

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>COMPOSITE MODULES, INC. RETIREMENT PLAN</u>	1b Three-digit plan number (PN) ▶ <u>001</u>
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) <u>COMPOSITE MODULES, INC.</u> <u>15446 FLIGHT PATH DR.</u> <u>BROOKSVILLE, FL 34604</u>	1c Effective date of plan <u>07/01/2000</u> 2b Employer Identification Number (EIN) <u>04-2504184</u> 2c Plan Sponsor's telephone number <u>508-226-0420</u> 2d Business code (see instructions) <u>335900</u>

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.

Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.

SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>06/03/2025</u>	<u>ELLIOT ROSENBLATT</u>
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	184
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	130
	6a(2)	144
	6b	0
	6c	55
	6d	199
	6e	0
	6f	199
	6g(1)	152
6g(2)	166	
6h	4	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <input checked="" type="checkbox"/> Insurance	(1) <input checked="" 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 1
- (4) **C** (Service Provider Information)
- (5) **D** (DFE/Participating Plan Information)
- (6) **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 _____

<p>SCHEDULE A (Form 5500)</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Insurance Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ File as an attachment to Form 5500.</p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p>2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<p>A Name of plan COMPOSITE MODULES, INC. RETIREMENT PLAN</p>	<p>B Three-digit plan number (PN) ▶</p>	<p>001</p>
<p>C Plan sponsor's name as shown on line 2a of Form 5500 COMPOSITE MODULES, INC.</p>	<p>D Employer Identification Number (EIN) 04-2504184</p>	

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

1 Coverage Information:

(a) Name of insurance carrier
JOHN HANCOCK LIFE INSURANCE COMPANY(USA)

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
01-0233346	65838	98895	212	01/01/2024	12/31/2024

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

<p>(a) Total amount of commissions paid 6249</p>	<p>(b) Total amount of fees paid 3484</p>
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MORGAN STANNLEY INSURANCE SERV,INC. 1 NEW YORK PLAZA 12TH FLOOR NEW YORK, NY 10004

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
6249	0	BROKER COMMISSION	3

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
MAP RETIREMENT USA LLC W6180 AEROTECH DRIVE APPLETON, WI 54914

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
0	3484	TPA COMPENSATION AND FEES	5

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information
 Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	2228033

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
 Specify nature of costs ▶

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

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

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

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

b Balance at the end of the previous year	7b	0
c Additions: (1) Contributions deposited during the year	7c(1)	
	7c(2)	
	7c(3)	
	7c(4)	
	7c(5)	
(6) Total additions	7c(6)	0
d Total of balance and additions (add lines 7b and 7c(6))	7d	0
e Deductions: (1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	
	7e(2)	
	7e(3)	
	7e(4)	
	(5) Total deductions	
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	0

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

a	Premiums: (1) Amount received	9a(1)		
	(2) Increase (decrease) in amount due but unpaid	9a(2)		
	(3) Increase (decrease) in unearned premium reserve	9a(3)		
	(4) Earned ((1) + (2) - (3))		9a(4)	0
b	Benefit charges (1) Claims paid	9b(1)		
	(2) Increase (decrease) in claim reserves	9b(2)		
	(3) Incurred claims (add (1) and (2))		9b(3)	0
	(4) Claims charged		9b(4)	
c	Remainder of premium: (1) Retention charges (on an accrual basis) --			
	(A) Commissions	9c(1)(A)		
	(B) Administrative service or other fees	9c(1)(B)		
	(C) Other specific acquisition costs	9c(1)(C)		
	(D) Other expenses	9c(1)(D)		
	(E) Taxes	9c(1)(E)		
	(F) Charges for risks or other contingencies	9c(1)(F)		
	(G) Other retention charges	9c(1)(G)		
	(H) Total retention		9c(1)(H)	0
	(2) Dividends or retroactive rate refunds. (These amounts were <input type="checkbox"/> paid in cash, or <input type="checkbox"/> credited.)		9c(2)	
d	Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
	(2) Claim reserves		9d(2)	
	(3) Other reserves		9d(3)	
e	Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

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

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan COMPOSITE MODULES, INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 COMPOSITE MODULES, INC.	D Employer Identification Number (EIN) 04-2504184	

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

JOHN HANCOCK LIFE INS CO(USA)

01-0233346

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

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

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

JOHN HANCOCK LIFE INS CO

P.O. BOX 600
BUFFALO, NY 14201-0600

01-0233346

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKPR	1342	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input type="checkbox"/> No <input checked="" 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"/>

(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.

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
A Name of plan <u>COMPOSITE MODULES, INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) <u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>COMPOSITE MODULES, INC.</u>	D Employer Identification Number (EIN) <u>04-2504184</u>

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX RET</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>2846</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2025</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>19012</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2030</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>116550</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2035</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>219124</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2040</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>36321</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2045</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>162374</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BLACKROCK LIFEPATH INDEX 2050</u>		
b Name of sponsor of entity listed in (a): <u>JOHN HANCOCK LIFE INSURANCE CO(USA)</u>		
c EIN-PN <u>01-0233346-000</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>39174</u>

a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFE PATH INDEX 2055		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16334
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFE PATH INDEX 2060		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 56178
a Name of MTIA, CCT, PSA, or 103-12 IE: BLACKROCK LIFE PATH INDEX 2065		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 12751
a Name of MTIA, CCT, PSA, or 103-12 IE: JH MULTIMANAGER AGGRESSIVE LS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 225225
a Name of MTIA, CCT, PSA, or 103-12 IE: JH MULTIMANAGER GROWTH LS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 182921
a Name of MTIA, CCT, PSA, or 103-12 IE: JH MULTIMANAGER BALANCED LS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 740844
a Name of MTIA, CCT, PSA, or 103-12 IE: JH MULTIMANAGER MODERATE LS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 95471
a Name of MTIA, CCT, PSA, or 103-12 IE: JH MULTIMANAGER CONSERV LS		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37965
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO SMALL CAP GROWTH		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7680
a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY ADV LEVERAGED CO STK		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 10077

a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY NASDAQ COMPOSITE IDX		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 88733
a Name of MTIA, CCT, PSA, or 103-12 IE: CAPITAL WORLD GROWTH & INCOME		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 14515
a Name of MTIA, CCT, PSA, or 103-12 IE: T.ROWE PRICE SML CAP VAL		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1035
a Name of MTIA, CCT, PSA, or 103-12 IE: 500 INDEX FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 50944
a Name of MTIA, CCT, PSA, or 103-12 IE: FIDELITY ADVISOR TOTAL BOND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2003
a Name of MTIA, CCT, PSA, or 103-12 IE: MUTUAL GLOBAL DISCOVERY		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 15055
a Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO INTERNATIONAL BOND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1932
a Name of MTIA, CCT, PSA, or 103-12 IE: PARNASSUS CORE EQUITY FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1240
a Name of MTIA, CCT, PSA, or 103-12 IE: PIMCO REAL RETURN		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 247
a Name of MTIA, CCT, PSA, or 103-12 IE: MONEY MARKET FUND		
b Name of sponsor of entity listed in (a): JOHN HANCOCK LIFE INSURANCE CO(USA)		
c EIN-PN 01-0233346-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 71483

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan COMPOSITE MODULES, INC. RETIREMENT PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 COMPOSITE MODULES, INC.	D Employer Identification Number (EIN) 04-2504184

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	7318	2840
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	37141	45353
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	1908186	2228033
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	1952645	2276226
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	1952645	2276226

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	107918	
(B) Participants.....	2a(1)(B)	283412	
(C) Others (including rollovers).....	2a(1)(C)	401	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		391731
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	4666	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		4666
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	224301
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	0
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total	2d	620698

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	277749
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	277749
f Corrective distributions (see instructions)	2f	
g Certain deemed distributions of participant loans (see instructions)	2g	
h Interest expense	2h	
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	0
(2) Contract administrator fees	2i(2)	16943
(3) Recordkeeping fees	2i(3)	2425
(4) IQPA audit fees	2i(4)	0
(5) Investment advisory and investment management fees	2i(5)	0
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	0
(8) Legal fees	2i(8)	0
(9) Valuation/appraisal fees	2i(9)	0
(10) Other trustee fees and expenses	2i(10)	0
(11) Other expenses	2i(11)	0
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	19368
j Total expenses. Add all expense amounts in column (b) and enter total	2j	297117

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k	323581
l Transfers of assets:		
(1) To this plan	2l(1)	
(2) From this plan	2l(2)	

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) Unmodified (2) Qualified (3) Disclaimer (4) Adverse

b Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1) DOL Regulation 2520.103-8 (2) DOL Regulation 2520.103-12(d) (3) neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

c Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: **ACCELL CPA & ASSOCIATES, P.A.**

(2) EIN: **99-1680488**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
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.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		300000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

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

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>COMPOSITE MODULES, INC. RETIREMENT PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>COMPOSITE MODULES, INC.</u>	D Employer Identification Number (EIN) <u>04-2504184</u>	

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....

1		0
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2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 01-0233346

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year.....

3	
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Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a
b Enter the amount contributed by the employer to the plan for this plan year	6b
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline?..... Yes No N/A

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? Yes No N/A

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

Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? Yes No

11 a Does the ESOP hold any preferred stock? Yes No

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) Yes No

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? Yes No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

a Name of contributing employer _____

b EIN _____ **c** Dollar amount contributed by employer _____

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

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

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

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

14 Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

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

15 Enter the ratio of the number of participants under the plan on whose behalf no employer had an obligation to make an employer contribution during the current plan year to:

a The corresponding number for the plan year immediately preceding the current plan year	15a	
b The corresponding number for the second preceding plan year	15b	

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

a Enter the number of employers who withdrew during the preceding plan year	16a	
b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....	16b	

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

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

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 Q703912A.

