

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2023

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

Part I Annual Report Identification Information

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

- A This return/report is for: a multiemployer plan, a multiple-employer plan, a single-employer plan, a DFE (specify), the first return/report, the final return/report, an amended return/report, a short plan year return/report (less than 12 months)
B This return/report is:
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: DOMINICAN VILLAGE, INC. 401(K) PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 10/01/2012
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): DOMINICAN VILLAGE, INC., 565 ALBANY AVE, AMITYVILLE, NY 11701
2b Employer Identification Number (EIN): 11-3037708
2c Plan Sponsor's telephone number: 631-842-6091
2d Business code (see instructions): 623000

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

Form 5500 (2023) v. 230707

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	106
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits ..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> . ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits ..... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> . ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	72
	<b>6a(2)</b>	102
	<b>6b</b>	0
	<b>6c</b>	28
	<b>6d</b>	130
	<b>6e</b>	0
	<b>6f</b>	130
	<b>6g(1)</b>	103
<b>6g(2)</b>	110	
<b>6h</b>	1	
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....	<b>7</b>	

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

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

<b>9a</b> Plan funding arrangement (check all that apply)	<b>9b</b> Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

**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 \_\_\_\_\_

---

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

For calendar plan year 2023 or fiscal plan year beginning **07/01/2023** and ending **06/30/2024**

<b>A</b> Name of plan <b>DOMINICAN VILLAGE, INC. 401(K) PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>DOMINICAN VILLAGE, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>11-3037708</b>	

**Part I Service Provider Information (see instructions)**

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....  Yes  No

**b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

**FIDELITY INVESTMENTS INSTITUTIONAL**

**04-2647786**

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

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

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

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
37 64 65	RECORDKEEPER	10506	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

RAYMOND JAMES FINANCIAL SERVICES

59-2937883

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	8175	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**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.

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

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

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

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

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

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

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> 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)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE D</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2023</b>  <b>This Form is Open to Public Inspection.</b>
---	--	--

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

<b>A</b> Name of plan <u>DOMINICAN VILLAGE, INC. 401(K) PLAN</u>	<b>B</b> Three-digit plan number (PN)	<u>001</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>DOMINICAN VILLAGE, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>11-3037708</u>	

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
---------------	--

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>PUTNAM STABLE VALUE</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>PUTNAM FIDUCIARY TRUST COMPANY</u>		
<b>c</b> EIN-PN <u>04-3159710-202</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

**a** Name of MTIA, CCT, PSA, or 103-12 IE:

**b** Name of sponsor of entity listed in (a):

**c** EIN-PN

**d** Entity code

**e** Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)



<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  ▶ <b>File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2023</b>  <b>This Form is Open to Public Inspection</b>
--	--	---

For calendar plan year 2023 or fiscal plan year beginning <b>07/01/2023</b> and ending <b>06/30/2024</b>	
<b>A</b> Name of plan <b>DOMINICAN VILLAGE, INC. 401(K) PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>DOMINICAN VILLAGE, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>11-3037708</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
---------------	--------------------------------------

**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.

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	0	0
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	74680	61236
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	1284	2577
<b>(3)</b> Other .....	<b>1b(3)</b>	0	0
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	0	0
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	0	0
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	0	0
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	0	0
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	0	0
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	0	0
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	0	0
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	0	0
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	0	0
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	18435	11195
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	0	0
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	0	0
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	0	0
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	0	0
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	1599725	1869202
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	0	0
<b>(15)</b> Other .....	<b>1c(15)</b>	0	0

<b>1d</b> Employer-related investments:		<b>(a)</b> Beginning of Year	<b>(b)</b> End of Year
<b>(1)</b> Employer securities .....	<b>1d(1)</b>	0	0
<b>(2)</b> Employer real property .....	<b>1d(2)</b>	0	0
<b>e</b> Buildings and other property used in plan operation .....	<b>1e</b>	0	0
<b>f</b> Total assets (add all amounts in lines 1a through 1e) .....	<b>1f</b>	1694124	1944210
<b>Liabilities</b>			
<b>g</b> Benefit claims payable .....	<b>1g</b>	0	0
<b>h</b> Operating payables .....	<b>1h</b>	0	0
<b>i</b> Acquisition indebtedness .....	<b>1i</b>	0	0
<b>j</b> Other liabilities .....	<b>1j</b>	0	0
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j) .....	<b>1k</b>	0	0
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f) .....	<b>1l</b>	1694124	1944210

**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.

<b>Income</b>		<b>(a)</b> Amount	<b>(b)</b> Total
<b>a Contributions:</b>			
<b>(1)</b> Received or receivable in cash from: <b>(A)</b> Employers .....	<b>2a(1)(A)</b>	156545	
<b>(B)</b> Participants .....	<b>2a(1)(B)</b>	176663	
<b>(C)</b> Others (including rollovers) .....	<b>2a(1)(C)</b>	27583	
<b>(2)</b> Noncash contributions .....	<b>2a(2)</b>	0	
<b>(3)</b> Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		360791
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit) .....	<b>2b(1)(A)</b>	0	
<b>(B)</b> U.S. Government securities .....	<b>2b(1)(B)</b>	0	
<b>(C)</b> Corporate debt instruments .....	<b>2b(1)(C)</b>	0	
<b>(D)</b> Loans (other than to participants) .....	<b>2b(1)(D)</b>	0	
<b>(E)</b> Participant loans .....	<b>2b(1)(E)</b>	865	
<b>(F)</b> Other .....	<b>2b(1)(F)</b>	0	
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		865
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock .....	<b>2b(2)(A)</b>	0	
<b>(B)</b> Common stock .....	<b>2b(2)(B)</b>	0	
<b>(C)</b> Registered investment company shares (e.g. mutual funds) .....	<b>2b(2)(C)</b>	47853	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		47853
<b>(3)</b> Rents .....	<b>2b(3)</b>		0
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds .....	<b>2b(4)(A)</b>	0	
<b>(B)</b> Aggregate carrying amount (see instructions) .....	<b>2b(4)(B)</b>	0	
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result .....	<b>2b(4)(C)</b>		
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate .....	<b>2b(5)(A)</b>	0	
<b>(B)</b> Other .....	<b>2b(5)(B)</b>	0	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	<b>2b(6)</b>		0
(7) Net investment gain (loss) from pooled separate accounts.....	<b>2b(7)</b>		0
(8) Net investment gain (loss) from master trust investment accounts.....	<b>2b(8)</b>		0
(9) Net investment gain (loss) from 103-12 investment entities.....	<b>2b(9)</b>		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		164344
<b>c</b> Other income .....	<b>2c</b>		139
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	<b>2d</b>		573992

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers .....	<b>2e(1)</b>	305225	
(2) To insurance carriers for the provision of benefits.....	<b>2e(2)</b>	0	
(3) Other.....	<b>2e(3)</b>	0	
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		305225
<b>f</b> Corrective distributions (see instructions).....	<b>2f</b>		0
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	<b>2g</b>		0
<b>h</b> Interest expense .....	<b>2h</b>		0
<b>i</b> Administrative expenses:			
(1) Salaries and allowances.....	<b>2i(1)</b>	0	
(2) Contract administrator fees.....	<b>2i(2)</b>	0	
(3) Recordkeeping fees.....	<b>2i(3)</b>	10506	
(4) IQPA audit fees.....	<b>2i(4)</b>	0	
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	8175	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	0	
(7) Actuarial fees .....	<b>2i(7)</b>	0	
(8) Legal fees .....	<b>2i(8)</b>	0	
(9) Valuation/appraisal fees .....	<b>2i(9)</b>	0	
(10) Other trustee fees and expenses .....	<b>2i(10)</b>	0	
(11) Other expenses .....	<b>2i(11)</b>	0	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		18681
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	<b>2j</b>		323906

