

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

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

Complete all entries in accordance with the instructions to the Form 5500.

Part I Annual Report Identification Information

For calendar plan year 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, a single-employer plan, a DFE, B This return/report is: the first return/report, the final return/report, an amended return/report, a short plan year return/report, 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, E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here

Part II Basic Plan Information—enter all requested information

1a Name of plan: TWM / TAC 401(K) PLAN; 1b Three-digit plan number (PN): 001; 1c Effective date of plan: 04/01/1985; 2a Plan sponsor's name, mailing address, city, state, and ZIP: THOUVENOT, WADE & MOERCHEN, INC., 4940 OLD COLLINSVILLE ROAD, SWANSEA, IL 62226-2001; 2b Employer Identification Number (EIN): 37-1042595; 2c Plan Sponsor's telephone number: 618-624-4488; 2d Business code (see instructions): 541330

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

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

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

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

Form 5500 (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	175
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)	154
	6a(2)	161
	6b	0
	6c	28
	6d	189
	6e	0
	6f	189
	6g(1)	140
6g(2)	149	
6h	6	
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:
 2G 2E 2J 2K 2T 2U 3D 2F 2R

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 <u>0</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input checked="" 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 TWM / TAC 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 THOUVENOT, WADE & MOERCHEN, INC.	D Employer Identification Number (EIN) 37-1042595	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

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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)

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	11850	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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 60 64 65	RECORDKEEPER	-27088	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" 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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AM CENT GOVT BD INV - AMERICAN CEN 44-0619208	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AM CENT OC AGGR INV - AMERICAN CEN 44-0619208	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AM CENT OC CONSV INV - AMERICAN CE 44-0619208	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AM CENT OC MOD INV - AMERICAN CENT 44-0619208	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
AS EMRG MKTS EQ ADM - ALLSPRING FU 94-3382001	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
DODGE&COX INTL STK I - SS&C GIDS, 1345 AVENUE OF THE AMERICAS NEW YORK, NY 10105	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
INVS DIVRS DIVD R5 - INVESCO INVES 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
INVS EQV INTL EQ R5 - INVESCO INVE 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
J H ENTERPRISE T - JANUS HENDERSON 151 DETROIT STREET DENVER, CO 80206	0.35%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
J H TRITON T - JANUS HENDERSON SER 151 DETROIT STREET DENVER, CO 80206	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JHANCOCK BOND R2 - JOHN HANCOCK SI 01-0233346	0.50%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
JS LARGE-CAP GR INST - US BANCORP 39-0281260	0.15%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
MFS VALUE R4 - MFS SERVICE CENTER 04-2865649	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
TRP INTL VAL EQ ADV - T. ROWE PRIC 52-2269240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(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.	
VICTORY S SM CO OP I - FIS INVESTO 14785 PRESTON ROAD SUITE 1000 DALLAS, TX 75254	0.10%	

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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 TWM / TAC 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 THOUVENOT, WADE & MOERCHEN, INC.	D Employer Identification Number (EIN) 37-1042595

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
a Total noninterest-bearing cash	1a	397	1085
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1537024	1612492
(2) U.S. Government securities	1c(2)	26739	12804
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	9979
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	287264	220407
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	60279	65578
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	20049355	23510663
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	0	0
(15) Other	1c(15)	1620	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	21962678	25433008
Liabilities			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	0	0
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	21962678	25433008

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)	300721	
(B) Participants.....	2a(1)(B)	1286661	
(C) Others (including rollovers).....	2a(1)(C)	273880	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		1861262
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	45930	
(B) U.S. Government securities.....	2b(1)(B)	186	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	5323	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		51439
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	3547	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1404019	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		1407566
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	147898	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	143753	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		4145
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)	0	
(B) Other.....	2b(5)(B)	-91899	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B).....	2b(5)(C)		-91899

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	2541794
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total.....	2d	5774307

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2319215
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other.....	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	2319215
f Corrective distributions (see instructions)	2f	0
g Certain deemed distributions of participant loans (see instructions).....	2g	0
h Interest expense.....	2h	0
i Administrative expenses:		
(1) Salaries and allowances	2i(1)	0
(2) Contract administrator fees	2i(2)	0
(3) Recordkeeping fees	2i(3)	-27088
(4) IQPA audit fees	2i(4)	0
(5) Investment advisory and investment management fees	2i(5)	11850
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	0
(8) Legal fees	2i(8)	0
(9) Valuation/appraisal fees	2i(9)	0
(10) Other trustee fees and expenses	2i(10)	0
(11) Other expenses.....	2i(11)	0
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	-15238
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j	2303977

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k	3470330
l Transfers of assets:		
(1) To this plan.....	2l(1)	0
(2) From this plan	2l(2)	0

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: **KERBER, ECK & BRAECKEL, LLP**

(2) EIN: **43-0352985**

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.		X	

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.	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 <u>TWM / TAC 401(K) PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>THOUVENOT, WADE & MOERCHEN, INC.</u>	D Employer Identification Number (EIN) <u>37-1042595</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	
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): <u>04-6568107</u>		
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)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

Part III	Amendments
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9 If this is a defined benefit pension plan, were any amendments adopted during this plan year that increased or decreased the value of benefits? If yes, check the appropriate box. If no, check the "No" box.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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 Q702438A.

<p>SCHEDULE MEP (Form 5500)</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p>	<p>MULTIPLE-EMPLOYER RETIREMENT PLAN INFORMATION</p> <p>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)</p> <p>▶ File as an attachment to Form 5500.</p>	<p>OMB No. 1210-0110</p> <hr/> <p style="text-align: center; font-size: 1.2em;">2024</p> <hr/> <p style="text-align: center;">This Form is Open to Public Inspection</p>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<p>A Name of plan TWM / TAC 401(K) PLAN</p>	<p>B Three-digit Plan number (PN)..... ▶</p>	<p>001</p>
<p>C Plan administrator's name as shown on line 3a of Form 5500/Form 5500-SF THOUVENOT, WADE & MOERCHEN, INC.</p>	<p>D Administrator's EIN 37-1042595</p>	

Part I Type of Multiple-Employer Pension Plan. All multiple-employer pension plans must complete.

1 Check the appropriate box to indicate type of multiple-employer pension plan. (Only defined contribution plans may check lines 1a, 1b, and 1c. Defined benefit plans and defined contribution plans not checking lines 1a, 1b, or 1c should check line 1d. See Instructions).

- a** association retirement plan (See 29 CFR 2510.3-55) (Complete Part II)
- b** professional employer organization plan (PEO Plan) (See 29 CFR 29 CFR 2510.3-55) (Complete Part II)
- c** pooled employer plan (PEP) (See 29 CFR 2510.3-44) (Complete Parts II and III)
- d** other multiple-employer pension plan (Describe) _____ (Complete Part II)

Part II Participating Employer Information.

2 All multiple-employer pension plans that are subject to section 210(a) of ERISA (see instructions for filing the Form 5500) must complete Part II, in addition to Part I, in accordance with the instructions, to report the information for each employer participating in the multiple-employer pension plan. **Defined contribution plans must complete lines 2a-2d. All other multiple-employer pension plans complete lines 2a-2c only. Complete as many entries as needed to list the required information for each participating employer that is not an individual person (see instructions).**

2a Name of Participating Employer THOUVENOT, WADE & MOERCHEN, INC.	2b EIN 37-1042595	2c Percentage of Total Contributions for the Plan Year 97.85	2d Aggregate Account Balances Attributable to Participating Employer 24572849
2a Name of Participating Employer TESTING, ANALYSIS & CONTROL, INC.	2b EIN 37-0897273	2c Percentage of Total Contributions for the Plan Year 2.15	2d Aggregate Account Balances Attributable to Participating Employer 791688

CAUTION Do not individually list information for working owners (see instructions and 29 CFR 2510.3-55(d)(2)) or other individuals who are participants or beneficiaries in the plan or arrangement that are no longer associated with a particular participating employer or participating employer plan (see instructions). Providing identifying information for individuals may result in rejection of this filing. If there are any such individuals in the plan, answer "Yes" to line 2e and provide the total information for all such individuals, without providing names or other identifying information.

