

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☐ Form 5558 ☐ automatic extension ☒ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan GRID ALTERNATIVES, INC. 403(B) PLAN
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 11/04/2006
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) GRID ALTERNATIVES, INC. 1171 OCEAN AVENUE SUITE 200 OAKLAND, CA 94608
2b	Employer Identification Number (EIN) 26-0043353
2c	Plan Sponsor's telephone number 510-731-1310
2d	Business code (see instructions) 541700

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.	01/22/2025	CATHERINE M. KERR
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5 460
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) 268 6a(2) 293 6b 131 6c 0 6d 424 6e 1 6f 425 6g(1) 6g(2) 425 6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

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

2A 2F 2G 2K 2M 2T 3H

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

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

For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023		
A Name of plan GRID ALTERNATIVES, INC. 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GRID ALTERNATIVES, INC.	D Employer Identification Number (EIN) 26-0043353	

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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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)

THE VANGUARD GROUP, INC.

P.O. BOX 2900
VALLEY FORGE, PA 19482

23-1945930

(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 50 64	THIRD PARTY ADMINISTRATO	21292	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
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(a) Enter name and EIN or address of service provider (see instructions)	(b) Nature of Service Code(s)	(c) Describe the information that the service provider failed or refused to provide
(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 GRID ALTERNATIVES, INC. 403(B) PLAN	B Three-digit plan number (PN) ►	001
C Plan sponsor's name as shown on line 2a of Form 5500 GRID ALTERNATIVES, INC.	D Employer Identification Number (EIN) 26-0043353	

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

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	6759
(2) Participant contributions	1b(2)	0	45095
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	7261155	9743874
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	0	0
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	7261155	9795728
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	7261155	9795728

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)	150125	
(B) Participants	2a(1)(B)	1054528	
(C) Others (including rollovers)	2a(1)(C)	19422	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1224075
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	140034	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		140034
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		0
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1440336
c Other income	2c		0
d Total income. Add all income amounts in column (b) and enter total	2d		2804445

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	246620	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		246620
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	23252	
(3) Recordkeeping fees.....	2i(3)	0	
(4) IQPA audit fees.....	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	0	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	0	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		23252
j Total expenses. Add all expense amounts in column (b) and enter total	2j		269872

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2534573
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: BELFINT, LYONS & SHUMAN, P.A.

(2) EIN: 51-0232399

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?	☒		1000000
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 GRID ALTERNATIVES, INC. 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GRID ALTERNATIVES, INC.	D Employer Identification Number (EIN) 26-0043353	

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): 23-1945930		
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
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9	If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.	☐ Increase	☐ Decrease	☐ Both	☐ No
---	--	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

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

10	Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11	a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
	b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12	Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

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 ____/____/____ (MM/DD/YYYY) and the Opinion Letter serial number _____.	

GRID ALTERNATIVES, INC. 403(b) PLAN

**FINANCIAL STATEMENTS AND
INDEPENDENT AUDITOR'S REPORT AND
ERISA-REQUIRED SUPPLEMENTAL
SCHEDULES**

DECEMBER 31, 2023, 2022, 2021, AND 2020

GRID ALTERNATIVES, INC. 403(b) PLAN
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Independent Auditor's Report

To the Plan Administrator
GRID Alternatives, Inc. 403(b) Plan

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

We have performed audits of the accompanying financial statements GRID Alternatives, Inc. 403(b) Plan (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, 2022, and 2021, and the related statements of changes in net assets available for benefits for the year ended December 31, 2023, 2022, and 2021, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by Ascensus Trust Company (as of December 31, 2023) and Newport Trust Company, LLC (as of December 31, 2022 and 2021), 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 by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from Ascensus, LLC, as an authorized representative of Ascensus Trust Company and Newport Trust Company, LLC, as of and for the year ended December 31, 2023, and from Newport Trust Company, LLC, of and for the years ended December 31, 2022 and 2021, stating that the certified investment information, as described in Note 4 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 *Auditor's Responsibilities for the Audit of the Financial Statements* section -

To the Plan Administrator
GRID Alternatives, Inc. 403(b) Plan

- 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 and certified 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 *Auditor's Responsibilities for the Audit of the Financial Statements* section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

To the Plan Administrator
GRID Alternatives, Inc. 403(b) Plan

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 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 the trustees, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedules Required by ERISA

The supplemental schedules of assets (held at end of year) as of December 31, 2023, 2022, and 2021 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary

To the Plan Administrator
GRID Alternatives, Inc. 403(b) Plan

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

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including its form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion -

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

Auditor's Report on the 2020 Financial Statements

We were engaged to audit the 2020 financial statements of the Plan. As permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA, the plan administrator instructed us not to perform and we did not perform any auditing procedures with respect to the information certified by a qualified institution. In our report dated January 10, 2025, we indicated that (a) because of the significance of the information that we did not audit, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion and accordingly, we did not express an opinion on the 2020 financial statements, and (b) the form and content of the information included in the 2020 financial statements other than that derived from the certified information were presented in compliance with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Belfint, Lyons & Shuman, P.A.