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		250086
<b>l</b> Transfers of assets:			
(1) To this plan .....	<b>2l(1)</b>		0
(2) From this plan .....	<b>2l(2)</b>		0

**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: **BAKER TILLY US, LLP**

(2) EIN: **30-1413443**

**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
<b>a</b> 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.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	36125
<b>b</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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>c</b> 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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>d</b> 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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>e</b> Was this plan covered by a fidelity bond?	<input checked="" type="checkbox"/>	<input type="checkbox"/>	500000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>g</b> 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>h</b> 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?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
<b>j</b> 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.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
<b>n</b> 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.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

**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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2023</b>  <b>This Form is Open to Public Inspection.</b>
--	---	---

For calendar plan year 2023 or fiscal plan year beginning 07/01/2023 and ending 06/30/2024

<b>A</b> Name of plan <u>DOMINICAN VILLAGE, INC. 401(K) PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>DOMINICAN VILLAGE, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>11-3037708</u>	

<b>Part I</b>	<b>Distributions</b>
---------------	----------------------

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

<b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	
<b>2</b> 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): <u>04-6568107</u>		
<b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>		
<b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....	3	

<b>Part II</b>	<b>Funding Information</b> (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.)
----------------	---

<b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>If the plan is a defined benefit plan, go to line 8.</b>			
<b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____ <b>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</b>			
<b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....	6a		
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....	6b		
<b>c</b> 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		
<b>If you completed line 6c, skip lines 8 and 9.</b>			
<b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>8</b> 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? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

<b>Part III</b>	<b>Amendments</b>
-----------------	-------------------

<b>9</b> 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. ....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
---	-----------------------------------	-----------------------------------	-------------------------------	-----------------------------

<b>Part IV</b>	<b>ESOPs</b> (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.
----------------	---

<b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>11 a</b> Does the ESOP hold any preferred stock? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>b</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.) .....	<input type="checkbox"/> Yes	<input type="checkbox"/> No
<b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....	<input type="checkbox"/> Yes	<input type="checkbox"/> 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:

<b>a</b> The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment) .....	<b>14a</b>	
<b>b</b> The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment) .....	<b>14b</b>	
<b>c</b> The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14c</b>	

**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:

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year .....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year .....	<b>15b</b>	

**16** Information with respect to any employers who withdrew from the plan during the preceding plan year:

<b>a</b> Enter the number of employers who withdrew during the preceding plan year .....	<b>16a</b>	
<b>b</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 .....	<b>16b</b>	

**17** If assets and liabilities from another plan have been transferred to or merged with this plan during the plan year, check box and see instructions regarding supplemental information to be included as an attachment.....

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

**18** If any liabilities to participants or their beneficiaries under the plan as of the end of the plan year consist (in whole or in part) of liabilities to such participants and beneficiaries under two or more pension plans as of immediately before such plan year, check box and see instructions regarding supplemental information to be included as an attachment.....

**19** If the total number of participants is 1,000 or more, complete lines (a) and (b):

**a** Enter the percentage of plan assets held as:  
 Public Equity: \_\_\_\_\_% Private Equity: \_\_\_\_\_% Investment-Grade Debt and Interest Rate Hedging Assets: \_\_\_\_\_%  
 High-Yield Debt: \_\_\_\_\_% Real Assets: \_\_\_\_\_% Cash or Cash Equivalents: \_\_\_\_\_% Other: \_\_\_\_\_%

**b** Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:  
 0-5 years  5-10 years  10-15 years  15 years or more

**20 PBGC missed contribution reporting requirements.** If this is a multiemployer plan or a single-employer plan that is not covered by PBGC, skip line 20.

**a** Is the amount of unpaid minimum required contributions for all years from Schedule SB (Form 5500) line 40 greater than zero?  Yes  No

**b** If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:  
 Yes.  
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.  
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.  
 No. Other. Provide explanation.....

**Part VII IRS Compliance Questions**

**21a** Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?  Yes  No

**21b** If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).  
 Design-based safe harbor method  
 "Prior year" ADP test  
 "Current year" ADP test  
 N/A

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702438A.

## **Dominican Village, Inc. 401(k) Plan**

Financial Statements and  
Supplementary Information

June 30, 2024 and 2023

## Table of Contents

Independent Auditors' Report .....	1
Statements of Net Assets Available for Benefits .....	5
Statement of Changes in Net Assets Available for Benefits .....	6
Notes to Financial Statements .....	7
Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions .....	13
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) .....	14

## Independent Auditors' Report

To the Plan Administrator of  
Dominican Village, Inc. 401(k) Plan

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

We have performed audits of the financial statements of Dominican Village, Inc. 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of June 30, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended June 30, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of June 30, 2024 and 2023, and for the year ended June 30, 2024, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

### Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

## **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' 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 the 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 at least one year following the date that the financial statements are available to be issued.

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

## **Auditors' Responsibilities for the Audit of the Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the 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, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions and Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year), as of or for the year ended June 30, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the 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, are 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 by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

*Baker Tilly US, LLP*

Iselin, NJ  
April 8, 2025

## Dominican Village, Inc. 401(k) Plan

### Statements of Net Assets Available for Benefits

June 30, 2024 and 2023

	2024	2023
<b>Assets</b>		
<b>Investments</b>		
Investments at fair value	\$ 1,869,202	\$ 1,599,725
<b>Receivables</b>		
Participant contributions	2,577	1,284
Employer contributions	61,236	74,680
Notes receivable from participants	11,195	18,435
<b>Total receivables</b>	75,008	94,399
<b>Total assets</b>	1,944,210	1,694,124
<b>Net assets available for benefits</b>	\$ 1,944,210	\$ 1,694,124

See notes to financial statements

## Dominican Village, Inc. 401(k) Plan

### Statement of Changes in Net Assets Available for Benefits

Year Ended June 30, 2024

---

#### Additions

##### Investment income

Interest and dividends	\$	47,853
Net appreciation in fair value of investments		164,344

---

<b>Total investment income</b>		<b>212,197</b>
--------------------------------	--	----------------

##### Contributions

Participant contributions		176,663
Employer contributions		156,545
Rollovers		27,583

---

<b>Total contributions</b>		<b>360,791</b>
----------------------------	--	----------------

Other revenue		139
---------------	--	-----

Interest income on notes receivable from participants		865
---	--	-----

---

<b>Total additions</b>		<b>573,992</b>
------------------------	--	----------------

#### Deductions

Benefits paid to participants		305,225
-------------------------------	--	---------

Administrative expenses		18,681
-------------------------	--	--------

---

<b>Total deductions</b>		<b>323,906</b>
-------------------------	--	----------------

---

<b>Net increase</b>		<b>250,086</b>
---------------------	--	----------------

Net assets available for benefits

Beginning of year		1,694,124
-------------------	--	-----------

---

<b>End of year</b>	\$	<b>1,944,210</b>
--------------------	----	------------------

---

See notes to financial statements

# Dominican Village, Inc. 401(k) Plan

## Notes to Financial Statements

June 30, 2024 and 2023

### 1. Description of Plan

The following description of the Dominican Village, Inc. 401(k) Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

#### General

The Plan is a defined contribution plan established effective October 1, 2012, as restated July 1, 2018. The Plan covers all employees of Dominican Village, Inc. (the Organization or Employer), excluding employees covered by a collective bargaining agreement, leased employees, nonresident aliens who do not receive any earned income from the Employer and per diem employees, who have completed three months of service and are age 21 or older. The Organization may contribute a discretionary profit sharing amount for employees that had worked 1,000 hours within the plan year and were 21 years of age. The Plan requires a participant to be employed as of year end to be eligible to receive discretionary profit sharing contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The Plan Administrator is responsible for oversight of the Plan. The Plan's Administrator determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Committee.

