

Form 5500-SF

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Short Form Annual Return/Report of Small Employee Benefit Plan

This form is required to be filed 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-SF.**

OMB Nos. 1210-0110
1210-0089

2023

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A** This return/report is for: a single-employer plan a multiple-employer plan (not multiemployer) (Pension Plan filers checking this box must attach Schedule MEP. Other plans must attach a list of participating employer information in accordance with the form instructions.)
- 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** Check box if filing under: Form 5558 automatic extension DFVC program
 special extension (enter description)
- D** If the plan is a collectively-bargained plan, check here ▶
- 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 GCP, INC. 401(K) PLAN | 1b Three-digit plan number (PN) ▶ | 001 |
| | 1c Effective date of plan | 01/01/2020 |
| 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) GLOBAL COMPUTER PRODUCTS INC GLOBAL COMPUTER PRODUCTS INC KALYAN PATHURI 6206 COLCHESTER RD FAIRFAX, VA 22030-5906 | 2b Employer Identification Number (EIN) | 54-1838208 |
| | 2c Sponsor's telephone number | 703-622-7190 |
| | 2d Business code (see instructions) | 339110 |
| | 3a Plan administrator's name and address <input checked="" type="checkbox"/> 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 | |
| 5a Total number of participants at the beginning of the plan year | 5a | 8 |
| b Total number of participants at the end of the plan year..... | 5b | 5 |
| c(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) | 5c(1) | 8 |
| c(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | 5c(2) | 5 |
| d(1) Total number of active participants at the beginning of the plan year..... | 5d(1) | 8 |
| d(2) Total number of active participants at the end of the plan year..... | 5d(2) | 5 |
| e Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... | 5e | 8 |

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, if applicable, a Schedule SB or Schedule MB completed and signed by an enrolled actuary, 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. | 04/01/2025 | KALYAN PATHURI |
| | Signature of plan administrator | Date | Enter name of individual signing as plan administrator |
| SIGN HERE | Filed with authorized/valid electronic signature. | 04/01/2025 | KALYAN PATHURI |
| | Signature of employer/plan sponsor | Date | Enter name of individual signing as employer or plan sponsor |

- 6a** Were all of the plan's assets during the plan year invested in eligible assets? (See instructions.)..... Yes No
- b** Are you claiming a waiver of the annual examination and report of an independent qualified public accountant (IQPA) under 29 CFR 2520.104-46? (See instructions on waiver eligibility and conditions.)..... Yes No
- If you answered "No" to either line 6a or line 6b, the plan cannot use Form 5500-SF and must instead use Form 5500.**
- c** If the plan is a defined benefit plan, is it covered under the PBGC insurance program (see ERISA section 4021)? Yes No Not determined
- If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____ (See instructions.)

| Part III Financial Information | | | |
|--|--------------|------------------------------|------------------------|
| 7 Plan Assets and Liabilities | | (a) Beginning of Year | (b) End of Year |
| a Total plan assets | 7a | 421358 | 112357 |
| b Total plan liabilities | 7b | | |
| c Net plan assets (subtract line 7b from line 7a) | 7c | 421358 | 112357 |
| 8 Income, Expenses, and Transfers for this Plan Year | | (a) Amount | (b) Total |
| a Contributions received or receivable from: | | | |
| (1) Employers | 8a(1) | 0 | |
| (2) Participants | 8a(2) | 0 | |
| (3) Others (including rollovers) | 8a(3) | 0 | |
| b Other income (loss) | 8b | 33392 | |
| c Total income (add lines 8a(1), 8a(2), 8a(3), and 8b) | 8c | | 33392 |
| d Benefits paid (including direct rollovers and insurance premiums to provide benefits) | 8d | | |
| e Certain deemed and/or corrective distributions (see instructions) . | 8e | | |
| f Administrative service providers (salaries, fees, commissions) | 8f | 1849 | |
| g Other expenses | 8g | | |
| h Total expenses (add lines 8d, 8e, 8f, and 8g) | 8h | | 1849 |
| i Net income (loss) (subtract line 8h from line 8c) | 8i | | 31543 |
| j Transfers to (from) the plan (see instructions) | 8j | -340543 | |

| Part IV Plan Characteristics | |
|-------------------------------------|---|
| 9a | If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristic Codes in the instructions: 2E 2F 2G 2J 2K 2T 3D |
| b | If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic Codes in the instructions: |

| Part V Compliance Questions | | | | |
|---|------------|------------|-----------|---------------|
| 10 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) | 10a | | X | |
| b Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 10a.) | 10b | | X | |
| c Was the plan covered by a fidelity bond? | 10c | | X | |
| d Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | 10d | | X | |
| e Were any fees or commissions paid to any brokers, agents, or other persons by an insurance carrier, insurance service, or other organization that provides some or all of the benefits under the plan? (See instructions.) | 10e | | X | |
| f Has the plan failed to provide any benefit when due under the plan? | 10f | | X | |
| g Did the plan have any participant loans? (If "Yes," enter amount as of year-end.) | 10g | | X | |
| h If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | 10h | | X | |
| i If 10h was answered "Yes," check the box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3 | 10i | | X | |

Part VI Pension Funding Compliance

11 Is this a defined benefit plan subject to minimum funding requirements? (If "Yes," see instructions and complete Schedule SB (Form 5500) and lines 11a and b below.) If this is a defined contribution pension plan, leave line 11 blank and complete line 12 below. Yes No

a Enter the unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 **11a**

b PBGC missed contribution reporting requirements. If the plan is covered by PBGC and the amount reported on line 11a is greater than \$0, 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 _____

12 Is this a defined contribution plan subject to the minimum funding requirements of section 412 of the Code or section 302 of ERISA? Yes No
 (If "Yes," complete line 12a or lines 12b, 12c, 12d, and 12e below, as applicable.) If this is a defined benefit pension plan, leave line 12 blank and complete line 11 above.

