

Form 5500

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) [X] a single-employer plan [] a DFE (specify) ____
B This return/report is: [] the first return/report [] the final return/report [] an amended return/report [] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. []
D Check box if filing under: [X] Form 5558 [] automatic extension [] the DFVC program [] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. []

Part II Basic Plan Information—enter all requested information

1a Name of plan: GREAT WESTERN MANUFACTURING COMPANY, INC. PROFIT SHARING 401(K) PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 10/03/1972
2a Plan sponsor's name (employer, if for a single-employer plan): GREAT WESTERN MANUFACTURING COMPANY, INC.
2b Employer Identification Number (EIN): 48-0777959
2c Plan Sponsor's telephone number: 913-682-2291
2d Business code (see instructions): 311200

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 entries for DAVID C. SCHROEDER dated 08/18/2025.

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	123
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)	97
	6a(2)	115
	6b	3
	6c	12
	6d	130
	6e	1
	6f	131
	6g(1)	120
6g(2)	131	
6h	5	
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	

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

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

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

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

a Pension Schedules

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

b General Schedules

- (1) **H** (Financial Information)
- (2) **I** (Financial Information – Small Plan)
- (3) **A** (Insurance Information) – Number Attached _____
- (4) **C** (Service Provider Information)
- (5) **D** (DFE/Participating Plan Information)
- (6) **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

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

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

A Name of plan GREAT WESTERN MANUFACTURING COMPANY, INC. PROFIT SHARING 401(K) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT WESTERN MANUFACTURING COMPANY, INC.	D Employer Identification Number (EIN) 48-0777959	

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

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

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

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

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

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

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

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

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

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

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

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

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

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

TPP RETIREMENT PLAN SPECIALISTS

20-1301962

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 64	N/A	27739	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)

UBS FINANCIAL SERVICES, INC.

700 W. 47TH ST., 5TH FLOOR
KANSAS CITY, MO 64112

(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?
26 27 28	N/A	25562	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)

COUNTRY CLUB TRUST COMPANY, N.A.

26-0052158

(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?
19 25 51 50 24	N/A	18719	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"/>

Part I Service Provider Information (continued)

3. If you reported on line 2 receipt of indirect compensation, other than eligible indirect compensation, by a service provider, and the service provider is a fiduciary or provides contract administrator, consulting, custodial, investment advisory, investment management, broker, or recordkeeping services, answer the following questions for (a) each source from whom the service provider received \$1,000 or more in indirect compensation and (b) each source for whom the service provider gave you a formula used to determine the indirect compensation instead of an amount or estimated amount of the indirect compensation. Complete as many entries as needed to report the required information for each source.

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

(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
--	--	---

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan GREAT WESTERN MANUFACTURING COMPANY, INC. PROFIT SHARING 401(K) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 GREAT WESTERN MANUFACTURING COMPANY, INC.	D Employer Identification Number (EIN) 48-0777959

Part I	Asset and Liability Statement
---------------	--------------------------------------

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	8005	5352
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	358925	200000
(2) Participant contributions	1b(2)	15082	
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	897248	
(2) U.S. Government securities	1c(2)	720248	
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	430509	
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)	845235	
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	36613	46260
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	11451434	10965945
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		5456270

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	14763299	16673827
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	14763299	16673827

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)	400589	
(B) Participants.....	2a(1)(B)	417233	
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		817822
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	3784	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		3784
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	678632	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		678632
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1197711
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		2697949

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	712129	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		712129
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	27739	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	25561	
(6) Bank or trust company trustee/custodial fees	2i(6)	21992	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses.....	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		75292
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		787421

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k		1910528
l Transfers of assets:			
(1) To this plan.....	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: PICKETT, CHANEY & MCMULLEN LLP

(2) EIN: 48-1246310

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		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined
If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

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

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

A Name of plan <u>GREAT WESTERN MANUFACTURING COMPANY, INC. PROFIT SHARING 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>GREAT WESTERN MANUFACTURING COMPANY, INC.</u>	D Employer Identification Number (EIN) <u>48-0777959</u>	

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

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

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

1		0
---	--	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
EIN(s): 75-3182674 48-0772499

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

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

3	
---	--

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702562A.

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

FINANCIAL STATEMENTS AND
INDEPENDENT AUDITORS' REPORT
DECEMBER 31, 2024 AND 2023



INDEPENDENT AUDITORS' REPORT

To the Administrative Committee and Participants of the Great Western Manufacturing Company, Inc.
Profit Sharing 401(k) Plan
Leavenworth, Kansas

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

We have performed an audit of the financial statements of Great Western Manufacturing Company, Inc. Profit Sharing 401(k) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's 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 year ended December 31, 2024, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

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

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

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 generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Supplemental Schedule Required by ERISA

The supplemental Schedule of Assets 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 generally accepted auditing standards. 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).