#### Contributions

Each year, participants may contribute up to 100% of pretax annual compensation, as defined in the plan document, up to the maximum limits of the Internal Revenue Code (IRC). Participants also may designate all or a portion of their deferral contributions as after-tax contributions into a Roth account. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants also may contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Organization contributes a safe harbor matching contribution in an amount equal to 100% of the first 4% of base compensation that a participant contributes to the Plan. Additional profit sharing amounts may be contributed at the option of the Board of Directors. For the year ended June 30, 2024, the Organization accrued a profit sharing contribution in the amount of \$81,807, offset by forfeitures of \$24,910, to the Plan which was determined as 2% of eligible compensation. Contributions are subject to certain Internal Revenue Service (IRS) limitations.

#### Participant Accounts

Each participant's account is credited with the participant's contributions, Organization matching contributions, allocations of the Organization's discretionary contributions and an allocation of the Plan's earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. 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.

#### Vesting

Participants are vested immediately in their contributions, rollover contributions and safe harbor matching contributions, plus actual earnings thereon. Vesting in the Organization's discretionary profit sharing contribution portion of their accounts is based on years of continuous service. A participant is 20% vested after two years of credited service and continues to vest in increments of 20% until 100% vested after six or more years of credited service.

# **Dominican Village, Inc. 401(k) Plan**

## Notes to Financial Statements

June 30, 2024 and 2023

### **Notes Receivable From Participants**

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loan interest rate, determined quarterly, is set at 2% above the prime rate, as defined. Principal and interest are paid ratably through monthly payroll deductions. Terms range from one to five years or greater for the purchase of a primary residence.

### **Payment of Benefits**

On termination of service due to death, disability, retirement, or other reasons, a participant may elect to receive a lump sum amount equal to the value of the participant's vested interest in his or her account. In addition, the Plan allows for hardship distributions if certain criteria are met.

### **Forfeited Accounts**

At June 30, 2024 and 2023, forfeited nonvested accounts totaled \$28,764 and \$18,713, respectively. Forfeitures may first be used to pay administrative expenses. Any remaining amounts will be used to reduce future employer contributions payable under the Plan. During 2024, employer contributions were reduced by \$24,910, from forfeited nonvested accounts, in accordance with plan provisions.

## **2. Summary of Accounting Policies**

### **Basis of Accounting**

The financial statements of the Plan are prepared on the accrual basis of accounting.

### **Use of Estimates**

The preparation of financial statements in accordance 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 and 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 to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrator determines the Plan's valuation policies utilizing information provided by the investment advisers and trustee, as applicable. See Note 3 for discussion of fair value measurements.

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

### **Notes Receivable From Participants**

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed as incurred.

# Dominican Village, Inc. 401(k) Plan

## Notes to Financial Statements

June 30, 2024 and 2023

### Payment of Benefits

Benefits are recorded when paid.

### Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Organization. Expenses that are paid by the Organization are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

### Subsequent Events

Subsequent events were evaluated through April 8, 2025, the date the financial statements were available to be issued.

### 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 authoritative guidance are described as follows:

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

Level 2 - Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

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

## Dominican Village, Inc. 401(k) Plan

### Notes to Financial Statements

June 30, 2024 and 2023

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2024 and 2023.

*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 U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2024 and 2023:

<b>Assets at Fair Value as of June 30, 2024</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
Mutual funds	\$ 1,869,202	\$ -	\$ -	\$ 1,869,202
<b>Total assets in the fair value hierarchy</b>	<b>1,869,202</b>	<b>-</b>	<b>-</b>	<b>1,869,202</b>
<b>Total investments at fair value</b>	<b>\$ 1,869,202</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,869,202</b>

<b>Assets at Fair Value as of December 31, 2023</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
Mutual funds	\$ 1,599,725	\$ -	\$ -	\$ 1,599,725
<b>Total assets in the fair value hierarchy</b>	<b>1,599,725</b>	<b>-</b>	<b>-</b>	<b>1,599,725</b>
<b>Total investments at fair value</b>	<b>\$ 1,599,725</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,599,725</b>

#### 4. Concentrations

As of June 30, 2024 and 2023, the Plan had investments of \$690,462 and \$628,171, respectively, that were concentrated in two funds, with each fund representing over 10% of the respective net assets available for benefits.

#### 5. Information Certified by Trustee

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2024 and 2023. Accordingly, Fidelity Management Trust Company, the Trustee of the Plan, has certified to the completeness and accuracy of all investments reported in the accompanying Statements of Net Assets Available for Benefits as of June 30, 2024 and 2023, and the supplemental Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of June 30, 2024, and the related investment activity reported in the Statement of Changes in Net Assets Available for Benefits for the year ended June 30, 2024.

# **Dominican Village, Inc. 401(k) Plan**

## Notes to Financial Statements

June 30, 2024 and 2023

### **6. Related-Party and Party in Interest Transactions**

Certain Plan investments are managed by Fidelity Management Trust Company, the Trustee, and therefore, these transactions qualify as party in interest transactions.

Fees incurred by the Plan for the investment management services are included in net appreciation in the fair value of the investment, as they are paid through revenue sharing, rather than a direct payment. The Trustee receives revenue from investment fund service providers for services the Trustee provides to the funds. This revenue is used to offset certain amounts owed to the Trustee for its administrative services to the Plan. The Plan or Employer may make a payment to the Trustee for administrative expenses not covered by revenue sharing.

Additionally, the Plan issues loans to participants, which are secured by the participant's account balances. These transactions qualify as party in interest transactions.

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

### **7. Plan Termination**

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

### **8. Tax Status**

The Plan adopted a pre-approved plan offered by FMR LLC. The pre-approved plan received an IRS Opinion Letter dated June 30, 2020, that the Plan and related trust are designed in accordance with the applicable sections of the IRC. Although the Plan has been amended since receiving the IRS Opinion Letter, the plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC, and, therefore believes that the Plan is qualified, and the related trust is tax exempt.

Plan management is required 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 IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

### **9. Risks and Uncertainties**

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

## **Dominican Village, Inc. 401(k) Plan**

Notes to Financial Statements

June 30, 2024 and 2023

### **10. Delinquent Participant Contributions**

For the years ended June 30, 2024 and 2023, the Organization did not remit certain participant contributions to the Plan on a timely basis as defined by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Untimely remittances identified on the Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions, which totaled \$5,028, were not corrected in 2024. Untimely remittances of \$31,097 were identified on the Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions in a prior year and were not corrected prior to July 1, 2023. The prior year untimely remittances were corrected outside of the Department of Labor Voluntary Fiduciary Correction Program in 2024. Additionally, the Organization will be compensating participants for lost earnings resulting from the delay in contributions.