a 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 letter ruling granting the waiver. Month _____ Day _____ Year _____

If you completed line 12a, complete lines 3, 9, and 10 of Schedule MB (Form 5500), and skip to line 13.

b Enter the minimum required contribution for this plan year **12b**

c Enter the amount contributed by the employer to the plan for this plan year **12c**

d Subtract the amount in line 12c from the amount in line 12b. Enter the result (enter a minus sign to the left of a negative amount) **12d**

e Will the minimum funding amount reported on line 12d be met by the funding deadline? Yes No N/A

Part VII Plan Terminations and Transfers of Assets

13a Has a resolution to terminate the plan been adopted in any plan year? Yes No

a If "Yes," enter the amount of any plan assets that reverted to the employer this year..... **13a**

b Were all the plan assets distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? Yes No

c 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.)

| 13c(1) Name of plan(s): | 13c(2) EIN(s) | 13c(3) PN(s) |
|--------------------------------|----------------------|---------------------|
| | | |

Part VIII IRS Compliance Questions

14a 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

14b 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

15 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 _____.

1301 S Harrison Street
PO Box 2248
Fort Wayne, IN 468012248

SCHEDULE D INFORMATION REPORT

GCP, INC.
4506 DALY DR SUITE 100
CHANTILLY, VA 20151-3723

Processed for Price Date: 01/01/2023 - 12/31/2023

Data as of: 03/25/2025

We are happy to provide you with information needed to complete the Schedule D Information attachment to Form 5500. This information is based on records maintained by Lincoln Financial Group and is provided on a Cash basis. Any adjustments made to the account after the plan year end into a prior year may affect activity shown on this report.

| | | | |
|---------------------|-----------|-------------|------------|
| Name of Plan | GCP, INC. | Plan Number | 001 |
| Plan Sponsor's Name | GCP, INC | EIN | 54-1838208 |
| Contract Number | 19334 | Plan ID | FP12 |

Information on Interests in MTIAs, CCTs, PSAs and 103-12 IEs

| Name of MTIA, CCT, PSA, or 103-12 IE | Sponsor of Entity | EIN-PN | Entity Code | Dollar Value of Interest |
|--------------------------------------|-------------------------------------|----------------|-------------|--------------------------|
| Lincoln Life Separate Account 4k | Lincoln National Life Insurance Co. | 35-0472300-402 | P | 112,357.70 |
| Total | | | | 112,357.70 |

Affiliates of Lincoln National Corporation include, but are not limited to, The Lincoln National Life Insurance Company and Lincoln Life & Annuity Company of New York.

Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates. Affiliates are separately responsible for their own financial and contractual obligations.

PAD1011-0688

5500 Summary Report

Processed for Price Date From 01/01/2023 To 12/31/2023

Plan: FP12 GP-19334 GCP, INC.

| | SA64 JH VIT Entprs Portfolio | SA84 Fidelity VIP Mid Cap | SA97 LVIP Mac Wealth Builder | SAL2 LVIP TRowePrice 2020 Fund | SAL3 LVIP TRowePrice 2030 Fund |
|--|------------------------------|---------------------------|------------------------------|--------------------------------|--------------------------------|
|--|------------------------------|---------------------------|------------------------------|--------------------------------|--------------------------------|

| | | | | | |
|--------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|--------------------------------------|
| BEGINNING_BALANCE | 38075.50 | 31412.63 | 125191.24 | 81249.88 | 24228.15 |
| TAKEOVERS | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| TRANSFERS | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| LOAN_PRINCIPAL | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| LOAN_INTEREST | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| EARNINGS | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| GAIN_LOSS | 910.90 | 232.73 | 4073.11 | 5669.31 | 1318.81 |
| FINAL_DISTRIBUTIONS | -38798.45 | -31494.98 | -128781.33 | -86598.38 | -25380.47 |
| FORFEITURES | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| HARDSHIP_WITHDRAWALS | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| INVESTMENT_ADVICE_FEES | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| FEES_PAID | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| LOANS_ISSUED | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| EXCHANGES_IN | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| EXCHANGES_OUT | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| ASSET_MANAGEMENT_FEES | -187.95 | -150.38 | -483.02 | -320.81 | -88.83 |
| CORRECTIVE_DISTRIBUTIONS | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |
| ENDING_BALANCE | 0.00 | 0.00 | 0.00 | 0.00 | 77.66 |
| Sch D PSA PN & Name | 402 Lincoln Life Separate Account 4k | 402 Lincoln Life Separate Account 4k | 402 Lincoln Life Separate Account 4k | 402 Lincoln Life Separate Account 4k | 402 Lincoln Life Separate Account 4k |

