

<p>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>Annual Return/Report of Employee Benefit Plan</p> <p>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).</p> <p>▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p>OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: 24pt; font-weight: bold;">2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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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 (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

<p>1a Name of plan <u>TRITON RESTAURANTS EMPLOYEES PROFIT SHARING PLAN AND TRUST</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>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>TRITON RESTAURANTS, INC.</u></p> <p><u>JAMES W SMITH</u> <u>PO BOX 38533</u> <u>GREENSBORO, NC 27438-8533</u></p>	<p>1c Effective date of plan <u>01/01/1994</u></p> <p>2b Employer Identification Number (EIN) <u>56-1837872</u></p> <p>2c Plan Sponsor's telephone number <u>336-375-1221</u></p> <p>2d Business code (see instructions) <u>722513</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	07/30/2025	JAMES SMITH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/30/2025	JAMES SMITH
	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 type="checkbox"/> Same as Plan Sponsor TRITON RESTAURANTS INC JAMES W SMITH PO BOX 38533 GREENSBORO, NC 27438-8533	3b Administrator's EIN 56-1837872 3c Administrator's telephone number 336-375-1221
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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
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5 Total number of participants at the beginning of the plan year	5	251
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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	6a(1)	104
a(2) Total number of active participants at the end of the plan year	6a(2)	126
b Retired or separated participants receiving benefits.....	6b	0
c Other retired or separated participants entitled to future benefits	6c	192
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	318
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	0
f Total. Add lines 6d and 6e	6f	318
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	251
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	318
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	10

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2E

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

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

a Pension Schedules

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

b General Schedules

- (1) **H** (Financial Information)
- (2) **I** (Financial Information – Small Plan)
- (3) **A** (Insurance Information) – Number Attached _____
- (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 _____

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 TRITON RESTAURANTS EMPLOYEES PROFIT SHARING PLAN AND TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 TRITON RESTAURANTS, INC.	D Employer Identification Number (EIN) 56-1837872	

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)

BROWN, EDWARDS AND COMPANY L.L.P.

3906 ELECTRIC ROAD
ROANOKE, VA 24018

54-0504608

(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?
10	PLAN AUDITOR	12805	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)

WELLS FARGO BANK

100 NORTH MAIN STREET
FLOORS 4 27 28
WINSTONSALEM, NC 27101

94-1347393

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 50	CUSTODIAN	10005	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"/>

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <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 TRITON RESTAURANTS EMPLOYEES PROFIT SHARING PLAN AND TRUST	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 TRITON RESTAURANTS, INC.	D Employer Identification Number (EIN) 56-1837872

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	41681	18045
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	15000	13979
(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)	370047	0
(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)		
(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)	998484	1492836
(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	1425212	1524860
Liabilities			
g Benefit claims payable.....	1g	5680	
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	5676	2749
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	11356	2749
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	1413856	1522111

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)	13979	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		13979
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	1588	
(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)		1588
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	25867	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	19271	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		45138
(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)		
(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		87581
d Total income. Add all income amounts in column (b) and enter total.....	2d		148286

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	16791	
(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)		16791
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)	12805	
(5) Investment advisory and investment management fees	2i(5)	10005	
(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)	430	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		23240
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		40031

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		108255
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: **BROWN, EDWARDS AND COMPANY**

(2) EIN: **54-0504608**

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		150000
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 _____.



Triton Restaurants Employees' Profit Sharing Plan and Trust

Financial Report

December 31, 2024

Triton Restaurants
Employees' Profit Sharing Plan and Trust

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Independent Auditor's Report

To the Plan Administrator and Those Charged with Governance of
Triton Restaurants Employees' Profit Sharing Plan and Trust
Greensboro, North Carolina

Opinion

We have audited the accompanying financial statements of Triton Restaurants Employees' Profit Sharing Plan and Trust (the "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 statement of changes in net assets available for benefits for the year ended December 31, 2024, 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 Triton Restaurants Employees' Profit Sharing Plan and Trust as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the year ended December 31, 2024, 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. 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 Triton Restaurants Employees' Profit Sharing Plan and Trust 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 Triton Restaurants Employees' Profit Sharing Plan and Trust'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

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when 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 Triton Restaurants Employees' Profit Sharing Plan and Trust'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 Triton Restaurants Employees' Profit Sharing Plan and Trust'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 H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024 and Schedule H, Line 4j – Schedule of Reportable Transactions 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 generally accepted auditing standards.

