

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 TRINITY SOLAR, LLC 401(K) PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 01/01/2015
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) TRINITY SOLAR, LLC 2211 ALLENWOOD ROAD WALL, NJ 07719
2b	Employer Identification Number (EIN) 22-3292324
2c	Plan Sponsor's telephone number 732-780-3779
2d	Business code (see instructions) 221100

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	RICHARD MANCINELLI
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2023)
v. 230707

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 TRINITY SOLAR INC. c Plan Name TRINITY SOLAR INC. 401(K) PLAN	4b EIN 22-3292324 4d PN 001
5 Total number of participants at the beginning of the plan year	5 2532
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) 1911 6a(2) 2366 6b 0 6c 825 6d 3191 6e 0 6f 3191 6g(1) 2127 6g(2) 2697 6h 884
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
2A 2E 2J 2K 2F 2G 3D

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

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

a Pension Schedules

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

b General Schedules

- (1) ☒ **H** (Financial Information)
- (2) ☐ **I** (Financial Information – Small Plan)
- (3) ☒ **A** (Insurance Information) – Number Attached 1
- (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 TRINITY SOLAR, LLC 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRINITY SOLAR, LLC	D Employer Identification Number (EIN) 22-3292324

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
NATIONWIDE LIFE INSTURANCE 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
31-4156830	66869	GAPCPHE6Z	2366	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 2345	(b) Total amount of fees paid 0
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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
LIBERTY PARTNERS FINANCIAL SER 1050 JOHNNIE DOODS BLVD
MOUNT PLEASANT, SC 29465

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
2345	0	INVESTMENT ADVISER	4

(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	
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. Specify nature of costs ▶	6d	

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

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

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

b	Balance at the end of the previous year	7b	1033504
c	Additions: (1) Contributions deposited during the year	7c(1)	209624
	(2) Dividends and credits	7c(2)	0
	(3) Interest credited during the year	7c(3)	22975
	(4) Transferred from separate account.....	7c(4)	105052
	(5) Other (specify below)	7c(5)	16200
	▶ LOAN REPAYMENTS, REALLOCATED TRANSFER IN		
	(6) Total additions	7c(6)	353851
d	Total of balance and additions (add lines 7b and 7c(6))	7d	1387355
e	Deductions:		
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	80552
	(2) Administration charge made by carrier	7e(2)	1307
	(3) Transferred to separate account.....	7e(3)	4082
	(4) Other (specify below)	7e(4)	2445
	▶ FORFEITURE, LOAN WITHDRAWAL		
	(5) Total deductions	7e(5)	88386
f	Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	1298969

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a Premiums: (1) Amount received		9a(1)		
(2) Increase (decrease) in amount due but unpaid.....		9a(2)		
(3) Increase (decrease) in unearned premium reserve		9a(3)		
(4) Earned ((1) + (2) - (3)).....			9a(4)	0
b Benefit charges (1) Claims paid.....		9b(1)		
(2) Increase (decrease) in claim reserves		9b(2)		
(3) Incurred claims (add (1) and (2)).....			9b(3)	0
(4) Claims charged			9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --				
(A) Commissions	9c(1)(A)			
(B) Administrative service or other fees	9c(1)(B)			
(C) Other specific acquisition costs	9c(1)(C)			
(D) Other expenses	9c(1)(D)			
(E) Taxes	9c(1)(E)			
(F) Charges for risks or other contingencies.....	9c(1)(F)			
(G) Other retention charges	9c(1)(G)			
(H) Total retention		9c(1)(H)		0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.).....			9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement			9d(1)	
(2) Claim reserves			9d(2)	
(3) Other reserves.....			9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)			9e	
10 Nonexperience-rated contracts:				
a Total premiums or subscription charges paid to carrier			10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount			10b	
Specify nature of costs.				

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		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 TRINITY SOLAR, LLC 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRINITY SOLAR, LLC	D Employer Identification Number (EIN) 22-3292324	

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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--

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

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

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

NATIONWIDE

ONE NATIONWIDE PLAZA
COLUMBUS, OH 43215

(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 64 99	SERVICE PROVIDER	263917	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

LIBERTY PARTNERS FINANCE SERVICE

1050 JOHNNIE DOODS BLVD
SUITE 2470
MOUNT PLEASANT, SC 29465

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
22	INSURANCE AGENCY	0	Yes ☒ No ☐	Yes ☒ No ☐	75044	Yes ☐ No ☒

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

PREFERRED PENSION PLANNING

991 ROUTE 22 WEST
BRIDGEWATER, NJ 08807

22-3200158

(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 63 64	TPA	67465	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 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 TRINITY SOLAR, LLC 401(K) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRINITY SOLAR, LLC	D Employer Identification Number (EIN) 22-3292324	

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)	69398	212784
(2) Participant contributions	1b(2)	115709	346962
(3) Other	1b(3)	9364	40177
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)	1009383	1087555
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts.....	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities.....	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	31196525	43062397
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	1298969
(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	32400379	46048844
Liabilities			
g Benefit claims payable	1g		
h Operating payables	1h		
i Acquisition indebtedness	1i		
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	32400379	46048844