5500 Summary Report**Processed for Price Date From 01/01/2023 To 12/31/2023****Plan: FP12 GP-19334 GCP, INC.**

| | <i>SAL4 LVIP TR</i> | <i>Price 2040 FundS</i> | <i>ALL LVIP TR</i> | <i>Price 2050 FundSA1A AmerFunds AMCAP</i> | <i>TOTALS</i> |
|--------------------------|--------------------------------------|-------------------------|--------------------------------------|--|---------------|
| BEGINNING_BALANCE | 115488.42 | | 3186.42 | 2526.34 | 421358.58 |
| TAKEOVERS | 0.00 | | 0.00 | 0.00 | 0.00 |
| TRANSFERS | 0.00 | | 0.00 | 0.00 | 0.00 |
| LOAN_PRINCIPAL | 0.00 | | 0.00 | 0.00 | 0.00 |
| LOAN_INTEREST | 0.00 | | 0.00 | 0.00 | 0.00 |
| EARNINGS | 0.00 | | 0.00 | 0.00 | 0.00 |
| GAIN_LOSS | 19776.26 | | 637.42 | 774.24 | 33392.78 |
| FINAL_DISTRIBUTIONS | -29490.07 | | 0.00 | 0.00 | -340543.68 |
| FORFEITURES | 0.00 | | 0.00 | 0.00 | 0.00 |
| HARDSHIP_WITHDRAWALS | 0.00 | | 0.00 | 0.00 | 0.00 |
| INVESTMENT_ADVICE_FEES | 0.00 | | 0.00 | 0.00 | 0.00 |
| FEES_PAID | 0.00 | | 0.00 | 0.00 | 0.00 |
| LOANS_ISSUED | 0.00 | | 0.00 | 0.00 | 0.00 |
| EXCHANGES_IN | 0.00 | | 0.00 | 0.00 | 0.00 |
| EXCHANGES_OUT | 0.00 | | 0.00 | 0.00 | 0.00 |
| ASSET_MANAGEMENT_FEES | -587.37 | | -17.27 | -14.35 | -1849.98 |
| CORRECTIVE_DISTRIBUTIONS | 0.00 | | 0.00 | 0.00 | 0.00 |
| ENDING_BALANCE | 105187.24 | | 3806.57 | 3286.23 | 112357.70 |
| Sch D PSA PN & Name | 402 Lincoln Life Separate Account 4k | | 402 Lincoln Life Separate Account 4k | 402 Lincoln Life Separate Account 4k | |

Participant Distribution and Forfeiture

Distribution Detail Report for Trades Priced From 01/01/2023 - 12/31/2023

GCP, INC.

Plan ID: FP12
Current Site Code: 0001

Contract Number: 0000019334
Current Site Name: GCP, INC.

Participant: MILNER, TERESA MARIE

Social Security Number: 029-60-1160

Account Number: 77414429829

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 11/09/2023 | \$70,293.43 | \$0.00 | \$0.00 | \$70,293.43 | |

Participant: UHTER, TAMMY

Social Security Number: 211-64-0491

Account Number: 11855143687

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/12/2023 | \$906.95 | \$0.00 | \$0.00 | \$906.95 | |

Participant: ANDERSON, YASMIN

Social Security Number: 218-17-4062

Account Number: 74864441657

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/27/2023 | \$17,960.93 | \$0.00 | \$0.00 | \$17,960.93 | |

Participant: PATHURI, KALYAN

Social Security Number: 228-61-3829

Account Number: 29718378293

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/12/2023 | \$128,781.33 | \$0.00 | \$0.00 | \$128,781.33 | |

Participant: Matthews, David

Social Security Number: 260-47-8921

Account Number: 52369433386

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Termination Lump Sum | 05/04/2023 | \$4,580.19 | \$916.04 | \$354.96 | \$3,309.19 | MD |

Participant: RUTLAND, VALARIE

Social Security Number: 263-95-8796

Account Number: 08506878097

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/29/2023 | \$2,839.35 | \$0.00 | \$0.00 | \$2,839.35 | |

Participant: RAMACHANDRAN, INDIRA

Social Security Number: 386-21-6945

Account Number: 41738267123

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/15/2023 | \$86,598.38 | \$0.00 | \$0.00 | \$86,598.38 | |

Participant: PATHURI, PADMA

Social Security Number: 578-43-1233

Account Number: 02858555970

| <i>Transaction Description</i> | <i>Effective Date</i> | <i>Gross Amount</i> | <i>Fed Withholding</i> | <i>State Withholding</i> | <i>Net Amount</i> | <i>State</i> |
|--------------------------------|-----------------------|---------------------|------------------------|--------------------------|-------------------|--------------|
| Plan Termination | 09/12/2023 | \$28,583.12 | \$0.00 | \$0.00 | \$28,583.12 | |

Participant Distribution and Forfeiture

Distribution Detail Report for Trades Priced From 01/01/2023 - 12/31/2023 - Plan Summary by Transaction Type:

GCP, INC.

Plan ID: FP12

Contract Number: 0000019334

Current Site Code: 0001

Current Site Name: GCP, INC.

| Transaction Description: | Gross Amount: | Fed Withholding: | State Withholding: | Net Amount: |
|--------------------------|---------------|------------------|--------------------|--------------|
| Plan Termination | \$335,963.49 | \$0.00 | \$0.00 | \$335,963.49 |
| Termination Lump Sum | \$4,580.19 | \$916.04 | \$354.96 | \$3,309.19 |

Participant Distribution and Forfeiture

Distribution Detail Report for Trades Priced From 01/01/2023 - 12/31/2023 - Plan Summary:

GCP, INC.

Plan ID: FP12

Contract Number: 0000019334

Current Site Code: 0001

Current Site Name: GCP, INC.

Gross Amount:

Fed Withholding:

State Withholding:

Net Amount:

\$340,543.68

\$916.04

\$354.96

\$339,272.68



March 27, 2025

SCHEDULE A INFORMATION REPORT

GCP, INC.
4506 DALY DR SUITE 100
CHANTILLY , VA 20151-3723

We are happy to provide you with information needed to complete the Schedule A Insurance Information attachment to Form 5500 or 5500-EZ. This information is based on records maintained by Lincoln Financial Group and is provided on a Cash basis. Any adjustments made to the account after the plan year end into a prior year may affect activity shown on this report.