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 are presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Brown, Edwards & Company, L.L.P.

CERTIFIED PUBLIC ACCOUNTANTS

Roanoke, Virginia
July 25, 2025



Financial Statements



Triton Restaurants
Employees' Profit Sharing Plan and Trust
Statements of Net Assets Available for Benefits
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments at fair value (Note 3)	\$ 1,492,836	\$ 998,484
Cash and cash equivalents	18,045	406,048
Receivables		
Employer contributions	13,979	15,000
	<u>1,524,860</u>	<u>1,419,532</u>
LIABILITIES		
Due to Plan Sponsor (Note 4)	<u>2,747</u>	<u>5,676</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u><u>\$ 1,522,113</u></u>	<u><u>\$ 1,413,856</u></u>

Triton Restaurants
Employees' Profit Sharing Plan and Trust
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2024

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income	
Net appreciation in fair value of investments (Note 3)	\$ 79,438
Dividends and interest	54,872
	134,310
Contributions	
Employer	13,979
Total additions	148,289

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

Benefits paid	16,791
Administrative expenses (Note 4)	23,241
Total deductions	40,032
Net increase	108,257

NET ASSETS AVAILABLE FOR BENEFITS

Beginning of year	1,413,856
End of year	\$ 1,522,113

Triton Restaurants Employees' Profit Sharing Plan and Trust

Notes to Financial Statements

December 31, 2024

Note 1 – Plan Description

The following description of the Triton Restaurants Employees' Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan established January 1, 1994, and was amended and restated effective January 1, 2022, covering all employees of Triton Restaurants, Inc. (the "Company") who have attained age twenty and one-half, excluding leased employees who meet certain criteria. Employees become eligible to share in the employer's contribution once they have completed one year of service, as defined by the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act (ERISA).

Contributions

Each year the Company may make discretionary contributions to the Plan as determined by the Trustee. These contributions are allocated to participants based on the provisions of the Plan. The Company's contributions are invested in a portfolio of investments as directed by the Company. Contributions are subject to certain limitations.

Participant Accounts

Each participant's account is credited with the Company's contributions and an allocation of Plan earnings and charged with an allocation of administrative expenses. Allocations are based on eligible compensation or account balances, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Vesting in employer contributions is based on years of continuous service as defined by the Plan. Participants are 100% vested after three years of service.

Forfeitures

Forfeitures are allocated to participant accounts in the same manner as the Company's contributions, as defined by the Plan. There were no unallocated forfeitures as of December 31, 2024 and 2023. Forfeitures of \$1,518 were allocated to participants during 2024.

Payment of Benefits

Upon termination of service due to death, disability, or retirement, a participant may elect to receive a lump-sum amount, periodic installments, or an annuity equal to the value of the participant's vested interest in his or her account. Vested account balances up to \$1,000 will be distributed in a lump-sum payment. For termination of service due to reasons other than death, disability, or retirement, an eligible participant will receive the value of the vested interest in his or her account as a lump-sum distribution upon attaining age 65 or five years prior to their normal retirement date, as defined. Participants may also receive a lump-sum distribution if they have been terminated for at least five consecutive years.

Triton Restaurants

Employees' Profit Sharing Plan and Trust

Notes to Financial Statements

December 31, 2024

Note 2 – Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared using the accrual method of accounting.

Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Actual results may differ from those estimates.

Cash and Cash Equivalents

The Plan's cash consists of funds held in a non-interest bearing business checking account maintained by Wells Fargo Bank, N.A. This account is insured by the Federal Deposit Insurance Corporation (FDIC). At December 31, 2023, the cash equivalents included certificates of deposit. Funds invested in brokered certificates of deposit were at banks or savings and loan associations with remaining maturities of 90 days or less. The amount of each individual certificate was within FDIC coverage limits.