2e Does the plan include any individuals not participating through an employer or who are individual working owners?	2e	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2f If you answer "Yes" in line 2e, enter a good faith estimate of the percentage of total contributions made by all such individuals that are not listed on line 2a during the plan year.	2f	
2g If you answer "Yes" in Line 2e, enter the aggregate account balances for all such individuals that are not listed on line 2a.	2g	

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

**Schedule MEP (2024)
v. 240311**

Part III	Pooled Employer Plan Information
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Line 3. All Pooled employer plans must answer all of the questions in Part III, in addition to completing all of Parts I and II.

3a Is the pooled plan provider (identified as the plan sponsor and administrator in Part II of the Form 5500) currently in compliance with the Form PR (Pooled Plan Provider Registration Statement) requirements? (See instructions and 29 CFR 2510.3-44)..... Yes No

3b If line 3a is "Yes", enter the ACK ID for the most recent Form PR that was required to be filed under the Form PR filing requirements. (Failure to enter a valid ACK ID will subject the Form 5500 filing to rejection as incomplete.)
ACK ID _____

Financial Statements
and
Independent Auditors' Report



TWM / TAC 401(k) Plan

December 31, 2024 and 2023

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Independent Auditors' Report

Board of Directors
TWM / TAC 401(k) Plan

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

We have performed audits of the financial statements of TWM / TAC 401(k) Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits – modified cash basis as of December 31, 2024 and 2023 and the related statements of changes in net assets available for benefits – modified cash basis for the years then ended and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the TWM / TAC 401(k) Plan financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

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

Opinion

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting described in Note B1.
- The information in the accompanying financial statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of TWM / TAC 401(k) Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Emphasis of Matter - Basis of Accounting

We draw attention to Note B1 of the financial statements, which describes the basis of accounting. The financial statements are prepared on the modified cash basis of accounting, which is a basis of accounting other than accounting principles generally accepted in the United States of America. Our opinion is not modified with respect to this matter.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with the modified cash basis of accounting described in Note B1, and for determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in the circumstances. Management is also responsible for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about TWM / TAC 401(k) Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the TWM / TAC 401(k) 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 TWM / TAC 401(k) Plan's ability to continue as a going concern for a reasonable period of time.

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

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

We are required to communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit, significant audit findings, and certain internal control-related matters that we identified during the audit.

Other Matter - Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets (Held at End of Year) as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

In forming our opinion on the supplemental schedule, we evaluated whether the supplemental schedule, other than the information agreed to or derived from the certified investment information, including its form and content, is presented in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion:

- The form and content of the supplemental schedule, other than the information in the supplemental schedule that agreed to or is derived from the certified investment information, is presented, in all material respects, in conformity with the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.
- The information in the supplemental schedule related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Kerber, Eck + Braedel LLP

Springfield, Illinois

July 24, 2025

TWM / TAC 401(k) Plan
STATEMENTS OF NET ASSETS AVAILABLE
FOR BENEFITS - MODIFIED CASH BASIS
December 31

	<u>2024</u>	<u>2023</u>
Investments, at fair value	\$ 25,366,345	\$ 21,902,002
Non-interest bearing cash	1,085	397
Notes receivable from participants	65,578	60,279
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 25,433,008</u>	<u>\$ 21,962,678</u>

The accompanying notes are an integral part of these statements.

TWM / TAC 401(k) Plan
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE
FOR BENEFITS - MODIFIED CASH BASIS
Years ended December 31

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Investment income		
Interest and dividends	\$ 1,453,682	\$ 757,417
Net appreciation in fair value of investments	2,454,040	3,491,814
	<u>3,907,722</u>	<u>4,249,231</u>
Interest income on notes receivable from participants	5,323	3,241
Contributions		
Participants	1,286,661	1,066,173
Employer	300,721	276,873
Other	273,880	256,191
	<u>1,861,262</u>	<u>1,599,237</u>
Total additions	5,774,307	5,851,709
DEDUCTIONS		
Benefits paid to participants	2,319,215	1,865,824
Administrative fees	(15,238)	(14,230)
	<u>2,303,977</u>	<u>1,851,594</u>
Total deductions	2,303,977	1,851,594
Increase in net assets available for benefits	3,470,330	4,000,115
Net assets available for benefits at beginning of year	<u>21,962,678</u>	<u>17,962,563</u>
Net assets available for benefits at end of year	<u>\$ 25,433,008</u>	<u>\$ 21,962,678</u>

The accompanying notes are an integral part of these statements.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE A | DESCRIPTION OF PLAN

The following description of TWM / TAC 401(k) Plan (the Plan) is provided for general information purposes only. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

1. General

The Plan is a multiple employer 401(k) plan covering employees of Thouvenot, Wade & Moerchen, Inc. (TWM) and Testing, Analysis & Control, Inc. (TAC) (collectively, the Companies). Employees are eligible to participate in the plan upon employment and can enter the plan at the beginning of each quarter. Employees must be age 18 or older to make elective deferrals to the Plan. To be eligible for employer matching or non-elective contributions, employees must be age 18 or older, have completed one year of service, and be employed on the last working day of the Plan year. A year of service is defined as a consecutive 12-month period of employment during which the employee is credited with at least 1,000 hours of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

2. Contributions

The Plan includes a 401(k) provision, which allows participants to contribute up to the maximum dollar amount as determined by the Federal government of pretax annual compensation, as defined in the Plan. Roth contributions are also permitted under the 401(k) provision. The Plan also includes a rollover provision, which allows a participant to roll over part or all of an eligible distribution received from an eligible retirement plan into this Plan even if they have not yet satisfied the age and service eligibility requirements. The maximum deferral in 2024 and 2023, was \$ 23,000 and \$ 22,500, respectively, with the option of an additional catch-up deferral for those 50 years of age or over of \$ 7,500.

The Companies may make matching contributions equal to a discretionary percentage, to be determined by the Companies, of the participant's elective deferrals. For the years ended December 31, 2024 and 2023, the Companies' matching contributions were made in the following plan year and was 50% of the participant's elective deferrals up to 3%. Additionally, the employees of TAC received an additional 1% profit-sharing contribution for the years ended December 31, 2024 and 2023. There were no profit-sharing contributions made to TWM employees. The total matching and profit-sharing contributions on employee elective deferrals paid during the plan years ending December 31, 2024 and 2023 were \$ 300,721 and \$ 276,873, respectively.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE A | DESCRIPTION OF PLAN

3. *Participant Accounts*

Each participant's fund balance is held in a separate account. Each participant's account is credited with the participant's voluntary contributions and an allocation of the Companies' contributions (if made), Plan expenses and Plan earnings. 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 balance.

4. *Notes Receivable from Participants*

Participants may borrow from their participant account a maximum amount equal to the lesser of 50% of the participants' vested account balances or \$ 50,000. Participant loans made from the Plan generally have a term no longer than five years from the date of the loan. Loans may be repaid over more than five years only if funds were used in purchasing a principal residence. Participant loans are secured by the balance in the participants' accounts and bear interest at a rate that is comparable with the interest rates charged by persons in the business of lending money for loans which would be made under similar circumstances as of the date the loan is made.