Please review this information carefully. If you find any discrepancies or have any questions, contact your Account Manager at 800 248-0838.

| | |
|---|-------------------------------------|
| Contract or Identification Number: | GP 19334 / Plan ID FP12 |
| Name of Insurance Carrier: | Lincoln National Life Insurance Co. |
| Insurance Carrier EIN: | 35-0472300 |
| NAIC Code: | 65676 |
| Approximate # of participants covered at end of contract year: | 5 |
| Policy or contract year: | 01/01/2023 to 12/31/2023 |
| Total amount of commissions paid: | \$923.45 |
| Total fees paid/amount: | \$52.67 |

Please note that any Marketing Allowance or TPA Recognition payments do not result in additional charges against the assets held in the contract.

| | Commission Paid | Fees Paid | Org Code |
|---|--------------------|----------------|-------------|
| SALES AND BASE COMMISSIONS | | | |
| LPL FNCL CORP C-O LPL 4707 EXECUTIVE DR SAN DIEGO CA 92121 | \$923.45 | \$0.00 | 4 |
| TPA ONGOING ADMIN REIMBURSEMENT PAYMENT | | | |
| THE ROSE FINANCIAL GROUP LLC 6602 E 75TH ST STE 200 INDIANAPOLIS IN 462500000 | \$0.00 | \$52.67 | 5 |
| TOTAL | \$923.45 | \$52.67 | |

Value in the general account(s) at year end: \$0.00

Value in separate account at year end: \$112,357.70

Value in life insurance at year end: \$0.00

Value in outside assets at year end: \$0.00

This contract is considered a contract with Unallocated Funds for purposes of Schedule A reporting.

Type of contract: Other-Group VAR Annuity w/Guar fund

Balance in General Account(s) at end of the previous year* \$0.00

Additions to General Account(s)

| | |
|--|---------------|
| Contributions deposited during the year | \$0.00 |
| Interest credited during the year | \$0.00 |
| Transferred from separate account | \$0.00 |
| Other (May Include - Loan repay/Forf/Takeover/Adjustments) | \$0.00 |
| Total additions | \$0.00 |
| Total of balance and additions | \$0.00 |

Deductions from General Account(s)

| | |
|--|---------------|
| Disbursed to pay benefits or purchase annuity | \$0.00 |
| Administration charge made by carrier | \$0.00 |
| Transferred to separate account | \$0.00 |
| Other (May Include - Loan issues/Forf/Fees/Correctives/Adjustments/Ins Prem) | \$0.00 |
| Total Deductions | \$0.00 |
| Balance at the end of the current year | \$0.00 |

*This amount may include value from the Guaranteed Fund and the Managed Principal Protection Portfolio fund. Lincoln Financial Group is the marketing name for Lincoln National Corporation and its affiliates. Affiliates are separately responsible for their own financial and contractual obligations.

PAD0804-0151 EMBC-0408-100



1301 S Harrison Street
 PO Box 2248
 Fort Wayne , IN 468012248

SCHEDULE C INFORMATION REPORT

GCP, INC.
4506 DALY DR SUITE 100
CHANTILLY, VA, 20151-3723

Processed for Price Date: 01/01/2023 - 12/31/2023 Data As of: 03/25/2025

We are happy to provide you with information needed to complete the Schedule C Information attachment to Form 5500. This information is based on records maintained by Lincoln Financial Group and is provided on a Cash basis. Any adjustments made to the account after the plan year end into a prior year may affect activity shown on this report.

| | | | |
|------------------------------|-------------------------|----------------------------|-------------|
| Name of Plan | GCP, INC. | Plan Number | 001 |
| Plan Sponsor's Name | GCP, INC | EIN | 54-1838208 |
| Contract Number | 19334 | Plan ID | FP12 |
| Current TPA of Record | MISSING TPA INFORMATION | Current TPA Address | ,46802-0000 |

Information on Persons Receiving Only Eligible Indirect Compensation

Persons who provided the disclosures for the service providers who received only eligible indirect compensation:

| | | | |
|-------------|------------------------------|------------|------------|
| Name | Lincoln National Corporation | EIN | 35-1140070 |
|-------------|------------------------------|------------|------------|

Information on Other Service Providers Receiving Direct or Indirect Compensation

Persons 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 should be reported on Schedule C. All fees associated with the plan(s) are shown, regardless of amount. For each Service Provider, address will be displayed only if no EIN is available. If no data is displayed, neither address nor EIN is available.

| Service Provider Name | EIN / Address | Service Code | Relationship | Direct Compensation | Receive Indirect Compensation | Include Eligible Indirect Comp | Total Indirect Compensation | Amount | Did Service Provider Give Formula? |
|------------------------------|---------------|--------------|------------------|---------------------|-------------------------------|--------------------------------|-----------------------------|--------|------------------------------------|
| Lincoln National Corporation | 35-1140070 | 13 | Service Provider | 1,849.98 | Yes | Yes | 0.00 | | No |

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 PAD 0911-0675

GCP, INC.

Plan/Participant Detail

Trades Priced From 01/01/2023 To 12/31/2023

Plan ID: FP12
Participant: MILNER, TERESA MARIE

Social Security Number: 029-60-1160
Account Number: 77414429829

Date of Birth: 12/18/1967
Date of Termination: 03/15/2018

Date of Hire: 11/16/2015

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> |
|------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|----------------------|
| JH VIT Entprs Portfolio SA64 | EMPLOYEE SALARY DEFERRAL | \$38,075.50 | \$0.00 | \$0.00 | \$910.90 | \$0.00 | \$0.00 | -\$38,798.45 | -\$187.95 | \$0.00 | 0.000 |
| Fund Total: | | \$38,075.50 | \$0.00 | \$0.00 | \$910.90 | \$0.00 | \$0.00 | -\$38,798.45 | -\$187.95 | \$0.00 | 0.000 |
| Fidelity VIP Mid Cap SA84 | EMPLOYEE SALARY DEFERRAL | \$31,412.63 | \$0.00 | \$0.00 | \$232.73 | \$0.00 | \$0.00 | -\$31,494.98 | -\$150.38 | \$0.00 | 0.000 |
| Fund Total: | | \$31,412.63 | \$0.00 | \$0.00 | \$232.73 | \$0.00 | \$0.00 | -\$31,494.98 | -\$150.38 | \$0.00 | 0.000 |
| All Investments | | | | | | | | | | | |
| | | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | |
| | EMPLOYEE SALARY DEFERRAL | \$69,488.13 | \$0.00 | \$0.00 | \$1,143.63 | \$0.00 | \$0.00 | -\$70,293.43 | -\$338.33 | \$0.00 | \$0.00 |
| Participant Total: | | \$69,488.13 | \$0.00 | \$0.00 | \$1,143.63 | \$0.00 | \$0.00 | -\$70,293.43 | -\$338.33 | \$0.00 | \$0.00 |

