

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Part I Annual Report Identification Information

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... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan... D Check box if filing under: [] Form 5558 [] automatic extension... E If this is a retroactively adopted plan...

Part II Basic Plan Information—enter all requested information

1a Name of plan: EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
1b Three-digit plan number (PN): 002
1c Effective date of plan: 04/01/1963
2a Plan sponsor's name (employer, if for a single-employer plan): EXACTO SPRING CORP.
2b Employer Identification Number (EIN): 36-2495545
2c Plan Sponsor's telephone number: 262-337-3970
2d Business code (see instructions): 332610

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

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

Table with 4 columns: SIGN HERE, Signature, Date, and Name. Rows include: 1. Filed with authorized/valid electronic signature, 07/22/2025, STEPHANIE FLEMING; 2. Signature of plan administrator; 3. Filed with authorized/valid electronic signature, 07/22/2025, STEPHANIE FLEMING; 4. Signature of employer/plan sponsor; 5. Signature of DFE.

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

Form 5500 (2024) v. 240311

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	183
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)	160
	6a(2)	142
	6b	0
	6c	22
	6d	164
	6e	0
	6f	164
	6g(1)	174
6g(2)	159	
6h	10	
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 3D

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

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

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

a Pension Schedules	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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 _____

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 EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 EXACTO SPRING CORP.	D Employer Identification Number (EIN) 36-2495545	

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

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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)

R.W. BAIRD

39-6003779

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	NONE	143914	Yes <input type="checkbox"/> No <input checked="" 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"/>

(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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <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.	OMB No. 1210-0110 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 EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 EXACTO SPRING CORP.	D Employer Identification Number (EIN) 36-2495545

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	3933	1509
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)	1329928	1452236
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	6619905	8169267
(2) U.S. Government securities	1c(2)	664783	499844
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	6049639	6720977
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	10422054	8129845
(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)		
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)		
(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	25090242	24973678
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	25090242	24973678

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)	1452236	
(B) Participants.....	2a(1)(B)	8133	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1460369
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	608000	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		608000
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	1714689	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		3783058

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	3755708	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		3755708
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)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	143914	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		143914
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		3899622

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-116564
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: CLIFTONLARSONALLEN LLP

(2) EIN: 41-0746749

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		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		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.
--	---	---

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>EXACTO SPRING CORP.</u>	D Employer Identification Number (EIN) <u>36-2495545</u>	

Part I	Distributions
---------------	----------------------

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 36-2495545 27-3169253

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

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

3	
---	--

Part II	Funding Information (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
----------------	---

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?..... Yes No N/A
If the plan is a defined benefit plan, go to line 8.

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

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

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

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

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

Part III	Amendments
-----------------	-------------------

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? Yes No

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

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

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

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 Q703729A.

**EXACTO SPRING CORP. EMPLOYEES'
PROFIT SHARING PLAN**

**FINANCIAL STATEMENTS AND
ERISA-REQUIRED SUPPLEMENTAL SCHEDULES**

YEARS ENDED DECEMBER 31, 2024 AND 2023



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**EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
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INDEPENDENT AUDITORS' REPORT

Plan Administrator and Plan Participants
Exacto Spring Corp. Employees' Profit Sharing Plan
Grafton, Wisconsin

Report on the Audit of the Financial Statements

Opinion

We have audited the accompanying financial statements of Exacto Spring Corp. Employees' Profit Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Exacto Spring Corp. Employees' Profit Sharing Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Exacto Spring Corp. Employees' Profit Sharing 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 audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error.

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 Exacto Spring Corp. Employees' Profit Sharing Plan's ability to continue as a going concern for one year after the date that the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Exacto Spring Corp. Employees' Profit Sharing 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 Exacto Spring Corp. Employees' Profit Sharing Plan's ability to continue as a going concern for a reasonable period of time.

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.

Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) and schedule of reportable transactions as of or for the year ended December 31, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the 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 has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

Plan Administrator and Plan Participants
Exacto Spring Corp. Employees' Profit Sharing Plan

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, 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 information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

CliftonLarsonAllen LLP

CliftonLarsonAllen LLP

Milwaukee, Wisconsin
July 11, 2025

**EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

ASSETS	2024	2023
INVESTMENTS (at Fair Value)		
Money Market Funds	\$ 2,646,458	\$ 2,224,598
Certificates of Deposit	5,522,809	4,395,307
Corporate Bonds	-	807,771
Government Bonds	499,844	664,783
Common Stock	8,129,845	10,422,054
Corporate Bond Funds / ETFs	6,720,977	5,241,868
Total Investments at Fair Value	23,519,933	23,756,381
RECEIVABLE		
Employer's Contribution	1,452,236	1,329,928
CASH		
	1,509	3,933
NET ASSETS AVAILABLE FOR BENEFITS	\$ 24,973,678	\$ 25,090,242

See accompanying Notes to Financial Statements.

**EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEARS ENDED DECEMBER 31, 2024 AND 2023**

	2024	2023
ADDITIONS:		
INVESTMENT INCOME		
Net Appreciation in Fair Value of Investments	\$ 1,714,689	\$ 1,583,063
Interest and Dividends	608,000	601,490
Total Investment Income	2,322,689	2,184,553
CONTRIBUTIONS		
Employer	1,452,236	1,329,928
Rollover	8,133	17,196
Total Contributions	1,460,369	1,347,124
Total	3,783,058	3,531,677
DEDUCTIONS:		
BENEFITS PAID TO PARTICIPANTS	3,755,708	5,399,803
ADMINISTRATIVE EXPENSES	143,914	162,791
Total Deductions	3,899,622	5,562,594
NET DECREASE	(116,564)	(2,030,917)
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	25,090,242	27,121,159
End of Year	\$ 24,973,678	\$ 25,090,242

See accompanying Notes to Financial Statements.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 DESCRIPTION OF THE PLAN

The following description of Exacto Spring Corp. Employees' Profit Sharing Plan (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan covering all full-time employees of Exacto Spring Corp. (the Company or Employer) who have a minimum of one year of service during which the employee completes at least 1,000 hours of service. Participants are eligible to receive a Company contribution if they meet the eligibility requirements and are employed on the last day of the Plan year. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Company contributions to the Plan are determined at the discretion of the Board of Directors of the Company, limited to the maximum amount deductible for Federal income tax purposes. The Company contributed an amount equal to 15% of each participant's qualified annual wage for each of the years ended December 31, 2024 and 2023. No participant may direct the investment or reinvestment of their account except as permitted in the Plan document.

Participants may elect to contribute after-tax dollars to the Plan. In addition, participants can roll-over existing qualified retirement funds into the Plan.

Participant Accounts

Each participant's account is credited with the participant's contributions, Company contributions, an allocation of forfeitures of terminated participants' nonvested accounts and plan earnings (losses). Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Company portion of their accounts, plus actual earnings thereon, is based on years of continuous service in which participants have been credited with at least 1,000 hours of service in accordance with the following vesting schedule: Less than two years of service-0%; two years of service-20%; three years of service-40%; four years of service-60%; five years of service-80%; six years or more of service-100%. Notwithstanding the above, a participant is fully vested upon reaching normal retirement age, death, or permanent disability.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 1 DESCRIPTION OF THE PLAN (CONTINUED)

Benefit Payments

On termination of service, a participant may elect to receive an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount, a life insurance contract, an annuity contract, or a direct transfer to another qualified retirement plan. Once a participant has reached age 59½, distributions may be made, at the participant's election, from their accounts which are 100% vested. A participant may elect at any time to withdraw all or any portion of their rollover account and/or after-tax account.

Forfeited Accounts

Forfeited balances of terminated nonvested participant accounts are held in the former participant's name for five years. After five years, forfeited balances are then allocated to active participants or used to pay plan expenses. A total of \$68,478 and \$157,793 of forfeited nonvested accounts were allocated to active participants in 2024 and 2023, respectively, and a total of \$-0- and \$125,547 of forfeited nonvested accounts were used to pay plan expenses in 2024 and 2023, respectively. There was no balance in the forfeiture account at December 31, 2024 and 2023.

Administration

The Company is the sponsor of the Plan and members of management of the Company are the trustees of the Plan. The trustees administer the Plan and are responsible for investing and safekeeping the Plan's assets. ERISA Inc is the third-party administrator of the Plan. Robert W. Baird is the custodian of the Plan's assets. The Plan's investment consultants, along with Robert W. Baird, advise the trustees on investment policy, the selection of investment options and monitor investment performance.