January 10, 2025
Wilmington, Delaware

GRID ALTERNATIVES, INC. 403(b) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2023, 2022, 2021, AND 2020

	<u>2023</u>	<u>2022</u>	<u>2021</u>	<u>2020</u>
ASSETS				
Investments, at Fair Value (See Note 3)	<u>\$ 9,743,874</u>	<u>\$ 7,261,155</u>	<u>\$ 7,787,297</u>	<u>\$ 6,273,983</u>
Receivables				
Participant Contributions	45,095	-	-	-
Employer Contributions	<u>6,759</u>	<u>-</u>	<u>-</u>	<u>-</u>
Total Receivables	<u>51,854</u>	<u>-</u>	<u>-</u>	<u>-</u>
TOTAL ASSETS	9,795,728	7,261,155	7,787,297	6,273,983
LIABILITIES	<u>-</u>	<u>-</u>	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 9,795,728</u></u>	<u><u>\$ 7,261,155</u></u>	<u><u>\$ 7,787,297</u></u>	<u><u>\$ 6,273,983</u></u>

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

GRID ALTERNATIVES, INC. 403(b) PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2023, 2022, AND 2021

ADDITIONS	2023	2022	2021
Investment Income (Loss)			
Net Appreciation (Depreciation) in Fair Value of Investments	\$ 1,440,336	\$ (1,589,786)	\$ 944,229
Dividends	140,034	199,945	192,771
	<u>1,580,370</u>	<u>(1,389,841)</u>	<u>1,137,000</u>
Net Investment Income (Loss)			
Contributions			
Employer	150,125	133,934	123,810
Participant	1,054,528	882,716	679,899
Rollover	19,422	-	-
	<u>1,224,075</u>	<u>1,016,650</u>	<u>803,709</u>
Total Contributions			
	<u>1,224,075</u>	<u>1,016,650</u>	<u>803,709</u>
TOTAL ADDITIONS	<u>2,804,445</u>	<u>(373,191)</u>	<u>1,940,709</u>
DEDUCTIONS			
Benefits Paid to Participants	246,620	132,549	409,654
Administrative Expenses	23,252	20,402	17,741
	<u>269,872</u>	<u>152,951</u>	<u>427,395</u>
TOTAL DEDUCTIONS	<u>269,872</u>	<u>152,951</u>	<u>427,395</u>
NET CHANGE	2,534,573	(526,142)	1,513,314
NET ASSETS AVAILABLE FOR BENEFITS - Beginning of Year	<u>7,261,155</u>	<u>7,787,297</u>	<u>6,273,983</u>
NET ASSETS AVAILABLE FOR BENEFITS - End of Year	<u>\$ 9,795,728</u>	<u>\$ 7,261,155</u>	<u>\$ 7,787,297</u>

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

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 1: DESCRIPTION OF PLAN

The following description of the Grid Alternatives, Inc. 403(b) Plan (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 which provides eligible employees of GRID Alternatives, Inc. (Company and plan administrator) and any adopting controlled group members the opportunity to accumulate savings that provide benefits in the event of retirement, disability, or death. Eligible employees do not include non-resident aliens. There is no age or service requirement to participate in the Plan and eligible employees will immediately enter the Plan. The Plan is structured to comply with the requirements of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions - Participants may contribute a percentage of their eligible pretax compensation, up to 100% of compensation, as defined by the Plan. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants may also contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Upon enrollment, participants may direct their contributions to the various investment options offered by the Plan. Effective January 1, 2016 non-elective contributions are permitted. Eligible employees must complete 18 months of service to become eligible for non-elective contributions. Individuals who are in a SolarCorps Fellowship funded by AmericCorps and paid interns are excluded from non-elective contributions. For the years ended December 31, 2023, 2022, 2021, and 2020, the Company contributed a non-elective contribution equal to 1% of eligible compensation.

Participant Accounts - Each participant's account is credited with the participant's contribution and an allocation of the Company's contribution, if any, investment results, and charged with an allocation of administrative expenses, as provided by the Plan. Other allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account. All accounts are self-directed by the participants.

Vesting - Participants are immediately vested in their contributions and the Company's contribution portion of their accounts and actual earnings thereon.

Forfeitures - Amounts forfeited from a participant's account shall be used to pay Plan expenses, restore forfeitures, reduce Company contributions, or reallocated as Company contributions.

Payment of Benefits - Distributions from the Plan are permitted upon termination of employment, death, disability, retirement (age 59½), or hardship. In-service withdrawals are also permitted for participants who have reached age 59½. Distributions from the Plan after severance from employment for reasons other than death will be made in the form of a lump-sum payment.

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 1: DESCRIPTION OF PLAN - CONTINUED

Payment of Benefits - Continued

As required under Section 401(a)(9) of the IRC, a participant who is not a five percent or more owner of the Company must begin receiving required minimum distributions from the Plan by April 1 of the calendar year following the later of (i) the calendar year following the year in which the participant reaches age 72 or 73 if the participant is not 72 prior to January 1, 2023, or (ii) the calendar year in which the participant retires.