Plan ID: FP12
 Participant: UHTER, TAMMY

Social Security Number: 211-64-0491
 Account Number: 11855143687

Date of Birth: 09/25/1975
 Date of Termination: 03/20/2020

Date of Hire: 03/27/2015

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|
| LVIP TRowePrice 2040 Fund SAL4 | EMPLOYEE SALARY DEFERRAL | \$818.53 | \$0.00 | \$0.00 | \$91.72 | \$0.00 | \$0.00 | -\$906.95 | -\$3.30 | \$0.00 | 0.000 |
| Fund Total: | | \$818.53 | \$0.00 | \$0.00 | \$91.72 | \$0.00 | \$0.00 | -\$906.95 | -\$3.30 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$818.53 | \$0.00 | \$0.00 | \$91.72 | \$0.00 | \$0.00 | -\$906.95 | -\$3.30 | \$0.00 |
| Participant Total: | \$818.53 | \$0.00 | \$0.00 | \$91.72 | \$0.00 | \$0.00 | -\$906.95 | -\$3.30 | \$0.00 |

Plan ID: FP12
 Participant: ANDERSON, YASMIN

Social Security Number: 218-17-4062
 Account Number: 74864441657

Date of Birth: 04/30/1985
 Date of Termination: 06/01/2019

Date of Hire: 03/01/2004

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2030 Fund SAL3 | EMPLOYEE SALARY DEFERRAL | \$17,097.76 | \$0.00 | \$0.00 | \$931.44 | \$0.00 | \$0.00 | -\$17,960.93 | -\$68.27 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$17,097.76 | \$0.00 | \$0.00 | \$931.44 | \$0.00 | \$0.00 | -\$17,960.93 | -\$68.27 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$17,097.76 | \$0.00 | \$0.00 | \$931.44 | \$0.00 | \$0.00 | -\$17,960.93 | -\$68.27 | \$0.00 |
| Participant Total: | \$17,097.76 | \$0.00 | \$0.00 | \$931.44 | \$0.00 | \$0.00 | -\$17,960.93 | -\$68.27 | \$0.00 |

Plan ID: FP12
 Participant: RICHARDSON, OLSON THOMAS

Social Security Number: 221-96-7730
 Account Number: 71634103671

Date of Birth: 10/08/1985
 Date of Termination: 10/15/2018

Date of Hire: 10/01/2017

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|---------|
| LVIP TRowePrice 2050 Fund SALL | EMPLOYEE SALARY DEFERRAL | \$744.74 | \$0.00 | \$0.00 | \$148.95 | \$0.00 | \$0.00 | \$0.00 | -\$4.04 | \$0.00 | \$889.65 | 40.393 |
| LVIP TRowePrice 2050 Fund SALL | EMPLOYEE ROLLOVER | \$2,441.68 | \$0.00 | \$0.00 | \$488.47 | \$0.00 | \$0.00 | \$0.00 | -\$13.23 | \$0.00 | \$2,916.92 | 132.438 |
| Fund Total: | | \$3,186.42 | \$0.00 | \$0.00 | \$637.42 | \$0.00 | \$0.00 | \$0.00 | -\$17.27 | \$0.00 | \$3,806.57 | 172.831 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$744.74 | \$0.00 | \$0.00 | \$148.95 | \$0.00 | \$0.00 | \$0.00 | -\$4.04 | \$889.65 |
| EMPLOYEE ROLLOVER | \$2,441.68 | \$0.00 | \$0.00 | \$488.47 | \$0.00 | \$0.00 | \$0.00 | -\$13.23 | \$2,916.92 |
| Participant Total: | \$3,186.42 | \$0.00 | \$0.00 | \$637.42 | \$0.00 | \$0.00 | \$0.00 | -\$17.27 | \$3,806.57 |

Plan ID: FP12
 Participant: Smith, Michele

Social Security Number: 227-02-4866
 Account Number: 00788510824

Date of Birth: 08/12/1967
 Date of Termination: 12/15/2014

Date of Hire: 01/01/2012

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|----------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|--------|
| AmerFunds AMCAP SA1A | EMPLOYEE SALARY DEFERRAL | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$0.00 | \$3,286.23 | 73.421 |
| Fund Total: | | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$0.00 | \$3,286.23 | 73.421 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$3,286.23 |
| Participant Total: | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$3,286.23 |

Plan ID: FP12
 Participant: PATHURI, KALYAN

Social Security Number: 228-61-3829
 Account Number: 29718378293

Date of Birth: 05/07/1969
 Date of Termination: 10/15/2019

Date of Hire: 04/01/2010

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|---------------|--------------------|-----------------------|----------------------|-------|
| LVIP Mac Wealth Builder SA97 | EMPLOYEE SALARY DEFERRAL | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|---------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 |
| Participant Total: | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 |

Plan ID: FP12

Social Security Number: 260-47-8921

Date of Birth: 10/19/1962

Date of Hire: 10/01/2013

Participant: Matthews, David

Account Number: 52369433386

Date of Termination: 04/15/2018

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2030 Fund SAL3 | EMPLOYEE SALARY DEFERRAL | \$4,369.17 | \$0.00 | \$0.00 | \$220.53 | \$0.00 | \$0.00 | -\$4,580.19 | -\$9.51 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$4,369.17 | \$0.00 | \$0.00 | \$220.53 | \$0.00 | \$0.00 | -\$4,580.19 | -\$9.51 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$4,369.17 | \$0.00 | \$0.00 | \$220.53 | \$0.00 | \$0.00 | -\$4,580.19 | -\$9.51 | \$0.00 |
| Participant Total: | \$4,369.17 | \$0.00 | \$0.00 | \$220.53 | \$0.00 | \$0.00 | -\$4,580.19 | -\$9.51 | \$0.00 |

Plan ID: FP12
 Participant: RUTLAND, VALARIE M.