COMPOSITE MODULES, INC. RETIREMENT PLAN

**FINANCIAL STATEMENTS,
SUPPLEMENTAL SCHEDULE AND
INDEPENDENT AUDITORS' REPORT**

DECEMBER 31, 2024



INDEPENDENT AUDITORS' REPORT

To the Trustee Committee of
Composite Modules, Inc. Retirement Plan

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

We have performed audits of the accompanying financial statements of Composite Modules, Inc. Retirement Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an

opinion on the effectiveness of Composite Modules, Inc. Retirement 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 Composite Modules, Inc. Retirement 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 Schedule of Assets is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with 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 schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including their form and content, are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion—

- the form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, are presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- the information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared

and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Accell CPA & Associates

Tampa, Florida
May 23, 2025

**COMPOSITE MODULES, INC. RETIREMENT PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

	<u>2024</u>	<u>2023</u>
Assets:		
Cash	\$ 2,840	\$ 7,318
Investments, at fair value	<u>2,228,033</u>	<u>1,908,186</u>
Receivables:		
Participant contributions	5,954	3,631
Employer contributions	2,198	1,523
Notes receivable from participants	<u>45,353</u>	<u>37,141</u>
Total assets	<u>2,284,378</u>	<u>1,957,799</u>
Net assets available for benefits	<u>\$ 2,284,378</u>	<u>\$ 1,957,799</u>

See accompanying Independent Auditors' Report and notes to the financial statements.

**COMPOSITE MODULES, INC. RETIREMENT PLAN
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2024**

Additions to net assets available for benefits attributed to:	
Net appreciation in fair value of investments	\$ 224,301
Total investment income	<u>224,301</u>
Contributions:	
Participant	285,735
Employer	108,593
Participant rollovers	401
Total contributions	<u>394,729</u>
Interest income on notes receivable from participants	<u>4,666</u>
Total additions	<u>623,696</u>
Deductions from net assets available for benefits attributed to:	
Benefits paid to participants	277,749
Administrative expenses	<u>19,368</u>
Total deductions	<u>297,117</u>
Net increase in net assets available for benefits	326,579
Net assets available for benefits - beginning of year	<u>1,957,799</u>
Net assets available for benefits - end of year	<u>\$ 2,284,378</u>

See accompanying Independent Auditors' Report and notes to the financial statements.

COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024

NOTE 1 DESCRIPTION OF THE PLAN

Organization

Composite Modules, Inc. Retirement Plan (the “Plan”) is a defined contribution plan covering all eligible employees of Composite Modules, Inc. and affiliates (the “Company” or the “Employer”). The Plan was established on July 1, 2000. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”). The most recent Plan adoption came on January 1, 2023.

The following brief description of the Plan provides only general information. Participants should refer to the Summary Plan Description or Plan Document for a more complete description of the Plan’s provisions.

General

The Plan covers all eligible employees of the Company as defined by the Plan Document. To participate in the Plan, employees must be employed by the Company or any affiliate who has adopted the Plan.

To become a participant eligible to make elective deferrals and receive matching contributions, employees must first complete six months service and attain the age of 21. They may elect to start, increase or reduce elections to contribute to the Plan effective as of the first day of the quarter following their eligibility date. The Plan has an auto-enrollment feature at 1% of eligible compensation with no escalation.

Contributions

Participants in the Plan may contribute up to 90% of their Plan Compensation, not to exceed the maximum allowed by the Internal Revenue Code (the “Code”). In addition, the Plan and the Code permit participants age 50 or over during the Plan year to make additional “catch-up contributions” up to Code limits. Participants may also contribute amounts representing distributions from other qualified retirement plans.

The Company may make discretionary matching contributions to the Plan each year. Eligible employees that terminate employment with the Company due to death, disability, or attainment of normal retirement age will still be eligible to receive a matching contribution for the year in which they are terminated. For the year ended December 31, 2024, the Company made discretionary matching contributions at 50% up to 6% of employee contributions of approximately \$109,000.

Investment Options

Upon enrollment, a participant may direct participant and employer contributions to one or more of the Plan’s investment fund options.

COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of Employer discretionary matching contributions and Plan 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

Participant contributions, including rollover contributions, are 100% vested. Employer contributions, and actual earnings thereon, are incrementally vested over six years at 20% per year, beginning the second year of vesting service. In the event of death, total or permanent disability, or retirement, participants become fully vested in the Employer contributions.

Notes Receivable from Participants

A participant may only apply for a loan to enable them to meet a financial need that is immediate and heavy. A loan will only be made if the Plan Administrator determines that the participant has the ability to repay the loan. Participants may borrow from their salary deferral account balance a minimum of \$1,000 to a maximum of the lesser of one half of the present value of the non-forfeitable accrued benefit or \$50,000. The loan must be repaid over a period not extending beyond five years from the date of the loan. Loan fees may be charged against the account of the participant to whom the loan is granted and the Employer may adopt any administrative rules or procedures that it deems necessary or appropriate with respect to the granting and administering of loans. The interest rate shall be the Prime Rate plus 2%.

Payment of Benefits

Upon death, disability, retirement, or termination of service, participants or their designated beneficiaries may receive a lump-sum payment amount equal to the vested amount of their account.

Plan Termination

Although it has not expressed any intent to do so, the Company has the right to amend or discontinue the Plan at any time subject to the provisions of ERISA. Upon termination of the Plan, the account of each participant will be 100% vested.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements are prepared on the accrual basis of accounting and in conformity with generally accepted accounting principles in the United States of America ("GAAP").

Use of Estimates

The preparation of financial statements in conformity with GAAP requires

COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024

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.

Valuation of Investments

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 Trustee Committee determines the Plan's valuation policies utilizing information provided by the investment advisers and custodians.

Purchases and sales of securities are recorded on a trade-date basis. Gain or loss on sales of securities is based on average cost. Dividend income is recorded on the ex-dividend date. Interest income is recognized as earned on the accrual basis.

In the statement of changes in net assets available for benefits, the Plan presents the net appreciation in the fair value of its investments. This consists of the realized gains or losses, the unrealized appreciation or depreciation, and any earned interest and dividend income in those investments.

Investment management expenses charged to the Plan for investments in pooled separate accounts are deducted from income earned and are not separately reflected. Consequently, investment management expenses reduce the investment return for such investments and are reflected in the net appreciation in fair value of investments on the statement of changes in net assets available for benefits.

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 when they are incurred. No allowance for credit losses has been recorded as of December 31, 2024 and 2023. If a participant ceases to make loan repayments and the plan administrator deems that participant loan to be in default, the participant loan balance is reduced and a benefit payment is recorded. Loans outstanding as of December 31, 2024 had interest rates ranging between 5.25% and 10.5%.

Excess Contributions

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service ("IRS") are recorded as a liability with the corresponding reduction to contributions. As of December 31, 2024 and 2023, there were no excess contributions.

Benefit Payments

Benefits are recorded when paid.

Forfeitures

Forfeitures of terminated non-vested accounts are used to reduce employer contributions or pay plan expenses. There was approximately \$1,000 in forfeitures during the year ended December 31, 2024. Forfeited investments are liquidated and

COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024

are included in the cash balance in the statement of net assets available for benefits.

Plan Expenses

Record-keeping fees and audit fees are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants and benefit payments to participants are charged directly to the participant's account and are included in administrative expenses. Investment management expenses are included in net depreciation in the fair value of investments.

Subsequent Events

In accordance with Financial Accounting Standards Board Accounting Standards Codification ("FASB ASC") Topic 855, *Subsequent Events*, the Plan evaluated subsequent events through May 23, 2025, the date the financial statements were available for issue.

NOTE 3 FAIR VALUE MEASUREMENTS

In accordance with FASB ASC 820, *Fair Value Measurement*, the Plan assessed the guidelines for measuring fair value. These guidelines provide a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. FASB ASC 820 establishes three levels of fair value hierarchy that 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 to the valuation methodology include quoted prices for similar assets or liabilities in active markets and quoted prices for identical or similar assets or liabilities in inactive markets. Inputs other than quoted prices that are observable for the asset or liability and inputs that are derived principally from or corroborated by observable market data are also included. 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. |

All of the Plan's investments are held in pooled separate accounts offered through a group annuity contract. Separate accounts function similar to retail mutual funds as the participant owns units in the individual investments that make up the separate account. These units represent ownership in the total commingled separate account. These investments are public investment vehicles valued using the NAV provided by the administrator of these investments. The NAV is based on the value of the underlying assets owned by the Fund, minus its liabilities, and then divided by

**COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024**

the number of shares outstanding. The NAV is classified within Level 2 of the valuation hierarchy because the NAV's unit price is quoted on a private market that is not active; however, the unit price is based on underlying investments which are traded on an active market.