Hardship Withdrawals - Participants may withdraw their account balance in the form of a hardship withdrawal to satisfy an immediate and heavy financial need as defined by the Plan. The participant must first exhaust all other assets reasonably available prior to obtaining a hardship withdrawal. The hardship distribution cannot be in excess of the need.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting - The financial statements of the Plan are prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates - The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets, liabilities, and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition - Investments are reported at fair value. Fair value is the price that would be received for the sale of an asset or paid for the transfer of a liability in an orderly transaction between market participants at the measurement date. See Note 3 for discussion of fair value measurements.

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

Payment of Benefits - Benefit payments to participants, or their beneficiaries, are recorded when paid.

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES - CONTINUED

Administrative Expenses - Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees associated with participant-initiated transactions are charged directly to participants' accounts and are included in administrative expenses. Some administrative expenses are paid from the annual operating expenses of the Plan's designated investment alternatives.

Subsequent Events - The Company's policy is to evaluate events and transactions subsequent to its year end for potential recognition in the financial statements or disclosure in the notes to the financial statements. The Company has evaluated events and transactions through the date of the independent auditor's report, which is the date the financial statements were available to be issued.

NOTE 3: FAIR VALUE MEASUREMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under Financial Accounting Standards Board Accounting Standards Codification (FASB ASC) 820, *Fair Value Measurements*, 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; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 3: FAIR VALUE MEASUREMENTS - 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.

Following is a description of the valuation methodology used for assets measured at fair value. There has been no change in the methodology used as of December 31, 2023, 2022, 2021, and 2020.

Registered Investment Companies (Mutual Funds) - Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission. These funds are required to publish their net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded and are classified as Level 1 within the fair value hierarchy.

The preceding method described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation method is 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 the fair value hierarchy, the Plan's investments at fair value as of December 31:

	2023			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	\$ 9,743,874	\$ -	\$ -	\$ 9,743,874
Total Investments, at Fair Value	<u>\$ 9,743,874</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 9,743,874</u>
	2022			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	\$ 7,261,155	\$ -	\$ -	\$ 7,261,155
Total Investments, at Fair Value	<u>\$ 7,261,155</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 7,261,155</u>

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 3: FAIR VALUE MEASUREMENTS - CONTINUED

Registered Investment Companies (Mutual Funds) - Continued

	2021			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	\$ 7,787,297	\$ -	\$ -	\$ 7,787,297
Total Investments, at Fair Value	<u>\$ 7,787,297</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 7,787,297</u>
	2020			
	Level 1	Level 2	Level 3	Total
Registered Investment Companies	\$ 6,273,983	\$ -	\$ -	\$ 6,273,983
Total Investments, at Fair Value	<u>\$ 6,273,983</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 6,273,983</u>

NOTE 4: INFORMATION CERTIFIED BY ASCENSUS TRUST COMPANY AND NEWPORT TRUST COMPANY, LLC

As of December 31, 2023, the Plan's investments were held by Ascensus Trust Company and as of December 31, 2022, 2021, and 2020, the Plan's investments were held by Newport Trust Company, LLC. The plan administrator elected the method of annual reporting compliance permitted by Department of Labor (DOL) Regulation Section 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Ascensus, LLC, as an authorized representative of Ascensus Trust Company and Newport Trust Company, LLC, as of and for the year ended December 31, 2023, and Newport Trust Company, LLC, as of December 31, 2022, 2021, and 2020, and for the years ended, 2022 and 2021, have certified the following data included in the accompanying financial statements and supplemental schedules as complete and accurate.

	2023	2022	2021	2020
Investments, at Fair Value				
Registered Investment Companies	<u>\$ 9,743,874</u>	<u>\$ 7,261,155</u>	<u>\$ 7,787,297</u>	<u>\$ 6,273,983</u>
Total Investments, at Fair Value	<u>9,743,874</u>	<u>7,261,155</u>	<u>7,787,297</u>	<u>6,273,983</u>
Total Investments	<u>\$ 9,743,874</u>	<u>\$ 7,261,155</u>	<u>\$ 7,787,297</u>	<u>\$ 6,273,983</u>

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 4: INFORMATION CERTIFIED BY ASCENSUS TRUST COMPANY AND NEWPORT TRUST COMPANY, LLC - CONTINUED

	<u>2023</u>	<u>2022</u>	<u>2021</u>
Investment Income (Loss)			
Net Appreciation (Depreciation) in Registered Investment Companies	\$ 1,440,336	\$ (1,589,786)	\$ 944,229
Dividends	<u>140,034</u>	<u>199,945</u>	<u>192,771</u>
Net Investment Income (Loss)	<u><u>\$ 1,580,370</u></u>	<u><u>\$ (1,389,841)</u></u>	<u><u>\$ 1,137,000</u></u>

NOTE 5: RELATED-PARTY TRANSACTIONS AND PARTY-IN-INTEREST TRANSACTIONS

The Company has not considered normal plan operations such as participant and employer contributions or benefits paid to participants as party-in-interest transactions that require separate disclosure. Certain plan investments are shares and units of registered investment companies (mutual funds). These transactions qualify as party-in-interest transactions that are exempt from the prohibited transaction rules.