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)	1665564	
(B) Participants	2a(1)(B)	9117790	
(C) Others (including rollovers)	2a(1)(C)	298703	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		11082057
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)	57753	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		57753
(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)	1106116	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1106116
(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)		
(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)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		4757037
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		17002963

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	2888843	
(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)		2888843
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		134288
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees.....	2i(2)		
(3) Recordkeeping fees.....	2i(3)		
(4) IQPA audit fees.....	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	331367	
(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)		331367
j Total expenses. Add all expense amounts in column (b) and enter total	2j		3354498

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		13648465
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: **BKC, CPA'S, P.C.**

(2) EIN: **22-3299874**

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		☒	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		☒	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		☒	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		☒	
e Was this plan covered by a fidelity bond?	☒		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		☒	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		☒	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	☒		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		☒	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		☒	
l Has the plan failed to provide any benefit when due under the plan?		☒	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		☒	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2023 This Form is Open to Public Inspection.
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan TRINITY SOLAR, LLC 401(K) PLAN		B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRINITY SOLAR, LLC		D Employer Identification Number (EIN) 22-3292324
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): 31-4156830		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year		3
Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)	
4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ☐ Yes ☐ No ☐ N/A If the plan is a defined benefit plan, go to line 8.		
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.		
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)		6a
b Enter the amount contributed by the employer to the plan for this plan year		6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)		6c
If you completed line 6c, skip lines 8 and 9.		
7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ☐ Yes ☐ No ☐ N/A		
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ☐ Yes ☐ No ☐ N/A		
Part III	Amendments	
9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box. ☐ Increase ☐ Decrease ☐ Both ☐ No		
Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.	
10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?..... ☐ Yes ☐ No		
11 a Does the ESOP hold any preferred stock? ☐ Yes ☐ No		
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ☐ Yes ☐ No		
12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ☐ Yes ☐ No		
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule R (Form 5500) 2023 v. 230707		

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

Part VI	Additional Information for Single-Employer and Multiemployer Defined Benefit Pension Plans
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18 If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment..... ☐	
19 If the total number of participants is 1,000 or more, complete lines (a) and (b): a Enter the percentage of plan assets held as: Public Equity: _____% Private Equity: _____% Investment-Grade Debt and Interest Rate Hedging Assets: _____% High-Yield Debt: _____% Real Assets: _____% Cash or Cash Equivalents: _____% Other: _____% b Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets: ☐ 0-5 years ☐ 5-10 years ☐ 10-15 years ☐ 15 years or more	
20 PBGC missed contribution reporting requirements. If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20. a Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero? ☐ Yes ☐ No b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box: ☐ Yes. ☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date. ☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date. ☐ No. Other. Provide explanation: _____	

Part VII	IRS Compliance Questions
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21a Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules? ☐ Yes ☒ No 21b If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2). ☐ Design-based safe harbor method ☐ "Prior year" ADP test ☒ "Current year" ADP test ☐ N/A	
22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter <u>06 / 30 / 2020</u> (MM/DD/YYYY) and the Opinion Letter serial number <u>Q703912A</u> .	

TRINITY SOLAR, LLC 401(K) PLAN

December 31, 2023



TRINITY SOLAR, LLC 401(K) PLAN

For the Year Ended December 31, 2023

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Certified Public Accountants, PC

www.bkc-cpa.com

Independent Auditors' Report

To the Board of Directors
Trinity Solar, LLC 401(k) Plan
Wall, New Jersey

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

We have performed audits of the accompanying financial statements of Trinity Solar, LLC 401(k) 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, and the related Statement of Changes in Net Assets Available for Benefits for the year then 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 audit of Trinity Solar, LLC 401(k) Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained a certification from a qualified institution as of December 31, 2023 and 2022, and for the year ended December 31, 2023, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Trinity Solar, LLC 401(k) Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Trinity Solar, LLC 401(k) Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve

collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Trinity Solar, LLC 401(k) Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Trinity Solar, LLC 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

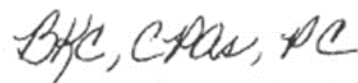
Other Matter - Supplementary Schedule Required by ERISA

The supplementary Schedule of Assets Held for Investment Purposes 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 Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of Management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the Supplementary Schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the Supplementary Schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion -

- the form and content of the Supplementary Schedule, other than the information in the Supplementary Schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the Supplementary Schedule related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).



BKC, CPAs, PC

October 14, 2024
Flemington, New Jersey

TRINITY SOLAR, LLC 401(K) PLAN
Statements of Net Assets Available for Benefits
December 31,

	<u>2023</u>	<u>2022</u>
Assets		
Investments at fair value	\$ 43,062,397	\$ 30,163,021
Investments at contract value	1,298,969	1,033,504
Employer contributions receivable	212,784	69,398
Participant contributions receivable	346,962	115,709
Other receivables	40,177	9,364
Notes receivable from participants	1,087,555	1,009,383
Total assets	<u>\$ 46,048,844</u>	<u>\$ 32,400,379</u>
Net assets available for benefits	<u>\$ 46,048,844</u>	<u>\$ 32,400,379</u>

See accompanying notes to the financial statements.