Pickett, Chaney & McMullen LLP

Overland Park, Kansas
August 18, 2025

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2024 AND 2023**

ASSETS	2024	2023
Cash	\$ 5,352	\$ 8,005
Investments, at fair value:		
Participant directed:		
Registered investment funds	9,528,647	8,916,396
Money market fund	<u>1,437,298</u>	<u>685,636</u>
Total participant directed investments	10,965,945	9,602,032
Non-participant directed:		
Registered investment funds	3,017,347	2,535,038
Money market fund	228,933	211,612
Common stock	879,428	845,235
Corporate bonds	314,167	430,509
U.S. government securities	<u>1,016,395</u>	<u>720,248</u>
Total non-participant directed investments	<u>5,456,270</u>	<u>4,742,642</u>
Total investments	16,422,215	14,344,674
Receivables:		
Participant directed:		
Employer contributions		8,066
Participant contributions		15,082
Notes receivable from participants	<u>46,260</u>	<u>36,613</u>
Total participant-directed receivables	46,260	59,761
Non-participant directed -		
Employer contributions	<u>200,000</u>	<u>350,859</u>
Total receivables	<u>246,260</u>	<u>410,620</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 16,673,827</u>	<u>\$ 14,763,299</u>

See notes to financial statements.

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
YEAR ENDED DECEMBER 31, 2024**

	<u>Participant Directed</u>	<u>Non-participant Directed</u>	<u>Total</u>
ADDITIONS TO NET ASSETS ATTRIBUTED TO:			
Income:			
Dividend and interest income	\$ 678,632	\$ 130,371	\$ 809,003
Interest on participant loans	3,784		3,784
Net appreciation in fair value of investments	<u>494,673</u>	<u>572,667</u>	<u>1,067,340</u>
Total income	1,177,089	703,038	1,880,127
Contributions:			
Employer	200,589	200,000	400,589
Participants'	<u>417,233</u>		<u>417,233</u>
Total contributions	<u>617,822</u>	<u>200,000</u>	<u>817,822</u>
Total additions	1,794,911	903,038	2,697,949
DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:			
Distributions to participants	409,945	302,184	712,129
Administrative expenses	55,594	19,698	75,292
Transfer of forfeiture	<u>(18,387)</u>	<u>18,387</u>	
Total deductions	<u>447,152</u>	<u>340,269</u>	<u>787,421</u>
NET INCREASE	1,347,759	562,769	1,910,528
NET ASSETS AVAILABLE FOR BENEFITS:			
Beginning of year	<u>9,669,798</u>	<u>5,093,501</u>	<u>14,763,299</u>
End of year	<u>\$ 11,017,557</u>	<u>\$ 5,656,270</u>	<u>\$ 16,673,827</u>

GREAT WESTERN MANUFACTURING COMPANY, INC. PROFIT SHARING 401(k) PLAN

NOTES TO FINANCIAL STATEMENTS DECEMBER 31, 2024 AND 2023

1. DESCRIPTION OF THE PLAN

The following description of Great Western Manufacturing Company, Inc. Profit Sharing 401(k) Plan (the "Plan") provides only general information. Participants should refer to the Plan Document for a more complete description of the Plan's provisions. The Plan was originally established October 3, 1972, and was restated effective January 1, 2022.

General – The Plan is a defined contribution plan subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA") for employees of Great Western Manufacturing Company, Inc. (the "Company").

Matrix Trust Company serves as the Plan's investment custodian while Country Club Bank serves as the Plan's trustee and custodian of the non-participant directed investments. TPP Retirement Plan Specialists, LLC, serve as the participant third-party administrator.

Eligibility – An employee is eligible to participate in the Plan after completing 1 year of service. Entry dates for employee contributions are the first of the month following eligibility. The Plan excludes leased employees.

Contributions – Participants may contribute amounts up to certain Internal Revenue Code ("IRC") limitations. Participants may contribute pre-tax amounts ("401(k) contributions") or after-tax amounts ("Roth contributions"). A participant who is at least 50 years old may also contribute catchup contributions to the Plan.

The Company makes a safe-harbor matching contribution to all eligible employees who have deferred to the Plan at a rate of 100% of the first 3% of eligible earnings contributed, and 50% of the next 2% of eligible earnings contributed. The safe harbor matching contribution is paid into the Plan each payroll. An employee is eligible for the safe harbor matching contribution after 1 year of service.

The Company may also make a discretionary profit-sharing contribution, which is non-participant directed. A participant must be employed on the last day of the year and work 1,000 hours in that Plan year in order to receive a profit-sharing contribution (if declared). A profit-sharing contribution of \$200,000 was declared in 2024. Eligible employees received 2.79% of eligible compensation.

Participant Accounts – Each participant's account is credited with the participant's and Company's contributions, investment earnings (losses), and is charged with the participant's withdrawals and distributions, and an allocation of expenses. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Investment Options – The Plan offers a variety of registered investment funds and a money market fund for participant directed contributions. The employer profit sharing contribution is invested with Country Club Bank and participants do not direct those investments.