As of December 31, 2024, the Plan's investments measured at fair value on a recurring basis by the fair value hierarchy levels described above are as follows:

	December 31, 2024			
	Level 1	Fair Value Measurements		Total
		Level 2	Level 3	
Pooled separate accounts	\$ -	\$ 2,228,033	\$ -	\$ 2,228,033

As of December 31, 2023, the Plan's investments measured at fair value on a recurring basis by the fair value hierarchy levels described above are as follows:

	December 31, 2023			
	Level 1	Fair Value Measurements		Total
		Level 2	Level 3	
Pooled separate accounts	\$ -	\$ 1,908,186	\$ -	\$ 1,908,186

NOTE 4 INCOME TAX STATUS

The Department of the Treasury has determined and informed the Plan administrator by a letter dated March 31, 2014, that the form of the Plan is acceptable under section 401 of the Code for use by employers for the benefit of their employees. Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt. As a result, no provision for income taxes has been included in the Plan's financial statements.

GAAP require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Internal Revenue Service. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is subject to income tax examinations for up to three years after tax returns are filed.

**COMPOSITE MODULES, INC. RETIREMENT PLAN
NOTES TO THE FINANCIAL STATEMENTS
DECEMBER 31, 2024**

NOTE 5 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.

NOTE 6 INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The Plan Administrator has elected the method of compliance as permitted by Section 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, John Hancock Life Insurance Company has certified as to the completeness and accuracy of the funds held by them as reflected in the accompanying financial statements and supplemental schedule, including investments held at December 31, 2024 and 2023 and net appreciation in fair value of investments, interest, and dividends for the year ended December 31, 2024.

NOTE 7 PARTIES IN INTEREST AND RELATED PARTY TRANSACTIONS

Certain Plan investments are funds managed by the Trustee. Transactions involving these investments are considered to be party-in-interest transactions. Fees incurred by the Plan for the investment management services are included in net appreciation in fair value of investments, as they are paid through revenue sharing, rather than a direct payment.

NOTE 8 RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

	2024	2023
Net assets available for benefits per the financial statements	\$ 2,284,378	\$ 1,957,799
Less: current year receivables	(8,152)	(5,154)
Net assets available for benefits per Form 5500	\$ 2,276,226	\$ 1,952,645
Net decrease in net assets available for benefits per the financial statements	\$ 326,579	
Less: current year receivables	(8,152)	
Plus: prior year receivable	5,154	
Net decrease in net assets available for benefits per the Form 5500	\$ 323,581	

SUPPLEMENTAL SCHEDULE

COMPOSITE MODULES, INC. RETIREMENT PLAN
Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
E.I.N.: 04-2504184 Plan No.: 001
December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor or similar party.	Description of investment including maturity date, rate of interest, collateral, par or maturity value.	Cost	Current Value
	John Hancock Life Insurance Company ("JHLIC")	JH Multimanager Balanced LS	\$	740,843
*	JHLIC	JH Multimanager Aggressive LS		225,225
		Blackrock Lifepath Index 2035		219,124
*	JHLIC	JH Multimanager Growth LS		182,921
		Blackrock Lifepath Index 2045		162,374
		Blackrock Lifepath Index 2030		116,550
*	JHLIC	JH Multimanager Moderate LS		95,471
		Fidelity Nasdaq Composite Index		88,733
		Money market fund		71,483
		Blackrock Lifepath Index 2060		56,178
		500 index fund		50,944
		Blackrock Lifepath Index 2050		39,174
*	JHLIC	JH Multimanager Conserv LS		37,965
		Blackrock Lifepath Index 2040		36,321
		Blackrock Lifepath Index 2025		19,012
		Blackrock Lifepath Index 2055		16,334
		Mutual Global Discovery		15,055
		Capital World Growth & Income		14,515
		Blackrock Lifepath Index 2065		12,751
		Fidelity Adv Leveraged Co Stk		10,077
		Invesco Small Cap Growth		7,680
		Blackrock Lifepath Index Ret		2,846
		Fidelity Advisor Total Bond		2,003
		Invesco International Bond		1,932
		Parnassus Core Equity Fund		1,240
		T. Rowe Price Sml Cap Val		1,035
		Pimco Real Return		247
*	Participant loans	Interest rates ranging from 5.25% to 10.5%	-0-	45,353
				\$ 2,273,386

* Indicates party-in-interest

Note 1: Column (d) is not included as all investments are participant directed and it is therefore not applicable.

Note 2: Participant loans are reflected in the accompanying financial statements as notes receivable from participants.

See accompanying Independent Auditors' Report.



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
American Century 2065	\$ 8473148.23	.000000	\$ 0.00
American Century 2060	\$ 25266485.03	.000000	\$ 0.00
American Century 2055	\$ 36365027.62	.000000	\$ 0.00
American Century 2050	\$ 46157771.21	.000000	\$ 0.00
American Century 2045	\$ 46581752.70	.000000	\$ 0.00
American Century 2040	\$ 52831801.19	.000000	\$ 0.00
American Century 2035	\$ 73760176.21	.000000	\$ 0.00
American Century 2030	\$ 79364188.09	.000000	\$ 0.00
American Century 2025	\$ 40703891.60	.000000	\$ 0.00
American Century In Retirement	\$ 36121043.86	.000000	\$ 0.00
American Funds 2065 TD	\$ 275020308.52	.000000	\$ 0.00
American Funds 2060 TD	\$ 621489839.95	.000000	\$ 0.00
American Funds 2055 TD	\$ 872460923.02	.000000	\$ 0.00
American Funds 2050 TD	\$ 1200537288.15	.000000	\$ 0.00
American Funds 2045 TD	\$ 1553510928.46	.000000	\$ 0.00
American Funds 2040 TD	\$ 1604507186.56	.000000	\$ 0.00
American Funds 2035 TD	\$ 1879943775.40	.000000	\$ 0.00
American Funds 2030 TD	\$ 1742451107.81	.000000	\$ 0.00
American Funds 2025 TD	\$ 1023887951.89	.000000	\$ 0.00
American Funds 2020 TD	\$ 392614249.54	.000000	\$ 0.00
American Funds 2015 TD	\$ 120319204.98	.000000	\$ 0.00
American Funds 2010 TD	\$ 157042513.22	.000000	\$ 0.00
BlackRock LifePath Index 2065	\$ 173446902.19	768.445838	\$ 12750.74
BlackRock LifePath Index 2060	\$ 375305896.37	2207.348566	\$ 56177.72
BlackRock LifePath Index 2055	\$ 530265668.67	554.258044	\$ 16333.92
BlackRock LifePath Index 2050	\$ 684755751.79	1366.969920	\$ 39174.35

*Assets = Liabilities

Note: this report does not reflect transactions processed after December 31, 2024
 Cash Basis