TRINITY SOLAR, LLC 401(K) PLAN
Statement of Changes in Net Assets Available for Benefits
For the Year Ended December 31, 2023

Additions	
Investment income	
Realized and unrealized gains (losses), net	\$ 4,757,037
Interest and dividend income	1,106,116
Total investment income (loss)	<u>5,863,153</u>
Participant loan interest	57,753
Participant contributions	9,117,790
Employer contributions	1,665,564
Rollover contributions	298,703
Total additions	<u>17,002,963</u>
Deductions	
Benefits paid to participants	3,023,131
Administrative fees	331,367
Total deductions	<u>3,354,498</u>
Net change in net assets available for benefits	13,648,465
Net assets available for benefits - beginning of year	<u>32,400,379</u>
Net assets available for benefits - end of year	<u><u>\$ 46,048,844</u></u>

See accompanying notes to the financial statements.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 1 - Plan summary

Description of plan

The following description of the Trinity Solar, LLC 401(k) Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering substantially all employees of Trinity Solar, LLC (the Company) not represented for collective bargaining purposes, and who are not non-resident aliens. The Plan has a service requirement of 250 hours in a three-month period. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective July 31, 2023, the Plan Sponsor name was changed to Trinity Solar, LLC, formerly known as Trinity Solar Inc., and the Plan name was changed to Trinity Solar, LLC 401(k) Plan. The previous plan name was Trinity Solar Inc. 401(k) Plan.

Automatic enrollment

The Plan has an auto-enrollment provision whereby all eligible participants are automatically enrolled in the Plan at a deferral rate equal to 3% of eligible compensation, unless the participant affirmatively elects not to participate in the Plan or selects a deferral percentage at a rate other than 3%.

Contributions

Participants may contribute up to 100% of pre-tax compensation, as defined by the Plan, subject to maximum amounts allowed by the Internal Revenue Code. Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions, along with the Company's contributions, into various investment options offered by the Plan. The Company may contribute to the Plan by making a discretionary matching contribution and a profit-sharing contribution to each participant based on his or her eligible compensation in a percentage set by the Company prior to the end of each pay period. The Company matched 20% on the first 8% of base compensation that a participant contributed to the Plan. The Company elected not to make a profit-sharing contribution in 2023.

Participant accounts

Each participant's account is self-directed and credited with the participant's and Company's contributions, profit sharing contributions, and investment earnings (losses). Each participant's account is charged with participant withdrawals and an allocation of administrative expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. Investment income is reinvested in the same fund in which it was earned. Investment earnings are allocated to each participant's account, on a daily basis, based upon the earnings (or losses) of the particular fund or funds in which the participant's account is invested.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 1 - Plan summary (continued)

Note receivables from participants

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 (minus highest outstanding balance of loans in the past 12 months) or 50% of their vested account balance. The loans bear interest at the prime rate plus 1% at the time of the loan. Loan terms range from one to five years, or longer for the purchase of a primary residence. The loans are secured by the balance in the participant's account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants become fully vested in any discretionary Company contributions made to the Plan after five years based on a graded schedule.

A participant is vested as follows:

Years of Vesting Service	Vesting Percentage
Less than 1 year	-
1 year but less than 2	20%
2 years but less than 3	40%
3 years but less than 4	60%
4 years but less than 5	80%
5 years or more	100%

A participant is 100% vested upon attaining age 65, death, disability, retirement, or termination of the Plan.

Investment options

Upon enrollment in the Plan, a participant may direct the investment of their contributions in a variety of investment options offered by the Plan. As of December 31, 2022, the Plan offered various mutual funds and guaranteed investment contract investment options. Participants may change their investment options at any time.

Payment of benefits

On termination of service due to death, disability, normal retirement at age 65 or for other reasons, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account.

Defaulted loans are loans resulting from the failure of a participant to make the required loan repayments on an outstanding loan and are considered deemed distributed loans. These loans are considered a distribution to the participant for which a federal 1099 tax form is issued. For the year ended December 31, 2023, benefit payments increased and participant loans decreased to reflect defaulted loans that the Plan has recorded as deemed distributed loans in the amount of \$134,288.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 1 - Plan summary (continued)

Hardship withdrawals

The Plan allows participants to make hardship withdrawals to satisfy certain immediate and heavy financial needs. Hardship withdrawals are permitted from the accounts that are fully vested. Certain earnings on the elective deferral portion of an account may not be eligible for hardship distribution.

Forfeited accounts

Forfeited non-vested accounts are used to pay administrative expenses of the Plan, reduce future Company contributions or allocated as an additional contribution. If an employee resumed employment with the Company, the amounts that were previously forfeited (if any) would be restored if the employee were to repay the full amount that was previously distributed before the earlier of 5 years after the first date on which the employee is subsequently re-employed or the date the employee would incur 5 consecutive one-year periods of severance following the date of distribution. As of December 31, 2023 and 2022, the forfeited accounts totaled \$83,952 and \$17,937, respectively. During 2023, \$96,670 was used to reduce employer contributions.