**Dominican Village, Inc. 401(k) Plan**

Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions

EIN: 11-3037708 Plan Number: 001

Year Ended June 30, 2024

<b>Total That Constitute Nonexempt Prohibited Transactions</b>				
<b>Participant Contributions Transferred Late to the Plan (1)</b>	<b>Contributions not Corrected</b>	<b>Contributions Corrected Outside of VFCP</b>	<b>Contributions Pending Correction in VFCP</b>	<b>Total Fully Corrected Under VFCP and PTE 2002-51</b>
\$ 5,028	\$ 5,028	\$ -	\$ -	\$ -
31,097	-	31,097	-	-
<b>\$ 36,125</b>	<b>\$ 5,028</b>	<b>\$ 31,097</b>	<b>\$ -</b>	<b>\$ -</b>

(1) Amount does not include participant loan repayments.

## Dominican Village, Inc. 401(k) Plan

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

EIN: 11-3037708 Plan Number: 001

June 30, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Mutual Funds				
*	Fidelity	Fidelity Freedom 2030 Fund K6	N/R	\$ 383,896
*	Fidelity	Fidelity Freedom 2025 Fund K6	N/R	306,566
*	Fidelity	Fidelity Freedom 2015 Fund K6	N/R	160,124
*	Fidelity	Fidelity Freedom 2040 Fund K6	N/R	177,004
*	Fidelity	Fidelity Freedom 2020 Fund K6	N/R	135,426
*	Fidelity	Fidelity Freedom 2035 Fund K6	N/R	167,926
*	Fidelity	Putnam Stable Value	N/R	122,111
*	Fidelity	Fidelity Freedom 2050 Fund K6	N/R	65,859
*	Fidelity	Fidelity Freedom 2045 Fund K6	N/R	113,850
*	Fidelity	Fidelity Freedom 2055 Fund K6	N/R	72,863
*	Fidelity	Fidelity Freedom 2010 Fund K6	N/R	33,445
*	Fidelity	JPMorgan Large Cap Growth R6	N/R	40,830
*	Fidelity	Fidelity 500 Index Fund	N/R	28,179
*	Fidelity	Fidelity Freedom 2060 Fund K6	N/R	10,822
*	Fidelity	Hartford Core Equity R6	N/R	4,161
*	Fidelity	T. Rowe Price Overseas Stock I	N/R	400
*	Fidelity	Fidelity Mid Cap Index Fund	N/R	3,522
*	Fidelity	MFS Value R6	N/R	3,846
*	Fidelity	American Funds New World R6	N/R	3,038
*	Fidelity	Fidelity Small Cap Index Fund	N/R	2,224
*	Fidelity	Fidelity Freedom 2065 Fund K6	N/R	2,949
*	Fidelity	Delaware Small Cap Value R6	N/R	881
*	Fidelity	JHancock Disciplined Value Mid Cap R6	N/R	400
*	Fidelity	Fidelity Government Money Market Fund Class K6	N/R	713
*	Fidelity	Calamos International Growth Fund Class R6	N/R	1,959
*	Fidelity	PIMCO Real Return Fund Institutional Class	N/R	143
*	Fidelity	American Funds Balanced Fund Class R6	N/R	397
*	Fidelity	Fidelity Freedom Inc Fund K6	N/R	16,156
*	Fidelity	T. Rowe Price Divers Mid Cap Gr I	N/R	8,557

**Dominican Village, Inc. 401(k) Plan**

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

EIN: 11-3037708 Plan Number: 001

June 30, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Fidelity	Federated Hermes MDT Small Cap Growth IS	N/R	\$ 955
		Total mutual funds		1,869,202
*	Participant Loans	Interest rates: 4.25% - 10.50%		11,195
				\$ 1,880,397

\*A party in interest as defined by ERISA  
N/R - cost omitted for participant directed investments

## **Dominican Village, Inc. 401(k) Plan**

Financial Statements and  
Supplementary Information

June 30, 2024 and 2023

## Table of Contents

Independent Auditors' Report .....	1
Statements of Net Assets Available for Benefits .....	5
Statement of Changes in Net Assets Available for Benefits .....	6
Notes to Financial Statements .....	7
Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions .....	13
Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) .....	14

## Independent Auditors' Report

To the Plan Administrator of  
Dominican Village, Inc. 401(k) Plan

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

We have performed audits of the financial statements of Dominican Village, Inc. 401(k) Plan (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of June 30, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended June 30, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of June 30, 2024 and 2023, and for the year ended June 30, 2024, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

### Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

## **Basis for Opinion**

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' 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 the 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 at least one year following the date that the financial statements are available to be issued.

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

## **Auditors' Responsibilities for the Audit of the Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the 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, Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions and Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year), as of or for the year ended June 30, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. 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 audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the 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, are 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 by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

*Baker Tilly US, LLP*

Iselin, NJ  
April 8, 2025

## Dominican Village, Inc. 401(k) Plan

### Statements of Net Assets Available for Benefits

June 30, 2024 and 2023

	2024	2023
<b>Assets</b>		
<b>Investments</b>		
Investments at fair value	\$ 1,869,202	\$ 1,599,725
<b>Receivables</b>		
Participant contributions	2,577	1,284
Employer contributions	61,236	74,680
Notes receivable from participants	11,195	18,435
<b>Total receivables</b>	75,008	94,399
<b>Total assets</b>	1,944,210	1,694,124
<b>Net assets available for benefits</b>	\$ 1,944,210	\$ 1,694,124

See notes to financial statements

## Dominican Village, Inc. 401(k) Plan

### Statement of Changes in Net Assets Available for Benefits

Year Ended June 30, 2024

---

#### Additions

##### Investment income

Interest and dividends	\$	47,853
Net appreciation in fair value of investments		164,344

---

<b>Total investment income</b>		<b>212,197</b>
--------------------------------	--	----------------

##### Contributions

Participant contributions		176,663
Employer contributions		156,545
Rollovers		27,583

---

<b>Total contributions</b>		<b>360,791</b>
----------------------------	--	----------------

Other revenue		139
---------------	--	-----

Interest income on notes receivable from participants		865
---	--	-----

---

<b>Total additions</b>		<b>573,992</b>
------------------------	--	----------------

#### Deductions

Benefits paid to participants		305,225
-------------------------------	--	---------

Administrative expenses		18,681
-------------------------	--	--------

---

<b>Total deductions</b>		<b>323,906</b>
-------------------------	--	----------------

---

<b>Net increase</b>		<b>250,086</b>
---------------------	--	----------------

Net assets available for benefits

Beginning of year		1,694,124
-------------------	--	-----------

---

<b>End of year</b>	\$	<b>1,944,210</b>
--------------------	----	------------------

---

# Dominican Village, Inc. 401(k) Plan

## Notes to Financial Statements

June 30, 2024 and 2023

### 1. Description of Plan

The following description of the Dominican Village, Inc. 401(k) Plan (the Plan) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan's provisions.

#### General

The Plan is a defined contribution plan established effective October 1, 2012, as restated July 1, 2018. The Plan covers all employees of Dominican Village, Inc. (the Organization or Employer), excluding employees covered by a collective bargaining agreement, leased employees, nonresident aliens who do not receive any earned income from the Employer and per diem employees, who have completed three months of service and are age 21 or older. The Organization may contribute a discretionary profit sharing amount for employees that had worked 1,000 hours within the plan year and were 21 years of age. The Plan requires a participant to be employed as of year end to be eligible to receive discretionary profit sharing contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The Plan Administrator is responsible for oversight of the Plan. The Plan's Administrator determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Committee.