Valuation of Investments and Revenue Recognition

The Plan's investments are recorded 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 a full discussion of fair value measurements.

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

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 such changes could materially affect participants' account balances and the amounts reported in the statements of net assets available for benefits.

Benefit Payments

Benefits are recorded when paid.

Administrative Costs

Administrative expenses incurred by the Plan may be paid by either the Company or the Plan on a discretionary basis.

Triton Restaurants Employees' Profit Sharing Plan and Trust

Notes to Financial Statements

December 31, 2024

Note 3 – Fair Value Measurements

The Plan's investments are reported at fair value in the accompanying statements of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority, Level 2 inputs consist of observable inputs other than quoted prices for identical assets, and Level 3 consists of unobservable inputs and has the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2024 and 2023. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

	Fair Value Measurements at Reporting Date Using:	
	Fair Value	Quoted Prices in Active Markets for Identical Assets (Level 1)
December 31, 2024		
Exchange traded funds	\$ 803,638	\$ 803,638
Mutual funds	689,198	689,198
Total at fair value	\$ 1,492,836	\$ 1,492,836
December 31, 2023		
Exchange traded funds	\$ 260,656	\$ 260,656
Mutual funds	737,828	737,828
Total at fair value	\$ 998,484	\$ 998,484

Level 1 Fair Value Measurements

The fair values of mutual funds and exchange traded funds are based on quoted net asset values of the shares held by the Plan at year-end.

Triton Restaurants Employees' Profit Sharing Plan and Trust

Notes to Financial Statements

December 31, 2024

Note 4 – Related Party Transactions

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

Administrative expenses include amounts paid to Wells Fargo Bank, N.A. for investment management and recordkeeping services of \$10,005, and fees for professional services. During the year, the Plan Sponsor paid certain benefits and expenses on behalf of the Plan totaling \$2,747 and, as a result, this amount is due to the Plan Sponsor at year end.

Note 5 – Plan Termination

The Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will be 100% vested in their accounts. See Note 7 for additional information regarding Plan termination.

Note 6 – Tax Status

Effective January 1, 2022, the Plan document was restated to a pre-approved document sponsored by Tuggle & Royster. Tuggle & Royster obtained its latest determination letter on June 30, 2020, in which the Internal Revenue Service (IRS) stated that the pre-approved document, as then designed, was in compliance with the applicable requirements of the *Internal Revenue Code (IRC)*. The Plan Administrator and counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the *IRC*.

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 (or asset) 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 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.

Note 7 – Subsequent Events

Subsequent events have been evaluated through July 25, 2025, the date the financial statements were available to be issued.

In May 2025, the Plan Sponsor approved termination of the Plan effective May 16, 2025 (Plan freeze date). As of the Plan freeze date, no further contributions will be made to the Plan and benefits held under the Plan will be distributed to participants as soon as administratively feasible.



Supplemental Information



Triton Restaurants
Employees' Profit Sharing Plan and Trust
(EIN: 56-1837872) (Plan: 001)

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Goldman Sachs	Financial Square Government Instl. Money Market Fund	\$ 22,294	\$ 22,294
	Allspring	Special Mid Cap Value Fund Inst.	36,185	35,082
	American Funds	EuroPacific Growth Fund Class F-2	11,598	11,256
	AlphaSimplex	Managed Futures Strategy Fund Class I	13,809	11,725
	Baron	Emerging Markets Fund Instl.	19,295	17,521
	Dodge & Cox	Stock Fund Class I	17,046	17,996
	Fidelity	500 Index Fund	90,744	112,829
	Causeway	International Value Fund Instl.	17,816	16,714
	Embark	Commodity Strategy Fund Instl.	30,954	30,994
	Invesco	Developing Markets Fund Class Y	23,299	22,529
	JP Morgan	Core Bond Fund Class I	86,109	75,974
	LoCorr	Macro Strategies Fund Class I	19,721	17,964
	NYLI	Large Cap Growth Fund Class I	39,161	44,723
	MFS	Value Fund Class I	30,142	29,396
	Macquarie	Small Cap Core Fund Class I	39,019	42,359
	PIMCO	Income Fund Instl.	75,175	73,710
	Principal	High Yield Fund Instl.	18,858	18,146
	Principal	Mid Cap Fund Instl.	35,723	43,368
	T Rowe Price	Overseas Stock Fund	44,940	44,618
	Invesco	DB Energy Fund ETF	58,769	54,852
	iShares	Global Healthcare Fund ETF	55,344	50,808
	iShares	Russell 1000 Growth Fund ETF	97,635	113,245
	iShares	Core S&P 500 Fund ETF	150,989	169,540
	iShares	S&P 500 Value Fund ETF	128,479	130,944
	Materials	Select Sector SPDR Fund ETF	73,946	66,639
	Vanguard	Industrials Index Fund ETF	70,436	75,300
	Vanguard	Total Bond Market Index Fund ETF	142,440	142,310
		Total	<u>\$ 1,449,926</u>	<u>\$ 1,492,836</u>