Note 2 - Summary of significant accounting policies

Basis of accounting

The Plan's financial statements are prepared in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of estimates

The preparation of financial statements in conformity with U.S. GAAP requires Plan management to make estimates and assumptions that affect certain reported amounts of assets and liabilities and disclosures of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenue and expenses during the reporting period. Such estimates include those regarding fair value. Accordingly, actual results may differ from those estimates.

Investment valuation and income recognition

The Plan's investments are stated at fair value except for fully benefit responsive contracts. 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. Shares of registered investment companies are valued at quoted prices in an active market, which represent the net asset value of shares held by the Plan at year-end.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 2 - Summary of significant accounting policies (continued)

Investment valuation and income recognition (continued)

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

During 2023 and 2022, participants in the Plan had an investment in the Nationwide Fixed Select Contract, a common trust fund of Nationwide Life Insurance Company, which includes an investment contract that is fully benefit-responsive, and therefore is reported at contract value.

Mutual fund fees

Investments in mutual funds are subject to sales charges in the form of front-end loads, back-end loads or 12b-1 fees. The 12b-1 fees, which are ongoing fees allowable under Section 12b-1 of the Investment Company Act of 1940, are fees deducted to pay for marketing and distribution costs of the funds. These fees are deducted prior to the allocation of the Plan's investment earnings activity and thus not separately identifiable as an expense.

Administrative expenses

Certain expenses of maintaining the Plan are paid by the Company and are therefore excluded from these financial statements. Fees for the administration and maintenance of a participant account balances are included in administrative expenses and charged directly to the participant's account. Investment-related expenses are included in net appreciation of fair value of investments.

Notes receivable from participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are recorded as administrative expenses and are expensed when they are incurred. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document.

Payment of benefits

Benefits are recorded when paid.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 3 - Information prepared and certified by Trustee

The following information included in the accompanying financial statements and supplemental schedule was obtained from data that has been prepared and certified to as complete and accurate by Nationwide Trust Company (Nationwide), the Trustee.

	December 31,	
	2023	2022
Investments, at fair value	\$ 43,062,397	\$ 30,163,021
Investments, at contract value	1,298,969	1,033,504
Notes receivable from participants	1,087,555	1,009,383

Changes in net assets available for benefits for the year ended December 31, 2023:

Interest income on notes receivable from participants	\$ 57,753
Investment income	1,106,116
Realized and unrealized gains and (losses), net	4,757,037

Note 4 - Fair value

Financial Accounting Standards Board (FASB) in its Accounting Standards Codification (ASC) Topic 820, *Fair Value Measurements*, establishes a framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives 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 inputs must be observable for substantially the full term of the asset or liability.

Level 3 Inputs to the valuation methodology are unobservable inputs in situations where there is little or no market activity for the asset or liability and the reporting entity makes estimates and assumptions related to the pricing of the asset or liability including assumptions regarding risk.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 4 - Fair value (continued)

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

The following is a description of the valuation methodology used for instruments measured at fair value, including the general classification of such instruments pursuant to the valuation hierarchy. There have been no changes in the methodology used at December 31, 2023 and 2022:

Mutual funds are valued based on the daily closing price reported by the fund.

The method described above may produce a fair value calculation that may not be indicative of new 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.

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

2023	Level 1	Level 2	Level 3
Mutual funds	\$ 43,062,397	\$ -	\$ -
Total assets at fair value	<u>\$ 43,062,397</u>	<u>\$ -</u>	<u>\$ -</u>
2022	Level 1	Level 2	Level 3
Mutual funds	\$ 30,163,021	\$ -	\$ -
Total assets at fair value	<u>\$ 30,163,021</u>	<u>\$ -</u>	<u>\$ -</u>

Note 5 - Investment contract

Participants in the Plan have the investment option of a fully benefit-responsive guaranteed investment contract with Nationwide Fixed Service Contract. Nationwide maintains the contributions in a general account. Each account is credited with participant contributions and earnings on the underlying investments and charged for participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. The guaranteed interest contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 5 - Investment contract (continued)

Because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for that portion of the net assets available for benefits attributable to the guaranteed investment contract. Contract value, as reported to the Plan by Nationwide, represents contributions made under the contract, plus earnings, less participant withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. As of December 31, 2023, and 2022, the balance in this account was \$1,298,969 and \$1,033,504, respectively.

Certain events may limit the ability of the Plan to transact at contract value. Such events include but may not be limited to the following: (1) complete or partial termination of the Plan, (2) the establishment or activation of, or material change in, any Plan investment fund, or an amendment to the Plan or a change in the administration or operation of the Plan, including the removal of a group of employees from Plan coverage as a result of the sale or liquidation of a subsidiary or division or as a result of group layoffs or early retirement programs. The Plan Administrator does not believe that any events which would limit the Plan's ability to transact at contract value with participants are probable of occurring.

The contract's crediting rate is reset quarterly. The crediting rate was 1.97% and 1.61% at December 31, 2023 and 2022, respectively.

Note 6 - Plan termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts and will either be distributed in a lump sum, periodic installments, or continue to be held in trust. Any unallocated assets of the Plan shall be allocated to the participant accounts based on participant earnings and distributed in such a manner as defined by the Plan.