#### Contributions

Each year, participants may contribute up to 100% of pretax annual compensation, as defined in the plan document, up to the maximum limits of the Internal Revenue Code (IRC). Participants also may designate all or a portion of their deferral contributions as after-tax contributions into a Roth account. Participants who have attained age 50 before the end of the plan year are eligible to make catch-up contributions. Participants also may contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollover). Participants direct the investment of their contributions into various investment options offered by the Plan. The Organization contributes a safe harbor matching contribution in an amount equal to 100% of the first 4% of base compensation that a participant contributes to the Plan. Additional profit sharing amounts may be contributed at the option of the Board of Directors. For the year ended June 30, 2024, the Organization accrued a profit sharing contribution in the amount of \$81,807, offset by forfeitures of \$24,910, to the Plan which was determined as 2% of eligible compensation. Contributions are subject to certain Internal Revenue Service (IRS) limitations.

#### Participant Accounts

Each participant's account is credited with the participant's contributions, Organization matching contributions, allocations of the Organization's discretionary contributions and an allocation of the Plan's earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. 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.

#### Vesting

Participants are vested immediately in their contributions, rollover contributions and safe harbor matching contributions, plus actual earnings thereon. Vesting in the Organization's discretionary profit sharing contribution portion of their accounts is based on years of continuous service. A participant is 20% vested after two years of credited service and continues to vest in increments of 20% until 100% vested after six or more years of credited service.

# **Dominican Village, Inc. 401(k) Plan**

## Notes to Financial Statements

June 30, 2024 and 2023

### **Notes Receivable From Participants**

Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loan interest rate, determined quarterly, is set at 2% above the prime rate, as defined. Principal and interest are paid ratably through monthly payroll deductions. Terms range from one to five years or greater for the purchase of a primary residence.

### **Payment of Benefits**

On termination of service due to death, disability, retirement, or other reasons, a participant may elect to receive a lump sum amount equal to the value of the participant's vested interest in his or her account. In addition, the Plan allows for hardship distributions if certain criteria are met.

### **Forfeited Accounts**

At June 30, 2024 and 2023, forfeited nonvested accounts totaled \$28,764 and \$18,713, respectively. Forfeitures may first be used to pay administrative expenses. Any remaining amounts will be used to reduce future employer contributions payable under the Plan. During 2024, employer contributions were reduced by \$24,910, from forfeited nonvested accounts, in accordance with plan provisions.

## **2. Summary of Accounting Policies**

### **Basis of Accounting**

The financial statements of the Plan are prepared on the accrual basis of accounting.

### **Use of Estimates**

The preparation of financial statements in accordance 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 and 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 to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Administrator determines the Plan's valuation policies utilizing information provided by the investment advisers and trustee, as applicable. See Note 3 for discussion of fair value measurements.

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

### **Notes Receivable From Participants**

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed as incurred.

# Dominican Village, Inc. 401(k) Plan

## Notes to Financial Statements

June 30, 2024 and 2023

### Payment of Benefits

Benefits are recorded when paid.

### Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Organization. Expenses that are paid by the Organization are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation in fair value of investments.

### Subsequent Events

Subsequent events were evaluated through April 8, 2025, the date the financial statements were available to be issued.

### 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 authoritative guidance are described as follows:

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

Level 2 - Inputs other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

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

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

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

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

## Dominican Village, Inc. 401(k) Plan

### Notes to Financial Statements

June 30, 2024 and 2023

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at June 30, 2024 and 2023.

*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 U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of June 30, 2024 and 2023:

<b>Assets at Fair Value as of June 30, 2024</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
Mutual funds	\$ 1,869,202	\$ -	\$ -	\$ 1,869,202
<b>Total assets in the fair value hierarchy</b>	<b>1,869,202</b>	<b>-</b>	<b>-</b>	<b>1,869,202</b>
<b>Total investments at fair value</b>	<b>\$ 1,869,202</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,869,202</b>

<b>Assets at Fair Value as of December 31, 2023</b>	<b>Level 1</b>	<b>Level 2</b>	<b>Level 3</b>	<b>Total</b>
Mutual funds	\$ 1,599,725	\$ -	\$ -	\$ 1,599,725
<b>Total assets in the fair value hierarchy</b>	<b>1,599,725</b>	<b>-</b>	<b>-</b>	<b>1,599,725</b>
<b>Total investments at fair value</b>	<b>\$ 1,599,725</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 1,599,725</b>

#### 4. Concentrations

As of June 30, 2024 and 2023, the Plan had investments of \$690,462 and \$628,171, respectively, that were concentrated in two funds, with each fund representing over 10% of the respective net assets available for benefits.

#### 5. Information Certified by Trustee

The plan administrator has elected the method of compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA for 2024 and 2023. Accordingly, Fidelity Management Trust Company, the Trustee of the Plan, has certified to the completeness and accuracy of all investments reported in the accompanying Statements of Net Assets Available for Benefits as of June 30, 2024 and 2023, and the supplemental Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of June 30, 2024, and the related investment activity reported in the Statement of Changes in Net Assets Available for Benefits for the year ended June 30, 2024.

# **Dominican Village, Inc. 401(k) Plan**

## Notes to Financial Statements

June 30, 2024 and 2023

### **6. Related-Party and Party in Interest Transactions**

Certain Plan investments are managed by Fidelity Management Trust Company, the Trustee, and therefore, these transactions qualify as party in interest transactions.

Fees incurred by the Plan for the investment management services are included in net appreciation in the fair value of the investment, as they are paid through revenue sharing, rather than a direct payment. The Trustee receives revenue from investment fund service providers for services the Trustee provides to the funds. This revenue is used to offset certain amounts owed to the Trustee for its administrative services to the Plan. The Plan or Employer may make a payment to the Trustee for administrative expenses not covered by revenue sharing.

Additionally, the Plan issues loans to participants, which are secured by the participant's account balances. These transactions qualify as party in interest transactions.

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

### **7. Plan Termination**

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

### **8. Tax Status**

The Plan adopted a pre-approved plan offered by FMR LLC. The pre-approved plan received an IRS Opinion Letter dated June 30, 2020, that the Plan and related trust are designed in accordance with the applicable sections of the IRC. Although the Plan has been amended since receiving the IRS Opinion Letter, the plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC, and, therefore believes that the Plan is qualified, and the related trust is tax exempt.

Plan management is required 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 IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

### **9. Risks and Uncertainties**

The Plan invests in various investment securities. Investment securities are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

# **Dominican Village, Inc. 401(k) Plan**

Notes to Financial Statements

June 30, 2024 and 2023

## **10. Delinquent Participant Contributions**

For the years ended June 30, 2024 and 2023, the Organization did not remit certain participant contributions to the Plan on a timely basis as defined by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Untimely remittances identified on the Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions, which totaled \$5,028, were not corrected in 2024. Untimely remittances of \$31,097 were identified on the Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions in a prior year and were not corrected prior to July 1, 2023. The prior year untimely remittances were corrected outside of the Department of Labor Voluntary Fiduciary Correction Program in 2024. Additionally, the Organization will be compensating participants for lost earnings resulting from the delay in contributions.

**Dominican Village, Inc. 401(k) Plan**

Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions

EIN: 11-3037708 Plan Number: 001

Year Ended June 30, 2024

<b>Total That Constitute Nonexempt Prohibited Transactions</b>				
<b>Participant Contributions Transferred Late to the Plan (1)</b>	<b>Contributions not Corrected</b>	<b>Contributions Corrected Outside of VFCP</b>	<b>Contributions Pending Correction in VFCP</b>	<b>Total Fully Corrected Under VFCP and PTE 2002-51</b>
\$ 5,028	\$ 5,028	\$ -	\$ -	\$ -
31,097	-	31,097	-	-
<b>\$ 36,125</b>	<b>\$ 5,028</b>	<b>\$ 31,097</b>	<b>\$ -</b>	<b>\$ -</b>

(1) Amount does not include participant loan repayments.