Vesting – Participants' contributions and safe harbor matching contributions are fully vested at all times. Vesting in the Company's other contributions is based on a graded vesting schedule depending on the participant's employment date and years of service. Participants have completed a year of service for vesting purposes if they worked at least 1,000 hours during a plan year or the twelve-month period beginning on their hire date.

Vesting occurs over a 6-year period with 10% vested after 1 year, 20% vested after 2 years, 40% vested after 3 years, 60% vested after 4 years, and 80% vested after 5 years. Employees become fully vested after 6 years of service.

Forfeitures – Forfeitures occur upon termination of employment by a participant who is not fully vested in the Plan. Forfeiture amounts are used to pay administrative expenses and to reduce employer contributions. As of December 31, 2024 and 2023, there were \$9,129 and \$18,387 in forfeitures, respectively. In 2024, the Plan Sponsor used \$18,387 in forfeitures to reduce employer contributions.

Payment of Benefits – Distributions of a participant's vested balance may occur upon normal retirement, termination of employment, death, or permanent and total disability in the form of a total lump sum or installment payments if the participant is subject to lifetime required minimum distributions. Participant balances under \$1,000 may be automatically distributed to the participant in a lump-sum. If a participant's account balance is between \$1,000 and \$7,000, the balance will be automatically rolled over to an IRA, unless a different election is made.

In-Service Withdrawals – Participants may make withdrawals prior to termination of employment.

- Hardship withdrawals are available to the plan participants for reasons as defined in the Plan Document and are limited to participant contributions.
- Participants who have obtained the age of 59 ½ may elect to receive a distribution of all or any portion of their vested account balances in a single lump sum payment or through installments.
- Participants may withdraw amounts that are designated as rollover contributions at any time.

Notes Receivable from Participants – Participants are permitted to borrow against their individual account balances a minimum of \$1,000 up to the lesser of \$50,000 or 50% of the participant's vested account balance. Loans are secured by the participant's vested account balance. Interest rates on the loans are set at the Prime rate plus one percentage point. Loan terms are in accordance with limitations set forth by the Internal Revenue Service, and may not exceed five years, unless the loan is to purchase a primary residence. Loan repayments are made ratably through payroll deductions. A participant is only allowed one loan at a time.

Administrative Expenses – Administrative expenses incurred by the Plan may be paid by the Plan or by the Company. During 2024, the Plan paid administrative expenses of \$75,292.

Termination of the Plan – Although the Company has not expressed any intent to do so, it has the right to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in the Plan and under ERISA. In the event that the Plan should be terminated, participants shall become fully vested, and all remaining Plan assets shall be allocated to the participants as described in the full text of the Plan.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting – The accompanying financial statements have been prepared using the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

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

Contributions – Employer and employee contributions are reported in the year services are rendered to the Company by the Plan participants.

Investment Valuation and Income Recognition – The Plan’s investments are stated 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. Purchases and sales of securities are recorded on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is recorded on the accrual basis.

Management fees and operating expenses charged to the Plan for investments in mutual funds are deducted from income earned on a daily basis and are not separately reflected. Consequently, management fees and operating expenses are reflected as a reduction of investment return for such investments.

Payment of Benefits – Benefit payments are reported in the year paid.

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent participant loans are reclassified as distributions based upon the terms of the Plan document. No allowance is considered necessary.

Date of Management’s Review – Subsequent events have been evaluated through August 18, 2025, which is the date the financial statements were available to be issued, and there were no material events requiring recognition or disclosure.

3. FAIR VALUE MEASUREMENTS

FASB ASC 820, *Fair Value Measurements*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value hierarchy are described as follows:

Level 1 – Inputs consist of unadjusted quoted prices for identical assets in active markets that the plan has the ability to access.

Level 2 – Inputs consist of 1) quoted prices for similar assets in active markets, 2) quoted prices for identical or similar assets in inactive markets, 3) inputs other than quoted prices that are observable, and 4) inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset has a specified (contractual) term, the level 2 input must be observable for substantially the full term.

Level 3 – Inputs consist of unobservable inputs where there is little or no market activity, and the reporting entity makes estimates and assumptions related to the pricing of the asset including assumptions regarding risk.

The assets fair value measurement level within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. Valuation techniques used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

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

Registered Investment Funds, Common Stocks, EFTs and Money Market Funds – Valued at the closing price, net asset value (“NAV”), reported on the active market on which the individual securities are traded.

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

U.S. Government Securities – Valued using pricing models maximizing the use of observable inputs for similar securities.