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA		THE TRUSTEES OF COMPOSITE MODULES, INC.	
	Total Sub-Accounts		RETIREMENT PLAN	
	Assets	Liabilities*	Total No of Units	Total Value
BlackRock LifePath Index 2045	\$ 797302180.13		5924.851881	\$ 162373.97
BlackRock LifePath Index 2040	\$ 831451557.83		1427.297152	\$ 36320.59
BlackRock LifePath Index 2035	\$ 894072156.69		9321.911001	\$ 219124.31
BlackRock LifePath Index 2030	\$ 834001694.34		5439.074721	\$ 116550.07
BlackRock LifePath Index 2025	\$ 480653416.19		970.719804	\$ 19012.46
BlackRock LifePath Index Ret	\$ 330078976.16		163.457652	\$ 2845.63
JH Lifetime Blend 2065 CIT R2	\$ 113354034.57		.000000	\$ 0.00
JH Lifetime Blend 2060 CIT R2	\$ 274735642.61		.000000	\$ 0.00
JH Lifetime Blend 2055 CIT R2	\$ 424945409.00		.000000	\$ 0.00
JH Lifetime Blend 2050 CIT R2	\$ 627264182.15		.000000	\$ 0.00
JH Lifetime Blend 2045 CIT R2	\$ 769834214.79		.000000	\$ 0.00
JH Lifetime Blend 2040 CIT R2	\$ 820430036.72		.000000	\$ 0.00
JH Lifetime Blend 2035 CIT R2	\$ 961937633.80		.000000	\$ 0.00
JH Lifetime Blend 2030 CIT R2	\$ 855441344.97		.000000	\$ 0.00
JH Lifetime Blend 2025 CIT R2	\$ 579605495.48		.000000	\$ 0.00
JH Lifetime Blend 2020 CIT R2	\$ 53769180.96		.000000	\$ 0.00
JH Lifetime Blend 2015 CIT R2	\$ 13337998.73		.000000	\$ 0.00
JH Lifetime Blend 2010 CIT R2	\$ 298391020.30		.000000	\$ 0.00
JH Multimanager 2065 Lifetime	\$ 91726205.39		.000000	\$ 0.00
JH Multimanager 2060 Lifetime	\$ 234453112.87		.000000	\$ 0.00
JH Multimanager 2055 Lifetime	\$ 317184397.08		.000000	\$ 0.00
JH Multimanager 2050 Lifetime	\$ 426075522.89		.000000	\$ 0.00
JH Multimanager 2045 Lifetime	\$ 630201901.49		.000000	\$ 0.00
JH Multimanager 2040 Lifetime	\$ 638807161.63		.000000	\$ 0.00
JH Multimanager 2035 Lifetime	\$ 731497863.85		.000000	\$ 0.00
JH Multimanager 2030 Lifetime	\$ 730642474.50		.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
JH Multimanager 2025 Lifetime	\$ 475118884.57	.000000	\$ 0.00
JH Multimanager 2020 Lifetime	\$ 203276375.94	.000000	\$ 0.00
JH Multimanager 2015 Lifetime	\$ 67609678.04	.000000	\$ 0.00
JH Multimanager 2010 Lifetime	\$ 61155662.98	.000000	\$ 0.00
JH 2065 Lifetime Blend	\$ 61590424.07	.000000	\$ 0.00
JH 2060 Lifetime Blend	\$ 138821762.50	.000000	\$ 0.00
JH 2055 Lifetime Blend	\$ 234257035.76	.000000	\$ 0.00
JH 2050 Lifetime Blend	\$ 283987621.04	.000000	\$ 0.00
JH 2045 Lifetime Blend	\$ 352055835.66	.000000	\$ 0.00
JH 2040 Lifetime Blend	\$ 401565192.43	.000000	\$ 0.00
JH 2035 Lifetime Blend	\$ 467259039.99	.000000	\$ 0.00
JH 2030 Lifetime Blend	\$ 411270316.45	.000000	\$ 0.00
JH 2025 Lifetime Blend	\$ 254794629.22	.000000	\$ 0.00
JH 2020 Lifetime Blend	\$ 100787714.40	.000000	\$ 0.00
JH 2015 Lifetime Blend	\$ 26100267.56	.000000	\$ 0.00
JH 2010 Lifetime Blend	\$ 33923283.96	.000000	\$ 0.00
MFS Lifetime 2065 Fund	\$ 5166977.33	.000000	\$ 0.00
MFS Lifetime 2060 Fund	\$ 12618723.32	.000000	\$ 0.00
MFS Lifetime 2055 Fund	\$ 19390519.62	.000000	\$ 0.00
MFS Lifetime 2050 Fund	\$ 28227327.32	.000000	\$ 0.00
MFS Lifetime 2045 Fund	\$ 33263499.25	.000000	\$ 0.00
MFS Lifetime 2040 Fund	\$ 38726363.09	.000000	\$ 0.00
MFS Lifetime 2035 Fund	\$ 42676377.50	.000000	\$ 0.00
MFS Lifetime 2030 Fund	\$ 40641705.57	.000000	\$ 0.00
MFS Lifetime 2025 Fund	\$ 22779162.16	.000000	\$ 0.00
MFS Lifetime Income Fund	\$ 16350206.81	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
MyWayRet Index 2065 Fund	\$ 28170367.31	.000000	\$ 0.00
MyWayRet Index 2060 Fund	\$ 70129936.00	.000000	\$ 0.00
MyWayRet Index 2055 Fund	\$ 111074220.23	.000000	\$ 0.00
MyWayRet Index 2050 Fund	\$ 153594006.62	.000000	\$ 0.00
MyWayRet Index 2045 Fund	\$ 207962819.79	.000000	\$ 0.00
MyWayRet Index 2040 Fund	\$ 223042751.91	.000000	\$ 0.00
MyWayRet Index 2035 Fund	\$ 270899535.83	.000000	\$ 0.00
MyWayRet Index 2030 Fund	\$ 242440219.48	.000000	\$ 0.00
MyWayRet Index 2025 Fund	\$ 166179589.50	.000000	\$ 0.00
MyWayRet Index Retirement Fund	\$ 99906749.38	.000000	\$ 0.00
Nuveen Lifecycle Index 2065	\$ 87676164.22	.000000	\$ 0.00
Nuveen Lifecycle Index 2060	\$ 194156027.82	.000000	\$ 0.00
Nuveen Lifecycle Index 2055	\$ 269000472.36	.000000	\$ 0.00
Nuveen Lifecycle Index 2050	\$ 377955303.04	.000000	\$ 0.00
Nuveen Lifecycle Index 2045	\$ 440574419.09	.000000	\$ 0.00
Nuveen Lifecycle Index 2040	\$ 456414299.52	.000000	\$ 0.00
Nuveen Lifecycle Index 2035	\$ 499935872.08	.000000	\$ 0.00
Nuveen Lifecycle Index 2030	\$ 446198272.24	.000000	\$ 0.00
Nuveen Lifecycle Index 2025	\$ 298337198.76	.000000	\$ 0.00
Nuveen Lifecycle Index 2020	\$ 96488722.19	.000000	\$ 0.00
Nuveen Lifecycle Index 2015	\$ 24962338.50	.000000	\$ 0.00
Nuveen Lifecycle Index 2010	\$ 10572980.69	.000000	\$ 0.00
Nuveen Lifecycle Index Ret Inc	\$ 40553368.37	.000000	\$ 0.00
State Street Target Ret 2065	\$ 27586086.34	.000000	\$ 0.00
State Street Target Ret 2060	\$ 52279097.56	.000000	\$ 0.00
State Street Target Ret 2055	\$ 74451952.82	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
State Street Target Ret 2050	\$ 109385722.99	.000000	\$ 0.00
State Street Target Ret 2045	\$ 112637951.76	.000000	\$ 0.00
State Street Target Ret 2040	\$ 121852788.64	.000000	\$ 0.00
State Street Target Ret 2035	\$ 120797467.92	.000000	\$ 0.00
State Street Target Ret 2030	\$ 128897401.34	.000000	\$ 0.00
State Street Target Ret 2025	\$ 69634600.01	.000000	\$ 0.00
State Street Target Ret 2020	\$ 23347804.77	.000000	\$ 0.00
State Street Target Ret Income	\$ 16384513.99	.000000	\$ 0.00
T. Rowe Price Retirement 2065	\$ 41047469.38	.000000	\$ 0.00
T. Rowe Price Retirement 2060	\$ 91869594.66	.000000	\$ 0.00
T. Rowe Price Retirement 2055	\$ 140684008.18	.000000	\$ 0.00
T. Rowe Price Retirement 2050	\$ 180965973.75	.000000	\$ 0.00
T. Rowe Price Retirement 2045	\$ 218703818.63	.000000	\$ 0.00
T. Rowe Price Retirement 2040	\$ 237717360.99	.000000	\$ 0.00
T. Rowe Price Retirement 2035	\$ 278876252.69	.000000	\$ 0.00
T. Rowe Price Retirement 2030	\$ 278904927.26	.000000	\$ 0.00
T. Rowe Price Retirement 2025	\$ 165637884.24	.000000	\$ 0.00
T. Rowe Price Retirement 2020	\$ 61288890.75	.000000	\$ 0.00
T. Rowe Price Retirement 2015	\$ 20478199.03	.000000	\$ 0.00
T. Rowe Price Retirement 2010	\$ 27276812.22	.000000	\$ 0.00
Vanguard Target Ret 2065	\$ 180198770.95	.000000	\$ 0.00
Vanguard Target Ret 2060	\$ 415941100.98	.000000	\$ 0.00
Vanguard Target Ret 2055	\$ 586121818.93	.000000	\$ 0.00
Vanguard Target Ret 2050	\$ 801724001.14	.000000	\$ 0.00
Vanguard Target Ret 2045	\$ 930467751.36	.000000	\$ 0.00
Vanguard Target Ret 2040	\$ 959506627.23	.000000	\$ 0.00