5. *Vesting*

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Vesting in the Companies' discretionary contributions, if any, plus or minus any actual earnings or losses thereon, is based on years of continuous service as follows:

<u>Years of Credited Service</u>	<u>Percent Vested</u>
Less than 2	0%
2	20%
3	40%
4	60%
5	80%
6	100%

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE A | DESCRIPTION OF PLAN

6. Investments

Upon enrollment in the Plan, a participant may direct contributions to selected investments as made available and determined by the Plan trustee. Participants may change their investment options at any time pursuant to procedures established in the Plan document.

7. Payment of Benefits

Retiring participants, participants that have reached age 59.5 and are still employed by their Employer, participants leaving the employment of the Companies due to disabling illness or injury and participants whose employment is terminated prior to retirement, or death will receive the vested balance in their individual account in a lump-sum payout, IRA rollover, or conversion to another qualified plan. Upon death, a participant's account is paid in a lump sum to the designated beneficiary. Under certain circumstances, participants may receive a hardship distribution.

8. Forfeitures

Forfeited accounts are to be applied to pay Plan expenses or reduce future employer contributions. In 2024 and 2023, forfeitures from the Plan totaled \$ 5,627 and \$ 5,710, respectively. There was \$ 2,892 and \$ 7,832 in the forfeiture account as of December 31, 2024 and 2023, respectively.

NOTE B | SUMMARY OF ACCOUNTING POLICIES

A summary of the significant accounting policies consistently applied in the preparation of the accompanying financial statements follows:

1. Basis of Accounting

The accounts of the Plan are maintained, and the accompanying financial statements have been prepared, on the modified cash basis of accounting; contributions are recognized when deposited into Plan assets, investment income is recognized when received and disbursements are recognized when made. Additionally, securities are reflected at fair value. Accordingly, the financial statements are not intended to present the net assets available for benefits and change in net assets available for benefits of the Plan in conformity with accounting principles generally accepted in the United States of America.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE B | SUMMARY OF ACCOUNTING POLICIES

2. Use of Estimates

The preparation of financial statements in conformity with the modified cash basis method of accounting that 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.

3. Investment Valuation and Income Recognition

The Plan's investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan committee determines the Plan's valuation policies utilizing information provided by the investment advisors, custodians and trustee. See Note C for discussion of fair value measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the cash 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.

4. Payment of Benefits

Benefit payments are recorded when paid.

5. Expenses

Salaries and related costs of personnel administering the Plan, and certain legal and other professional fees with parties-in-interest are paid by the Companies and are not included in the accompanying financial statements. Other administrative costs of the Plan are paid by the Plan participants, as provided in the Plan document. Investment related fees are dependent on the funds at which participants wish to invest in. Pursuant to a revenue credit agreement in place with the Plan custodian, any excess investment related fees withheld are then credited back to the participant accounts which at times may result in a net credit of administrative fees.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE B | SUMMARY OF ACCOUNTING POLICIES

6. *Subsequent Events*

Management has evaluated subsequent events for recognition and disclosure in the financial statements through July 24, 2025, which is the date the financial statements were available to be issued. Through July 24, 2025, no subsequent events required recognition or disclosure in the financial statements.

NOTE C | FAIR VALUE MEASUREMENTS

The Plan follows the fair value measurement guidance for financial assets and financial liabilities. The guidance defines fair value, establishes a framework for measuring fair value and expands disclosure about fair value measurements. In addition, the guidance permits an entity to measure eligible financial instruments and other items at fair value. The Plan has not made any fair value elections.

Fair value is defined to be 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. A three-level hierarchy has been established for fair value measurements based upon the inputs to the valuation of an asset or liability as follows:

Level 1 - Valuation is based on quoted prices for identical assets and liabilities in active markets.

Level 2 - Valuation is derived from inputs, other than quoted prices included in Level 1, which are observable for the asset or liability either directly or indirectly. Investments classified as Level 2 are generally valued by benchmarking model-derived prices to quoted market prices and trade data for identical or comparable securities. The significant inputs used in this approach include interest rates, prepayment timing, yield spreads, maturities, credit losses and credit ratings of the securities.

Level 3 - Valuation is derived from unobservable inputs that are not corroborated by market data.

Investments in mutual funds are valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are open-ended mutual funds that are registered with the SEC. The funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE C | FAIR VALUE MEASUREMENTS

Securities within the self-directed accounts are valued based on quoted market prices in active markets or on quoted market prices of similar assets in active markets.

The following table presents the Plan’s fair value hierarchy for those assets measured at fair value on a recurring basis as of December 31:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>2024</u>				
Investments				
Mutual funds	\$ 25,002,264	\$ -	\$ -	\$ 25,002,264
Self-directed accounts	<u>341,298</u>	<u>22,783</u>	-	<u>364,081</u>
Investments at fair value	<u>\$ 25,343,562</u>	<u>\$ 22,783</u>	<u>\$ -</u>	<u>\$ 25,366,345</u>

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
<u>2023</u>				
Investments				
Mutual funds	\$ 21,489,577	\$ -	\$ -	\$ 21,489,577
Self-directed accounts	<u>383,065</u>	<u>29,360</u>	-	<u>412,425</u>
Investments at fair value	<u>\$ 21,872,642</u>	<u>\$ 29,360</u>	<u>\$ -</u>	<u>\$ 21,902,002</u>

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE D | INFORMATION CERTIFIED BY THE TRUSTEE

The following is a summary of the unaudited information regarding the Plan as of and for the years ended December 31, 2024 and 2023, included in the Plan’s financial statements, Note C and supplementary schedule of assets that was prepared by or derived from information prepared by the trustee of the Plan, and furnished to the Plan administrator. The Plan administrator has obtained certifications from Fidelity Management Trust Company that such information is complete and accurate.

	<u>2024</u>	<u>2023</u>
Investments, at fair value	\$ 25,366,345	\$ 21,902,002
Non-interest bearing cash	1,085	397
Notes receivable from participants	65,578	60,279
Interest and dividends	1,453,682	757,417
Net appreciation in fair value of investments	2,454,040	3,491,814
Interest on notes receivable	5,323	3,241

NOTE E | PLAN TERMINATION

Although the Companies have not expressed any intent to do so, the Companies have the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of partial or total Plan termination, participants will be entitled to the full amount in their accounts as of the date of termination.

NOTE F | TAX STATUS

The Plan is intended to be qualified under Section 401(a) and tax exempt under Section 501(a) of the Internal Revenue Code (IRC). The Plan is a non-standardized pre-approved profit sharing plan with CODA and obtained its last approval letter, dated June 30, 2020, in which the Internal Revenue Service stated that the Plan was in compliance with the applicable requirements of the IRC. The Plan has been amended since receiving the letter. However, the administrator believes that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Internal Revenue Code.

TWM / TAC 401(k) Plan
NOTES TO FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE F | TAX STATUS

The modified cash basis of accounting requires 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 Internal Revenue Service. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

NOTE G | RELATED PARTY AND PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity Management Trust Company. Fidelity Management Trust Company is the trustee and recordkeeper for the Plan, and, therefore, these transactions qualify as party-in-interest transactions.

Fidelity Management Trust Company receives revenue from mutual fund service providers. This revenue is deposited into a Plan credit account and is used to offset certain amounts owed for administrative services provided to the Plan. During 2024 and 2023, the revenues from service providers exceeded expenses paid from the account, resulting in credits to participant accounts of \$ 27,088 and \$ 24,001, respectively.