The preceding methods described may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The Plan's investments are reported at fair value as follows at December 31, 2024 and 2023:

	Fair Value Measurements Using:			Total
	Level 1	Level 2	Level 3	
December 31, 2024:				
Participant directed:				
Registered investment funds	\$ 9,528,647			\$ 9,528,647
Money market fund	1,437,298			1,437,298
Non-participant directed:				
Registered investment funds	3,017,347			3,017,347
Money market fund	228,933			228,933
Common stock	879,428			879,428
Corporate bonds		\$ 314,167		314,167
U.S. government securities		1,016,395		1,016,395
Total fair value	<u>\$ 15,091,653</u>	<u>\$ 1,330,562</u>	<u>\$ -</u>	<u>\$ 16,422,215</u>
December 31, 2023:				
Participant directed:				
Registered investment funds	\$ 8,916,396			\$ 8,916,396
Money market fund	685,636			685,636
Non-participant directed:				
Registered investment funds	2,535,038			2,535,038
Money market fund	211,612			211,612
Common stock	845,235			845,235
Corporate bonds		\$ 430,509		430,509
U.S. government securities		720,248		720,248
Total fair value	<u>\$ 13,193,917</u>	<u>\$ 1,150,757</u>	<u>\$ -</u>	<u>\$ 14,344,674</u>

4. RISKS AND UNCERTAINTIES

The Plan invests in investment securities, which hold securities including U.S. Government securities, corporate debt instruments, and corporate stocks. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Market risks include global events which could impact the value of investment securities, such as a pandemic or international conflict. Due to the level of risk associated with certain investment securities, it is 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 financial statements.

5. INFORMATION CERTIFIED BY CUSTODIANS

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor Rules and Regulations for Reporting and Disclosures under ERISA. Accordingly, Matrix Trust Company, the custodian of the Plan, and Country Club Bank, the trustee of the Plan, have certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate with respect to investments as of December 31, 2024 and 2023, and for the year then ended:

- Investments, at fair value
- Notes receivable from participants, and related interest income on notes receivable
- Net appreciation in fair value of investments
- Interest and dividend income
- Schedule of assets (held at end of year)

The Plan's independent public accountants did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and supplemental schedule.

6. EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments consist of an interest-bearing cash within an account managed by Country Club Bank. Country Club Bank is the trustee of the Plan; therefore, these qualify as party-in-interest transactions.

The Plan pays certain fees to Country Club Bank, Matrix and TPP to administer the Plan. These transactions qualify as party-in-interest.

Notes receivable from participants also qualifies as party-in-interest.

7. TAX STATUS

The Plan has adopted a non-standardized volume submitter plan document, which obtained its latest opinion letter on June 30, 2020, in which the Internal Revenue Service stated that the Plan, as then designed, was in compliance with the applicable requirements of the Internal Revenue Code. The Plan administrator believes that the Plan is currently designed and operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Generally accepted accounting principles require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain tax position that more likely than not would not be sustained upon examination by the applicable taxing authorities. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

* * * * *

GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Current Value	
Participant Directed Investments:			
AB Small Cap Value Fund	Mutual Fund	\$ 417,414	
American Funds 2025 Target Date	Mutual Fund	414	
American Funds 2030 Target Date	Mutual Fund	33,915	
American Funds 2035 Target Date	Mutual Fund	493	
American Funds 2040 Target Date	Mutual Fund	18,633	
American Funds 2045 Target Date	Mutual Fund	4,773	
American Funds 2050 Target Date	Mutual Fund	665	
American Funds 2055 Target Date	Mutual Fund	14,465	
American Funds 2060 Target Date	Mutual Fund	34,405	
American Funds 2065 Target Date	Mutual Fund	7,245	
American Funds American Mutual Fund	Mutual Fund	1,252,742	
American Funds Capital Income Builder	Mutual Fund	13,246	
American Funds Europacific Growth	Mutual Fund	967,853	
American Funds New World	Mutual Fund	606,200	
BlackRock Strategic Income Opp Portfolio	Mutual Fund	617,601	
Janus Henderson Triton	Mutual Fund	138,705	
Lord Abbett Short Duration Income Fund	Mutual Fund	359,342	
Lord Abbett Total Return Fund	Mutual Fund	382,706	
MFS Growth Fund	Mutual Fund	1,287,950	
MFS International Intrinsic Value	Mutual Fund	963,158	
MFS Mid Cap Growth	Mutual Fund	279,966	
Vanguard 500 Index Admiral	Mutual Fund	1,210,079	
Vanguard Mid Cap Index Admiral	Mutual Fund	386,314	
Vanguard Small Cap Index Admiral	Mutual Fund	167,557	
Victory Sycamore Established Value	Mutual Fund	362,806	
	Total Mutual Funds	9,528,647	
	Vanguard Federal Money Market Investor	1,437,298	
* Notes receivable from participants	Various participants, interest rates from 4.25% to 9.50%	46,260	
	Total Participant Directed Investments	11,012,205	

(Continued)

GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Non-Participant Directed Investments:				
Ishares Core S&P 500 ETF	Exchange Traded Fund	\$ 618,723	\$ 1,015,473	
Ishares Msci EAFE ETF	Exchange Traded Fund	203,613	234,391	
Ishares Msci EAFE Growth ETF	Exchange Traded Fund	24,177	29,049	
Ishares Msci Emerging Markets ETF	Exchange Traded Fund	33,757	29,274	
Ishares Russell 2000 ETF	Exchange Traded Fund	162,608	220,960	
Ishares Russell Mid-Cap ETF	Exchange Traded Fund	55,559	88,400	
Ishares S&P 100 ETF	Exchange Traded Fund	252,900	541,594	
Ishares U.S. Utilities ETF	Exchange Traded Fund	11,338	16,837	
Vanguard Real Estate ETF	Exchange Traded Fund	7,304	8,908	
Vanguard Total Intl Stock Index Funds ETF	Exchange Traded Fund	99,216	156,164	
Allspring Short-Term High Income	Mutual Fund	107,047	102,624	
Ballie Gifford Emerging Markets Equities Fund	Mutual Fund	36,674	25,538	
Cibc Atlas Disciplined Equity Fund	Mutual Fund	87,730	118,007	
Goldman Sachs Short-Term Cons Inc Fund	Mutual Fund	24,322	24,394	
Vanguard Index Funds	Mutual Fund	236,637	405,734	
Total Registered Investment Funds		1,961,605	3,017,347	
3M Company	Corporate Bond, 2.875% due 10/15/2027	22,930	23,935	
Amazon	Corporate Bond, 3.150% due 8/22/2027	56,752	48,276	
Apple, Inc.	Corporate Bond, 2.050% due 9/11/2026	53,454	48,095	
Emerson Electric	Corporate Bond, 0.875% due 10/15/2026	48,080	46,989	
Intel Corporation	Corporate Bond, 3.400% due 3/25/2025	55,553	49,827	
Morgan Stanley	Corporate Bond, 3.625% due 1/20/2027	23,921	24,544	
US Bancorp	Corporate Bond, 2.375% due 7/22/2026	68,990	72,501	
Total Corporate Bonds		329,680	314,167	
Advanced Micro Devices Inc.	Common Stock	8,237	7,851	
Alphabet Inc.	Common Stock	11,771	22,853	
Amazon	Common Stock	10,390	26,327	
Amentum Holdings Inc.	Common Stock	1,222	1,262	
Amgen Inc.	Common Stock	6,010	10,426	
Apa Corporation	Common Stock	9,692	9,582	
Bank of New York Mellon Corp	Common Stock	5,440	13,061	
Baxter International Inc.	Common Stock	9,012	8,019	
Berkshire Hathaway Inc.	Common Stock	16,433	31,730	
Broadcom Inc.	Common Stock	4,149	32,458	
Camden Property Trust	Common Stock	4,477	5,222	
Cameco Corporate	Common Stock	4,666	6,167	
Canadian Pacific Kansas City	Common Stock	7,862	7,961	
Chevron Corporation	Common Stock	14,762	24,623	
Chewy Inc.	Common Stock	5,864	10,549	
Cisco Systems Inc.	Common Stock	7,575	16,872	
Citigroup Inc.	Common Stock	23,787	35,547	

(Continued)

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Corteva Inc.	Common Stock	\$ 3,196	\$ 3,702	
Crown Castle Inc.	Common Stock	11,469	10,437	
Discovery Inc.	Common Stock	5,244	6,395	
Disney Walt Company	Common Stock	21,253	25,611	
Eaton Corp PLC Shares	Common Stock	4,677	19,912	
Elanco Animal Helath Inc.	Common Stock	3,864	3,330	
Emerson Electric Company	Common Stock	9,216	15,491	
Exxon Mobil Corporation	Common Stock	16,921	17,749	
Federated Hermes Inc.	Common Stock	10,045	13,772	
Fedex Corporation	Common Stock	8,457	14,067	
Genuine Parts	Common Stock	5,011	7,589	
Healthcare Realty Trust	Common Stock	10,424	10,509	
Hershey Company	Common Stock	9,284	8,468	
Jacobs Solutions, Inc.	Common Stock	5,711	8,017	
Johnson & Johnson	Common Stock	25,909	23,862	
JPMorgan Chase & Company	Common Stock	11,740	21,574	
Kenvue Inc.	Common Stock	9,012	10,675	
Kia Corporation	Common Stock	2,925	18,904	
Lululemon Athletica Inc	Common Stock	8,185	11,472	
LVMH Moet Hennessy Lou Vuitton	Common Stock	6,913	7,239	
Medtronic	Common Stock	13,725	13,180	
Merck & Co Inc.	Common Stock	3,402	9,451	
Microsoft Corporation	Common Stock	1,977	14,752	
Mobileye Global Inc	Common Stock	3,479	4,681	
Newmont Corporation	Common Stock	8,011	7,258	
Nextera Energy, Inc.	Common Stock	20,870	19,715	
Nike Inc.	Common Stock	9,076	8,324	
Novartis Ag	Common Stock	9,913	11,677	
Oracle Coproration	Common Stock	3,431	4,999	
Philip Morris International Inc	Common Stock	14,524	18,052	
Procter & Gamble Company	Common Stock	6,124	10,059	
Prosperity Bancshares Inc.	Common Stock	10,633	14,317	
Prudential Financial, Inc.	Common Stock	10,717	17,187	
Realty Income Corporation	Common Stock	9,970	10,148	
Royal Bank of Canada Montreal Quebec	Common Stock	4,242	10,243	
RTX Corporation	Common Stock	2,655	14,465	
Sandoz Group Ag	Common Stock	8,632	12,304	
Schwab Charles Corporation	Common Stock	13,217	17,392	
Shell PLC Sponsored Ads	Common Stock	11,537	21,928	
Southwest Airlines Co	Common Stock	7,659	8,405	
SPDR S&P Regional Banking	Common Stock	10,061	12,975	
Target Corporation	Common Stock	6,487	11,490	
Teck Resources	Common Stock	4,638	3,850	
The Cigna Group	Common Stock	9,175	9,665	