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 contribution at any time and to terminate the Plan subject to the provisions of ERISA. In the event of plan termination, participants would become 100 percent vested in their accounts. Any unallocated assets would be allocated to participant accounts and distributed in such a manner as the Company may determine.

NOTE 7: TAX STATUS

The Plan did not comply with the legislative and regulatory requirements associated with IRC Section 403(b) and the regulations thereunder with respect to the written plan requirement. The Plan has adopted a volume submitter 403(b) plan. The Plan's ERISA counsel submitted a voluntary correction program application and the Plan has obtained a closing letter for the identified qualification errors and the completed corrections. Plan management believes the Plan is qualified and that the related trust is tax exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the DOL or IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan's federal Form 5500 is subject to examination by the IRS and DOL, generally for the three years after it was filed.

GRID ALTERNATIVES, INC. 403(b) PLAN
NOTES TO FINANCIAL STATEMENTS - CONTINUED
DECEMBER 31, 2023, 2022, 2021, AND 2020

NOTE 8: RISKS AND UNCERTAINTIES

Investment securities are exposed to various risks such as interest rate, market, and credit risks. Because of the level of risk associated with certain investments, it is at least reasonably possible that changes in their values will occur in the near term and that such changes could materially affect participants' account balances, and the amounts reported in the financial statements.

NOTE 9: COMMITMENTS AND CONTINGENCIES

In the normal course of business, there may be various commitments and contingencies outstanding, which are not reflected in these financial statements. In the opinion of the plan administrator, the outcome of such events, if any, would not have a material effect on the Plan's financial position or operations.

NOTE 10: CARES ACT

On March 27, 2020, the president signed the Coronavirus Aid, Relief, and Economic Security (CARES) Act into law. Provisions of the CARES Act to allow qualified individuals, as defined in the Plan, to withdraw Coronavirus-related distributions and request Coronavirus-related loans, subject to the terms of the Plan. Additionally, the CARES Act suspended required minimum distributions (RMD's) for 2020.

NOTE 11: SUBSEQUENT EVENTS

Roth elective deferrals are permitted effective February 1, 2024.

ERISA-REQUIRED SUPPLEMENTAL SCHEDULES

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2023

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard 500 Index - Admiral	Mutual Funds	\$ -	\$ 1,708,899
*	Vanguard Balanced Index - Admiral	Mutual Funds	-	11,205
*	Vanguard Cash Reserves Federal Money Market	Mutual Funds	-	403,747
*	Vanguard Core Bond - Admiral	Mutual Funds	-	1,745
*	Vanguard Developed Markets Index - Admiral	Mutual Funds	-	291,867
*	Vanguard Diversified Equity	Mutual Funds	-	25,448
*	Vanguard Dividend Appreciation Index	Mutual Funds	-	605
*	Vanguard Dividend Growth	Mutual Funds	-	141,363
*	Vanguard Emerging Markets Select Stock	Mutual Funds	-	11,236
*	Vanguard Emerging Markets Stock Index	Mutual Funds	-	74,054
*	Vanguard Energy - Admiral	Mutual Funds	-	9,800
*	Vanguard Equity Income - Admiral	Mutual Funds	-	114,070
*	Vanguard Explorer - Admiral	Mutual Funds	-	31,026
*	Vanguard Explorer Value	Mutual Funds	-	472
*	Vanguard FTSE All-World Ex-US Index	Mutual Funds	-	36,544
*	Vanguard FTSE Social Index - Admiral	Mutual Funds	-	887,299
*	Vanguard Global Capital Cycles - Investor	Mutual Funds	-	218
*	Vanguard Global Equity	Mutual Funds	-	70,138
*	Vanguard Growth And Income - Admiral	Mutual Funds	-	10,972
*	Vanguard Growth Index - Admiral	Mutual Funds	-	278,308
*	Vanguard Health Care - Admiral	Mutual Funds	-	111
*	Vanguard High Dividend Yield Index - Admiral	Mutual Funds	-	4,074
*	Vanguard High-Yield Corporate - Admiral	Mutual Funds	-	221
*	Vanguard Inflation-Protected Securities - Admiral	Mutual Funds	-	14,580
*	Vanguard International Growth - Admiral	Mutual Funds	-	51,996
*	Vanguard International Growth - Investor	Mutual Funds	-	333
*	Vanguard International Value	Mutual Funds	-	10,882
*	Vanguard Large-Cap Index - Admiral	Mutual Funds	-	44,718
*	Vanguard Lifestrategy Growth	Mutual Funds	-	1,669
*	Vanguard Lifestrategy Moderate Growth	Mutual Funds	-	319,179
*	Vanguard Long-Term Bond Index - Admiral	Mutual Funds	-	13,128
*	Vanguard Long-Term Investment-Grade	Mutual Funds	-	10,270
*	Vanguard Long-Term Treasury - Admiral	Mutual Funds	-	24,537
*	Vanguard Mid-Cap Growth Index - Admiral	Mutual Funds	-	17,826
*	Vanguard Mid-Cap Index - Admiral	Mutual Funds	-	4,762
*	Vanguard Mid-Cap Value Index - Admiral	Mutual Funds	-	84,622