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STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Vanguard Target Ret 2035	\$ 1104686320.01	.000000	\$ 0.00
Vanguard Target Ret 2030	\$ 987942441.03	.000000	\$ 0.00
Vanguard Target Ret 2025	\$ 642152353.05	.000000	\$ 0.00
Vanguard Target Ret 2020	\$ 202548265.80	.000000	\$ 0.00
Vanguard Target Ret Income	\$ 149211255.55	.000000	\$ 0.00
JH Lifestyle Blend Aggressive	\$ 9749350.77	.000000	\$ 0.00
JH Lifestyle Blend Growth	\$ 32031330.52	.000000	\$ 0.00
JH Lifestyle Blend Balanced	\$ 35261932.53	.000000	\$ 0.00
JH Lifestyle Blend Moderate	\$ 17804319.98	.000000	\$ 0.00
JHLifestyle Blend Conservative	\$ 7970081.07	.000000	\$ 0.00
JH Multimanager Aggressive LS	\$ 2409540807.36	5758.300407	\$ 225224.67
JH Multimanager Growth LS	\$ 5772129895.60	5071.146888	\$ 182921.30
JH Multimanager Balanced LS	\$ 5150897751.21	24427.098779	\$ 740843.86
JH Multimanager Moderate LS	\$ 1299941209.66	3864.530039	\$ 95471.25
JH Multimanager Conserv LS	\$ 933302188.04	1841.892187	\$ 37965.36
JH Lifestyle Blend Aggressive	\$ 429521059.29	.000000	\$ 0.00
JH Lifestyle Blend Growth	\$ 922057503.71	.000000	\$ 0.00
JH Lifestyle Blend Balanced	\$ 840279431.52	.000000	\$ 0.00
JH Lifestyle Blend Moderate	\$ 239396803.53	.000000	\$ 0.00
JH Lifestyle Bln Conservative	\$ 188100970.22	.000000	\$ 0.00
JH Managed Volatility Growth	\$ 23007370.48	.000000	\$ 0.00
JH Managed Volatility Bal	\$ 27372344.37	.000000	\$ 0.00
JH Managed Volatility Mod	\$ 16006252.32	.000000	\$ 0.00
JH Managed Volatility Con	\$ 22181694.89	.000000	\$ 0.00
AB Discovery Growth Fund	\$ 984219.50	.000000	\$ 0.00
AB Discovery Value Fund	\$ 3069871.94	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
AB Large Cap Growth Fund	\$ 307027056.90	.000000	\$ 0.00
AB Small Cap Growth Fund	\$ 12274410.27	.000000	\$ 0.00
Aberdeen EM ex-China Fund	\$ 1041807.22	.000000	\$ 0.00
Allspring Discovery SMID Grow	\$ 14953.13	.000000	\$ 0.00
Allspring Emerging Markets Eq	\$ 809712.80	.000000	\$ 0.00
Allspring Growth Fund	\$ 176098.15	.000000	\$ 0.00
Allspring Small Company Growth	\$ 4083998.72	.000000	\$ 0.00
Allspring Special MidCap Value	\$ 27462056.04	.000000	\$ 0.00
Allspring Special SCap Value	\$ 15576971.04	.000000	\$ 0.00
American Beacon SC Value	\$ 3705542.72	.000000	\$ 0.00
American Century EM Fund	\$ 12206316.66	.000000	\$ 0.00
American Century Focused Dynam	\$ 2604668.48	.000000	\$ 0.00
American Century Heritage	\$ 190411725.13	.000000	\$ 0.00
American Funds AMCAP Fund	\$ 70242958.39	.000000	\$ 0.00
American Funds New World Fund	\$ 220524139.53	.000000	\$ 0.00
American Funds SMALLCAP World	\$ 73945930.69	.000000	\$ 0.00
AF The Growth Fund of America	\$ 1041651473.32	.000000	\$ 0.00
AMG River Road Mid Cap Value	\$ 28879234.72	.000000	\$ 0.00
Avantis US Small Cap Value	\$ 15981383.74	.000000	\$ 0.00
Baird Mid Cap Growth Fund	\$ 9056804.67	.000000	\$ 0.00
Baron Asset Fund	\$ 0.00	.000000	\$ 0.00
Baron Real Estate Fund	\$ 16213918.55	.000000	\$ 0.00
BlackRock Advantage Sm Cap Gr	\$ 437531.00	.000000	\$ 0.00
BlackRock Health Sciences Opp	\$ 38773824.25	.000000	\$ 0.00
BlackRock Mid Cap Equity Index	\$ 24757888.25	.000000	\$ 0.00
BlackRock MidCap Growth Equity	\$ 2099892.79	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
BlackRock Russell 2000 Index	\$ 23667514.64	.000000	\$ 0.00
Blue Chip Growth Fund	\$ 1858572767.19	.000000	\$ 0.00
Capital Appreciation Fund	\$ 654702217.95	.000000	\$ 0.00
Carillon Eagle Mid Cap Growth	\$ 55592577.83	.000000	\$ 0.00
ClearBridge Large Cap Growth	\$ 31132224.50	.000000	\$ 0.00
ClearBridge Mid Cap Fund	\$ 3761185.24	.000000	\$ 0.00
Cohen & Steers Real Estate	\$ 48286458.39	.000000	\$ 0.00
Columbia Small Cap Value Fund	\$ 1192026.30	.000000	\$ 0.00
Delaware Ivy Small Cap Growth	\$ 9704996.85	.000000	\$ 0.00
Delaware Ivy SMID Cap Core	\$ 5625076.01	.000000	\$ 0.00
Delaware Small Cap Value Fund	\$ 5543220.65	.000000	\$ 0.00
DFA Emerging Markets Value	\$ 90030891.93	.000000	\$ 0.00
DFA Real Estate Securities	\$ 3928287.11	.000000	\$ 0.00
DFA US Targeted Value Fund	\$ 169286434.20	.000000	\$ 0.00
DFA U.S. Small Cap Fund	\$ 253133714.13	.000000	\$ 0.00
Diamond Hill Small-Mid Cap	\$ 6864882.67	.000000	\$ 0.00
Domini Impact Equity Fund	\$ 30979415.54	.000000	\$ 0.00
Eaton Vance Atlanta SMID-Cap	\$ 24988369.99	.000000	\$ 0.00
Federated Kaufmann Large Cap	\$ 3529095.19	.000000	\$ 0.00
Federated Hermes MDT SC Growth	\$ 10492092.38	.000000	\$ 0.00
Fidelity Adv Diversified Stock	\$ 49100201.39	.000000	\$ 0.00
Fidelity Advisor Energy Fund	\$ 23999806.02	.000000	\$ 0.00
Fidelity Advisor Equity Growth	\$ 815642.17	.000000	\$ 0.00
Fidelity Advisor Growth Opps	\$ 14964699.12	.000000	\$ 0.00
Fidelity Adv New Insights	\$ 87562924.29	.000000	\$ 0.00
Fidelity ContraFund	\$ 832071505.61	.000000	\$ 0.00

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STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Fidelity Mid Cap Index Fund	\$ 499088536.55	.000000	\$ 0.00
Fidelity NASDAQ Composite Idx	\$ 81085910.41	327.316227	\$ 88732.97
Fidelity Real Estate Index	\$ 38676894.53	.000000	\$ 0.00
Financial Industries Fund	\$ 76299539.87	.000000	\$ 0.00
Franklin DynaTech Fund	\$ 62445172.78	.000000	\$ 0.00
Franklin Growth Fund	\$ 26607372.57	.000000	\$ 0.00
Franklin Small-Mid Growth	\$ 131963320.73	.000000	\$ 0.00
Fundamental All Cap Core Fund	\$ 108315245.17	.000000	\$ 0.00
Goldman Sachs SmCap Eq Insight	\$ 0.00	.000000	\$ 0.00
Harbor Capital Appreciation	\$ 4220228.80	.000000	\$ 0.00
Harbor Mid Cap Value Fund	\$ 20919606.46	.000000	\$ 0.00
Hartford Growth Opportunities	\$ 811573.20	.000000	\$ 0.00
Hartford MidCap Fund	\$ 22899297.47	.000000	\$ 0.00
Hartford Schroders US Mid Cap	\$ 7320666.28	.000000	\$ 0.00
Impax Small Cap Fund	\$ 1130489.70	.000000	\$ 0.00
Invesco Developing Markets	\$ 106624372.96	.000000	\$ 0.00
Invesco Discovery Mid Cap Grow	\$ 26875904.84	.000000	\$ 0.00
Invesco Main Street Mid Cap	\$ 3817596.12	.000000	\$ 0.00
Invesco Real Estate Fund	\$ 3737807.23	.000000	\$ 0.00
Invesco Small Cap Growth	\$ 226254771.30	71.045854	\$ 7679.83
iShares Gold Trust ETF	\$ 83038406.99	.000000	\$ 0.00
iShares Russell 2000 SmCap Ind	\$ 0.00	.000000	\$ 0.00
iShares Russell Mid-Cap Index	\$ 0.00	.000000	\$ 0.00
Janus Henderson Enterprise	\$ 31129807.54	.000000	\$ 0.00
Janus Henderson Forty Fund	\$ 29579614.53	.000000	\$ 0.00
Janus Henderson Gbl Life Sci	\$ 19997572.45	.000000	\$ 0.00

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STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Janus Henderson Triton Fund	\$ 22537145.28	.000000	\$ 0.00
JH Disciplined Value Mid Cap	\$ 86648031.10	.000000	\$ 0.00
John Hancock Diversified Macro	\$ 0.00	.000000	\$ 0.00
John Hancock EM Equity Fund	\$ 1580799.49	.000000	\$ 0.00
John Hancock Mid Cap Growth	\$ 265396928.80	.000000	\$ 0.00
John Hancock Small Cap Core	\$ 12408523.57	.000000	\$ 0.00
JH Small Cap Dynamic Growth	\$ 614293.27	.000000	\$ 0.00
John Hancock U.S. Growth Fund	\$ 131354559.96	.000000	\$ 0.00
John Hancock US Gbl Ldr Grow	\$ 3956951.45	.000000	\$ 0.00
JPMorgan Large Cap Growth	\$ 601940084.31	.000000	\$ 0.00
JPMorgan MidCap Value Fund	\$ 193499766.53	.000000	\$ 0.00
JPMorgan SMID Cap Fund	\$ 25181216.43	.000000	\$ 0.00
Keeley Small Cap Dividend Val	\$ 8599951.09	.000000	\$ 0.00
Lord Abbett Value Opps Fund	\$ 21581872.36	.000000	\$ 0.00
MFS Growth Fund	\$ 71766269.95	.000000	\$ 0.00
MFS International Growth Fund	\$ 464362.69	.000000	\$ 0.00
MFS Mid Cap Growth Fund	\$ 99677299.93	.000000	\$ 0.00
MFS Mid Cap Value Fund	\$ 54621952.14	.000000	\$ 0.00
Mid Cap Index Fund	\$ 726001441.76	.000000	\$ 0.00
Mid Value Fund	\$ 175346135.91	.000000	\$ 0.00
MyWayRet Emerging Markets Fund	\$ 7028412.78	.000000	\$ 0.00
MyWayRet Large Cap Growth Fund	\$ 62287151.45	.000000	\$ 0.00
MyWayRetirement Mid Cap Growth	\$ 15522679.41	.000000	\$ 0.00
MyWayRetirement Mid Cap Value	\$ 7192896.04	.000000	\$ 0.00
MyWayRetirement Real Estate	\$ 4083819.88	.000000	\$ 0.00
MyWayRet Small Cap Growth Fund	\$ 11410365.89	.000000	\$ 0.00