(Continued)

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Thermo Fisher Corporation	Common Stock	\$ 12,408	\$ 13,006	
Truist Financial Corporation	Common Stock	4,389	4,555	
Ulta Beauty Inc.	Common Stock	3,703	4,349	
Union Pacific Corporation	Common Stock	7,751	9,121	
United Parcel Services	Common Stock	15,595	13,871	
Vail Resorts Inc	Common Stock	5,280	5,623	
Walmart, Inc.	Common Stock	3,157	13,101	
Total Common Stock		597,243	879,428	
United States Treasury	US Treasury Note, 1.500% due 02/15/2025	48,375	49,826	
United States Treasury	US Treasury Note, 3.250% due 06/30/2027	49,133	48,836	
United States Treasury	US Treasury Note, 3.500% due 09/15/2025	24,543	24,869	
United States Treasury	US Treasury Note, 4.125% due 09/30/2027	124,588	124,526	
United States Treasury	US Treasury Note, 4.250% due 10/15/2025	24,960	25,008	
United States Treasury	US Treasury Note, 3.875% due 11/30/2029	73,731	73,331	
United States Treasury	US Treasury Note, 4.125% due 01/31/2025	49,773	49,990	
United States Treasury	US Treasury Note, 4.000% due 02/29/2028	100,425	99,109	
United States Treasury	US Treasury Note, 4.625% due 03/15/2026	74,695	75,336	
United States Treasury	US Treasury Note, 4.000% due 06/30/2028	99,183	98,988	
United States Treasury	US Treasury Note, 4.625% due 09/15/2026	49,910	50,306	
United States Treasury	US Treasury Note, 3.750% due 12/31/2028	50,180	48,890	
United States Treasury	US Treasury Note, 4.000% due 01/15/2027	25,000	24,881	
United States Treasury	US Treasury Note, 4.250% due 02/28/2029	49,807	49,779	
United States Treasury	US Treasury Note, 4.000% due 07/31/2029	50,816	49,220	
United States Treasury	US Treasury Note, 3.625% due 08/31/2029	24,978	24,212	
United States Treasury	US Treasury Note, 2.750% due 06/30/2025	99,875	99,288	
Total Government Securities		1,019,972	1,016,395	
* CCB FDIC Insured Sweep Account	Money Market	228,933	228,933	
Total Non-Participant Directed Investments		<u>\$ 4,137,433</u>	<u>\$ 5,456,270</u>	
Total Investments		<u>N/A **</u>	<u>\$ 16,468,475</u>	

* Represents a party-in-interest to the Plan.

** Not applicable as cost information is not required for participant directed investments.

(Concluded)

GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Current Value	
Participant Directed Investments:			
AB Small Cap Value Fund	Mutual Fund	\$ 417,414	
American Funds 2025 Target Date	Mutual Fund	414	
American Funds 2030 Target Date	Mutual Fund	33,915	
American Funds 2035 Target Date	Mutual Fund	493	
American Funds 2040 Target Date	Mutual Fund	18,633	
American Funds 2045 Target Date	Mutual Fund	4,773	
American Funds 2050 Target Date	Mutual Fund	665	
American Funds 2055 Target Date	Mutual Fund	14,465	
American Funds 2060 Target Date	Mutual Fund	34,405	
American Funds 2065 Target Date	Mutual Fund	7,245	
American Funds American Mutual Fund	Mutual Fund	1,252,742	
American Funds Capital Income Builder	Mutual Fund	13,246	
American Funds Europacific Growth	Mutual Fund	967,853	
American Funds New World	Mutual Fund	606,200	
BlackRock Strategic Income Opp Portfolio	Mutual Fund	617,601	
Janus Henderson Triton	Mutual Fund	138,705	
Lord Abbett Short Duration Income Fund	Mutual Fund	359,342	
Lord Abbett Total Return Fund	Mutual Fund	382,706	
MFS Growth Fund	Mutual Fund	1,287,950	
MFS International Intrinsic Value	Mutual Fund	963,158	
MFS Mid Cap Growth	Mutual Fund	279,966	
Vanguard 500 Index Admiral	Mutual Fund	1,210,079	
Vanguard Mid Cap Index Admiral	Mutual Fund	386,314	
Vanguard Small Cap Index Admiral	Mutual Fund	167,557	
Victory Sycamore Established Value	Mutual Fund	362,806	
	Total Mutual Funds	9,528,647	
	Vanguard Federal Money Market Investor	1,437,298	
* Notes receivable from participants	Various participants, interest rates from 4.25% to 9.50%	46,260	
	Total Participant Directed Investments	11,012,205	