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

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

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 2 SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Investment Valuation and Income Recognition (Continued)

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

Payment of Benefits

Benefits are recorded when paid.

Concentration of Credit Risk

The Plan maintains its cash in deposit accounts which at times may exceed federally insured limits. The Plan has not experienced any losses in such accounts. The trustees believe the Plan is not exposed to any significant credit risk on cash.

Administrative Expenses

The Plan's expenses are paid either by the Plan or the Company as provided by the Plan document. Expenses that are paid directly by the Company are excluded from these financial statements. Certain expenses incurred in connection with the general administration of the Plan that are paid by the Plan are recorded as deductions in the accompanying statements of changes in net assets available for benefits. In addition, certain investment related expenses are included in net appreciation (depreciation) of fair value of investments presented in the accompanying statements of changes in net assets available for benefits.

Subsequent Events

The Plan has evaluated subsequent events through July 11, 2025, the date the financial statements were available to be issued.

NOTE 3 FAIR VALUE OF INVESTMENTS

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy 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.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 3 FAIR VALUE OF INVESTMENTS (CONTINUED)

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

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

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

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

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

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the valuation methodologies used at December 31, 2024 and 2023.

Money market funds and corporate bond funds / ETFs: Valued at the daily closing price as reported by the fund. Money market funds and corporate bond funds / ETFs held by the Plan are open-ended funds that are registered with the Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The money market funds and corporate bond funds / ETFs held by the Plan are deemed to be actively traded.

Certificates of deposit: Valued at fair value by discounting the related cash flows based on current yields of similar instruments with comparable durations considering the credit-worthiness of the issuer.

Corporate bonds and government bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing value on yields currently available on comparable securities of issuers with similar credit ratings. When quoted prices are not available for identical or similar bonds, the bond is valued under a discounted cash flows approach that maximizes observable inputs, such as current yields of similar instruments, but includes adjustments for certain risks that may not be observable, such as credit and liquidity risks or a broker quote if available.

Common stock: Valued at the closing price reported in the active market in which the individual securities are traded.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 3 FAIR VALUE OF INVESTMENTS (CONTINUED)

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

	2024			
	Level 1	Level 2	Level 3	Total
Money Market Funds	\$ 2,646,458	\$ -	\$ -	\$ 2,646,458
Certificates of Deposits	-	5,522,809	-	5,522,809
Government Bonds	-	499,844	-	499,844
Common Stock	8,129,845	-	-	8,129,845
Corporate Bond Funds / ETFs	6,720,977	-	-	6,720,977
Total Investments at Fair Value	\$ 17,497,280	\$ 6,022,653	\$ -	\$ 23,519,933

	2023			
	Level 1	Level 2	Level 3	Total
Money Market Funds	\$ 2,224,598	\$ -	\$ -	\$ 2,224,598
Certificates of Deposits	-	4,395,307	-	4,395,307
Corporate Bonds	-	807,771	-	807,771
Government Bonds	-	664,783	-	664,783
Common Stock	10,422,054	-	-	10,422,054
Corporate Bond Funds / ETFs	5,241,868	-	-	5,241,868
Total Investments at Fair Value	\$ 17,888,520	\$ 5,867,861	\$ -	\$ 23,756,381

NOTE 4 PLAN TERMINATION

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

NOTE 5 PLAN TAX STATUS

The Company adopted a nonstandardized pre-approved profit sharing plan with a cash or deferral arrangement which received an opinion letter from the Internal Revenue Service (IRS) stating that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code (IRC). The Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified and the related trust is tax-exempt.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024 AND 2023

NOTE 5 PLAN TAX STATUS (CONTINUED)

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded there were no uncertain positions taken or expected to be taken that would require recognition of a liability or disclosure in the accompanying financial statements. The Plan is subject to routine audits by taxing jurisdictions. However, there are currently no audits for any tax periods in progress.

NOTE 6 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 the 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 7 PARTY-IN-INTEREST TRANSACTIONS

As described in Note 2, the Plan paid certain expenses related to Plan operations and investment activity to various service providers. These transactions qualify as party in interest transactions, which are exempt from the prohibited transaction rules of ERISA.