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED
DECEMBER 31, 2023

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard Real Estate Index - Admiral	Mutual Funds	\$ -	\$ 151,481
*	Vanguard Short-Term Investment-Grade	Mutual Funds	-	1,182
*	Vanguard Small-Cap Growth Index - Admiral	Mutual Funds	-	43,979
*	Vanguard Small-Cap Index - Admiral	Mutual Funds	-	133,629
*	Vanguard Small-Cap Value Index - Admiral	Mutual Funds	-	107,207
*	Vanguard Star	Mutual Funds	-	5,430
*	Vanguard Strategic Equity	Mutual Funds	-	1,534
*	Vanguard Strategic Small-Cap Equity	Mutual Funds	-	895
*	Vanguard Target Retirement 2025	Mutual Funds	-	127,408
*	Vanguard Target Retirement 2030	Mutual Funds	-	55,000
*	Vanguard Target Retirement 2035	Mutual Funds	-	425,232
*	Vanguard Target Retirement 2040	Mutual Funds	-	358,921
*	Vanguard Target Retirement 2045	Mutual Funds	-	462,921
*	Vanguard Target Retirement 2050	Mutual Funds	-	741,473
*	Vanguard Target Retirement 2055	Mutual Funds	-	744,154
*	Vanguard Target Retirement 2060	Mutual Funds	-	559,451
*	Vanguard Target Retirement 2065	Mutual Funds	-	103,071
*	Vanguard Target Retirement 2070	Mutual Funds	-	361
*	Vanguard Target Retirement Income	Mutual Funds	-	55,315
*	Vanguard Total Bond Market Index - Admiral	Mutual Funds	-	122,199
*	Vanguard Total International Bond Index	Mutual Funds	-	4,369
*	Vanguard Total International Stock Index	Mutual Funds	-	88,769
*	Vanguard Total Stock Market Index - Admiral	Mutual Funds	-	312,794
*	Vanguard Total World Stock Index - Admiral	Mutual Funds	-	12,134
*	Vanguard U.S. Growth - Admiral	Mutual Funds	-	146,415
*	Vanguard U.S. Growth - Investor	Mutual Funds	-	93
*	Vanguard Value Index - Admiral	Mutual Funds	-	168,929
*	Vanguard Wellesley Income - Admiral	Mutual Funds	-	10,886
*	Vanguard Wellington - Admiral	Mutual Funds	-	86,718
Total Investments			\$ -	\$ 9,743,874

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2022

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard 500 Index - Admiral	Mutual Funds	\$ -	\$ 1,284,817
*	Vanguard Balanced Index - Admiral	Mutual Funds	-	8,437
*	Vanguard Cash Reserves Federal Money Market	Mutual Funds	-	369,254
*	Vanguard Core Bond - Admiral	Mutual Funds	-	1,650
*	Vanguard Developed Markets Index - Admiral	Mutual Funds	-	234,883
*	Vanguard Diversified Equity	Mutual Funds	-	18,569
*	Vanguard Dividend Appreciation Index	Mutual Funds	-	431
*	Vanguard Dividend Growth	Mutual Funds	-	117,507
*	Vanguard Emerging Markets Select Stock	Mutual Funds	-	10,027
*	Vanguard Emerging Markets Stock Index	Mutual Funds	-	67,587
*	Vanguard Energy - Admiral	Mutual Funds	-	9,048
*	Vanguard Equity Income - Admiral	Mutual Funds	-	105,399
*	Vanguard Explorer - Admiral	Mutual Funds	-	25,916
*	Vanguard Explorer Value	Mutual Funds	-	268
*	Vanguard FTSE All-World Ex-US Index	Mutual Funds	-	66,946
*	Vanguard FTSE Social Index - Admiral	Mutual Funds	-	601,969
*	Vanguard Global Capital Cycles - Investor	Mutual Funds	-	88
*	Vanguard Global Equity	Mutual Funds	-	56,790
*	Vanguard Growth And Income - Admiral	Mutual Funds	-	8,817
*	Vanguard Growth Index - Admiral	Mutual Funds	-	179,212
*	Vanguard Health Care - Admiral	Mutual Funds	-	41
*	Vanguard High Dividend Yield Index - Admiral	Mutual Funds	-	3,581
*	Vanguard High-Yield Corporate - Admiral	Mutual Funds	-	85
*	Vanguard Inflation-Protected Securities - Admiral	Mutual Funds	-	15,401
*	Vanguard Intermediate-Term Investment-Grade	Mutual Funds	-	36,745
*	Vanguard International Growth - Admiral	Mutual Funds	-	41,647
*	Vanguard International Growth - Investor	Mutual Funds	-	292
*	Vanguard International Value	Mutual Funds	-	6,473
*	Vanguard Large-Cap Index - Admiral	Mutual Funds	-	22,895
*	Vanguard Lifestrategy Growth	Mutual Funds	-	2,175
*	Vanguard Lifestrategy Moderate Growth Fund	Mutual Funds	-	264,621
*	Vanguard Long-Term Bond Index - Admiral	Mutual Funds	-	12,222
*	Vanguard Long-Term Investment-Grade	Mutual Funds	-	9,416
*	Vanguard Long-Term Treasury - Admiral	Mutual Funds	-	22,145
*	Vanguard Mid-Cap Growth Index - Admiral	Mutual Funds	-	13,473
*	Vanguard Mid-Cap Index - Admiral	Mutual Funds	-	4,115