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STATEMENT OF ASSETS AND LIABILITIES OF
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 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
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 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
MyWayRet Small Cap Value Fund	\$ 6054319.10	.000000	\$ 0.00
Nationwide Geneva Small Cap Gr	\$ 0.00	.000000	\$ 0.00
Neuberger Berman Genesis Fund	\$ 9948626.42	.000000	\$ 0.00
Neuberger Berman Intrinsic Val	\$ 765490.20	.000000	\$ 0.00
New Opportunities Fund	\$ 20116293.07	.000000	\$ 0.00
Northern EM Equity Index Fund	\$ 34753426.36	.000000	\$ 0.00
Northern Small Cap Value Fund	\$ 7058258.30	.000000	\$ 0.00
Nuveen Large-Cap Growth Index	\$ 407416572.07	.000000	\$ 0.00
Nuveen Quant Small/Mid-Cap Eq	\$ 4661983.84	.000000	\$ 0.00
Nuveen Small Cap Value Fund	\$ 8510996.56	.000000	\$ 0.00
Nuveen Small-Cap Blend Index	\$ 265423453.44	.000000	\$ 0.00
Parnassus Mid Cap Fund	\$ 7623362.01	.000000	\$ 0.00
PGIM Jennison Mid Cap Growth	\$ 105164670.02	.000000	\$ 0.00
PGIM Jennison Small Company	\$ 5977920.38	.000000	\$ 0.00
PGIM Quant Solutions MC Value	\$ 1014932.86	.000000	\$ 0.00
Principal Real Estate Securit	\$ 920420.38	.000000	\$ 0.00
Putnam Large Cap Growth Fund	\$ 50348977.43	.000000	\$ 0.00
Putnam Small Cap Growth Fund	\$ 34395829.99	.000000	\$ 0.00
Real Est. Securities Fund	\$ 202855853.62	.000000	\$ 0.00
Royce Small-Cap Fund	\$ 12651325.29	.000000	\$ 0.00
Royce Small-Cap Opportunity	\$ 86162716.01	.000000	\$ 0.00
Royce Small-Cap Total Return	\$ 1106100.61	.000000	\$ 0.00
Science & Technology Fund	\$ 644260068.89	.000000	\$ 0.00
Small Cap Index Fund	\$ 320317598.71	.000000	\$ 0.00
Small Cap Stock Fund	\$ 66148913.87	.000000	\$ 0.00
Small Cap Value Fund	\$ 114102942.20	.000000	\$ 0.00

*Assets = Liabilities

Note: this report does not reflect transactions processed after December 31, 2024
 Cash Basis