Certain employees and officers of the Company, who are also participants in the Plan, perform administrative services to the Plan at no cost.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF REPORTABLE TRANSACTIONS
YEAR ENDED DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(g)	(h)	(i)
Identity of Party Involved	Description of Assets	Purchase Price	Selling Price	Cost	Current Value	Net Gain (Loss)
Category (i) - Single Transaction in Excess of 5% of Plan Assets						
Robert W. Baird	Dreyfus Government Cash Management	\$ 1,329,928	\$ -	\$ 1,329,928	\$ 1,329,928	\$ -
Robert W. Baird	Dreyfus Government Cash Management	1,723,279	-	1,723,279	1,723,279	-
Robert W. Baird	Dreyfus Government Cash Management	2,062,594	-	2,062,594	2,062,594	-
Robert W. Baird	Dreyfus Government Cash Management	-	2,201,562	2,201,562	2,201,562	-
Category (iii) - A Series of Transactions in Excess of 5% of Plan Assets						
Robert W. Baird	Dreyfus Government Cash Management	14,535,604	-	14,535,604	14,535,604	-
Robert W. Baird	Dreyfus Government Cash Management	-	14,113,743	14,113,743	14,113,743	-

*Columns (e) and (f) are omitted as they are not applicable.
There were no category (ii) or (iv) reportable transactions for the year ended December 31, 2024.*



CLA (CliftonLarsonAllen LLP) is a network member of CLA Global. See CLAGlobal.com/disclaimer. Investment advisory services are offered through CliftonLarsonAllen Wealth Advisors, LLC, an SEC-registered investment advisor.

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Money Market Funds:</u>		
	Dreyfus Govt Sec	Money Market Fund	\$ 2,646,458	\$ 2,646,458
		<u>Certificates of Deposit:</u>		
	American Express National Bank, 1.80%, due 3/3/25	Certificate of Deposit	500,000	497,916
	Bank of America, 4.85%, due 3/30/26	Certificate of Deposit	499,715	504,288
	BMW Bank of North America, 4.90%, due 4/20/26	Certificate of Deposit	499,000	504,890
	Dollar Bank FSB, 5.10%, due 6/16/25	Certificate of Deposit	499,125	502,041
	First National Bank, 4.70%, due 4/23/27	Certificate of Deposit	498,500	508,815
	Flagstar Bank, 4.85%, due 3/27/26	Certificate of Deposit	498,750	504,351
	Goldman Sachs Bank, 1.80%, due 3/9/26	Certificate of Deposit	500,000	486,617
	Morgan Stanley Bank, 4.70%, due 3/29/27	Certificate of Deposit	494,975	503,079
	Morgan Stanley PVT Bank, 4.70%, due 3/29/27	Certificate of Deposit	494,975	503,079
	UBS Bank USA, 4.60%, due 3/15/27	Certificate of Deposit	497,950	507,234
	Wells Fargo Bank NA, 4.65%, due 4/14/25	Certificate of Deposit	494,670	500,499
		Total Certificates of Deposit	5,477,660	5,522,809
		<u>Government Bonds:</u>		
	U.S. Treasury Note, 4.125%, due 1/31/25	Government Bond	492,617	499,844
		<u>Common Stock:</u>		
	Aaon Inc	Common Stock	40,987	40,835
	Abbot Laboratories	Common Stock	36,626	38,005
	Abbvie Inc.	Common Stock	42,677	52,777
	Accenture PLC Ireland	Common Stock	26,362	50,306
	Air Products & Chemicals Inc.	Common Stock	14,570	29,874
	Altria Group Inc.	Common Stock	35,268	34,145
	American Water Works Company Inc	Common Stock	65,993	65,232
	Amphenol Corp	Common Stock	67,023	82,090
	Analog Devices Inc.	Common Stock	9,944	27,195
	A.O. Smith	Common Stock	30,975	25,511
	Apple Inc.	Common Stock	37,447	151,254
	Arthur J. Gallagher & Co.	Common Stock	12,924	47,119
	Atmos Energy Corp	Common Stock	38,780	57,101