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED
DECEMBER 31, 2022

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard Mid-Cap Value Index - Admiral	Mutual Funds	\$ -	\$ 70,534
*	Vanguard Real Estate Index - Admiral	Mutual Funds	-	117,849
*	Vanguard Short-Term Investment-Grade	Mutual Funds	-	145
*	Vanguard Small-Cap Growth Index - Admiral	Mutual Funds	-	35,630
*	Vanguard Small-Cap Index - Admiral	Mutual Funds	-	112,340
*	Vanguard Small-Cap Value Index - Admiral	Mutual Funds	-	85,793
*	Vanguard Star	Mutual Funds	-	2,332
*	Vanguard Strategic Equity Fund	Mutual Funds	-	1,196
*	Vanguard Strategic Small-Cap Equity Fund	Mutual Funds	-	151
*	Vanguard Target Retirement 2025	Mutual Funds	-	61,430
*	Vanguard Target Retirement 2030	Mutual Funds	-	29,154
*	Vanguard Target Retirement 2035	Mutual Funds	-	333,964
*	Vanguard Target Retirement 2040	Mutual Funds	-	279,818
*	Vanguard Target Retirement 2045	Mutual Funds	-	356,326
*	Vanguard Target Retirement 2050	Mutual Funds	-	535,310
*	Vanguard Target Retirement 2055	Mutual Funds	-	486,538
*	Vanguard Target Retirement 2060	Mutual Funds	-	293,281
*	Vanguard Target Retirement 2065	Mutual Funds	-	41,872
*	Vanguard Target Retirement Income	Mutual Funds	-	46,661
*	Vanguard Total Bond Market Index - Admiral	Mutual Funds	-	112,132
*	Vanguard Total International Bond Index	Mutual Funds	-	1,830
*	Vanguard Total International Stock Index	Mutual Funds	-	67,656
*	Vanguard Total Stock Market Index - Admiral	Mutual Funds	-	207,839
*	Vanguard Total World Stock Index - Admiral	Mutual Funds	-	5,836
*	Vanguard U.S. Growth - Admiral	Mutual Funds	-	98,211
*	Vanguard U.S. Growth - Investor	Mutual Funds	-	64
*	Vanguard Value Index - Admiral	Mutual Funds	-	154,681
*	Vanguard Wellesley Income - Admiral	Mutual Funds	-	9,256
*	Vanguard Wellington - Admiral	Mutual Funds	-	90,384
			\$ -	\$ 7,261,155

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2021

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard 500 Index - Admiral	Mutual Funds	\$ -	\$ 1,476,146
*	Vanguard Balanced Index - Admiral	Mutual Funds	-	18,124
*	Vanguard Cash Reserves Federal Money Market	Mutual Funds	-	367,411
*	Vanguard Core Bond - Admiral	Mutual Funds	-	1,901
*	Vanguard Developed Markets Index - Admiral	Mutual Funds	-	260,778
*	Vanguard Diversified Equity	Mutual Funds	-	22,195
*	Vanguard Dividend Appreciation Index	Mutual Funds	-	391
*	Vanguard Dividend Growth	Mutual Funds	-	108,446
*	Vanguard Emerging Markets Select Stock	Mutual Funds	-	12,074
*	Vanguard Emerging Markets Stock Index	Mutual Funds	-	88,171
*	Vanguard Energy - Admiral	Mutual Funds	-	6,404
*	Vanguard Equity Income - Admiral	Mutual Funds	-	104,938
*	Vanguard Explorer - Admiral	Mutual Funds	-	33,783
*	Vanguard Explorer Value	Mutual Funds	-	199
*	Vanguard FTSE All-World Ex-US Index	Mutual Funds	-	73,326
*	Vanguard FTSE Social Index - Admiral	Mutual Funds	-	686,540
*	Vanguard Global Equity	Mutual Funds	-	73,280
*	Vanguard Growth And Income - Admiral	Mutual Funds	-	10,566
*	Vanguard Growth Index - Admiral	Mutual Funds	-	245,255
*	Vanguard High Dividend Yield Index - Admiral	Mutual Funds	-	3,566
*	Vanguard High-Yield Corporate - Admiral	Mutual Funds	-	5
*	Vanguard Inflation-Protected Securities - Admiral	Mutual Funds	-	18,439
*	Vanguard Target Retirement 2015	Mutual Funds	-	680
*	Vanguard Target Retirement 2020	Mutual Funds	-	19,988
*	Vanguard Target Retirement 2025	Mutual Funds	-	48,467
*	Vanguard Target Retirement 2030	Mutual Funds	-	22,769
*	Vanguard Target Retirement 2035	Mutual Funds	-	340,046
*	Vanguard Target Retirement 2040	Mutual Funds	-	294,845
*	Vanguard Target Retirement 2045	Mutual Funds	-	376,883
*	Vanguard Target Retirement 2050	Mutual Funds	-	557,805
*	Vanguard Target Retirement 2055	Mutual Funds	-	450,787
*	Vanguard Target Retirement 2060	Mutual Funds	-	203,566
*	Vanguard Target Retirement 2065	Mutual Funds	-	15,345
*	Vanguard Target Retirement Income	Mutual Funds	-	38,637
*	Vanguard Intermediate-Term Investment-Grade	Mutual Funds	-	39,449
*	Vanguard Intermediate-Term Treasury	Mutual Funds	-	1,333