NOTE H | RISKS AND UNCERTAINTIES

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

Supplemental Schedule

TWM / TAC 401(k) Plan
EIN 37-1042595 Plan #001
SCHEDULE H, LINE 4i | SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2024

(a)	(b)	(c)	(d)	(e)
<u>Identity of issue, borrower, lessor, or similar party</u>		<u>Description of investments including maturity date, rate of interest, collateral, par, or maturity value</u>	<u>Cost</u>	<u>Current Value</u>
MUTUAL FUNDS				
	Janus Henderson	Enterprise Fund Class T	**	\$ 398,810
	Vanguard	Selected Value Fund	**	1,231,380
	John Hancock	Bond Fund Class R2	**	351,816
	Invesco	Diversified Dividend Fund	**	2,395,072
	MFS Investment Management	Value Fund Class R4	**	547,228
	Invesco Oppenheimer	International Growth Fund Class R5	**	435,811
	American Century	Government Bond Fund	**	166,511
	American Century	One Choice Aggressive Investor	**	485,993
	American Century	One Choice Conservative Investor	**	91,098
	American Century	One Choice Moderate Investor	**	196,912
	Jackson Square Partners	Large Cap Growth Fund	**	1,946,998
	Janus Henderson	Triton Fund Class T	**	1,438,432
	T. Rowe Price	International Value Equity Fund Adv Class	**	381,077
	Vanguard	500 Index Fund Admiral Shares	**	2,867,682
	Dodge & Cox	International Stock Fund	**	551,988
	Victory Sycamore	Small Company Opportunity Fund Class I	**	255,311
	Allspring Global Investments	Emerging Markets Equity Fund	**	264,809
*	Fidelity	Puritan Fund	**	2,300,983
*	Fidelity	Blue Chip Growth Fund	**	4,652,510
*	Fidelity	Large Cap Stock Fund	**	1,313,588
*	Fidelity	Government Money Market Fund	**	1,556,618
*	Fidelity	US Bond Index Fund	**	440,335
*	Fidelity	Global ex US Index Fund	**	391,376
*	Fidelity	Extended Market Index Fund	**	339,926
*	FIDELITY BROKERAGELINK	Self-Directed Investment Accounts	**	<u>364,081</u>
				25,366,345
NON-INTEREST BEARING CASH				1,085
*	PARTICIPANT LOANS	Interest rates of 6.25% to 9.50% Maturity range of 16 to 55 months		<u>65,578</u>
				<u>\$ 25,433,008</u>
*	Party-in-interest			
**	Participant-directed investments, therefore cost information omitted.			

SUMMARY OF PLAN OPERATIONS (TOTALS)

	<u>TOTAL FUND ACTIVITY</u>	<u>TOTAL LOAN ACTIVITY</u>	<u>TOTAL PLAN ACTIVITY</u>
Market Value as of 12/31/2023	\$21,902,398.14	\$60,279.07	\$21,962,677.21
Adjustment to Prior Year	\$0.00	\$0.00	\$0.00
A. TOTAL RECEIPTS			
Contributions/Employer			
EMPLOYER MATCH	\$297,623.95	\$0.00	\$297,623.95
PROFIT SHARING	\$3,097.02	\$0.00	\$3,097.02
Contributions/Employee			
ROTH DEFERRAL	\$573,548.34	\$0.00	\$573,548.34
EMPLOYEE DEFERRAL	\$713,113.00	\$0.00	\$713,113.00
ROLLOVER	\$177,944.00	\$0.00	\$177,944.00
ROTH ROLLOVER	\$95,935.78	\$0.00	\$95,935.78
Interest and Dividends	\$1,445,865.56	\$0.00	\$1,445,865.56
Realized Gain/(Loss)	\$875,005.50	\$0.00	\$875,005.50
Unrealized Gain/(Loss)	\$1,658,632.28	\$0.00	\$1,658,632.28
Loan Repayment (Principal)	\$29,700.70	(\$29,700.70)	\$0.00
Loan Repayment (Interest)	\$5,322.77	\$0.00	\$5,322.77
Exchange In	\$5,955,541.37	\$0.00	\$5,955,541.37
Forfeiture Credit	\$5,627.26	\$0.00	\$5,627.26
Balance Forward	\$0.00	\$0.00	\$0.00
Transfer In	\$0.00	\$0.00	\$0.00
Adjustment (+)	\$11,878.60	\$0.00	\$11,878.60
	-----	-----	-----
TOTAL RECEIPTS	\$11,848,836.13	(\$29,700.70)	\$11,819,135.43
B. TOTAL DISBURSEMENTS			
Benefit Payments	(\$2,319,214.94)	\$0.00	(\$2,319,214.94)
Forfeiture Debit	(\$5,627.26)	\$0.00	(\$5,627.26)
Administrative Fee	\$15,238.25	\$0.00	\$15,238.25
Exchange Out	(\$5,955,541.37)	\$0.00	(\$5,955,541.37)
Loan Withdrawal	(\$35,000.00)	\$35,000.00	\$0.00
Transfer Out	\$0.00	\$0.00	\$0.00
Adjustment (-)	(\$83,659.76)	\$0.00	(\$83,659.76)
Offset/Previously Defaulted Loans	\$0.00	\$0.00	\$0.00
	-----	-----	-----
TOTAL DISBURSEMENTS	(\$8,383,805.08)	\$35,000.00	(\$8,348,805.08)
Market Value as of 12/31/2024	\$25,367,429.19	\$65,578.37	\$25,433,007.56

SUMMARY OF TOTAL LOAN ACTIVITY

	<u>ACTIVE LOANS</u>	<u>DEEMED W/POST DEFAULT PMTS</u>	<u>DEEMED NO POST DEFAULT PMTS</u>
Market Value as of 12/31/2023	\$60,279.07	\$0.00	\$0.00
Adjustment to Prior Year	\$0.00	\$0.00	\$0.00
A. TOTAL RECEIPTS			
Loan Repayment (Principal)	(\$29,700.70)	\$0.00	\$0.00
Loan Repayment (Interest)	\$0.00	\$0.00	\$0.00
Balance Forward	\$0.00	\$0.00	\$0.00
Transfer In	\$0.00	\$0.00	\$0.00
Adjustment (+)	\$0.00	\$0.00	\$0.00
	-----	-----	-----
TOTAL RECEIPTS	(\$29,700.70)	\$0.00	\$0.00
B. TOTAL DISBURSEMENTS			
Benefit Payments	\$0.00	\$0.00	\$0.00
Loan Withdrawal	\$35,000.00	\$0.00	\$0.00
Transfer Out	\$0.00	\$0.00	\$0.00
Adjustment (-)	\$0.00	\$0.00	\$0.00
Deemed Distributions	\$0.00	\$0.00	\$0.00
Deemed/Post-Default Payment Received	\$0.00	\$0.00	\$0.00
Offset/Previously Defaulted Loans	\$0.00	\$0.00	\$0.00
	-----	-----	-----
TOTAL DISBURSEMENTS	\$35,000.00	\$0.00	\$0.00
Market Value as of 12/31/2024	\$65,578.37	\$0.00	\$0.00

Please Note: The loan information that is required to be reported on the Schedule H (Form 5500) and Schedule I (Form 5500) is the sum of the values reported under "Active Loans" and "Deemed w/Post-Default Pmts". Loans that have been deemed distributed and have had no post-default payment activity are disregarded for purposes of Schedules H and I. The total of the values reported in the three columns on this page reflect the total loan balances and activity on the Fidelity Participant Recordkeeping System for the reporting year. The sum of these columns is reported under the Total Loan Activity column on the prior page and reconciles to the loan information reported on the Trial Balance.