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Common Stock (Continued):</u>		
	AT&T Inc.	Common Stock	\$ 58,656	\$ 56,492
	Automatic Data Processing Inc.	Common Stock	27,419	49,764
	Bank of America Corp.	Common Stock	50,010	80,692
	BCE Inc.	Common Stock	65,090	33,959
	Becton Dickinson & Company	Common Stock	53,428	55,810
	Berkley W R Corp	Common Stock	20,507	29,084
	Bio-Techne Corp.	Common Stock	26,344	24,922
	BJs Wholesale Club Holdings Inc.	Common Stock	32,150	40,118
	Blackrock Inc.	Common Stock	36,181	56,381
	Broadcom Inc.	Common Stock	15,222	107,574
	Broadridge Financial Solutions Inc.	Common Stock	39,162	90,210
	Brown & Brown Inc.	Common Stock	5,814	28,260
	Brown-Forman Corp	Common Stock	28,853	23,889
	Burlington Stores Inc	Common Stock	28,653	41,619
	BWX Technologies Inc	Common Stock	18,591	20,941
	Caseys General Stores Inc.	Common Stock	56,577	94,699
	CDW Corp.	Common Stock	7,893	33,764
	Chevron Corp.	Common Stock	61,526	86,035
	Churchill Downs Inc.	Common Stock	43,162	43,267
	Chubb Ltd.	Common Stock	70,430	135,664
	Cintas Corp.	Common Stock	32,505	42,935
	Cisco Systems Inc.	Common Stock	35,657	68,850
	Citigroup Inc.	Common Stock	59,644	53,778
	Clorox Company	Common Stock	26,009	31,670
	Colgate-Palmolive Company	Common Stock	19,252	25,273
	Comcast Corp	Common Stock	51,601	49,652
	Conocophillips	Common Stock	24,273	56,626
	Copart Inc.	Common Stock	12,346	30,704
	Corteva Inc	Common Stock	53,558	47,903
	Costar Group Inc	Common Stock	33,454	35,294
	Costco Wholesale Corp	Common Stock	16,910	54,976
	Crown Castle Intl Corp.	Common Stock	37,130	36,486
	Datadog Inc	Common Stock	29,784	34,294

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Common Stock (Continued):</u>		
	D R Horton Inc.	Common Stock	\$ 5,574	\$ 21,812
	Descartes Systems Group Inc.	Common Stock	18,364	27,264
	Dexcom Inc	Common Stock	10,465	21,231
	Diageo PLC	Common Stock	22,986	21,993
	Diamondback Energy Inc.	Common Stock	23,238	28,834
	Donaldson Company Inc.	Common Stock	21,239	31,991
	DOW Inc	Common Stock	53,660	40,652
	Duke Energy Corp	Common Stock	55,465	71,324
	Dutch Bros Inc	Common Stock	23,733	37,766
	Dynatrace Inc.	Common Stock	19,017	21,251
	Ecolab Inc.	Common Stock	20,331	27,650
	EOG Resources Inc.	Common Stock	62,316	70,360
	Epam Systems Inc.	Common Stock	22,574	39,048
	Equifax Inc.	Common Stock	31,085	38,737
	Equinix Inc.	Common Stock	40,727	49,030
	Expeditors Intl. Wash Inc.	Common Stock	14,374	28,800
	Exxon Mobile Corp.	Common Stock	102,073	148,769
	Fastenal Company	Common Stock	42,573	85,717
	Ferguson Enterprises Inc	Common Stock	22,717	26,730
	Floor & Décor Holdings Inc	Common Stock	14,761	19,641
	General Dynamics Corp.	Common Stock	51,201	93,012
	Genuine Parts Co.	Common Stock	33,389	42,267
	Globant S A	Common Stock	42,778	45,457
	Graco Inc.	Common Stock	22,696	66,252
	Healthpeak PPTYS Inc	Common Stock	55,038	40,398
	Heico Corp	Common Stock	13,411	30,193
	Hershey Company	Common Stock	27,356	23,878
	Home Depot Inc.	Common Stock	42,462	89,078
	Hubspot Inc	Common Stock	30,830	29,961
	ICON PLC	Common Stock	8,559	22,229
	IDEX Corp.	Common Stock	25,229	34,114
	IDEXX Laboratories Inc.	Common Stock	5,742	30,181
	Illinois Tool Works Inc.	Common Stock	46,826	82,154