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED
DECEMBER 31, 2021

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard International Growth - Admiral	Mutual Funds	\$ -	\$ 54,578
*	Vanguard International Growth - Investor	Mutual Funds	-	425
*	Vanguard International Value	Mutual Funds	-	3,761
*	Vanguard Large-Cap Index - Admiral	Mutual Funds	-	13,840
*	Vanguard Lifestrategy Growth	Mutual Funds	-	892
*	Vanguard Lifestrategy Moderate Growth	Mutual Funds	-	300,007
*	Vanguard Long-Term Bond Index - Admiral	Mutual Funds	-	16,815
*	Vanguard Long-Term Investment-Grade	Mutual Funds	-	12,684
*	Vanguard Long-Term Treasury - Admiral	Mutual Funds	-	29,949
*	Vanguard Mid-Cap Growth Index - Admiral	Mutual Funds	-	8,451
*	Vanguard Mid-Cap Index - Admiral	Mutual Funds	-	5,072
*	Vanguard Mid-Cap Value Index - Admiral	Mutual Funds	-	68,615
*	Vanguard Real Estate Index - Admiral	Mutual Funds	-	137,343
*	Vanguard Short-Term Investment-Grade	Mutual Funds	-	6,146
*	Vanguard Small-Cap Growth Index - Admiral	Mutual Funds	-	48,887
*	Vanguard Small-Cap Index - Admiral	Mutual Funds	-	128,566
*	Vanguard Small-Cap Value Index - Admiral	Mutual Funds	-	86,918
*	Vanguard Star	Mutual Funds	-	653
*	Vanguard Strategic Equity	Mutual Funds	-	1,235
*	Vanguard Total Bond Market Index - Admiral	Mutual Funds	-	133,186
*	Vanguard Total International Bond Index	Mutual Funds	-	1,369
*	Vanguard Total International Stock Index	Mutual Funds	-	70,134
*	Vanguard Total Stock Market Index - Admiral	Mutual Funds	-	207,337
*	Vanguard Total World Stock Index - Admiral	Mutual Funds	-	2,567
*	Vanguard U.S. Growth - Admiral	Mutual Funds	-	158,039
*	Vanguard U.S. Growth - Investor	Mutual Funds	-	106
*	Vanguard Value Index - Admiral	Mutual Funds	-	156,338
*	Vanguard Wellesley Income - Admiral	Mutual Funds	-	8,933
*	Vanguard Wellington - Admiral	Mutual Funds	-	101,913
Total Investments			\$ -	\$ 7,787,297

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

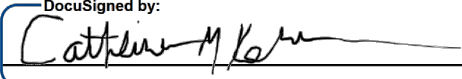
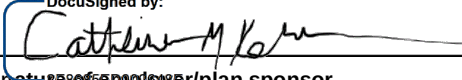
Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2023 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2023 or fiscal plan year beginning 01/01/2023 and ending 12/31/2023	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☐ Form 5558 ☐ automatic extension ☒ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan GRID Alternatives, Inc. 403(b) Plan
1b	Three-digit plan number (PN) ▶ 001
1c	Effective date of plan 11/04/2006
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) GRID Alternatives, Inc. 1171 Ocean Avenue Suite 200 Oakland CA 94608
2b	Employer Identification Number (EIN) 26-0043353
2c	Plan Sponsor's telephone number 510-731-1310
2d	Business code (see instructions) 541700

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	DocuSigned by: 	1/22/2025	Catherine M. Kerr
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	DocuSigned by: 	1/22/2025	Catherine M. Kerr
	Signature of employer or 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