Note 7 - Risks and uncertainties

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

TRINITY SOLAR, LLC 401(K) PLAN
Notes to the Financial Statements

Note 8 - Party-in-interest and related party transactions

Certain Plan investments are held in the Nationwide Fixed Select Contract, which is issued by Nationwide Insurance Company, an affiliate of the Trustee, Nationwide Trust Company, FSA. These transactions qualify as party-in interest transactions.

Certain administrative functions are performed by officers or employees of the Companies. No such officer or employee receives compensation from the Plan. Certain administrative expenses are paid directly by the Companies.

All of these transactions are considered to be party-in-interest transactions that are exempt from the ERISA prohibited transactions rules.

Note 9 - Tax status

The Internal Revenue Service (IRS) has determined and informed the Company by a letter dated June 30, 2020, that the Plan and related Trust are designed in accordance with the applicable sections of the Internal Revenue Code (IRC). The Company and the Plan Administrator believe that the Plan is currently designed and operated in compliance with the requirements of the IRC.

The Plan Administrator believes the Plan is no longer subject to income tax examinations for the years prior to 2020.

Note 10 Subsequent events

The Plan's management has determined that no material events or transactions have occurred subsequent to December 31, 2023 and through October 14, 2024, the date of the Plan's financial statements issuance, which require additional disclosure in the Plan's financial statements.

TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Ab Core Oppr I	412.3407 shares	\$ -	\$ 9,175
	Ab Disc Gr I	634.6056 shares	-	7,063
	Ab Disc Val I	222.1027 shares	-	4,715
	Ab Glbl Bd I	9,860.1999 shares	-	68,430
	Ab Glbl Rsk Alloc I	141.2215 shares	-	2,308
	Allspr Disc Smidcapgr Inst	211.1419 shares	-	5,965
	Allspr Prec Mtls Inst	189.4183 shares	-	8,984
	Amcent Mdcap Val R6	20.4164 shares	-	318
	Amfds Amcap R6	519.8082 shares	-	20,247
	Amfds Am Bal R6	573,700.2222 shares	-	18,358,406
	Amfds Int Gr Inc R6	9,162.9692 shares	-	328,492
	Avnts Us Lgcap Val Inst	18,249.7409 shares	-	224,837
	Avnts Us Smcap Val Inst	4,298.1885 shares	-	69,932
	Bnymel Smmddcap Gr I	235.3821 shares	-	6,191
	Blkrk Hi Yld Bd Port K	13,513.9842 shares	-	95,139
	Blkrk Midcap Gr Eq Inst	183.5931 shares	-	7,070
	Blkrk Tech Oppr Inst	50.8787 shares	-	2,858
	Blkrk Ttl Rtn K	3,204.5872 shares	-	32,142
	Causwy Intl Val Inst	20.5409 shares	-	402
	Col Sel Lgcap Gr Inst2	156.0109 shares	-	1,576
	De Mid Cap Gr Eq Inst	225.8884 shares	-	6,399
	Dfa Emrg Mkt Cor Eq Inst	9,030.6021 shares	-	202,376
	Dfa Glbl Realest Sec Inst	92.4723 shares	-	950
	Dfa Intl Cor Eq Inst	8,968.2067 shares	-	137,392
	Dfa Us Lgcap Val Inst	9,004.9241 shares	-	401,079
	Dfa Us Smcap Inst	5,265.5475 shares	-	233,579
	Dfa Us Trgt Val Inst	5,376.7665 shares	-	171,465
	Diamond Hill Mdcap1	8,043.7522 shares	-	131,355

See independent auditors' report.

TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Dodgecox Intl Stk 1	5,132.6419 shares	\$ -	\$ 252,321
	Fed Hrms Gov Oblgtns Prmr	80,700.3957 shares	-	83,954
	Fid 500 Index	2,509.8508 shares	-	415,355
	Fid Intl Index	5,159.5104 shares	-	244,303
	Fid Sel Tech	66.1915 shares	-	1,887
	Fid Ttl Mkt Indx	55.4374 shares	-	7,304
	Fid Us Bd Indx	15,390.5070 shares	-	160,523
	Fidadv Energy I	7.6756 shares	-	347
	Fidadv Gold I	21.6188 shares	-	479
	Fidadv Gr Oppr Inst	76.5862 shares	-	10,901
	Fnkln Gold Prec Mtls Adv	91.9386 shares	-	1,661
	Frstegle Gold R6	157.6714 shares	-	3,929
	Gabelli Gold Inst	502.4380 shares	-	9,225
	Gdmnses Gqgptnrntloppr R6	12,960.0487 shares	-	256,609
	Gdmnses Insmcpinsight Inst	15,476.7379 shares	-	188,352
	Gdmnses Infl Prtctsec Inst	4,821.5039 shares	-	46,431
	Gughm Ttl Rtn Bd Inst	4,040.5798 shares	-	96,247
	Invsco Eq Wgt S P 500 Y	12,533.4132 shares	-	879,344
	Invsco Goldspecmnrsls Y	14.4544 shares	-	331
	Invsco Intl Smmd Co Y	8,401.9045 shares	-	357,501
	Invsco Smcap Gr R5	11,590.9079 shares	-	381,689
	Jpm Eq Inc R5	8,842.0423 shares	-	203,367
	Jpm Lgcap Gr R6	3,162.8947 shares	-	199,642
	Jpm Um Behval Fd R6	5.0918 shares	-	407
	Leggm Clrbrdg Intl Gr I	3,225.6407 shares	-	196,538
	Mfs Mdcap Gr R6	4,322.4042 shares	-	126,301
	Massmut Blue Chip Gr I	93.1133 shares	-	1,849
	Massmut Mdcap Gr I	24,326.4423 shares	-	481,664
*	Nw Loomis Allcap Gr R6	14,299.2437 shares	-	223,826
	Pgim Jnism Natrl Rsrc R6	6.5614 shares	-	353
	Pgim Ttl Rtn Bd R6	8,890.4106 shares	-	107,218