## Dominican Village, Inc. 401(k) Plan

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

EIN: 11-3037708 Plan Number: 001

June 30, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
Mutual Funds				
*	Fidelity	Fidelity Freedom 2030 Fund K6	N/R	\$ 383,896
*	Fidelity	Fidelity Freedom 2025 Fund K6	N/R	306,566
*	Fidelity	Fidelity Freedom 2015 Fund K6	N/R	160,124
*	Fidelity	Fidelity Freedom 2040 Fund K6	N/R	177,004
*	Fidelity	Fidelity Freedom 2020 Fund K6	N/R	135,426
*	Fidelity	Fidelity Freedom 2035 Fund K6	N/R	167,926
*	Fidelity	Putnam Stable Value	N/R	122,111
*	Fidelity	Fidelity Freedom 2050 Fund K6	N/R	65,859
*	Fidelity	Fidelity Freedom 2045 Fund K6	N/R	113,850
*	Fidelity	Fidelity Freedom 2055 Fund K6	N/R	72,863
*	Fidelity	Fidelity Freedom 2010 Fund K6	N/R	33,445
*	Fidelity	JPMorgan Large Cap Growth R6	N/R	40,830
*	Fidelity	Fidelity 500 Index Fund	N/R	28,179
*	Fidelity	Fidelity Freedom 2060 Fund K6	N/R	10,822
*	Fidelity	Hartford Core Equity R6	N/R	4,161
*	Fidelity	T. Rowe Price Overseas Stock I	N/R	400
*	Fidelity	Fidelity Mid Cap Index Fund	N/R	3,522
*	Fidelity	MFS Value R6	N/R	3,846
*	Fidelity	American Funds New World R6	N/R	3,038
*	Fidelity	Fidelity Small Cap Index Fund	N/R	2,224
*	Fidelity	Fidelity Freedom 2065 Fund K6	N/R	2,949
*	Fidelity	Delaware Small Cap Value R6	N/R	881
*	Fidelity	JHancock Disciplined Value Mid Cap R6	N/R	400
*	Fidelity	Fidelity Government Money Market Fund Class K6	N/R	713
*	Fidelity	Calamos International Growth Fund Class R6	N/R	1,959
*	Fidelity	PIMCO Real Return Fund Institutional Class	N/R	143
*	Fidelity	American Funds Balanced Fund Class R6	N/R	397
*	Fidelity	Fidelity Freedom Inc Fund K6	N/R	16,156
*	Fidelity	T. Rowe Price Divers Mid Cap Gr I	N/R	8,557

**Dominican Village, Inc. 401(k) Plan**

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)

EIN: 11-3037708 Plan Number: 001

June 30, 2024

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
*	Fidelity	Federated Hermes MDT Small Cap Growth IS	N/R	\$ 955
		Total mutual funds		1,869,202
*	Participant Loans	Interest rates: 4.25% - 10.50%		11,195
				\$ 1,880,397

\*A party in interest as defined by ERISA  
N/R - cost omitted for participant directed investments

SSN *	Is this a contribution or a loan correction? *	Contribution Source ID (2 Digit Number) or Loan ID (from PSW) *	Correction Amount -Use positive values to add money to participant accounts -Use <b>negative values</b> to <b>remove</b> money from participant accounts *	Error Date (MM/DD/YYYY) This is the date that the amount should have/did post to the participant account at Fidelity *	Fiscal Year <b>For contributions only.</b> This is the plan's fiscal year in which the contribution amount should be posted to or removed from *	Earnings Method for Adjustments Use drop down to select earnings method. This field is required for each line of this correction request.  <b>Please see the instructions tab for additional information.</b> *	
088-02-5965	Contribution	03	2.49	3/7/2024	06/30/2024	DOL (Department of Labor)	
127-70-3803	Contribution	01	8.75	3/7/2024	06/30/2024	DOL (Department of Labor)	
127-70-3803	Contribution	03	5.83	3/7/2024	06/30/2024	DOL (Department of Labor)	
846-06-2521	Contribution	01	3.91	3/7/2024	06/30/2024	DOL (Department of Labor)	
070-60-3123	Contribution	03	2.51	3/7/2024	06/30/2024	DOL (Department of Labor)	
100-90-3774	Contribution	01	1.02	3/7/2024	06/30/2024	DOL (Department of Labor)	
100-90-3774	Contribution	03	1.03	3/7/2024	06/30/2024	DOL (Department of Labor)	
082-84-5509	Contribution	01	3.82	3/7/2024	06/30/2024	DOL (Department of Labor)	
082-84-5509	Contribution	03	2.55	3/7/2024	06/30/2024	DOL (Department of Labor)	
053-56-0584	Contribution	01	0.42	3/7/2024	06/30/2024	DOL (Department of Labor)	
053-56-0584	Contribution	03	0.42	3/7/2024	06/30/2024	DOL (Department of Labor)	
073-02-7480	Contribution	03	3.82	3/7/2024	06/30/2024	DOL (Department of Labor)	
487-06-1203	Contribution	01	3.97	3/7/2024	06/30/2024	DOL (Department of Labor)	
487-06-1203	Contribution	03	3.97	3/7/2024	06/30/2024	DOL (Department of Labor)	
064-90-8403	Contribution	03	51.68	3/7/2024	06/30/2024	DOL (Department of Labor)	
211-94-3665	Contribution	01	2.19	3/7/2024	06/30/2024	DOL (Department of Labor)	
211-94-3665	Contribution	03	2.19	3/7/2024	06/30/2024	DOL (Department of Labor)	
170-36-2147	Contribution	01	21.25	3/7/2024	06/30/2024	DOL (Department of Labor)	
170-36-2147	Contribution	03	4.25	3/7/2024	06/30/2024	DOL (Department of Labor)	
081-72-2318	Contribution	03	6.04	3/7/2024	06/30/2024	DOL (Department of Labor)	
090-98-7046	Contribution	01	9.59	3/7/2024	06/30/2024	DOL (Department of Labor)	
090-98-7046	Contribution	03	3.20	3/7/2024	06/30/2024	DOL (Department of Labor)	
122-62-6574	Contribution	01	1.75	3/7/2024	06/30/2024	DOL (Department of Labor)	
122-62-6574	Contribution	03	0.78	3/7/2024	06/30/2024	DOL (Department of Labor)	
110-82-5816	Contribution	03	0.56	3/7/2024	06/30/2024	DOL (Department of Labor)	
121-84-8437	Contribution	01	2.20	3/7/2024	06/30/2024	DOL (Department of Labor)	
121-84-8437	Contribution	03	2.20	3/7/2024	06/30/2024	DOL (Department of Labor)	
462-57-1287	Contribution	01	4.29	3/7/2024	06/30/2024	DOL (Department of Labor)	
462-57-1287	Contribution	03	4.30	3/7/2024	06/30/2024	DOL (Department of Labor)	
834-12-8330	Contribution	03	2.70	3/7/2024	06/30/2024	DOL (Department of Labor)	
014-68-4129	Contribution	01	28.78	3/7/2024	06/30/2024	DOL (Department of Labor)	
014-68-4129	Contribution	03	57.55	3/7/2024	06/30/2024	DOL (Department of Labor)	
073-36-4980	Contribution	01	56.18	3/7/2024	06/30/2024	DOL (Department of Labor)	
073-36-4980	Contribution	03	22.47	3/7/2024	06/30/2024	DOL (Department of Labor)	
122-62-6574	Contribution	01	32.86	3/7/2024	06/30/2024	DOL (Department of Labor)	
122-62-6574	Contribution	03	29.21	3/7/2024	06/30/2024	DOL (Department of Labor)	
073-54-5572	Contribution	01	35.81	3/7/2024	06/30/2024	DOL (Department of Labor)	
073-54-5572	Contribution	03	28.64	3/7/2024	06/30/2024	DOL (Department of Labor)	
090-98-7046	Contribution	01	34.87	3/7/2024	06/30/2024	DOL (Department of Labor)	
090-98-7046	Contribution	03	23.24	3/7/2024	06/30/2024	DOL (Department of Labor)	
834-12-8330	Contribution	01	13.31	3/7/2024	06/30/2024	DOL (Department of Labor)	
834-12-8330	Contribution	03	26.62	3/7/2024	06/30/2024	DOL (Department of Labor)	
082-84-5509	Contribution	01	63.65	3/7/2024	06/30/2024	DOL (Department of Labor)	
082-84-5509	Contribution	03	127.29	3/7/2024	06/30/2024	DOL (Department of Labor)	
054-90-8265	Contribution	01	2.55	3/7/2024	06/30/2024	DOL (Department of Labor)	
054-90-8265	Contribution	03	5.10	3/7/2024	06/30/2024	DOL (Department of Labor)	
127-70-3803	Contribution	01	24.75	3/7/2024	06/30/2024	DOL (Department of Labor)	
127-70-3803	Contribution	03	33.00	3/7/2024	06/30/2024	DOL (Department of Labor)	
120-56-3766	Contribution	01	1.64	3/7/2024	06/30/2024	DOL (Department of Labor)	
120-56-3766	Contribution	03	3.29	3/7/2024	06/30/2024	DOL (Department of Labor)	
056-68-2766	Contribution	01	53.48	3/7/2024	06/30/2024	DOL (Department of Labor)	
056-68-2766	Contribution	03	85.57	3/7/2024	06/30/2024	DOL (Department of Labor)	
053-56-0584	Contribution	01	15.81	3/7/2024	06/30/2024	DOL (Department of Labor)	
053-56-0584	Contribution	03	31.61	3/7/2024	06/30/2024	DOL (Department of Labor)	
121-56-2157	Contribution	01	24.78	3/7/2024	06/30/2024	DOL (Department of Labor)	
121-56-2157	Contribution	03	49.56	3/7/2024	06/30/2024	DOL (Department of Labor)	
112-82-4666	Contribution	01	4.28	3/7/2024	06/30/2024	DOL (Department of Labor)	
112-82-4666	Contribution	03	8.57	3/7/2024	06/30/2024	DOL (Department of Labor)	
063-72-0459	Contribution	01	47.54	3/7/2024	06/30/2024	DOL (Department of Labor)	
063-72-0459	Contribution	03	95.07	3/7/2024	06/30/2024	DOL (Department of Labor)	
170-36-2147	Contribution	01	306.00	3/7/2024	06/30/2024	DOL (Department of Labor)	
170-36-2147	Contribution	03	122.40	3/7/2024	06/30/2024	DOL (Department of Labor)	
128-68-3419	Contribution	01	71.28	3/7/2024	06/30/2024	DOL (Department of Labor)	
128-68-3419	Contribution	03	142.56	3/7/2024	06/30/2024	DOL (Department of Labor)	
114-64-7495	Contribution	01	25.67	3/7/2024	06/30/2024	DOL (Department of Labor)	
114-64-7495	Contribution	03	51.34	3/7/2024	06/30/2024	DOL (Department of Labor)	
070-60-3123	Contribution	01	62.44	3/9/2023	06/30/2024	DOL (Department of Labor)	