Social Security Number: 263-95-8796
 Account Number: 08506878097

Date of Birth: 02/13/1966
 Date of Termination: 06/30/2017

Date of Hire: 10/19/2015

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2030 Fund SAL3 | EMPLOYEE SALARY DEFERRAL | \$2,693.95 | \$0.00 | \$0.00 | \$156.16 | \$0.00 | \$0.00 | -\$2,839.35 | -\$10.76 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$2,693.95 | \$0.00 | \$0.00 | \$156.16 | \$0.00 | \$0.00 | -\$2,839.35 | -\$10.76 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$2,693.95 | \$0.00 | \$0.00 | \$156.16 | \$0.00 | \$0.00 | -\$2,839.35 | -\$10.76 | \$0.00 |
| Participant Total: | \$2,693.95 | \$0.00 | \$0.00 | \$156.16 | \$0.00 | \$0.00 | -\$2,839.35 | -\$10.76 | \$0.00 |

Plan ID: FP12
 Participant: Miller, Tonya C.

Social Security Number: 371-86-9482
 Account Number: 88966425922

Date of Birth: 01/04/1970
 Date of Termination: 08/31/2017

Date of Hire: 07/17/2017

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2040 Fund SAL4 | EMPLOYEE SALARY DEFERRAL | \$139.20 | \$0.00 | \$0.00 | \$26.29 | \$0.00 | \$0.00 | \$0.00 | -\$0.76 | \$0.00 | \$164.73 | 7.717 |
| Fund Total: | | \$139.20 | \$0.00 | \$0.00 | \$26.29 | \$0.00 | \$0.00 | \$0.00 | -\$0.76 | \$0.00 | \$164.73 | 7.717 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------|
| EMPLOYEE SALARY DEFERRAL | \$139.20 | \$0.00 | \$0.00 | \$26.29 | \$0.00 | \$0.00 | \$0.00 | -\$0.76 | \$0.00 | \$164.73 |
| Participant Total: | \$139.20 | \$0.00 | \$0.00 | \$26.29 | \$0.00 | \$0.00 | \$0.00 | -\$0.76 | \$0.00 | \$164.73 |

Plan ID: FP12
 Participant: RAMACHANDRAN, INDIRA

Social Security Number: 386-21-6945
 Account Number: 41738267123

Date of Birth: 02/07/1949
 Date of Termination: 09/30/2019

Date of Hire: 04/01/2010

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2020 Fund SAL2 | EMPLOYEE SALARY DEFERRAL | \$22,134.29 | \$0.00 | \$0.00 | \$1,544.42 | \$0.00 | \$0.00 | -\$23,591.32 | -\$87.39 | \$0.00 | \$0.00 | 0.000 |
| LVIP TRowePrice 2020 Fund SAL2 | EMPLOYEE ROLLOVER | \$59,115.59 | \$0.00 | \$0.00 | \$4,124.89 | \$0.00 | \$0.00 | -\$63,007.06 | -\$233.42 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$81,249.88 | \$0.00 | \$0.00 | \$5,669.31 | \$0.00 | \$0.00 | -\$86,598.38 | -\$320.81 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$22,134.29 | \$0.00 | \$0.00 | \$1,544.42 | \$0.00 | \$0.00 | -\$23,591.32 | -\$87.39 | \$0.00 |
| EMPLOYEE ROLLOVER | \$59,115.59 | \$0.00 | \$0.00 | \$4,124.89 | \$0.00 | \$0.00 | -\$63,007.06 | -\$233.42 | \$0.00 |
| Participant Total: | \$81,249.88 | \$0.00 | \$0.00 | \$5,669.31 | \$0.00 | \$0.00 | -\$86,598.38 | -\$320.81 | \$0.00 |

Plan ID: FP12

Social Security Number: 470-41-5845

Date of Birth: 07/01/1974

Date of Hire: 10/01/2006

Participant: Gutta, Sreenivasulu N.

Account Number: 89943617438

Date of Termination: 09/30/2020

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|-----------|
| LVIP TRowePrice 2040 Fund SAL4 | EMPLOYEE SALARY DEFERRAL | \$88,734.27 | \$0.00 | \$0.00 | \$16,767.24 | \$0.00 | \$0.00 | \$0.00 | -\$479.00 | \$0.00 | \$105,022.51 | 4,919.986 |
| Fund Total: | | \$88,734.27 | \$0.00 | \$0.00 | \$16,767.24 | \$0.00 | \$0.00 | \$0.00 | -\$479.00 | \$0.00 | \$105,022.51 | 4,919.986 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|--------------|
| EMPLOYEE SALARY DEFERRAL | \$88,734.27 | \$0.00 | \$0.00 | \$16,767.24 | \$0.00 | \$0.00 | \$0.00 | -\$479.00 | \$0.00 | \$105,022.51 |
| Participant Total: | \$88,734.27 | \$0.00 | \$0.00 | \$16,767.24 | \$0.00 | \$0.00 | \$0.00 | -\$479.00 | \$0.00 | \$105,022.51 |