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Common Stock (Continued):</u>		
	Ingersoll Rand Inc.	Common Stock	\$ 17,910	\$ 34,194
	Insulet Corp	Common Stock	16,884	44,904
	Intuit Inc.	Common Stock	27,620	50,909
	Jack Henry & Associates Inc	Common Stock	63,562	72,224
	Johnson & Johnson	Common Stock	60,235	62,910
	Johnson Controls Intl. PLC	Common Stock	39,533	81,535
	JPMorgan Chase and Co.	Common Stock	41,314	109,308
	Kenvue Inc.	Common Stock	47,815	50,770
	Kinsale Capital Group Inc.	Common Stock	26,074	40,931
	Lamb Weston Hldgs Inc.	Common Stock	22,434	25,730
	Lennox International Inc	Common Stock	19,182	24,372
	Linde PLC	Common Stock	10,134	25,958
	Lockheed Martin Corp.	Common Stock	13,912	24,783
	Lowe's Companies Inc.	Common Stock	21,266	57,504
	Manhattan Associates Inc	Common Stock	36,044	39,996
	Marketaxess Holdings Inc.	Common Stock	41,260	28,481
	Masco Corp	Common Stock	19,277	28,230
	Mastercard Inc.	Common Stock	31,247	93,729
	McCormick & Company Inc.	Common Stock	46,959	47,040
	McDonalds Corp.	Common Stock	46,469	78,270
	Medtronic PLC	Common Stock	80,756	79,800
	Merck & Company Inc.	Common Stock	59,423	91,919
	Microchip Technology Inc	Common Stock	20,478	12,502
	Microsoft Corp.	Common Stock	48,026	129,402
	Mondelez International Inc.	Common Stock	37,729	33,150
	Monolithic Power System Inc.	Common Stock	15,333	44,969
	Morgan Stanley	Common Stock	28,139	90,770
	Motorola Solutions Inc.	Common Stock	46,368	61,939
	MSCI Inc	Common Stock	31,934	45,001
	NASDAQ Inc	Common Stock	23,600	49,478
	NextEra Energy Inc.	Common Stock	36,653	69,898
	New Jersey Resources Corp.	Common Stock	16,706	29,250
	Nike Inc.	Common Stock	17,706	23,987

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Common Stock (Continued):</u>		
	Nordson Corp	Common Stock	\$ 15,248	\$ 25,946
	Northern Trust Corp.	Common Stock	29,030	33,928
	Novartis AG	Common Stock	40,690	57,218
	Oracle Corp	Common Stock	11,148	34,161
	Paychex Inc.	Common Stock	14,096	34,915
	Penumbra Inc	Common Stock	34,924	40,609
	Pepsico Inc.	Common Stock	19,241	26,002
	Pfizer Inc.	Common Stock	49,252	41,997
	Philip Morris International Inc.	Common Stock	57,184	82,319
	Polaris Inc.	Common Stock	12,860	15,615
	Pool Corp.	Common Stock	47,684	61,710
	PTC Inc.	Common Stock	15,979	38,061
	Price T Rowe Grp Inc.	Common Stock	19,741	29,403
	Procter & Gamble Company	Common Stock	15,120	28,165
	Pure Storage Inc	Common Stock	23,486	22,483
	Qualcomm Inc.	Common Stock	42,137	61,602
	Raymond James Financial Inc	Common Stock	28,095	36,037
	Republic Services Inc.	Common Stock	18,886	49,490
	Repligen Corp.	Common Stock	27,625	30,227
	Resmed Inc.	Common Stock	40,198	55,343
	Rollins Inc	Common Stock	32,150	31,240
	RTX Corp.	Common Stock	56,028	85,633
	S&P Global Inc.	Common Stock	52,494	80,183
	Sherwin Williams Co.	Common Stock	40,957	78,184
	Shift 4 Payments Inc	Common Stock	16,360	23,662
	Siemens A G	Common Stock	31,553	52,981
	Snap On Inc.	Common Stock	46,054	89,622
	Southern Company	Common Stock	15,468	27,083
	Starbucks Corp.	Common Stock	16,698	28,288
	Steris PLC USD	Common Stock	26,694	39,673
	Stryker Corp.	Common Stock	37,255	85,332
	T-Mobile US Inc.	Common Stock	45,444	60,921
	Target Corp	Common Stock	24,212	46,096