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
DECEMBER 31, 2023

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard 500 Index - Admiral	Mutual Funds	\$ -	\$ 1,708,899
*	Vanguard Balanced Index - Admiral	Mutual Funds	-	11,205
*	Vanguard Cash Reserves Federal Money Market	Mutual Funds	-	403,747
*	Vanguard Core Bond - Admiral	Mutual Funds	-	1,745
*	Vanguard Developed Markets Index - Admiral	Mutual Funds	-	291,867
*	Vanguard Diversified Equity	Mutual Funds	-	25,448
*	Vanguard Dividend Appreciation Index	Mutual Funds	-	605
*	Vanguard Dividend Growth	Mutual Funds	-	141,363
*	Vanguard Emerging Markets Select Stock	Mutual Funds	-	11,236
*	Vanguard Emerging Markets Stock Index	Mutual Funds	-	74,054
*	Vanguard Energy - Admiral	Mutual Funds	-	9,800
*	Vanguard Equity Income - Admiral	Mutual Funds	-	114,070
*	Vanguard Explorer - Admiral	Mutual Funds	-	31,026
*	Vanguard Explorer Value	Mutual Funds	-	472
*	Vanguard FTSE All-World Ex-US Index	Mutual Funds	-	36,544
*	Vanguard FTSE Social Index - Admiral	Mutual Funds	-	887,299
*	Vanguard Global Capital Cycles - Investor	Mutual Funds	-	218
*	Vanguard Global Equity	Mutual Funds	-	70,138
*	Vanguard Growth And Income - Admiral	Mutual Funds	-	10,972
*	Vanguard Growth Index - Admiral	Mutual Funds	-	278,308
*	Vanguard Health Care - Admiral	Mutual Funds	-	111
*	Vanguard High Dividend Yield Index - Admiral	Mutual Funds	-	4,074
*	Vanguard High-Yield Corporate - Admiral	Mutual Funds	-	221
*	Vanguard Inflation-Protected Securities - Admiral	Mutual Funds	-	14,580
*	Vanguard International Growth - Admiral	Mutual Funds	-	51,996
*	Vanguard International Growth - Investor	Mutual Funds	-	333
*	Vanguard International Value	Mutual Funds	-	10,882
*	Vanguard Large-Cap Index - Admiral	Mutual Funds	-	44,718
*	Vanguard Lifestrategy Growth	Mutual Funds	-	1,669
*	Vanguard Lifestrategy Moderate Growth	Mutual Funds	-	319,179
*	Vanguard Long-Term Bond Index - Admiral	Mutual Funds	-	13,128
*	Vanguard Long-Term Investment-Grade	Mutual Funds	-	10,270
*	Vanguard Long-Term Treasury - Admiral	Mutual Funds	-	24,537
*	Vanguard Mid-Cap Growth Index - Admiral	Mutual Funds	-	17,826
*	Vanguard Mid-Cap Index - Admiral	Mutual Funds	-	4,762
*	Vanguard Mid-Cap Value Index - Admiral	Mutual Funds	-	84,622

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.

GRID ALTERNATIVES, INC. 403(b) PLAN
EIN: 23-2070570, PLAN #001
ATTACHMENT TO FORM 5500, SCHEDULE H, LINE 4(i)
SCHEDULE OF ASSETS (HELD AT END OF YEAR) - CONTINUED
DECEMBER 31, 2023

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment	(d) Cost	(e) Current Value
*	Vanguard Real Estate Index - Admiral	Mutual Funds	\$ -	\$ 151,481
*	Vanguard Short-Term Investment-Grade	Mutual Funds	-	1,182
*	Vanguard Small-Cap Growth Index - Admiral	Mutual Funds	-	43,979
*	Vanguard Small-Cap Index - Admiral	Mutual Funds	-	133,629
*	Vanguard Small-Cap Value Index - Admiral	Mutual Funds	-	107,207
*	Vanguard Star	Mutual Funds	-	5,430
*	Vanguard Strategic Equity	Mutual Funds	-	1,534
*	Vanguard Strategic Small-Cap Equity	Mutual Funds	-	895
*	Vanguard Target Retirement 2025	Mutual Funds	-	127,408
*	Vanguard Target Retirement 2030	Mutual Funds	-	55,000
*	Vanguard Target Retirement 2035	Mutual Funds	-	425,232
*	Vanguard Target Retirement 2040	Mutual Funds	-	358,921
*	Vanguard Target Retirement 2045	Mutual Funds	-	462,921
*	Vanguard Target Retirement 2050	Mutual Funds	-	741,473
*	Vanguard Target Retirement 2055	Mutual Funds	-	744,154
*	Vanguard Target Retirement 2060	Mutual Funds	-	559,451
*	Vanguard Target Retirement 2065	Mutual Funds	-	103,071
*	Vanguard Target Retirement 2070	Mutual Funds	-	361
*	Vanguard Target Retirement Income	Mutual Funds	-	55,315
*	Vanguard Total Bond Market Index - Admiral	Mutual Funds	-	122,199
*	Vanguard Total International Bond Index	Mutual Funds	-	4,369
*	Vanguard Total International Stock Index	Mutual Funds	-	88,769
*	Vanguard Total Stock Market Index - Admiral	Mutual Funds	-	312,794
*	Vanguard Total World Stock Index - Admiral	Mutual Funds	-	12,134
*	Vanguard U.S. Growth - Admiral	Mutual Funds	-	146,415
*	Vanguard U.S. Growth - Investor	Mutual Funds	-	93
*	Vanguard Value Index - Admiral	Mutual Funds	-	168,929
*	Vanguard Wellesley Income - Admiral	Mutual Funds	-	10,886
*	Vanguard Wellington - Admiral	Mutual Funds	-	86,718
Total Investments			\$ -	\$ 9,743,874

* Indicates a party in interest to the Plan.

(d) Note: Historical cost information is not required for participant-directed investments.