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Sprott Gold Equity Fund	\$ 52526724.27	.000000	\$ 0.00
T. Rowe Price Growth Stock	\$ 52593160.29	.000000	\$ 0.00
T. Rowe Price Health Sci	\$ 375541717.25	.000000	\$ 0.00
T. Rowe Price Integr US SC Gr	\$ 25580848.48	.000000	\$ 0.00
T. Rowe Price Intl Discovery	\$ 965487.96	.000000	\$ 0.00
T. Rowe Price Large Cap Growth	\$ 1946384.88	.000000	\$ 0.00
T. Rowe Price New Era Fund	\$ 31537858.55	.000000	\$ 0.00
T. Rowe Price Sci & Tech	\$ 682676708.37	.000000	\$ 0.00
T. Rowe Price Sml Cap Val	\$ 119306713.64	9.086178	\$ 1034.53
Thrivent Mid Cap Stock Fund	\$ 32508784.11	.000000	\$ 0.00
Touchstone Mid Cap Growth Fund	\$ 3199246.14	.000000	\$ 0.00
Undiscovered Mgr Behavioral	\$ 52981594.36	.000000	\$ 0.00
Vanguard Emerging Mkts Stk Ind	\$ 18117907.54	.000000	\$ 0.00
Vanguard Energy Fund	\$ 169689746.71	.000000	\$ 0.00
Vanguard Explorer Fund	\$ 199408749.73	.000000	\$ 0.00
Vanguard Growth Index Fund	\$ 1638664748.76	.000000	\$ 0.00
Vanguard Materials Index Fund	\$ 10096002.72	.000000	\$ 0.00
Vanguard Mid-Cap Growth ETF	\$ 390500099.35	.000000	\$ 0.00
Vanguard Mid-Cap Value ETF	\$ 270181971.13	.000000	\$ 0.00
Vanguard Small Cap Grow Index	\$ 479519039.15	.000000	\$ 0.00
Vanguard Small Cap Value Index	\$ 372367851.33	.000000	\$ 0.00
Vanguard Strategic Equity Fund	\$ 57726439.36	.000000	\$ 0.00
Virtus Ceredex MCV Equity	\$ 4792259.39	.000000	\$ 0.00
Virtus Large Cap Growth Stock	\$ 5637823.49	.000000	\$ 0.00
WisdomTree MidCap Dividend ETF	\$ 43092745.34	.000000	\$ 0.00
WisdomTree MidCap ETF	\$ 12066426.80	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
WisdomTree SC Dividend ETF	\$ 6422552.16	.000000	\$ 0.00
500 Index Fund	\$ 6706590129.66	581.529973	\$ 50943.93
AB Equity Income Fund	\$ 0.00	.000000	\$ 0.00
AB Sustainable Global Thematic	\$ 14278520.48	.000000	\$ 0.00
Allspring Disciplined US Core	\$ 2268409.69	.000000	\$ 0.00
American Century Value Fund	\$ 4068638.36	.000000	\$ 0.00
American Funds American Mutual	\$ 87027.68	.000000	\$ 0.00
Capital World Growth & Income	\$ 318763284.06	137.409028	\$ 14514.91
American Funds EuroPac Growth	\$ 451979934.48	.000000	\$ 0.00
American Funds Fundamental Inv	\$ 325659731.77	.000000	\$ 0.00
American Funds New Perspective	\$ 609156899.25	.000000	\$ 0.00
Investment Company of America	\$ 323411804.03	.000000	\$ 0.00
Washington Mutual Investors	\$ 522982347.09	.000000	\$ 0.00
BlackRock EAFE Equity Index	\$ 30896886.41	.000000	\$ 0.00
BlackRock Equity Index Fund	\$ 142529179.69	.000000	\$ 0.00
BlackRock International Fund	\$ 2958081.15	.000000	\$ 0.00
BlackRock Large Cap Focus Val	\$ 27599333.03	.000000	\$ 0.00
ClearBridge Growth Fund	\$ 49169479.35	.000000	\$ 0.00
ClearBridge International Grow	\$ 4636700.88	.000000	\$ 0.00
ClearBridge Large Cap Value	\$ 87487.99	.000000	\$ 0.00
Columbia Contrarian Core Fund	\$ 14080094.97	.000000	\$ 0.00
Columbia Dividend Income Fund	\$ 93782643.24	.000000	\$ 0.00
Columbia Global Value Fund	\$ 2084499.46	.000000	\$ 0.00
Columbia Overseas Value Fund	\$ 13279793.97	.000000	\$ 0.00
Delaware Ivy Intl Core Equity	\$ 4075726.02	.000000	\$ 0.00
DFA Global Equity Fund	\$ 32715818.47	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
DFA Global Real Estate Secur	\$ 96008.78	.000000	\$ 0.00
DFA Intl Small Cap Value	\$ 19897895.35	.000000	\$ 0.00
DFA Intl Small Company Fund	\$ 14993947.36	.000000	\$ 0.00
DFA International Value	\$ 112476291.07	.000000	\$ 0.00
DFA US Large Cap Value Fund	\$ 74100340.03	.000000	\$ 0.00
DFA US Large Company Fund	\$ 114205893.63	.000000	\$ 0.00
Diamond Hill Large Cap Fund	\$ 5765488.14	.000000	\$ 0.00
Dodge & Cox International St	\$ 77590584.25	.000000	\$ 0.00
Dodge & Cox Stock Fund	\$ 329975507.31	.000000	\$ 0.00
Domini Impact Intl Equity	\$ 3241003.43	.000000	\$ 0.00
Eaton Vance RB Equity Strategy	\$ 2239447.50	.000000	\$ 0.00
Equity Income Fund	\$ 164511653.00	.000000	\$ 0.00
Fidelity Adv Diversified Intl	\$ 13536722.39	.000000	\$ 0.00
Fidelity Adv Leveraged Co Stk	\$ 42843580.04	66.296946	\$ 10077.22
Fidelity International Index	\$ 254481501.00	.000000	\$ 0.00
Franklin Mutual Beacon Fund	\$ 83332367.90	.000000	\$ 0.00
Mutual Global Discovery	\$ 124651888.90	226.243475	\$ 15054.82
Fundamental Large Cap Value	\$ 182594329.45	.000000	\$ 0.00
Harbor Large Cap Value Fund	\$ 462145.58	.000000	\$ 0.00
Hartford Core Equity Fund	\$ 9082948.95	.000000	\$ 0.00
Hartford Equity Income Fund	\$ 12449731.86	.000000	\$ 0.00
Hartford International Oppor	\$ 7053400.14	.000000	\$ 0.00
Hartford Schroders Intl MCV	\$ 7360957.50	.000000	\$ 0.00
Intl Equity Index Fund	\$ 254478036.94	.000000	\$ 0.00
Invesco Diversified Dividend	\$ 24959886.57	.000000	\$ 0.00
Invesco EQV Intl Equity Fund	\$ 20829864.29	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Invesco Global Fund	\$ 149989996.42	.000000	\$ 0.00
Invesco Growth and Income	\$ 4565529.81	.000000	\$ 0.00
Invesco Main Street Fund	\$ 1313214.96	.000000	\$ 0.00
Invesco Opp Intl Growth Fund	\$ 66105437.96	.000000	\$ 0.00
iShares MSCI EAFE Growth ETF	\$ 17030452.22	.000000	\$ 0.00
iShares MSCI EAFE Value ETF	\$ 18577393.04	.000000	\$ 0.00
iShares MSCI Total Intl Index	\$ 0.00	.000000	\$ 0.00
iShares Russell 1000 LaCap Ind	\$ 0.00	.000000	\$ 0.00
Janus Henderson Gbl Eq Income	\$ 21782947.35	.000000	\$ 0.00
John Hancock Classic Value	\$ 1311475.35	.000000	\$ 0.00
John Hancock Disciplined Value	\$ 569525209.67	.000000	\$ 0.00
JH Disciplined Value Intl Fund	\$ 94341891.00	.000000	\$ 0.00
John Hancock ESG Intl Equity	\$ 744961.15	.000000	\$ 0.00
John Hancock ESG LC Core	\$ 4049181.94	.000000	\$ 0.00
JH Fundamental Gbl Franchise	\$ 1808669.85	.000000	\$ 0.00
JH Fundamental Large Cap Core	\$ 10300129.44	.000000	\$ 0.00
John Hancock Global Equity	\$ 1915587.27	.000000	\$ 0.00
JH Intl Dynamic Growth Fund	\$ 520906.35	.000000	\$ 0.00
John Hancock Intl Growth	\$ 49097544.97	.000000	\$ 0.00
John Hancock Intl Small Co	\$ 84544.50	.000000	\$ 0.00
JPMorgan Equity Income Fund	\$ 73527310.57	.000000	\$ 0.00
JPMorgan U.S. Equity Fund	\$ 633870897.22	.000000	\$ 0.00
Lazard International Equity	\$ 5224304.77	.000000	\$ 0.00
MFS Blended Research Core Eq	\$ 3862882.04	.000000	\$ 0.00
MFS Intl Diversification Fund	\$ 12741089.74	.000000	\$ 0.00
MFS Massachusetts Investors	\$ 66952844.52	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
MFS Value Fund	\$ 121855297.10	.000000	\$ 0.00
MyWayRetirement Commodities	\$ 3528698.93	.000000	\$ 0.00
MyWayRet International Growth	\$ 13328935.27	.000000	\$ 0.00
MyWayRet International Value	\$ 6578252.59	.000000	\$ 0.00
MyWayRet Large Cap Value Fund	\$ 34819182.57	.000000	\$ 0.00
Neuberger Berman Intl Equity	\$ 1039964.03	.000000	\$ 0.00
Neuberger Berman Multi-Cap Opp	\$ 1232351.28	.000000	\$ 0.00
Neuberger Berman Sustain Equ	\$ 2240930.40	.000000	\$ 0.00
Nuveen Equity Index Fund	\$ 84918695.32	.000000	\$ 0.00
Nuveen Large-Cap Value Index	\$ 59328070.32	.000000	\$ 0.00
Nuveen Social Choice Equity	\$ 13089032.97	.000000	\$ 0.00
Oakmark Fund	\$ 15383294.26	.000000	\$ 0.00
Oakmark International Fund	\$ 8332346.04	.000000	\$ 0.00
Parnassus Core Equity Fund	\$ 233766468.29	9.394545	\$ 1239.60
Parnassus Value Equity Fund	\$ 24280285.59	.000000	\$ 0.00
PIMCO Commodity Real Return	\$ 20290271.61	.000000	\$ 0.00
Principal Global Real Estate	\$ 3134542.08	.000000	\$ 0.00
Putnam Large Cap Value Fund	\$ 83178897.96	.000000	\$ 0.00
Putnam Research Fund	\$ 2157728.79	.000000	\$ 0.00
Sit Dividend Growth Fund	\$ 5546151.33	.000000	\$ 0.00
State Street Inst U.S. Equity	\$ 216303.55	.000000	\$ 0.00
T. Rowe Price Dividend Growth	\$ 66742943.19	.000000	\$ 0.00
T. Rowe Price Equity Inc	\$ 207482410.96	.000000	\$ 0.00
T. Rowe Price Intl Value Eqy	\$ 2309672.45	.000000	\$ 0.00
T. Rowe Price Overseas Stock	\$ 35179210.58	.000000	\$ 0.00
Templeton Foreign Fund	\$ 2258495.16	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Templeton Foreign Smaller Co	\$ 17704974.78	.000000	\$ 0.00
Templeton World	\$ 65200918.27	.000000	\$ 0.00
Thornburg Global Opportunities	\$ 2938038.84	.000000	\$ 0.00
Total Stock Market Index Fund	\$ 450616050.14	.000000	\$ 0.00
Vanguard Equity-Income Fund	\$ 136542243.52	.000000	\$ 0.00
Vanguard High Dividend Yld Idx	\$ 36649499.56	.000000	\$ 0.00
Vanguard International Growth	\$ 133134927.73	.000000	\$ 0.00
Vanguard International Value	\$ 7022481.47	.000000	\$ 0.00
Vanguard Total Intl Stock Idx	\$ 108686293.42	.000000	\$ 0.00
Vanguard Tot Wld Stk Index ETF	\$ 131196126.74	.000000	\$ 0.00
Vanguard Value Index Fund	\$ 756802224.19	.000000	\$ 0.00
Victory Diversified Stock	\$ 6368508.58	.000000	\$ 0.00
Victory Trivalent Intl SC	\$ 4737628.98	.000000	\$ 0.00
AF American Balanced Fund	\$ 1660998888.74	.000000	\$ 0.00
AF Capital Income Builder	\$ 114668026.28	.000000	\$ 0.00
American Fund Ret Inc-Enhanced	\$ 0.00	.000000	\$ 0.00
American Fund Ret Inc-Moderate	\$ 0.00	.000000	\$ 0.00
American Fund Ret Inc-Conserv	\$ 0.00	.000000	\$ 0.00
AF The Income Fund of America	\$ 148868162.04	.000000	\$ 0.00
BlackRock Global Allocation	\$ 186397972.54	.000000	\$ 0.00
BlackRock High Equity Income	\$ 3179294.98	.000000	\$ 0.00
Delaware Ivy Asset Strategy	\$ 29614102.69	.000000	\$ 0.00
DWS RREEF Gbl Infrastructure	\$ 1031488.11	.000000	\$ 0.00
Fidelity Advisor Balanced Fund	\$ 74388492.64	.000000	\$ 0.00
First Eagle Global Fund	\$ 3767340.72	.000000	\$ 0.00
Franklin Global Allocation	\$ 15559304.10	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Franklin Utilities Fund	\$ 28454693.28	.000000	\$ 0.00
Hartford Balanced Income Fund	\$ 32990034.10	.000000	\$ 0.00
Impax Sustainable Allocation	\$ 9436789.09	.000000	\$ 0.00
Invesco Equity and Income Fund	\$ 12748362.15	.000000	\$ 0.00
Janus Henderson Balanced Fund	\$ 70289444.81	.000000	\$ 0.00
John Hancock Balanced Fund	\$ 29621598.25	.000000	\$ 0.00
John Hancock EM Debt Fund	\$ 1026795.33	.000000	\$ 0.00
John Hancock Infrastructure	\$ 705637.47	.000000	\$ 0.00
Lazard Global Listed Infra	\$ 2455387.86	.000000	\$ 0.00
Loomis Sayles Gbl Allocation	\$ 13082997.52	.000000	\$ 0.00
MainStay Income Builder Fund	\$ 4113057.75	.000000	\$ 0.00
MFS Emerging Markets Debt	\$ 9577787.17	.000000	\$ 0.00
MFS Total Return Fund	\$ 9756536.53	.000000	\$ 0.00
MFS Utilities Fund	\$ 109649699.67	.000000	\$ 0.00
MyWayRetirement Balanced Fund	\$ 22464580.43	.000000	\$ 0.00
PIMCO All Asset	\$ 31829990.79	.000000	\$ 0.00
PIMCO Long Duration Total Rtn	\$ 11239363.82	.000000	\$ 0.00
Principal Spectrum PrefSec Inc	\$ 240375.65	.000000	\$ 0.00
Vanguard Balanced Index Fund	\$ 209374583.55	.000000	\$ 0.00
Vanguard LT Treasury Index	\$ 11521007.85	.000000	\$ 0.00
AB Global Bond Fund	\$ 19031270.07	.000000	\$ 0.00
AB High Income Fund	\$ 13306678.96	.000000	\$ 0.00
AB Income Fund	\$ 2587198.55	.000000	\$ 0.00
Allspring Core Bond Fund	\$ 8508691.66	.000000	\$ 0.00
Allspring Core Plus Bond Fund	\$ 1508770.07	.000000	\$ 0.00
Allspring Government Securitie	\$ 4382668.20	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
American Century Infl Adj Bond	\$ 4339286.63	.000000	\$ 0.00
American Funds Bond Fund of Am	\$ 67799127.40	.000000	\$ 0.00
AF Capital World Bond Fund	\$ 21671037.72	.000000	\$ 0.00
American Funds Strategic Bond	\$ 3150032.70	.000000	\$ 0.00
AF US Government Securities	\$ 64397414.97	.000000	\$ 0.00
Baird Core Plus Bond Fund	\$ 2789649.89	.000000	\$ 0.00
BlackRock High Yield Bond Fund	\$ 79319349.70	.000000	\$ 0.00
BlackRock Infl Protected Bond	\$ 18680243.26	.000000	\$ 0.00
BlackRock Total Return Fund	\$ 19765137.57	.000000	\$ 0.00
BlackRock U.S. Debt Index Fund	\$ 22534114.30	.000000	\$ 0.00
BlackRock U.S. TIPS Index Fund	\$ 4181153.83	.000000	\$ 0.00
BNY Mellon Bond Market Index	\$ 0.00	.000000	\$ 0.00
Brandywine Global Opps Bond	\$ 1116064.88	.000000	\$ 0.00
Core Bond Fund	\$ 116602411.80	.000000	\$ 0.00
DFA Five-Year Gbl Fixed-Income	\$ 943176.44	.000000	\$ 0.00
DFA Inflation-Protected Sec	\$ 113898194.53	.000000	\$ 0.00
DFA Intermediate Gov Fixed Inc	\$ 12008390.31	.000000	\$ 0.00
DoubleLine Core Fixed Income	\$ 4082861.71	.000000	\$ 0.00
DoubleLine Total Return Bond	\$ 9063372.20	.000000	\$ 0.00
Eaton Vance High Income Opps	\$ 17266726.58	.000000	\$ 0.00
Federated High Yield Bond	\$ 128057798.76	.000000	\$ 0.00
Federated Total Return Bond	\$ 13131809.22	.000000	\$ 0.00
Fidelity Advisor Total Bond	\$ 583417267.11	148.428185	\$ 2003.12
Floating Rate Income Fund	\$ 15254437.92	.000000	\$ 0.00
Guggenheim Total Return Bond	\$ 17703936.54	.000000	\$ 0.00
Hartford Inflation Plus Fund	\$ 1079454.74	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Hartford World Bond Fund	\$ 4024624.42	.000000	\$ 0.00
High Yield Fund	\$ 190267241.67	.000000	\$ 0.00
Invesco Core Bond Fund	\$ 44362.89	.000000	\$ 0.00
Invesco Core Plus Bond Fund	\$ 6398658.08	.000000	\$ 0.00
Invesco International Bond	\$ 17553612.52	284.510225	\$ 1931.50
Alternative Asset Allocation	\$ 6456462.41	.000000	\$ 0.00
John Hancock Bond Fund	\$ 351949542.13	.000000	\$ 0.00
John Hancock ESG Core Bond	\$ 746682.72	.000000	\$ 0.00
John Hancock Government Income	\$ 257802.27	.000000	\$ 0.00
John Hancock Income Fund	\$ 13843241.16	.000000	\$ 0.00
John Hancock Invt Grade Bond	\$ 7892058.50	.000000	\$ 0.00
JPMorgan Core Bond Fund	\$ 61018315.57	.000000	\$ 0.00
JPMorgan Global Bond Opps	\$ 13034956.14	.000000	\$ 0.00
Loomis Sayles Core Plus Bond	\$ 6591291.82	.000000	\$ 0.00
Lord Abbett Bond Debenture	\$ 22709574.19	.000000	\$ 0.00
Lord Abbett Core Bond Fund	\$ 705791.80	.000000	\$ 0.00
Lord Abbett Core Fixed Income	\$ 6805158.98	.000000	\$ 0.00
Lord Abbett High Yield Fund	\$ 11669305.00	.000000	\$ 0.00
MainStay MacKay HY Corp Bond	\$ 10989054.71	.000000	\$ 0.00
Metropolitan West Ttl Rtn Bond	\$ 7129571.16	.000000	\$ 0.00
MFS Income Fund	\$ 2119711.46	.000000	\$ 0.00
MyWayRetirement Core Bond Fund	\$ 16277403.90	.000000	\$ 0.00
MyWayRetirement Global Bond	\$ 2636573.80	.000000	\$ 0.00
MyWayRet Multi-Sector Bond	\$ 8700160.65	.000000	\$ 0.00
Nuveen Core Impact Bond Fund	\$ 6838931.36	.000000	\$ 0.00
Nuveen Strategic Income Fund	\$ 9951308.85	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
Opportunistic Fixed Income	\$ 53360788.76	.000000	\$ 0.00
PGIM Global Total Return Fund	\$ 16490247.37	.000000	\$ 0.00
PGIM Total Return Bond Fund	\$ 105685544.72	.000000	\$ 0.00
PIMCO Income Fund	\$ 140614969.57	.000000	\$ 0.00
PIMCO Intl Bond USD-Hedged	\$ 15028683.71	.000000	\$ 0.00
PIMCO Invt Grade Credit Bond	\$ 5893635.41	.000000	\$ 0.00
PIMCO Real Return	\$ 120796453.88	17.598206	\$ 247.03
Putnam Global Income Fund	\$ 804421.76	.000000	\$ 0.00
Strategic Income Opp Fund	\$ 185918975.90	.000000	\$ 0.00
T. Rowe Price Spectrum Inc	\$ 102394060.37	.000000	\$ 0.00
Templeton Global Bond Fund	\$ 35078774.66	.000000	\$ 0.00
Total Bond Market Fund	\$ 306600725.25	.000000	\$ 0.00
Vanguard Interm-Term Bond Idx	\$ 49886205.11	.000000	\$ 0.00
Vanguard Total Bond Market Idx	\$ 145399655.95	.000000	\$ 0.00
Vanguard Total Intl Bond Index	\$ 18296757.61	.000000	\$ 0.00
Virtus Seix Floating Rate HInc	\$ 8489542.12	.000000	\$ 0.00
Western Asset Core Bond Fund	\$ 35897006.48	.000000	\$ 0.00
Western Asset Core Plus Bond	\$ 26333666.76	.000000	\$ 0.00
Calvert Short Duration Income	\$ 5209199.99	.000000	\$ 0.00
DoubleLine Low Duration Bond	\$ 4688646.68	.000000	\$ 0.00
Federated Capital Preservation	\$ 21056228.39	.000000	\$ 0.00
Guggenheim Limited Duration	\$ 3901663.54	.000000	\$ 0.00
Invesco Premier US Govt Money	\$ 105380255.88	.000000	\$ 0.00
John Hancock Stable Val	\$ 1857372490.17	.000000	\$ 0.00
Lord Abbett Short Duration Inc	\$ 43551992.63	.000000	\$ 0.00
Money Market Fund	\$ 1496599694.92	60016.377350	\$ 71483.13