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		<u>Common Stock (Continued):</u>		
	Texas Instruments Inc	Common Stock	\$ 44,461	\$ 45,752
	Texas Roadhouse Inc	Common Stock	27,653	29,230
	TJX Companies Inc.	Common Stock	8,951	30,565
	Toro Co	Common Stock	26,743	25,872
	Tractor Supply Co	Common Stock	20,985	56,509
	Travelers Companies Inc.	Common Stock	31,100	58,777
	Trex Co Inc	Common Stock	20,595	32,996
	Truist Financial Corp	Common Stock	47,143	44,855
	Tyler Technologies Inc.	Common Stock	10,495	43,825
	Unilever PLC Sponsored	Common Stock	52,835	52,788
	United Parcel Service Inc.	Common Stock	90,223	64,185
	Verizon Communications Inc	Common Stock	51,805	44,549
	Veeva System Inc.	Common Stock	32,389	33,640
	Vertiv Holdings LLC	Common Stock	24,536	32,947
	Vici Properties Inc.	Common Stock	52,666	49,745
	Walmart Inc	Common Stock	44,401	58,637
	Watsco Inc.	Common Stock	19,329	55,919
	WEC Energy Group Inc.	Common Stock	74,647	82,379
	Zebra Technologies Corp	Common Stock	35,174	42,870
	Zoetis Inc	Common Stock	40,801	35,030
		Total Common Stock	5,543,061	8,129,845
		<u>Corporate Bond Funds / ETFs:</u>		
	Invesco S&P 500 Rev ETF	Corporate Bond Fund / ETF	500,092	533,664
	iShares 0-3 Month Treasury Bond	Corporate Bond Fund / ETF	19,298	19,261
	iShares 10-20 Year Treasury Bond	Corporate Bond Fund / ETF	32,523	34,441
	iShares iBonds December 2026 Term Corp ETF	Corporate Bond Fund / ETF	77,145	75,267
	iShares iBonds December 2027 Term Corp ETF	Corporate Bond Fund / ETF	18,571	18,713
	iShares iBonds December 2027 Term Treasury ETF	Corporate Bond Fund / ETF	146,994	148,918
	iShares iBonds December 2028 Term Treasury ETF	Corporate Bond Fund / ETF	54,223	46,195
	iShares iBonds December 2029 Term Treasury ETF	Corporate Bond Fund / ETF	44,427	36,639
	iShares iBonds December 2030 Term Treasury ETF	Corporate Bond Fund / ETF	36,312	36,332

* Indicates Party-in-Interest

EXACTO SPRING CORP. EMPLOYEES' PROFIT SHARING PLAN
E.I.N. 36-2495545 PLAN NO. 002
SCHEDULE H, LINE 4i—SCHEDULE OF ASSETS HELD (AT END OF YEAR) (CONTINUED)
DECEMBER 31, 2024

(a)	(b) Identity of Issue	(c) Description of Investment	(d) Cost	(e) Current Value
		Corporate Bond Funds / ETFs (Continued):		
	iShares iBonds December 2031 Term Corp ETF	Corporate Bond Fund / ETF	\$ 46,088	\$ 45,706
	iShares iBonds December 2032 Term Treasury ETF	Corporate Bond Fund / ETF	48,561	44,844
	iShares iBonds December 2032 Term Corp ETF	Corporate Bond Fund / ETF	46,060	45,596
	iShares iBonds December 2033 Term Corp Bond ETF	Corporate Bond Fund / ETF	37,252	36,270
	iShares MBS ETF	Corporate Bond Fund / ETF	125,424	122,576
	iShares Russell Mid Cap	Corporate Bond Fund / ETF	400,161	475,971
	iShares Russell 1000 Growth ETF	Corporate Bond Fund / ETF	499,427	722,844
	SPDR Mortgage Backed Bond ETF	Corporate Bond Fund / ETF	211,625	218,000
	Vanguard S&P 500 Growth ETF	Corporate Bond Fund / ETF	1,268,097	2,022,482
	Vanguard S&P 500 Value ETF	Corporate Bond Fund / ETF	949,086	1,212,231
	Vanguard Mid Cap Value ETF	Corporate Bond Fund / ETF	494,817	825,027
		Total Corporate Bond Funds / ETFs	<u>5,056,183</u>	<u>6,720,977</u>
		Total Investments	<u>\$ 19,215,979</u>	<u>\$ 23,519,933</u>

* Indicates Party-in-Interest