Plan ID: FP12
 Participant: STEWART, SHANTASHA

Social Security Number: 512-04-4248
 Account Number: 76317171602

Date of Birth: 09/25/1990
 Date of Termination: 06/20/2016

Date of Hire: 06/18/2012

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2030 Fund SAL3 | EMPLOYEE SALARY DEFERRAL | \$67.27 | \$0.00 | \$0.00 | \$10.68 | \$0.00 | \$0.00 | \$0.00 | -\$0.29 | \$0.00 | \$77.66 | 3.689 |
| Fund Total: | | \$67.27 | \$0.00 | \$0.00 | \$10.68 | \$0.00 | \$0.00 | \$0.00 | -\$0.29 | \$0.00 | \$77.66 | 3.689 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|-------------|--------------------|-----------------------|---------|
| EMPLOYEE SALARY DEFERRAL | \$67.27 | \$0.00 | \$0.00 | \$10.68 | \$0.00 | \$0.00 | \$0.00 | -\$0.29 | \$0.00 | \$77.66 |
| Participant Total: | \$67.27 | \$0.00 | \$0.00 | \$10.68 | \$0.00 | \$0.00 | \$0.00 | -\$0.29 | \$0.00 | \$77.66 |

Plan ID: FP12
 Participant: PATHURI, PADMA

Social Security Number: 578-43-1233
 Account Number: 02858555970

Date of Birth: 05/17/1971
 Date of Termination: 04/01/2023

Date of Hire: 04/01/2010

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> | |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|----------------------|-------|
| LVIP TRowePrice 2040 Fund SAL4 | EMPLOYEE SALARY DEFERRAL | \$25,796.42 | \$0.00 | \$0.00 | \$2,891.01 | \$0.00 | \$0.00 | -\$28,583.12 | -\$104.31 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$25,796.42 | \$0.00 | \$0.00 | \$2,891.01 | \$0.00 | \$0.00 | -\$28,583.12 | -\$104.31 | \$0.00 | \$0.00 | 0.000 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> |
|---------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|--------------|--------------------|-----------------------|
| EMPLOYEE SALARY DEFERRAL | \$25,796.42 | \$0.00 | \$0.00 | \$2,891.01 | \$0.00 | \$0.00 | -\$28,583.12 | -\$104.31 | \$0.00 |
| Participant Total: | \$25,796.42 | \$0.00 | \$0.00 | \$2,891.01 | \$0.00 | \$0.00 | -\$28,583.12 | -\$104.31 | \$0.00 |

GCP, INC.
Employer Report - Plan Summary
Trades Priced From 01/01/2023 To 12/31/2023

| <i>Fund</i> | <i>Source</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | <i>Shares/ Units</i> |
|--------------------------------|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|---------------|-------------|--------------------|-----------------------|----------------------|
| LVIP TRowePrice 2030 Fund SAL3 | EMPLOYEE SALARY DEFERRAL | \$24,228.15 | \$0.00 | \$0.00 | \$1,318.81 | \$0.00 | \$0.00 | -\$25,380.47 | -\$88.83 | \$0.00 | \$77.66 | 3.689 |
| Fund Total: | | \$24,228.15 | \$0.00 | \$0.00 | \$1,318.81 | \$0.00 | \$0.00 | -\$25,380.47 | -\$88.83 | \$0.00 | \$77.66 | 3.689 |
| LVIP TRowePrice 2040 Fund SAL4 | EMPLOYEE SALARY DEFERRAL | \$115,488.42 | \$0.00 | \$0.00 | \$19,776.26 | \$0.00 | \$0.00 | -\$29,490.07 | -\$587.37 | \$0.00 | \$105,187.24 | 4,927.703 |
| Fund Total: | | \$115,488.42 | \$0.00 | \$0.00 | \$19,776.26 | \$0.00 | \$0.00 | -\$29,490.07 | -\$587.37 | \$0.00 | \$105,187.24 | 4,927.703 |
| LVIP TRowePrice 2020 Fund SAL2 | EMPLOYEE SALARY DEFERRAL | \$22,134.29 | \$0.00 | \$0.00 | \$1,544.42 | \$0.00 | \$0.00 | -\$23,591.32 | -\$87.39 | \$0.00 | \$0.00 | 0.000 |
| LVIP TRowePrice 2020 Fund SAL2 | EMPLOYEE ROLLOVER | \$59,115.59 | \$0.00 | \$0.00 | \$4,124.89 | \$0.00 | \$0.00 | -\$63,007.06 | -\$233.42 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$81,249.88 | \$0.00 | \$0.00 | \$5,669.31 | \$0.00 | \$0.00 | -\$86,598.38 | -\$320.81 | \$0.00 | \$0.00 | 0.000 |
| LVIP TRowePrice 2050 Fund SALL | EMPLOYEE SALARY DEFERRAL | \$744.74 | \$0.00 | \$0.00 | \$148.95 | \$0.00 | \$0.00 | \$0.00 | -\$4.04 | \$0.00 | \$889.65 | 40.393 |
| LVIP TRowePrice 2050 Fund SALL | EMPLOYEE ROLLOVER | \$2,441.68 | \$0.00 | \$0.00 | \$488.47 | \$0.00 | \$0.00 | \$0.00 | -\$13.23 | \$0.00 | \$2,916.92 | 132.438 |
| Fund Total: | | \$3,186.42 | \$0.00 | \$0.00 | \$637.42 | \$0.00 | \$0.00 | \$0.00 | -\$17.27 | \$0.00 | \$3,806.57 | 172.831 |
| JH VIT Entprs Portfolio SA64 | EMPLOYEE SALARY DEFERRAL | \$38,075.50 | \$0.00 | \$0.00 | \$910.90 | \$0.00 | \$0.00 | -\$38,798.45 | -\$187.95 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$38,075.50 | \$0.00 | \$0.00 | \$910.90 | \$0.00 | \$0.00 | -\$38,798.45 | -\$187.95 | \$0.00 | \$0.00 | 0.000 |
| Fidelity VIP Mid Cap SA84 | EMPLOYEE SALARY DEFERRAL | \$31,412.63 | \$0.00 | \$0.00 | \$232.73 | \$0.00 | \$0.00 | -\$31,494.98 | -\$150.38 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$31,412.63 | \$0.00 | \$0.00 | \$232.73 | \$0.00 | \$0.00 | -\$31,494.98 | -\$150.38 | \$0.00 | \$0.00 | 0.000 |
| LVIP Mac Wealth Builder SA97 | EMPLOYEE SALARY DEFERRAL | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 | \$0.00 | 0.000 |
| Fund Total: | | \$125,191.24 | \$0.00 | \$0.00 | \$4,073.11 | \$0.00 | \$0.00 | -\$128,781.33 | -\$483.02 | \$0.00 | \$0.00 | 0.000 |
| AmerFunds AMCAP SA1A | EMPLOYEE SALARY DEFERRAL | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$0.00 | \$3,286.23 | 73.421 |
| Fund Total: | | \$2,526.34 | \$0.00 | \$0.00 | \$774.24 | \$0.00 | \$0.00 | \$0.00 | -\$14.35 | \$0.00 | \$3,286.23 | 73.421 |