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID PURITAN

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$1,826,402.98	78,386.394
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$19,722.84	776.490
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$10,628.61	417.337
EMPLOYEE DEFERRAL	\$78,037.10	3,071.914
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$668.03	29.146
Interest and Dividends	\$236,288.83	9,414.431
Realized Gain/(Loss)	\$1,503.19	0.000
Unrealized Gain/(Loss)	\$115,526.41	0.000
Loan Repayment (Principal)	\$0.00	0.000
Loan Repayment (Interest)	\$0.00	0.000
Exchange In	\$26,738.39	1,085.162
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$1,157.31	44.670
TOTAL RECEIPTS	\$490,270.71	14,839.150
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$17,932.34)	(711.935)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$4,729.39	181.230
Exchange Out	(\$2,487.95)	(99.958)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$15,690.90)	(630.663)
Market Value as of 12/31/2024	\$2,300,982.79	92,594.881

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID BLUE CHIP GR

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$3,733,996.74	21,550.163
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$36,398.43	180.488
PROFIT SHARING	\$410.71	2.036
Contributions/Employee		
ROTH DEFERRAL	\$75,062.02	356.783
EMPLOYEE DEFERRAL	\$76,003.12	364.501
ROLLOVER	\$28,405.92	137.101
ROTH ROLLOVER	\$2,274.53	12.081
Interest and Dividends	\$292,480.06	1,404.453
Realized Gain/(Loss)	\$566,084.65	0.000
Unrealized Gain/(Loss)	\$668,068.11	0.000
Loan Repayment (Principal)	\$5,676.47	27.830
Loan Repayment (Interest)	\$854.02	4.110
Exchange In	\$2,030,262.89	9,711.648
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$2,325.29	9.824
	-----	-----
TOTAL RECEIPTS	\$3,784,306.22	12,210.855
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$841,611.24)	(4,236.878)
Forfeiture Debit	(\$716.97)	(3.153)
Administrative Fee	\$7,372.44	34.232
Exchange Out	(\$2,022,625.12)	(9,036.810)
Loan Withdrawal	(\$8,213.91)	(38.116)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$2,865,794.80)	(13,280.725)
Market Value as of 12/31/2024	\$4,652,508.16	20,480.293

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID LARGE CAP STOCK

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$926,105.09	20,539.035
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$21,406.74	425.413
PROFIT SHARING	\$165.74	3.294
Contributions/Employee		
ROTH DEFERRAL	\$41,329.99	797.783
EMPLOYEE DEFERRAL	\$67,440.36	1,308.544
ROLLOVER	\$5,427.97	103.410
ROTH ROLLOVER	\$1,528.30	28.058
Interest and Dividends	\$54,014.89	1,031.320
Realized Gain/(Loss)	\$13,450.64	0.000
Unrealized Gain/(Loss)	\$192,848.73	0.000
Loan Repayment (Principal)	\$4,830.07	95.222
Loan Repayment (Interest)	\$447.75	8.887
Exchange In	\$85,834.96	1,714.297
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$704.59	12.498
TOTAL RECEIPTS	\$489,430.73	5,528.726
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$19,896.04)	(380.998)
Forfeiture Debit	(\$992.92)	(18.454)
Administrative Fee	\$546.18	9.563
Exchange Out	(\$81,605.05)	(1,575.340)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$101,947.83)	(1,965.229)
Market Value as of 12/31/2024	\$1,313,587.99	24,102.532

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID GOVT MMKT

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$1,489,446.70	1,489,446.700
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$5,499.47	5,499.470
PROFIT SHARING	\$33.32	33.320
Contributions/Employee		
ROTH DEFERRAL	\$10,913.06	10,913.060
EMPLOYEE DEFERRAL	\$24,939.92	24,939.920
ROLLOVER	\$231.39	231.390
ROTH ROLLOVER	\$138.13	138.130
Interest and Dividends	\$55,357.41	55,357.410
Realized Gain/(Loss)	\$0.00	0.000
Unrealized Gain/(Loss)	\$0.00	0.000
Loan Repayment (Principal)	\$51.62	51.620
Loan Repayment (Interest)	\$22.85	22.850
Exchange In	\$1,923,472.17	1,923,472.170
Forfeiture Credit	\$5,627.26	5,627.260
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$0.00	0.000
TOTAL RECEIPTS	\$2,026,286.60	2,026,286.600
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$125,307.59)	(125,307.590)
Forfeiture Debit	(\$38.54)	(38.540)
Administrative Fee	\$665.98	665.980
Exchange Out	(\$1,822,556.63)	(1,822,556.630)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	(\$11,878.60)	(11,878.600)
TOTAL DISBURSEMENTS	(\$1,959,115.38)	(1,959,115.380)
Market Value as of 12/31/2024	\$1,556,617.92	1,556,617.920

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID US BOND IDX

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$590,450.93	56,610.827
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$16,678.22	1,636.723
PROFIT SHARING	\$303.56	29.790
Contributions/Employee		
ROTH DEFERRAL	\$25,061.07	2,434.670
EMPLOYEE DEFERRAL	\$52,452.48	5,106.456
ROLLOVER	\$3,108.60	300.763
ROTH ROLLOVER	\$1,158.48	110.648
Interest and Dividends	\$18,059.54	1,753.368
Realized Gain/(Loss)	\$41.92	0.000
Unrealized Gain/(Loss)	(\$6,966.70)	0.000
Loan Repayment (Principal)	\$1,105.69	107.272
Loan Repayment (Interest)	\$305.96	29.756
Exchange In	\$27,144.40	2,628.285
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$232.16	22.523
	-----	-----
TOTAL RECEIPTS	\$138,685.38	14,160.254
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$17,352.04)	(1,689.561)
Forfeiture Debit	(\$573.80)	(55.943)
Administrative Fee	(\$2,320.10)	(225.071)
Exchange Out	(\$268,555.37)	(25,714.890)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$288,801.31)	(27,685.465)
Market Value as of 12/31/2024	\$440,335.00	43,085.616

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID GLB EX US IDX

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$183,507.54	13,033.206
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$4,930.14	335.613
PROFIT SHARING	\$21.34	1.453
Contributions/Employee		
ROTH DEFERRAL	\$18,410.64	1,232.750
EMPLOYEE DEFERRAL	\$15,000.66	1,003.781
ROLLOVER	\$750.91	47.466
ROTH ROLLOVER	\$448.24	28.334
Interest and Dividends	\$10,721.37	721.491
Realized Gain/(Loss)	\$284.66	0.000
Unrealized Gain/(Loss)	(\$4,176.25)	0.000
Loan Repayment (Principal)	\$394.67	25.848
Loan Repayment (Interest)	\$73.73	4.899
Exchange In	\$166,740.94	11,093.899
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$193.92	13.153
	-----	-----
TOTAL RECEIPTS	\$213,794.97	14,508.687
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$4,480.28)	(304.254)
Forfeiture Debit	(\$300.63)	(20.210)
Administrative Fee	(\$881.63)	(58.457)
Exchange Out	(\$264.21)	(17.796)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$5,926.75)	(400.717)
Market Value as of 12/31/2024	\$391,375.76	27,141.176

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: FID EXTD MKT IDX

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$199,160.41	2,551.376
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$4,986.69	60.219
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$10,845.66	126.414
EMPLOYEE DEFERRAL	\$13,238.60	156.050
ROLLOVER	\$656.87	7.541
ROTH ROLLOVER	\$392.10	4.501
Interest and Dividends	\$1,628.39	17.702
Realized Gain/(Loss)	\$12,202.77	0.000
Unrealized Gain/(Loss)	\$33,351.64	0.000
Loan Repayment (Principal)	\$221.13	2.551
Loan Repayment (Interest)	\$36.28	0.407
Exchange In	\$138,987.70	1,628.534
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$178.25	1.866
	-----	-----
TOTAL RECEIPTS	\$216,726.08	2,005.785
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$3,489.30)	(39.651)
Forfeiture Debit	(\$132.98)	(1.481)
Administrative Fee	(\$587.70)	(6.698)
Exchange Out	(\$71,750.32)	(768.946)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$75,960.30)	(816.776)
Market Value as of 12/31/2024	\$339,926.19	3,740.385