See independent auditors' report.

TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Pimco Inc Inst	16,089.6396 shares	\$ -	\$ 170,872
	Pimco Intl Bdsdlrhdst	14,735.5727 shares	-	145,440
	Pimco Real Rtn Inst	7,067.5477 shares	-	70,887
	Pimcocomdyrealrtnst	8,473.2327 shares	-	109,728
	Prncpl Gbl Realest R6	14,545.9961 shares	-	135,132
	Ptnm Lgcap Gr Y	31.5655 shares	-	1,845
	Tiaacrf Lgcap Gr Inst	10.5377 shares	-	249
	Trowepr Divd Gr	3.2637 shares	-	231
	Trowepr Divd Gr I	3.9878 shares	-	282
	Trowepr Lgcap Gr I	24,171.6175 shares	-	1,590,009
	Trowepr Senc Tech	78.0007 shares	-	3,134
	Trowepr Spctrmmmodgralloc	8,986.2225 shares	-	330,423
	Vaneck Intl Inv Gold Inst	41.4049 shares	-	559
	Virtus Tech Inst	193.3214 shares	-	12,866
	Vngrd 500 Index Fd As	812.8694 shares	-	357,654
	Vngrd Cnsmr Stpls Adml	117.8287 shares	-	11,097
	Vngrd Comdty Strat Adml	16.6975 shares	-	412
	Vngrd Devl Mkt Indx Adml	205.7137 shares	-	3,168
	Vngrd Divd App Indx Adml	6.7664 shares	-	313
	Vngrd Divd Gr Inv	2.0494 shares	-	76
	Vngrd Energy Index Adml	4.9316 shares	-	289
	Vngrd Explr Adml	681.2169 shares	-	70,322
	Vngrd Gnma Adml	3,026.6813 shares	-	28,299
	Vngrd Gbl Cap Cyc Inv	70.8410 shares	-	869
	Vngrd Hdivd Yld Indx Adml	12.6111 shares	-	424
	Vngrd Info Tech Indx Adml	157.0717 shares	-	38,927
	Vngrd Intl Gr Adml	3.6778 shares	-	374
	Vngrd Mdcap Gr Inc	13.6836 shares	-	318

See independent auditors' report.

TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Vngrd Mdcap Val Indx Adml	6,015.7385 shares	\$ -	\$ 451,662
	Vngrd Pacfc Stk Indx Adml	8.7568 shares	-	782
	Vngrd Sm Cap Indx Fd As	31.2950 shares	-	3,198
	Vngrd Strat Eq Inv	10,058.7356 shares	-	345,618
	Vngrd Trgt Rtmt 2020 Inv	29,989.2952 shares	-	805,812
	Vngrd Trgt Rtmt 2025 Inv	38,756.2665 shares	-	712,340
	Vngrd Trgt Rtmt 2030 Inv	42,099.7655 shares	-	1,493,279
	Vngrd Trgt Rtmt 2035 Inv	73,636.0769 shares	-	1,628,830
	Vngrd Trgt Rtmt 2040 Inv	42,793.2406 shares	-	1,681,774
	Vngrd Trgt Rtmt 2045 Inv	71,365.9787 shares	-	1,902,617
	Vngrd Trgt Rtmt 2050 inv	53,532.2520 shares	-	2,378,973
	Vngrd Trgt Rtmt 2055 Inv	36,550.0616 shares	-	1,812,518
	Vngrd Trgt Rtmt 2060 inv	23,216.8709 shares	-	1,060,779
	Vngrd Trgt Rtmt Inc	3,897.9677 shares	-	50,713
	Vngrd Ttl Stmkt Indx Fd As	182.1951 shares	-	21,042
	Vngrd Util Indx Adml	2.8236 shares	-	194
	Vngrd Val Indx Adml	10.4730 shares	-	610
	Vngrd Wlngtn Inv	1.8522 shares	-	77
	Vngrd Wlsly Inc Adml	2,460.2649 shares	-	148,677
			-	43,062,397
*	Fixed Select Contract	1,132,137.1574 shares		1,298,969
*	Participant Loans	4.25% - 8.50%	-	1,087,555
			<u>\$ -</u>	<u>\$ 45,448,921</u>
*	Party-in-interest			

See independent auditors' report.