(Continued)

GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Non-Participant Directed Investments:				
Ishares Core S&P 500 ETF	Exchange Traded Fund	\$ 618,723	\$ 1,015,473	
Ishares Msci EAFE ETF	Exchange Traded Fund	203,613	234,391	
Ishares Msci EAFE Growth ETF	Exchange Traded Fund	24,177	29,049	
Ishares Msci Emerging Markets ETF	Exchange Traded Fund	33,757	29,274	
Ishares Russell 2000 ETF	Exchange Traded Fund	162,608	220,960	
Ishares Russell Mid-Cap ETF	Exchange Traded Fund	55,559	88,400	
Ishares S&P 100 ETF	Exchange Traded Fund	252,900	541,594	
Ishares U.S. Utilities ETF	Exchange Traded Fund	11,338	16,837	
Vanguard Real Estate ETF	Exchange Traded Fund	7,304	8,908	
Vanguard Total Intl Stock Index Funds ETF	Exchange Traded Fund	99,216	156,164	
Allspring Short-Term High Income	Mutual Fund	107,047	102,624	
Ballie Gifford Emerging Markets Equities Fund	Mutual Fund	36,674	25,538	
Cibc Atlas Disciplined Equity Fund	Mutual Fund	87,730	118,007	
Goldman Sachs Short-Term Cons Inc Fund	Mutual Fund	24,322	24,394	
Vanguard Index Funds	Mutual Fund	236,637	405,734	
Total Registered Investment Funds		1,961,605	3,017,347	
3M Company	Corporate Bond, 2.875% due 10/15/2027	22,930	23,935	
Amazon	Corporate Bond, 3.150% due 8/22/2027	56,752	48,276	
Apple, Inc.	Corporate Bond, 2.050% due 9/11/2026	53,454	48,095	
Emerson Electric	Corporate Bond, 0.875% due 10/15/2026	48,080	46,989	
Intel Corporation	Corporate Bond, 3.400% due 3/25/2025	55,553	49,827	
Morgan Stanley	Corporate Bond, 3.625% due 1/20/2027	23,921	24,544	
US Bancorp	Corporate Bond, 2.375% due 7/22/2026	68,990	72,501	
Total Corporate Bonds		329,680	314,167	
Advanced Micro Devices Inc.	Common Stock	8,237	7,851	
Alphabet Inc.	Common Stock	11,771	22,853	
Amazon	Common Stock	10,390	26,327	
Amentum Holdings Inc.	Common Stock	1,222	1,262	
Amgen Inc.	Common Stock	6,010	10,426	
Apa Corporation	Common Stock	9,692	9,582	
Bank of New York Mellon Corp	Common Stock	5,440	13,061	
Baxter International Inc.	Common Stock	9,012	8,019	
Berkshire Hathaway Inc.	Common Stock	16,433	31,730	
Broadcom Inc.	Common Stock	4,149	32,458	
Camden Property Trust	Common Stock	4,477	5,222	
Cameco Corporate	Common Stock	4,666	6,167	
Canadian Pacific Kansas City	Common Stock	7,862	7,961	
Chevron Corporation	Common Stock	14,762	24,623	
Chewy Inc.	Common Stock	5,864	10,549	
Cisco Systems Inc.	Common Stock	7,575	16,872	
Citigroup Inc.	Common Stock	23,787	35,547	

(Continued)

**GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN**

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Corteva Inc.	Common Stock	\$ 3,196	\$ 3,702	
Crown Castle Inc.	Common Stock	11,469	10,437	
Discovery Inc.	Common Stock	5,244	6,395	
Disney Walt Company	Common Stock	21,253	25,611	
Eaton Corp PLC Shares	Common Stock	4,677	19,912	
Elanco Animal Health Inc.	Common Stock	3,864	3,330	
Emerson Electric Company	Common Stock	9,216	15,491	
Exxon Mobil Corporation	Common Stock	16,921	17,749	
Federated Hermes Inc.	Common Stock	10,045	13,772	
Fedex Corporation	Common Stock	8,457	14,067	
Genuine Parts	Common Stock	5,011	7,589	
Healthcare Realty Trust	Common Stock	10,424	10,509	
Hershey Company	Common Stock	9,284	8,468	
Jacobs Solutions, Inc.	Common Stock	5,711	8,017	
Johnson & Johnson	Common Stock	25,909	23,862	
JPMorgan Chase & Company	Common Stock	11,740	21,574	
Kenvue Inc.	Common Stock	9,012	10,675	
Kia Corporation	Common Stock	2,925	18,904	
Lululemon Athletica Inc	Common Stock	8,185	11,472	
LVMH Moet Hennessy Lou Vuitton	Common Stock	6,913	7,239	
Medtronic	Common Stock	13,725	13,180	
Merck & Co Inc.	Common Stock	3,402	9,451	
Microsoft Corporation	Common Stock	1,977	14,752	
Mobileye Global Inc	Common Stock	3,479	4,681	
Newmont Corporation	Common Stock	8,011	7,258	
Nextera Energy, Inc.	Common Stock	20,870	19,715	
Nike Inc.	Common Stock	9,076	8,324	
Novartis Ag	Common Stock	9,913	11,677	
Oracle Corporation	Common Stock	3,431	4,999	
Philip Morris International Inc	Common Stock	14,524	18,052	
Procter & Gamble Company	Common Stock	6,124	10,059	
Prosperity Bancshares Inc.	Common Stock	10,633	14,317	
Prudential Financial, Inc.	Common Stock	10,717	17,187	
Realty Income Corporation	Common Stock	9,970	10,148	
Royal Bank of Canada Montreal Quebec	Common Stock	4,242	10,243	
RTX Corporation	Common Stock	2,655	14,465	
Sandoz Group Ag	Common Stock	8,632	12,304	
Schwab Charles Corporation	Common Stock	13,217	17,392	
Shell PLC Sponsored Ads	Common Stock	11,537	21,928	
Southwest Airlines Co	Common Stock	7,659	8,405	
SPDR S&P Regional Banking	Common Stock	10,061	12,975	
Target Corporation	Common Stock	6,487	11,490	
Teck Resources	Common Stock	4,638	3,850	
The Cigna Group	Common Stock	9,175	9,665	

(Continued)

GREAT WESTERN MANUFACTURING COMPANY, INC.
PROFIT SHARING 401(k) PLAN

FORM 5500, SCHEDULE H, PART IV, LINE 4i
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AS OF DECEMBER 31, 2024 - SEE FORM 5500

EIN: 48-0777959, PLAN IDENTIFICATION NUMBER: 001

(a)	(b)	(c)	(d)	(e)
Identity of Issuer, Borrower, Lessor or Similar Party	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	Cost	Current Value	
Thermo Fisher Corporation	Common Stock	\$ 12,408	\$ 13,006	
Truist Financial Corporation	Common Stock	4,389	4,555	
Ulta Beauty Inc.	Common Stock	3,703	4,349	
Union Pacific Corporation	Common Stock	7,751	9,121	
United Parcel Services	Common Stock	15,595	13,871	
Vail Resorts Inc	Common Stock	5,280	5,623	
Walmart, Inc.	Common Stock	3,157	13,101	
Total Common Stock		597,243	879,428	
United States Treasury	US Treasury Note, 1.500% due 02/15/2025	48,375	49,826	
United States Treasury	US Treasury Note, 3.250% due 06/30/2027	49,133	48,836	
United States Treasury	US Treasury Note, 3.500% due 09/15/2025	24,543	24,869	
United States Treasury	US Treasury Note, 4.125% due 09/30/2027	124,588	124,526	
United States Treasury	US Treasury Note, 4.250% due 10/15/2025	24,960	25,008	
United States Treasury	US Treasury Note, 3.875% due 11/30/2029	73,731	73,331	
United States Treasury	US Treasury Note, 4.125% due 01/31/2025	49,773	49,990	
United States Treasury	US Treasury Note, 4.000% due 02/29/2028	100,425	99,109	
United States Treasury	US Treasury Note, 4.625% due 03/15/2026	74,695	75,336	
United States Treasury	US Treasury Note, 4.000% due 06/30/2028	99,183	98,988	
United States Treasury	US Treasury Note, 4.625% due 09/15/2026	49,910	50,306	
United States Treasury	US Treasury Note, 3.750% due 12/31/2028	50,180	48,890	
United States Treasury	US Treasury Note, 4.000% due 01/15/2027	25,000	24,881	
United States Treasury	US Treasury Note, 4.250% due 02/28/2029	49,807	49,779	
United States Treasury	US Treasury Note, 4.000% due 07/31/2029	50,816	49,220	
United States Treasury	US Treasury Note, 3.625% due 08/31/2029	24,978	24,212	
United States Treasury	US Treasury Note, 2.750% due 06/30/2025	99,875	99,288	
Total Government Securities		1,019,972	1,016,395	
* CCB FDIC Insured Sweep Account	Money Market	228,933	228,933	
Total Non-Participant Directed Investments		<u>\$ 4,137,433</u>	<u>\$ 5,456,270</u>	
Total Investments		<u>N/A **</u>	<u>\$ 16,468,475</u>	

* Represents a party-in-interest to the Plan.

** Not applicable as cost information is not required for participant directed investments.

(Concluded)