Triton Restaurants
Employees' Profit Sharing Plan and Trust
(EIN: 56-1837872) (Plan: 001)

Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2024

(a) Identity of Party Involved	(b) Description of Asset	Total Number of Transactions	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred With Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
Assoc. Bank Green Bay, WI	Certificate of Deposit, 5.300%, Due 3/22/24	1	\$ -	\$ 250,000	\$ -	\$ -	\$ 250,000	\$ 250,000	\$ -
Bank of America, N.A.	Certificate of Deposit, 5.250%, Due 2/1/24	1	\$ -	\$ 120,000	\$ -	\$ -	\$ 120,000	\$ 120,000	\$ -
Fidelity	500 Index Fund	2	\$ 70,107	\$ -	\$ -	\$ -	\$ 70,107	\$ 70,107	\$ -
Fidelity	500 Index Fund	2	\$ -	\$ 41,238	\$ -	\$ -	\$ 22,220	\$ 41,238	\$ 19,018
Fidelity	Government Portfolio Inst.	1	\$ 190,000	\$ -	\$ -	\$ -	\$ 190,000	\$ 190,000	\$ -
Fidelity	Government Portfolio Inst.	1	\$ -	\$ 193,542	\$ -	\$ -	\$ 193,542	\$ 193,542	\$ -
iShares	Core S&P 500 ETF	3	\$ 150,989	\$ -	\$ -	\$ -	\$ 150,989	\$ 150,989	\$ -
iShares	Russell 1000 Growth ETF	3	\$ 97,635	\$ -	\$ -	\$ -	\$ 97,635	\$ 97,635	\$ -
iShares	S&P 500 Value ETF	3	\$ 128,479	\$ -	\$ -	\$ -	\$ 128,479	\$ 128,479	\$ -
Mainstay	Winslow Large Cap Growth Fund I	1	\$ 10,425	\$ -	\$ -	\$ -	\$ 10,425	\$ 10,425	\$ -
Mainstay	Winslow Large Cap Growth Fund I	3	\$ -	\$ 70,628	\$ -	\$ -	\$ 67,084	\$ 70,628	\$ 3,544
Midfirst Bank	Certificate of Deposit, 5.300%, Due 4/29/24	1	\$ 200,000	\$ -	\$ -	\$ -	\$ 200,000	\$ 200,000	\$ -
Midfirst Bank	Certificate of Deposit, 5.300%, Due 4/29/24	1	\$ -	\$ 200,000	\$ -	\$ -	\$ 200,000	\$ 200,000	\$ -
PIMCO	Income Fund Instl.	1	\$ 73,950	\$ -	\$ -	\$ -	\$ 73,950	\$ 73,950	\$ -
Select	Sector SPDR F ETF	1	\$ 73,946	\$ -	\$ -	\$ -	\$ 73,946	\$ 73,946	\$ -
Vanguard	High Dividend Yield Index Fund ETF	1	\$ -	\$ 269,422	\$ -	\$ -	\$ 201,219	\$ 269,422	\$ 68,203
Vanguard	Total Bond ETF	2	\$ 217,945	\$ -	\$ -	\$ -	\$ 217,945	\$ 217,945	\$ -
Vanguard	Total Bond ETF	1	\$ -	\$ 78,317	\$ -	\$ -	\$ 75,505	\$ 78,317	\$ 2,812