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: BROKERAGELINK**

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$412,821.90	412,821.900
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$3,163.07	3,163.070
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$19,839.22	19,839.220
EMPLOYEE DEFERRAL	\$0.00	0.000
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$0.00	0.000
Realized Gain/(Loss)	\$0.00	0.000
Unrealized Gain/(Loss)	\$0.00	0.000
Loan Repayment (Principal)	\$0.00	0.000
Loan Repayment (Interest)	\$0.00	0.000
Exchange In	\$1,125.00	1,125.000
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$0.00	0.000
	-----	-----
TOTAL RECEIPTS	\$24,127.29	24,127.290
B. TOTAL DISBURSEMENTS		
Benefit Payments	\$0.00	0.000
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$0.06	0.060
Exchange Out	\$0.00	0.000
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	(\$71,781.16)	(71,781.160)
	-----	-----
TOTAL DISBURSEMENTS	(\$71,781.10)	(71,781.100)
Market Value as of 12/31/2024	\$365,168.09	365,168.090

** Please Note: The financial information included in the market value for certain line items in the Summary of Plan Operations may differ slightly from value of the net assets reported in the Summary of Net Trust Assets and 5500 Worksheet. This difference may be due to rounding and/or the timing of the posting of certain transactions, trade versus settlement date. Please use the financial information reported in the Summary of Net Trust Assets and the 5500 Worksheet to prepare the audit and Form 5500. Please refer to the year-end reconciliation, which is available upon request, and Chapter 7 of the Auditor's Guide for details.

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: J H ENTERPRISE T

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$341,918.46	2,648.888
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$6,205.97	44.616
PROFIT SHARING	\$257.93	1.854
Contributions/Employee		
ROTH DEFERRAL	\$8,683.04	61.959
EMPLOYEE DEFERRAL	\$9,026.43	64.862
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$25,929.32	176.343
Realized Gain/(Loss)	\$2,031.60	0.000
Unrealized Gain/(Loss)	\$17,787.26	0.000
Loan Repayment (Principal)	\$1,045.14	7.477
Loan Repayment (Interest)	\$315.28	2.263
Exchange In	\$52,961.11	359.888
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$182.74	1.274
TOTAL RECEIPTS	\$124,425.82	720.536
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$4,387.02)	(31.883)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$697.47	4.957
Exchange Out	(\$63,844.41)	(480.976)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$67,533.96)	(507.902)
Market Value as of 12/31/2024	\$398,810.32	2,861.522

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: VANG SELECTED VALUE

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$1,220,372.24	42,227.413
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$27,427.47	886.187
PROFIT SHARING	\$109.43	3.536
Contributions/Employee		
ROTH DEFERRAL	\$54,750.02	1,831.903
EMPLOYEE DEFERRAL	\$49,891.08	1,665.173
ROLLOVER	\$2,896.72	96.292
ROTH ROLLOVER	\$987.95	33.633
Interest and Dividends	\$152,986.79	5,702.072
Realized Gain/(Loss)	\$26,583.95	0.000
Unrealized Gain/(Loss)	(\$78,187.84)	0.000
Loan Repayment (Principal)	\$1,043.76	34.444
Loan Repayment (Interest)	\$307.70	10.103
Exchange In	\$96,881.70	3,331.536
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$745.63	23.482
TOTAL RECEIPTS	\$336,424.36	13,618.361
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$10,595.48)	(340.217)
Forfeiture Debit	(\$304.67)	(9.983)
Administrative Fee	(\$1,972.52)	(65.701)
Exchange Out	(\$308,871.37)	(9,803.956)
Loan Withdrawal	(\$3,672.32)	(120.365)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$325,416.36)	(10,340.222)
Market Value as of 12/31/2024	\$1,231,380.24	45,505.552

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: JHANCOCK BOND R2

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$267,389.71	19,646.562
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$5,461.42	408.790
PROFIT SHARING	\$187.27	14.017
Contributions/Employee		
ROTH DEFERRAL	\$11,362.78	842.000
EMPLOYEE DEFERRAL	\$18,970.21	1,407.257
ROLLOVER	\$650.90	47.511
ROTH ROLLOVER	\$388.54	28.361
Interest and Dividends	\$12,698.03	941.722
Realized Gain/(Loss)	(\$453.48)	0.000
Unrealized Gain/(Loss)	(\$5,895.03)	0.000
Loan Repayment (Principal)	\$245.94	18.080
Loan Repayment (Interest)	\$93.54	6.882
Exchange In	\$116,774.74	8,653.169
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$182.00	13.490
	-----	-----
TOTAL RECEIPTS	\$160,666.86	12,381.279
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$7,548.50)	(556.586)
Forfeiture Debit	(\$162.31)	(12.124)
Administrative Fee	\$822.36	60.506
Exchange Out	(\$68,219.44)	(5,042.812)
Loan Withdrawal	(\$1,132.40)	(84.006)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$76,240.29)	(5,635.022)
Market Value as of 12/31/2024	\$351,816.28	26,392.819

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: INVS DIVRS DIVD R5

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$2,477,380.66	140,680.333
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$19,355.56	1,028.455
PROFIT SHARING	\$302.82	16.090
Contributions/Employee		
ROTH DEFERRAL	\$37,445.57	1,997.039
EMPLOYEE DEFERRAL	\$31,037.06	1,655.868
ROLLOVER	\$23,734.53	1,201.748
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$267,542.13	14,505.952
Realized Gain/(Loss)	\$40,504.28	0.000
Unrealized Gain/(Loss)	\$5,025.32	0.000
Loan Repayment (Principal)	\$97.20	5.027
Loan Repayment (Interest)	\$53.74	2.766
Exchange In	\$47,333.95	2,453.809
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$1,330.14	73.127
	-----	-----
TOTAL RECEIPTS	\$473,762.30	22,939.881
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$489,405.26)	(25,758.077)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$5,352.84	288.891
Exchange Out	(\$70,639.05)	(3,750.216)
Loan Withdrawal	(\$1,380.56)	(72.661)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$556,072.03)	(29,292.063)
Market Value as of 12/31/2024	\$2,395,070.93	134,328.151

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: MFS VALUE R4

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$295,255.09	6,248.785
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$9,928.05	194.898
PROFIT SHARING	\$53.78	1.056
Contributions/Employee		
ROTH DEFERRAL	\$20,017.45	394.275
EMPLOYEE DEFERRAL	\$16,107.19	319.016
ROLLOVER	\$1,832.17	35.596
ROTH ROLLOVER	\$364.47	6.757
Interest and Dividends	\$39,118.52	787.424
Realized Gain/(Loss)	\$7,315.04	0.000
Unrealized Gain/(Loss)	(\$892.01)	0.000
Loan Repayment (Principal)	\$965.06	18.886
Loan Repayment (Interest)	\$246.32	4.859
Exchange In	\$247,519.10	5,057.701
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$266.04	5.433
	-----	-----
TOTAL RECEIPTS	\$342,841.18	6,825.901
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$8,321.05)	(166.183)
Forfeiture Debit	(\$329.71)	(6.659)
Administrative Fee	(\$185.83)	(3.307)
Exchange Out	(\$82,031.23)	(1,592.164)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$90,867.82)	(1,768.313)
Market Value as of 12/31/2024	\$547,228.45	11,306.373