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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****Part I Annual Report Identification Information**For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023

- A** This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
- ☒ a single-employer plan ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first return/report ☐ the final return/report
- ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
- C** If the plan is a collectively-bargained plan, check here. ▶ ☐
- D** Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program
- ☐ special extension (enter description) _____
- E** If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II Basic Plan Information—enter all requested information

1a Name of plan Trinity Solar, LLC 401(k) Plan	1b Three-digit plan number (PN) ▶ 001
	1c Effective date of plan 01/01/2015
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) Trinity Solar, LLC 2211 Allenwood Road Wall NJ 07719	2b Employer Identification Number (EIN) 22-3292324
	2c Plan Sponsor's telephone number 732-780-3779
	2d Business code (see instructions) 221100

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		<u>10/15/2024</u>	Richard Mancinelli
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

For Paperwork Reduction Act Notice, see the Instructions for Form 5500.

Form 5500 (2023)
v. 2300728

TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Ab Core Oppr I	412.3407 shares	\$ -	\$ 9,175
	Ab Disc Gr I	634.6056 shares	-	7,063
	Ab Disc Val I	222.1027 shares	-	4,715
	Ab Glbl Bd I	9,860.1999 shares	-	68,430
	Ab Glbl Rsk Alloc I	141.2215 shares	-	2,308
	Allspr Disc Smidcapgr Inst	211.1419 shares	-	5,965
	Allspr Prec Mtls Inst	189.4183 shares	-	8,984
	Amcent Mdcap Val R6	20.4164 shares	-	318
	Amfds Amcap R6	519.8082 shares	-	20,247
	Amfds Am Bal R6	573,700.2222 shares	-	18,358,406
	Amfds Int Gr Inc R6	9,162.9692 shares	-	328,492
	Avnts Us Lgcap Val Inst	18,249.7409 shares	-	224,837
	Avnts Us Smcap Val Inst	4,298.1885 shares	-	69,932
	Bnymel Smmdcap Gr I	235.3821 shares	-	6,191
	Blkrk Hi Yld Bd Port K	13,513.9842 shares	-	95,139
	Blkrk Midcap Gr Eq Inst	183.5931 shares	-	7,070
	Blkrk Tech Oppr Inst	50.8787 shares	-	2,858
	Blkrk Ttl Rtn K	3,204.5872 shares	-	32,142
	Causwy Intl Val Inst	20.5409 shares	-	402
	Col Sel Lgcap Gr Inst2	156.0109 shares	-	1,576
	De Mid Cap Gr Eq Inst	225.8884 shares	-	6,399
	Dfa Emrg Mkt Cor Eq Inst	9,030.6021 shares	-	202,376
	Dfa Glbl Realest Sec Inst	92.4723 shares	-	950
	Dfa Intl Cor Eq Inst	8,968.2067 shares	-	137,392
	Dfa Us Lgcap Val Inst	9,004.9241 shares	-	401,079
	Dfa Us Smcap Inst	5,265.5475 shares	-	233,579
	Dfa Us Trgt Val Inst	5,376.7665 shares	-	171,465
	Diamond Hill Mdcap1	8,043.7522 shares	-	131,355

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TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Dodgecox Intl Stk 1	5,132.6419 shares	\$ -	\$ 252,321
	Fed Hrms Gov Oblgtns Prmr	80,700.3957 shares	-	83,954
	Fid 500 Index	2,509.8508 shares	-	415,355
	Fid Intl Index	5,159.5104 shares	-	244,303
	Fid Sel Tech	66.1915 shares	-	1,887
	Fid Ttl Mkt Indx	55.4374 shares	-	7,304
	Fid Us Bd Indx	15,390.5070 shares	-	160,523
	Fidadv Energy I	7.6756 shares	-	347
	Fidadv Gold I	21.6188 shares	-	479
	Fidadv Gr Oppr Inst	76.5862 shares	-	10,901
	Fnkln Gold Prec Mtls Adv	91.9386 shares	-	1,661
	Frstegle Gold R6	157.6714 shares	-	3,929
	Gabelli Gold Inst	502.4380 shares	-	9,225
	Gdmnses Gqgptnrntloppr R6	12,960.0487 shares	-	256,609
	Gdmnses Insmcpinsight Inst	15,476.7379 shares	-	188,352
	Gdmnses Infl Prtctsec Inst	4,821.5039 shares	-	46,431
	Gughm Ttl Rtn Bd Inst	4,040.5798 shares	-	96,247
	Invsco Eq Wgt S P 500 Y	12,533.4132 shares	-	879,344
	Invsco Goldspecmnrsls Y	14.4544 shares	-	331
	Invsco Intl Smmd Co Y	8,401.9045 shares	-	357,501
	Invsco Smcap Gr R5	11,590.9079 shares	-	381,689
	Jpm Eq Inc R5	8,842.0423 shares	-	203,367
	Jpm Lgcap Gr R6	3,162.8947 shares	-	199,642
	Jpm Um Behval Fd R6	5.0918 shares	-	407
	Leggm Clrbrdg Intl Gr I	3,225.6407 shares	-	196,538
	Mfs Mdcap Gr R6	4,322.4042 shares	-	126,301
	Massmut Blue Chip Gr I	93.1133 shares	-	1,849
	Massmut Mdcap Gr I	24,326.4423 shares	-	481,664
*	Nw Loomis Allcap Gr R6	14,299.2437 shares	-	223,826
	Pgim Jnism Natrl Rsrc R6	6.5614 shares	-	353
	Pgim Ttl Rtn Bd R6	8,890.4106 shares	-	107,218