070-60-3123	Contribution	03	62.45	3/9/2023	06/30/2024	DOL (Department of Labor)
050-82-4922	Contribution	01	14.18	3/9/2023	06/30/2024	DOL (Department of Labor)
050-82-4922	Contribution	03	18.90	3/9/2023	06/30/2024	DOL (Department of Labor)
122-62-6574	Contribution	01	28.64	3/9/2023	06/30/2024	DOL (Department of Labor)
122-62-6574	Contribution	03	28.64	3/9/2023	06/30/2024	DOL (Department of Labor)
073-54-5572	Contribution	01	29.17	3/9/2023	06/30/2024	DOL (Department of Labor)
073-54-5572	Contribution	03	22.25	3/9/2023	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	01	3.97	3/9/2023	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	03	7.93	3/9/2023	06/30/2024	DOL (Department of Labor)
211-94-3665	Contribution	01	2.55	3/9/2023	06/30/2024	DOL (Department of Labor)
211-94-3665	Contribution	03	5.11	3/9/2023	06/30/2024	DOL (Department of Labor)
058-76-5417	Contribution	01	23.91	3/9/2023	06/30/2024	DOL (Department of Labor)
058-76-5417	Contribution	03	47.82	3/9/2023	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	01	56.64	3/9/2023	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	03	113.29	3/9/2023	06/30/2024	DOL (Department of Labor)
054-90-8265	Contribution	01	9.90	3/9/2023	06/30/2024	DOL (Department of Labor)
054-90-8265	Contribution	03	19.80	3/9/2023	06/30/2024	DOL (Department of Labor)
127-70-3803	Contribution	01	14.18	3/9/2023	06/30/2024	DOL (Department of Labor)
127-70-3803	Contribution	03	18.90	3/9/2023	06/30/2024	DOL (Department of Labor)
120-56-3766	Contribution	01	8.78	3/9/2023	06/30/2024	DOL (Department of Labor)
120-56-3766	Contribution	03	17.56	3/9/2023	06/30/2024	DOL (Department of Labor)
126-68-6925	Contribution	01	9.82	3/9/2023	06/30/2024	DOL (Department of Labor)
126-68-6925	Contribution	03	19.64	3/9/2023	06/30/2024	DOL (Department of Labor)
104-42-8725	Contribution	01	6.36	3/9/2023	06/30/2024	DOL (Department of Labor)
104-42-8725	Contribution	03	12.73	3/9/2023	06/30/2024	DOL (Department of Labor)
121-84-8437	Contribution	01	3.65	3/9/2023	06/30/2024	DOL (Department of Labor)
121-84-8437	Contribution	03	7.29	3/9/2023	06/30/2024	DOL (Department of Labor)
462-57-1287	Contribution	01	4.77	3/9/2023	06/30/2024	DOL (Department of Labor)
462-57-1287	Contribution	03	9.54	3/9/2023	06/30/2024	DOL (Department of Labor)
053-56-0584	Contribution	01	15.35	3/9/2023	06/30/2024	DOL (Department of Labor)
053-56-0584	Contribution	03	30.69	3/9/2023	06/30/2024	DOL (Department of Labor)
121-56-2157	Contribution	01	32.08	3/9/2023	06/30/2024	DOL (Department of Labor)
121-56-2157	Contribution	03	64.15	3/9/2023	06/30/2024	DOL (Department of Labor)
170-36-2147	Contribution	01	272.25	3/9/2023	06/30/2024	DOL (Department of Labor)
170-36-2147	Contribution	03	108.90	3/9/2023	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	01	69.20	3/9/2023	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	03	138.40	3/9/2023	06/30/2024	DOL (Department of Labor)
114-64-7495	Contribution	01	24.92	3/9/2023	06/30/2024	DOL (Department of Labor)
114-64-7495	Contribution	03	49.85	3/9/2023	06/30/2024	DOL (Department of Labor)
073-36-4980	Contribution	01	40.12	3/19/2022	06/30/2024	DOL (Department of Labor)
073-36-4980	Contribution	03	16.05	3/19/2022	06/30/2024	DOL (Department of Labor)
050-82-4922	Contribution	01	33.75	3/19/2022	06/30/2024	DOL (Department of Labor)
050-82-4922	Contribution	03	45.00	3/19/2022	06/30/2024	DOL (Department of Labor)
122-62-6574	Contribution	01	24.10	3/19/2022	06/30/2024	DOL (Department of Labor)
122-62-6574	Contribution	03	27.54	3/19/2022	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	01	4.90	3/19/2022	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	03	9.79	3/19/2022	06/30/2024	DOL (Department of Labor)
211-94-3665	Contribution	01	11.82	3/19/2022	06/30/2024	DOL (Department of Labor)
211-94-3665	Contribution	03	23.64	3/19/2022	06/30/2024	DOL (Department of Labor)
091-58-6712	Contribution	01	7.27	3/19/2022	06/30/2024	DOL (Department of Labor)
091-58-6712	Contribution	03	9.70	3/19/2022	06/30/2024	DOL (Department of Labor)
083-86-9658	Contribution	01	10.33	3/19/2022	06/30/2024	DOL (Department of Labor)
083-86-9658	Contribution	03	16.52	3/19/2022	06/30/2024	DOL (Department of Labor)
109-90-4836	Contribution	01	8.61	3/19/2022	06/30/2024	DOL (Department of Labor)
109-90-4836	Contribution	03	13.77	3/19/2022	06/30/2024	DOL (Department of Labor)
089-78-6346	Contribution	01	2.63	3/19/2022	06/30/2024	DOL (Department of Labor)
089-78-6346	Contribution	03	5.27	3/19/2022	06/30/2024	DOL (Department of Labor)
082-84-5509	Contribution	01	6.89	3/19/2022	06/30/2024	DOL (Department of Labor)
082-84-5509	Contribution	03	9.18	3/19/2022	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	01	50.00	3/19/2022	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	03	99.99	3/19/2022	06/30/2024	DOL (Department of Labor)
054-90-8265	Contribution	01	14.20	3/19/2022	06/30/2024	DOL (Department of Labor)
054-90-8265	Contribution	03	28.40	3/19/2022	06/30/2024	DOL (Department of Labor)
070-60-3123	Contribution	01	30.02	3/19/2022	06/30/2024	DOL (Department of Labor)
070-60-3123	Contribution	03	60.03	3/19/2022	06/30/2024	DOL (Department of Labor)
120-56-3766	Contribution	01	9.58	3/19/2022	06/30/2024	DOL (Department of Labor)
120-56-3766	Contribution	03	19.16	3/19/2022	06/30/2024	DOL (Department of Labor)
126-68-6925	Contribution	01	3.81	3/19/2022	06/30/2024	DOL (Department of Labor)
126-68-6925	Contribution	03	7.63	3/19/2022	06/30/2024	DOL (Department of Labor)
122-62-7160	Contribution	01	12.86	3/19/2022	06/30/2024	DOL (Department of Labor)
122-62-7160	Contribution	03	25.72	3/19/2022	06/30/2024	DOL (Department of Labor)
053-56-0584	Contribution	01	15.05	3/19/2022	06/30/2024	DOL (Department of Labor)
053-56-0584	Contribution	03	30.09	3/19/2022	06/30/2024	DOL (Department of Labor)
091-72-5784	Contribution	01	65.38	3/19/2022	06/30/2024	DOL (Department of Labor)
091-72-5784	Contribution	03	52.31	3/19/2022	06/30/2024	DOL (Department of Labor)
121-56-2157	Contribution	01	31.14	3/19/2022	06/30/2024	DOL (Department of Labor)
121-56-2157	Contribution	03	62.28	3/19/2022	06/30/2024	DOL (Department of Labor)
112-82-4666	Contribution	01	2.45	3/19/2022	06/30/2024	DOL (Department of Labor)
112-82-4666	Contribution	03	4.90	3/19/2022	06/30/2024	DOL (Department of Labor)
107-80-9075	Contribution	01	17.21	3/19/2022	06/30/2024	DOL (Department of Labor)