| <i>All Investments</i> | <i>Beginning Balance</i> | <i>Takeover Deposits</i> | <i>Contributions</i> | <i>Earnings/ Unrealized Gain/Loss</i> | <i>Transfers</i> | <i>Loans Distributions</i> | <i>Fees</i> | <i>Forfeitures</i> | <i>Ending Balance</i> | |
|--------------------------|--------------------------|--------------------------|----------------------|---------------------------------------|------------------|----------------------------|---------------|--------------------|-----------------------|--------------|
| EMPLOYEE SALARY DEFERRAL | \$359,801.31 | \$0.00 | \$0.00 | \$28,779.42 | \$0.00 | \$0.00 | -\$277,536.62 | -\$1,603.33 | \$0.00 | \$109,440.78 |
| EMPLOYEE ROLLOVER | \$61,557.27 | \$0.00 | \$0.00 | \$4,613.36 | \$0.00 | \$0.00 | -\$63,007.06 | -\$246.65 | \$0.00 | \$2,916.92 |
| Totals: | \$421,358.58 | \$0.00 | \$0.00 | \$33,392.78 | \$0.00 | \$0.00 | -\$340,543.68 | -\$1,849.98 | \$0.00 | \$112,357.70 |

Participant Count

Total Number of Participants: 13

GCP, INC.**Schedule of Assets Held for Investment Purposes Schedule H Item 4i**

EIN 54 1838208 **IRS Plan #** 001
As of Plan Year End 12/31/2023
Contract #: 19334

| (A) | (B) | (C) | (D) | (E) |
|------------|-------------------------------|-------------------------------------|------------------------------------|----------------------|
| | Identity of Issue | Description of Investment | Historical Cost¹ | Current Value |
| * | LINCOLN NAT'L LIFE - DIRECTOR | JH VIT Entprs Portfolio SA64 | 0.00 | 0.00 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | Fidelity VIP Mid Cap SA84 | 0.00 | 0.00 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | LVIP Mac Wealth Builder SA97 | 0.00 | 0.00 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | LVIP TRowePrice 2020 Fund SAL2 | 0.00 | 0.00 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | LVIP TRowePrice 2030 Fund SAL3 | 48.59 | 77.66 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | LVIP TRowePrice 2040 Fund SAL4 | 67,186.00 | 105,187.24 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | LVIP TRowePrice 2050 Fund SALL | 2,306.93 | 3,806.57 |
| * | LINCOLN NAT'L LIFE - DIRECTOR | AmerFunds AMCAP SA1A | 1,426.00 | 3,286.23 |
| | Participant Loans | Various Maturities & Interest Rates | | 0.00 |
| | Total | | 70,967.52 | 112,357.70 |

¹ The reported cost is based on account balances at the inception of the investment contract (and subsequent additions/subtractions) and may not accurately reflect the true cost of the investment that is reportable on Form 5500.

GCP, INC.

Schedule of Reportable Transactions Schedule H, Part 4J(5%Reportable)

EIN 54 1838208 IRS Plan # 001
As of Plan Year End 12/31/2023
Contract #: 19334

| (A) Identity of party involved | (B) Description of Assets | (C) Purchase Price | (D) Selling Price | (E) Lease Rental | (F) Expenses Incurred | (G) Cost of Asset | (H) Current Value of Asset on Transaction Date | (I) Net Gain Or Loss |
|-----------------------------------|--------------------------------|-----------------------|----------------------|---------------------|--------------------------|----------------------|---|-------------------------|
| LNL-DIRECTOR | JH VIT Entprs Portfolio SA64 | 0.00 | 38,986.40 | N/A | N/A | 0.00 | 0.00 | 38,986.40 |
| LNL-DIRECTOR | Fidelity VIP Mid Cap SA84 | 0.00 | 31,645.36 | N/A | N/A | 0.00 | 0.00 | 31,645.36 |
| LNL-DIRECTOR | LVIP Mac Wealth Builder SA97 | 0.00 | 129,264.35 | N/A | N/A | 0.00 | 0.00 | 129,264.35 |
| LNL-DIRECTOR | LVIP TRowePrice 2020 Fund SAL2 | 0.00 | 86,919.19 | N/A | N/A | 0.00 | 0.00 | 86,919.19 |
| LNL-DIRECTOR | LVIP TRowePrice 2030 Fund SAL3 | 0.00 | 25,469.30 | N/A | N/A | 0.00 | 0.00 | 25,469.30 |
| LNL-DIRECTOR | LVIP TRowePrice 2040 Fund SAL4 | 0.00 | 30,077.44 | N/A | N/A | 0.00 | 0.00 | 30,077.44 |