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: INVS EQV INTL EQ R5

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$513,801.25	21,826.731
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$8,881.77	362.078
PROFIT SHARING	\$28.04	1.143
Contributions/Employee		
ROTH DEFERRAL	\$16,670.17	698.025
EMPLOYEE DEFERRAL	\$9,239.16	385.169
ROLLOVER	\$1,060.38	43.655
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$30,881.01	1,362.800
Realized Gain/(Loss)	\$5,681.85	0.000
Unrealized Gain/(Loss)	(\$30,411.00)	0.000
Loan Repayment (Principal)	\$131.67	5.514
Loan Repayment (Interest)	\$33.35	1.401
Exchange In	\$32,196.45	1,319.399
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$234.88	10.356
	-----	-----
TOTAL RECEIPTS	\$74,627.73	4,189.540
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$3,198.03)	(132.627)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$898.77	37.525
Exchange Out	(\$150,318.85)	(6,147.536)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$152,618.11)	(6,242.638)
Market Value as of 12/31/2024	\$435,810.87	19,773.633

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: AM CENT GOVT BD INV

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$162,969.43	17,047.012
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$2,586.38	278.405
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$4,409.30	472.241
EMPLOYEE DEFERRAL	\$9,502.91	1,017.033
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$6,953.80	743.701
Realized Gain/(Loss)	\$136.10	0.000
Unrealized Gain/(Loss)	(\$5,887.25)	0.000
Loan Repayment (Principal)	\$91.20	9.668
Loan Repayment (Interest)	\$52.51	5.565
Exchange In	\$3,082.18	329.130
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$67.54	7.268
TOTAL RECEIPTS	\$20,994.67	2,863.011
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$15,250.23)	(1,576.244)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$188.24	20.092
Exchange Out	(\$1,289.04)	(136.981)
Loan Withdrawal	(\$1,101.78)	(117.837)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$17,452.81)	(1,810.970)
Market Value as of 12/31/2024	\$166,511.29	18,099.053

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: AM CENT OC AGGR INV

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$387,957.05	26,266.557
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$9,374.35	598.236
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$10,672.62	665.999
EMPLOYEE DEFERRAL	\$28,128.22	1,768.398
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$445.36	30.630
Interest and Dividends	\$12,186.21	751.312
Realized Gain/(Loss)	\$97.49	0.000
Unrealized Gain/(Loss)	\$37,224.53	0.000
Loan Repayment (Principal)	\$0.00	0.000
Loan Repayment (Interest)	\$0.00	0.000
Exchange In	\$0.00	0.000
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$170.94	10.074
	-----	-----
TOTAL RECEIPTS	\$98,299.72	3,824.649
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$1,235.37)	(77.040)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$971.71	59.665
Exchange Out	\$0.00	0.000
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$263.66)	(17.375)
Market Value as of 12/31/2024	\$485,993.11	30,073.831

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: AM CENT OC CONSV INV

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$78,227.27	6,243.198
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$1,118.14	87.015
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$37.76	2.900
EMPLOYEE DEFERRAL	\$2,848.09	218.567
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$222.68	17.973
Interest and Dividends	\$2,457.95	188.010
Realized Gain/(Loss)	\$25.09	0.000
Unrealized Gain/(Loss)	\$3,574.42	0.000
Loan Repayment (Principal)	\$3,112.69	242.566
Loan Repayment (Interest)	\$89.81	7.092
Exchange In	\$0.00	0.000
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$4.95	0.368
	-----	-----
TOTAL RECEIPTS	\$13,491.58	764.491
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$810.93)	(62.717)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$189.63	14.352
Exchange Out	\$0.00	0.000
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$621.30)	(48.365)
Market Value as of 12/31/2024	\$91,097.55	6,959.324

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: AM CENT OC MOD INV

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$174,314.83	12,258.427
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$5,015.90	338.226
PROFIT SHARING	\$483.13	32.578
Contributions/Employee		
ROTH DEFERRAL	\$8,483.47	567.601
EMPLOYEE DEFERRAL	\$6,555.06	437.529
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$222.68	15.883
Interest and Dividends	\$4,768.08	313.327
Realized Gain/(Loss)	\$135.77	0.000
Unrealized Gain/(Loss)	\$12,101.83	0.000
Loan Repayment (Principal)	\$0.00	0.000
Loan Repayment (Interest)	\$0.00	0.000
Exchange In	\$0.00	0.000
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$81.40	5.159
	-----	-----
TOTAL RECEIPTS	\$37,847.32	1,710.303
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$368.65)	(24.626)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$399.97	26.092
Exchange Out	(\$15,281.04)	(1,066.367)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$15,249.72)	(1,064.901)
Market Value as of 12/31/2024	\$196,912.43	12,903.829

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: JS LARGE-CAP GR INST

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$2,242,335.91	110,188.497
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$20,287.93	872.598
PROFIT SHARING	\$106.02	4.560
Contributions/Employee		
ROTH DEFERRAL	\$36,550.26	1,563.743
EMPLOYEE DEFERRAL	\$34,181.81	1,478.718
ROLLOVER	\$49,502.04	2,068.857
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$45,376.97	1,817.260
Realized Gain/(Loss)	\$159,714.85	0.000
Unrealized Gain/(Loss)	\$282,733.98	0.000
Loan Repayment (Principal)	\$1,876.79	80.201
Loan Repayment (Interest)	\$652.14	27.672
Exchange In	\$78,416.72	3,554.821
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$1,001.53	40.110
TOTAL RECEIPTS	\$710,401.04	11,508.540
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$681,877.35)	(27,769.827)
Forfeiture Debit	(\$305.77)	(12.598)
Administrative Fee	(\$456.24)	(22.329)
Exchange Out	(\$315,769.87)	(13,456.874)
Loan Withdrawal	(\$7,329.27)	(312.016)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$1,005,738.50)	(41,573.644)
Market Value as of 12/31/2024	\$1,946,998.45	80,123.393

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: J H TRITON T

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$1,237,087.79	48,665.924
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$13,608.06	508.710
PROFIT SHARING	\$91.11	3.406
Contributions/Employee		
ROTH DEFERRAL	\$25,906.04	966.967
EMPLOYEE DEFERRAL	\$15,916.19	595.605
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$102,965.21	3,709.122
Realized Gain/(Loss)	\$2,093.92	0.000
Unrealized Gain/(Loss)	\$22,586.91	0.000
Loan Repayment (Principal)	\$1,621.14	59.587
Loan Repayment (Interest)	\$648.78	23.722
Exchange In	\$51,827.00	1,854.940
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$753.55	27.803
	-----	-----
TOTAL RECEIPTS	\$238,017.91	7,749.862
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$21,649.18)	(803.775)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	\$2,938.91	109.228
Exchange Out	(\$10,054.95)	(378.290)
Loan Withdrawal	(\$7,908.23)	(293.877)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$36,673.45)	(1,366.714)
Market Value as of 12/31/2024	\$1,438,432.25	55,049.072

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: TRP INTL VAL EQ ADV

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$297,236.56	18,146.310
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$8,828.28	512.379
PROFIT SHARING	\$368.03	21.359
Contributions/Employee		
ROTH DEFERRAL	\$23,006.31	1,303.877
EMPLOYEE DEFERRAL	\$27,943.02	1,590.271
ROLLOVER	\$3,599.34	198.335
ROTH ROLLOVER	\$1,024.81	54.832
Interest and Dividends	\$8,747.35	496.443
Realized Gain/(Loss)	\$8,581.42	0.000
Unrealized Gain/(Loss)	\$7,334.87	0.000
Loan Repayment (Principal)	\$1,132.59	63.649
Loan Repayment (Interest)	\$226.85	12.932
Exchange In	\$75,168.46	4,194.165
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$194.94	11.172
	-----	-----
TOTAL RECEIPTS	\$166,156.27	8,459.414
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$11,881.25)	(688.599)
Forfeiture Debit	(\$661.44)	(37.452)
Administrative Fee	(\$291.95)	(16.108)
Exchange Out	(\$69,480.87)	(3,759.312)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$82,315.51)	(4,501.471)
Market Value as of 12/31/2024	\$381,077.32	22,104.253