Triton Restaurants
Employees' Profit Sharing Plan and Trust
(EIN: 56-1837872) (Plan: 001)

Schedule H, Line 4i – Schedule of Assets (Held at End of Year)
December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
	Goldman Sachs	Financial Square Government Instl. Money Market Fund	\$ 22,294	\$ 22,294
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	Principal	Mid Cap Fund Instl.	35,723	43,368
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	iShares	S&P 500 Value Fund ETF	128,479	130,944
	Materials	Select Sector SPDR Fund ETF	73,946	66,639
	Vanguard	Industrials Index Fund ETF	70,436	75,300
	Vanguard	Total Bond Market Index Fund ETF	142,440	142,310
		Total	<u>\$ 1,449,926</u>	<u>\$ 1,492,836</u>

Triton Restaurants
Employees' Profit Sharing Plan and Trust
(EIN: 56-1837872) (Plan: 001)

Schedule H, Line 4j – Schedule of Reportable Transactions
Year Ended December 31, 2024

(a) Identity of Party Involved	(b) Description of Asset	Total Number of Transactions	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred With Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain or (Loss)
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Bank of America, N.A.	Certificate of Deposit, 5.250%, Due 2/1/24	1	\$ -	\$ 120,000	\$ -	\$ -	\$ 120,000	\$ 120,000	\$ -
Fidelity	500 Index Fund	2	\$ 70,107	\$ -	\$ -	\$ -	\$ 70,107	\$ 70,107	\$ -
Fidelity	500 Index Fund	2	\$ -	\$ 41,238	\$ -	\$ -	\$ 22,220	\$ 41,238	\$ 19,018
Fidelity	Government Portfolio Inst.	1	\$ 190,000	\$ -	\$ -	\$ -	\$ 190,000	\$ 190,000	\$ -
Fidelity	Government Portfolio Inst.	1	\$ -	\$ 193,542	\$ -	\$ -	\$ 193,542	\$ 193,542	\$ -
iShares	Core S&P 500 ETF	3	\$ 150,989	\$ -	\$ -	\$ -	\$ 150,989	\$ 150,989	\$ -
iShares	Russell 1000 Growth ETF	3	\$ 97,635	\$ -	\$ -	\$ -	\$ 97,635	\$ 97,635	\$ -
iShares	S&P 500 Value ETF	3	\$ 128,479	\$ -	\$ -	\$ -	\$ 128,479	\$ 128,479	\$ -
Mainstay	Winslow Large Cap Growth Fund I	1	\$ 10,425	\$ -	\$ -	\$ -	\$ 10,425	\$ 10,425	\$ -
Mainstay	Winslow Large Cap Growth Fund I	3	\$ -	\$ 70,628	\$ -	\$ -	\$ 67,084	\$ 70,628	\$ 3,544
Midfirst Bank	Certificate of Deposit, 5.300%, Due 4/29/24	1	\$ 200,000	\$ -	\$ -	\$ -	\$ 200,000	\$ 200,000	\$ -
Midfirst Bank	Certificate of Deposit, 5.300%, Due 4/29/24	1	\$ -	\$ 200,000	\$ -	\$ -	\$ 200,000	\$ 200,000	\$ -
PIMCO	Income Fund Instl.	1	\$ 73,950	\$ -	\$ -	\$ -	\$ 73,950	\$ 73,950	\$ -
Select	Sector SPDR F ETF	1	\$ 73,946	\$ -	\$ -	\$ -	\$ 73,946	\$ 73,946	\$ -
Vanguard	High Dividend Yield Index Fund ETF	1	\$ -	\$ 269,422	\$ -	\$ -	\$ 201,219	\$ 269,422	\$ 68,203
Vanguard	Total Bond ETF	2	\$ 217,945	\$ -	\$ -	\$ -	\$ 217,945	\$ 217,945	\$ -
Vanguard	Total Bond ETF	1	\$ -	\$ 78,317	\$ -	\$ -	\$ 75,505	\$ 78,317	\$ 2,812