annuity Contracts		3,970,452
Pooled Separate Accounts:		
* Prudential	Medley Jennison Blend Portfolio	18,016
* Prudential	Medley Capital Growth Portfolio	9,407
* Prudential	Medley Flexible Managed Portfolio	5,248
* Prudential	Medley 50/50 Balanced Portfolio	3,688
* Prudential	Medley Total Return Bond Portfolio	2,269
Total Pooled Separate Accounts		38,628
Guaranteed Interest Accounts		
Standard Insurance Company	Stable Asset Fund II	3,181,567
* Prudential	Guaranteed Interest Account	98,404
Total Guaranteed Interest Accounts		3,279,971
Registered Investment Companies:		
Vanguard	Wellington Fund Admiral Shares	3,802,912
Fidelity	Advisor New Insights	3,610,439
BlackRock	Equity Dividend Institutional	2,874,703
Vanguard	500 Index Fund Admiral Shares	1,604,108
Western Asset	Core Plus Bond Fund Class I	1,056,496
JPMorgan	Mid Cap Growth R6	1,003,167
PIMCO	Income Fund Institutional Class	921,849
JPMorgan	Large Cap Growth R6	898,120
Hartford	MidCap Fund Class Y	870,395
Vanguard	Target Retirement 2045 Fund	832,614
Vanguard	Target Retirement 2020 Fund	713,566
Vanguard	Target Retirement 2040 Fund	493,271
American Funds	EuroPacific Growth R6	476,089
* TIAA	Access Lifecycle 2035 T4	317,339
Vanguard	Target Retirement 2025 Fund	311,339
Vanguard	Target Retirement 2030 Fund	284,493
Vanguard	Target Retirement 2035 Fund	269,662

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YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2023 EIN: 22-1487560 PLAN NUMBER: 002

<u>Identity of Issue</u>	<u>Description of Investment</u>	<u>Current Value</u>
Oakmark	International Fund Investor Class	262,065
BlackRock	Health Sciences Ops	188,285
PIMCO	Real Return Fund Institutional Class	164,838
Vanguard	Target Retirement 2050 Fund	140,140
Vanguard	Target Retirement 2055 Fund	138,390
* DWS	Total Return Bond Fund	136,442
* TIAA	Access Lg-Cap Val T4	124,700
Voya	Small Cap Growth Fund	114,186
* DWS	Large Cap Focus Fund	114,113
Fidelity	Natural Resources Fund	89,267
* TIAA	Access Intl Equity T4	84,424
* TIAA	Access Sml Cp Eq T4	83,116
* TIAA	Access Lifecycle 2030 T4	63,987
* PGIM	Global Real Estate Fund R6	37,777
* DWS	Core Equity Fund	34,255
* DWS	Croci US S Fund	33,721
* TIAA	Access Sm-Cap Bl Idx T4	31,107
* TIAA	Access Social Ch Eq T4	30,483
* DWS	Global Macro Fund	21,696
* DWS	International Growth Fund	21,483
* TIAA	Access Growth & Income T4	20,960
Vanguard	Target Retirement 2060 Fund	13,115
Vanguard	Target Retirement 2065 Fund	12,923
* DWS	Govt & Agency Money Fund	10,984
* DWS	Croci International Fund	9,479
* TIAA	Access Real Est Secs T4	8,024
Vanguard	Target Retirement Income Fund	7,621
* DWS	Capital Growth Fund	6,566
* DWS	ESG Core Equity Fund	2,802
* TIAA	Access Mid-Cap Val T4	1,224
* TIAA	Access Mid-Cap Growth T4	783
* TIAA	Access Core Bond Plus T4	212
* TIAA	Access Lifecycle 2025 T4	10
Total Registered Investment Companies		22,349,740
* Participant Loans		Interest rates range from 4.25%-9.50%. Maturity Dates ranging from 2024 to 2028
		377,132
Total Investments		\$ 31,203,455
* Denotes party-in-interest		

YOUTH CONSULTATION SERVICE TAX SHELTERED ANNUITY PLAN

SCHEDULE OF ASSETS (HELD AT END OF YEAR) DECEMBER 31, 2023 EIN: 22-1487560 Plan Number: 002

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