*Assets = Liabilities

Note: this report does not reflect transactions processed after December 31, 2024
 Cash Basis



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
NY Life Ins. Co. Anchor Acct	\$ 36647247.96	.000000	\$ 0.00
Payden Managed Income Fund	\$ 62591788.78	.000000	\$ 0.00
PGIM Short-Term Corporate Bond	\$ 8709826.80	.000000	\$ 0.00
PIMCO Short-Term Fund	\$ 4935208.62	.000000	\$ 0.00
Reliance MetLife Stable Value	\$ 280212750.34	.000000	\$ 0.00
T. Rowe Price Short Term Bond	\$ 26208866.74	.000000	\$ 0.00
Thornburg Limited Term Income	\$ 5860524.21	.000000	\$ 0.00
Vanguard Short-Term Bond Index	\$ 41036475.83	.000000	\$ 0.00
Vanguard Short-Term Federal	\$ 189547747.18	.000000	\$ 0.00
Vanguard ST Investment-Grade	\$ 18273649.58	.000000	\$ 0.00
SELECT AA Growth	\$ 58608870.51	.000000	\$ 0.00
SELECT AA Balanced	\$ 27193478.54	.000000	\$ 0.00
SELECT AA Moderate	\$ 19175848.46	.000000	\$ 0.00
SELECT AA Conservative	\$ 7980080.15	.000000	\$ 0.00
Select Lifestyle Growth	\$ 2558071.27	.000000	\$ 0.00
Select Lifestyle Balanced	\$ 188778.29	.000000	\$ 0.00
Select Lifestyle Moderate	\$ 144348.56	.000000	\$ 0.00
Select Lifestyle Conservative	\$ 80405.33	.000000	\$ 0.00
Russell Equity Growth	\$ 0.00	.000000	\$ 0.00
Russell Growth	\$ 0.00	.000000	\$ 0.00
Russell Balanced	\$ 0.00	.000000	\$ 0.00
Russell Moderate	\$ 0.00	.000000	\$ 0.00
Russell Conservative	\$ 0.00	.000000	\$ 0.00
American Beacon Bridgeway LCV	\$ 0.00	.000000	\$ 0.00
Lazard US Equity Concentrated	\$ 0.00	.000000	\$ 0.00
Thornburg Intl Growth	\$ 0.00	.000000	\$ 0.00

*Assets = Liabilities



STATEMENT OF ASSETS AND LIABILITIES OF
 THE SUB-ACCOUNTS OF JOHN HANCOCK LIFE INSURANCE COMPANY (U.S.A.)
 FOR CONTRACT # 98895 THE TRUSTEES OF COMPOSITE MODULES, INC.
 RETIREMENT PLAN
 MONEY INVESTED AS OF DECEMBER 31, 2024

Sub-Accounts	John Hancock USA Total Sub-Accounts Assets and Liabilities*	THE TRUSTEES OF COMPOSITE MODULES, INC. RETIREMENT PLAN Total No of Units	Total Value
PIMCO All Asset All Authority	\$ 0.00	.000000	\$ 0.00

*Assets = Liabilities

I hereby certify that this statement, given pursuant to 29 CFR 2520.103-5(c), is complete and accurate.

Sue Reibel
 CEO, John Hancock Retirement

Production Date (R): JAN/03/2025