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: VANG 500 INDEX ADM

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$1,781,155.64	4,048.173
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$25,050.41	51.769
PROFIT SHARING	\$0.00	0.000
Contributions/Employee		
ROTH DEFERRAL	\$62,009.90	121.479
EMPLOYEE DEFERRAL	\$79,290.10	157.493
ROLLOVER	\$52,802.54	103.813
ROTH ROLLOVER	\$84,966.59	167.547
Interest and Dividends	\$29,442.96	56.611
Realized Gain/(Loss)	\$15,065.02	0.000
Unrealized Gain/(Loss)	\$392,604.94	0.000
Loan Repayment (Principal)	\$4,010.21	8.205
Loan Repayment (Interest)	\$284.80	0.555
Exchange In	\$662,083.85	1,264.005
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$1,278.03	2.289
	-----	-----
TOTAL RECEIPTS	\$1,408,889.35	1,933.766
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$20,556.65)	(39.283)
Forfeiture Debit	(\$635.45)	(1.159)
Administrative Fee	(\$3,368.92)	(6.496)
Exchange Out	(\$295,906.78)	(647.754)
Loan Withdrawal	(\$1,897.67)	(3.734)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$322,365.47)	(698.426)
Market Value as of 12/31/2024	\$2,867,679.52	5,283.513

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: DODGE&COX INTL STK I

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$565,393.83	11,501.095
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$9,259.80	183.362
PROFIT SHARING	\$21.88	0.433
Contributions/Employee		
ROTH DEFERRAL	\$15,247.22	299.366
EMPLOYEE DEFERRAL	\$12,263.05	240.740
ROLLOVER	\$617.96	11.944
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$12,071.48	242.358
Realized Gain/(Loss)	\$6,136.99	0.000
Unrealized Gain/(Loss)	\$4,634.54	0.000
Loan Repayment (Principal)	\$258.56	5.020
Loan Repayment (Interest)	\$114.09	2.191
Exchange In	\$43,017.63	831.874
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$307.26	5.895
	-----	-----
TOTAL RECEIPTS	\$103,950.46	1,823.183
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$2,066.44)	(40.716)
Forfeiture Debit	(\$38.34)	(0.771)
Administrative Fee	(\$193.86)	(3.807)
Exchange Out	(\$112,693.63)	(2,171.812)
Loan Withdrawal	(\$2,363.86)	(45.285)
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
	-----	-----
TOTAL DISBURSEMENTS	(\$117,356.13)	(2,262.391)
Market Value as of 12/31/2024	\$551,988.16	11,061.887

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: VICTORY S SM CO OP I

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$216,437.00	4,470.915
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$4,438.23	89.500
PROFIT SHARING	\$83.40	1.682
Contributions/Employee		
ROTH DEFERRAL	\$9,163.26	187.737
EMPLOYEE DEFERRAL	\$12,203.48	249.451
ROLLOVER	\$0.00	0.000
ROTH ROLLOVER	\$0.00	0.000
Interest and Dividends	\$20,391.48	409.998
Realized Gain/(Loss)	\$17.28	0.000
Unrealized Gain/(Loss)	(\$7,576.70)	0.000
Loan Repayment (Principal)	\$512.94	10.451
Loan Repayment (Interest)	\$155.10	3.170
Exchange In	\$0.00	0.000
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$142.67	2.885
	-----	-----
TOTAL RECEIPTS	\$39,531.14	954.874
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$597.48)	(12.080)
Forfeiture Debit	\$0.00	0.000
Administrative Fee	(\$59.97)	(1.144)
Exchange Out	\$0.00	0.000
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
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TOTAL DISBURSEMENTS	(\$657.45)	(13.224)
Market Value as of 12/31/2024	\$255,310.69	5,412.565

SUMMARY OF PLAN OPERATIONS (FUND)

FUND: AS EMRG MKTS EQ ADM

	<u>CASH</u>	<u>SHARES</u>
Market Value as of 12/31/2023	\$281,273.13	10,914.751
Adjustment to Prior Year	\$0.00	0.000
A. TOTAL RECEIPTS		
Contributions/Employer		
EMPLOYER MATCH	\$8,010.63	305.399
PROFIT SHARING	\$69.51	2.650
Contributions/Employee		
ROTH DEFERRAL	\$17,042.90	638.207
EMPLOYEE DEFERRAL	\$22,897.70	862.349
ROLLOVER	\$2,665.76	96.883
ROTH ROLLOVER	\$704.89	24.535
Interest and Dividends	\$2,797.78	104.979
Realized Gain/(Loss)	\$7,770.50	0.000
Unrealized Gain/(Loss)	\$3,221.57	0.000
Loan Repayment (Principal)	\$1,276.16	47.546
Loan Repayment (Interest)	\$308.17	11.628
Exchange In	\$47,972.03	1,819.361
Forfeiture Credit	\$0.00	0.000
Balance Forward	\$0.00	0.000
Transfer In	\$0.00	0.000
Adjustment (+)	\$142.84	5.229
TOTAL RECEIPTS	\$114,880.44	3,918.766
B. TOTAL DISBURSEMENTS		
Benefit Payments	(\$9,397.24)	(352.017)
Forfeiture Debit	(\$433.73)	(15.984)
Administrative Fee	(\$216.98)	(8.412)
Exchange Out	(\$121,296.19)	(4,418.839)
Loan Withdrawal	\$0.00	0.000
Transfer Out	\$0.00	0.000
Adjustment (-)	\$0.00	0.000
TOTAL DISBURSEMENTS	(\$131,344.14)	(4,795.252)
Market Value as of 12/31/2024	\$264,809.43	10,038.265

Plan Name: TWM / TAC 401(k) Plan
Plan Number: 80429
Plan Sponsor Name: Thouvenot, Wade & Moerchen, Inc.
EIN: 37-1042595
Attachment to Form 5500
Multiple-Employer Plan Information
12/31/2024

Employer Name	EIN	Estimates of Contribution%
Thouvenot, Wade & Moerchen, Inc.	37-1042595	98%
Testing, Analysis & Control, Inc.	37-0897273	2%

Participant Count

Displays counts by status for participants both with and without a balance as of the specified calendar day. Please note that DC Participant Status results will be as of the date specified in the prompt.

Calendar Day	DC Plan Number	Historical Status	Market Value	# of Participants w/a Balance	# of Participants w/ No Balance	Total # of Participants
12/31/2024	80429		\$2,892.46	1	3	4
12/31/2024	80429	A-ACTIVE	\$22,227,644.70	120	9	129
12/31/2024	80429	D-DECEASED	\$0.00	0	1	1
12/31/2024	80429	E-ELIGIBLE	\$2,018.24	1	32	33
12/31/2024	80429	I-INACTIVE	\$0.00	0	1	1
12/31/2024	80429	K-BENEFICIARY-NONSPOUS	\$14,720.80	1	2	3
12/31/2024	80429	M-ALT-PAYEE-SPOUSAL	\$0.00	0	2	2
12/31/2024	80429	R-RETIRED	\$1,297,225.50	4	14	18
12/31/2024	80429	T-TERMINATED	\$1,822,927.49	24	91	115
12/31/2024	80429 Total		\$25,367,429.19	151	155	306
Grand Total			\$25,367,429.19	151	155	306

Calendar Day is equal to 12/31/2024