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TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Pimco Inc Inst	16,089.6396 shares	\$ -	\$ 170,872
	Pimco Intl Bdsdlrhdst	14,735.5727 shares	-	145,440
	Pimco Real Rtn Inst	7,067.5477 shares	-	70,887
	Pimcomcomdyrealrtnst	8,473.2327 shares	-	109,728
	Prncpl Gbl Realest R6	14,545.9961 shares	-	135,132
	Ptnm Lgcap Gr Y	31.5655 shares	-	1,845
	Tiaacrf Lgcap Gr Inst	10.5377 shares	-	249
	Trowepr Divd Gr	3.2637 shares	-	231
	Trowepr Divd Gr I	3.9878 shares	-	282
	Trowepr Lgcap Gr I	24,171.6175 shares	-	1,590,009
	Trowepr Scnc Tech	78.0007 shares	-	3,134
	Trowepr Spctrmmmodgralloc	8,986.2225 shares	-	330,423
	Vaneck Intl Inv Gold Inst	41.4049 shares	-	559
	Virtus Tech Inst	193.3214 shares	-	12,866
	Vngrd 500 Index Fd As	812.8694 shares	-	357,654
	Vngrd Cnsmr Stpls Adml	117.8287 shares	-	11,097
	Vngrd Comdty Strat Adml	16.6975 shares	-	412
	Vngrd Devl Mkt Indx Adml	205.7137 shares	-	3,168
	Vngrd Divd App Indx Adml	6.7664 shares	-	313
	Vngrd Divd Gr Inv	2.0494 shares	-	76
	Vngrd Energy Index Adml	4.9316 shares	-	289
	Vngrd Explr Adml	681.2169 shares	-	70,322
	Vngrd Gnma Adml	3,026.6813 shares	-	28,299
	Vngrd Gbl Cap Cyc Inv	70.8410 shares	-	869
	Vngrd Hdivd Yld Indx Adml	12.6111 shares	-	424
	Vngrd Info Tech Indx Adml	157.0717 shares	-	38,927
	Vngrd Intl Gr Adml	3.6778 shares	-	374
	Vngrd Mdcap Gr Inc	13.6836 shares	-	318

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TRINITY SOLAR, LLC 401(K) PLAN
Employer Identification Number: 22-3292324, Plan 001
Schedule H, Line 4i
Schedule of Assets Held for Investment Purposes (continued)
December 31, 2023

(a)	(b)	(c)	(d)	(e)
	Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value
	Vngrd Mdcap Val Indx Adml	6,015.7385 shares	\$ -	\$ 451,662
	Vngrd Pacfc Stk Indx Adml	8.7568 shares	-	782
	Vngrd Sm Cap Indx Fd As	31.2950 shares	-	3,198
	Vngrd Strat Eq Inv	10,058.7356 shares	-	345,618
	Vngrd Trgt Rtmt 2020 Inv	29,989.2952 shares	-	805,812
	Vngrd Trgt Rtmt 2025 Inv	38,756.2665 shares	-	712,340
	Vngrd Trgt Rtmt 2030 Inv	42,099.7655 shares	-	1,493,279
	Vngrd Trgt Rtmt 2035 Inv	73,636.0769 shares	-	1,628,830
	Vngrd Trgt Rtmt 2040 Inv	42,793.2406 shares	-	1,681,774
	Vngrd Trgt Rtmt 2045 Inv	71,365.9787 shares	-	1,902,617
	Vngrd Trgt Rtmt 2050 inv	53,532.2520 shares	-	2,378,973
	Vngrd Trgt Rtmt 2055 Inv	36,550.0616 shares	-	1,812,518
	Vngrd Trgt Rtmt 2060 inv	23,216.8709 shares	-	1,060,779
	Vngrd Trgt Rtmt Inc	3,897.9677 shares	-	50,713
	Vngrd Ttl Stmkt Indx Fd As	182.1951 shares	-	21,042
	Vngrd Util Indx Adml	2.8236 shares	-	194
	Vngrd Val Indx Adml	10.4730 shares	-	610
	Vngrd Wlngtn Inv	1.8522 shares	-	77
	Vngrd Wlsly Inc Adml	2,460.2649 shares	-	148,677
			-	43,062,397
*	Fixed Select Contract	1,132,137.1574 shares		1,298,969
*	Participant Loans	4.25% - 8.50%	-	1,087,555
			<u>\$ -</u>	<u>\$ 45,448,921</u>
*	Party-in-interest			

See independent auditors' report.