107-80-9075	Contribution	03	13.77	3/19/2022	06/30/2024	DOL (Department of Labor)
096-68-3559	Contribution	01	12.94	3/19/2022	06/30/2024	DOL (Department of Labor)
096-68-3559	Contribution	03	20.70	3/19/2022	06/30/2024	DOL (Department of Labor)
170-36-2147	Contribution	01	280.44	3/19/2022	06/30/2024	DOL (Department of Labor)
170-36-2147	Contribution	03	112.18	3/19/2022	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	01	65.91	3/19/2022	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	03	131.81	3/19/2022	06/30/2024	DOL (Department of Labor)
114-64-7495	Contribution	01	28.76	3/19/2022	06/30/2024	DOL (Department of Labor)
114-64-7495	Contribution	03	57.51	3/19/2022	06/30/2024	DOL (Department of Labor)
071-56-0044	Contribution	01	67.50	3/19/2022	06/30/2024	DOL (Department of Labor)
071-56-0044	Contribution	03	54.00	3/19/2022	06/30/2024	DOL (Department of Labor)
014-68-4129	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
014-68-4129	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
071-74-8486	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
071-74-8486	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
082-54-1144	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
056-68-2766	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
056-68-2766	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
063-72-0459	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
063-72-0459	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	01	20.00	12/9/2023	06/30/2024	DOL (Department of Labor)
128-68-3419	Contribution	03	40.00	12/9/2023	06/30/2024	DOL (Department of Labor)
088-02-5965	Contribution	03	33.65	5/16/2024	06/30/2024	DOL (Department of Labor)
070-60-3123	Contribution	03	54.67	5/16/2024	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	03	28.09	5/16/2024	06/30/2024	DOL (Department of Labor)
064-90-8403	Contribution	03	25.84	5/16/2024	06/30/2024	DOL (Department of Labor)
132-29-6379	Contribution	03	20.10	5/16/2024	06/30/2024	DOL (Department of Labor)
052-98-7713	Contribution	03	20.47	6/13/2024	06/30/2024	DOL (Department of Labor)
700-70-1197	Contribution	03	19.73	6/13/2024	06/30/2024	DOL (Department of Labor)
110-82-5816	Contribution	03	27.46	6/13/2024	06/30/2024	DOL (Department of Labor)
117-88-8550	Contribution	03	22.90	6/13/2024	06/30/2024	DOL (Department of Labor)
114-88-3666	Contribution	03	26.59	6/13/2024	06/30/2024	DOL (Department of Labor)
088-02-5965	Contribution	03	17.92	6/27/2024	06/30/2024	DOL (Department of Labor)
446-81-7494	Contribution	03	6.80	6/27/2024	06/30/2024	DOL (Department of Labor)
073-02-7480	Contribution	03	26.55	6/27/2024	06/30/2024	DOL (Department of Labor)
132-29-6379	Contribution	03	23.49	6/27/2024	06/30/2024	DOL (Department of Labor)
110-82-5816	Contribution	03	14.51	6/27/2024	06/30/2024	DOL (Department of Labor)
117-88-8550	Contribution	03	19.81	6/27/2024	06/30/2024	DOL (Department of Labor)