

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: SEAL & DESIGN, INC. 401(K) PROFIT SHARING PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 04/01/1989
2a Plan sponsor's name (employer, if for a single-employer plan): SEAL AND DESIGN, INC.
2b Employer Identification Number (EIN): 16-1340721
2c Plan Sponsor's telephone number: 716-759-2222
2d Business code (see instructions): 339900

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	245
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)	190
	6a(2)	201
	6b	0
	6c	51
	6d	252
	6e	0
	6f	252
	6g(1)	202
6g(2)	207	
6h	3	
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:
2A 2E 2F 2G 2J 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	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 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 SEAL & DESIGN, INC. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 SEAL AND DESIGN, INC.	D Employer Identification Number (EIN) 16-1340721	

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

NEWPORT GROUP, INC.

27-2037969

(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)

BURKE GROUP

80-0688755

(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?
64 50 38	NONE	38679	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

CLEAR WEALTH MANAGEMENT

2522 198TH PL SW
LYNNWOOD, WA 98036

(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 50	NONE	4481	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan SEAL & DESIGN, INC. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 SEAL AND DESIGN, INC.	D Employer Identification Number (EIN) 16-1340721

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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	850000	900000
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	47147	34564
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	212107	339796
(2) U.S. Government securities	1c(2)	1416962	1252984
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)	2716709	2542471
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	140738	139640
(B) Common	1c(4)(B)	5301338	6683061
(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)	130274	177626
(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)	11305589	13693526
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	22120864	25763668
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	22120864	25763668

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)	900000	
(B) Participants.....	2a(1)(B)	719490	
(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)		1619490
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)	11037	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		11037
(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)	1060534	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1060534
(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)		2761821
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		5452882

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1766918	
(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)		1766918
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)	38679	
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	4481	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		43160
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1810078

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3642804
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: **TRONCONI SEGARRA & ASSOCIATES LLP**

(2) EIN: **04-3728817**

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

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

Part IV Compliance Questions

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

During the plan year:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		500000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

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

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

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

A Name of plan SEAL & DESIGN, INC. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN)	001
C Plan sponsor's name as shown on line 2a of Form 5500 SEAL AND DESIGN, INC.	D Employer Identification Number (EIN) 16-1340721	

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

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 Q702826A.

Seal & Design, Inc.
401(k) Profit Sharing Plan

**Financial Statements
and Supplementary Schedule**

December 31, 2024 and 2023

Seal & Design, Inc. 401(k) Profit Sharing Plan

Financial Statements

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Independent Auditors' Report

To the Plan Sponsor and Participants of the
Seal & Design Inc. 401(k) Profit Sharing Plan
Clarence, New York

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

We have performed an audit of the accompanying financial statements of the Seal & Design Inc. 401(k) Profit Sharing 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 statement 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 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 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 ("DOL's") Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statement 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 statement 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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

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

Opinion

In our opinion, based on our audits and on the procedures performed as described in the 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 our 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 ("U.S. GAAP").

- The information in the financial statements referred to above related to assets held by and certified 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 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 U.S. GAAP, 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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve

collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with auditing standards generally accepted in the United States of America, 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 U.S. GAAP.

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 U.S. GAAP.

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

Supplemental Schedules Required by ERISA

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 DOL'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 DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion -

- The form and content of the supplemental schedules, 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 DOL'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).

Tronconi Segana & Associates LLP

Williamsville, New York
August 18, 2025

Seal & Design, Inc. 401(k) Profit Sharing Plan

Statements of Net Assets Available for Benefits

December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
<i>Investments, at fair value</i>		
Mutual funds	\$ 12,186,414	\$ 10,387,945
Exchange traded funds	1,507,112	917,644
Common stock	6,683,061	5,301,338
Preferred Stock	139,640	140,738
Corporate bonds	2,542,471	2,716,709
Government securities	1,252,984	1,416,962
Cash equivalents	<u>339,796</u>	<u>212,107</u>
Total investments	24,651,478	21,093,443
<i>Receivables</i>		
Employer contributions	900,000	850,000
Interest	34,564	47,147
Notes receivable from participants	<u>177,626</u>	<u>130,274</u>
Total receivables	<u>1,112,190</u>	<u>1,027,421</u>
Net assets available for benefits	<u>\$ 25,763,668</u>	<u>\$ 22,120,864</u>

See independent auditors' report and notes to financial statements.

Seal & Design, Inc. 401(k) Profit Sharing Plan
Statements of Changes in Net Assets Available for Benefits
for the years ended December 31, 2024 and 2023

	2024	2023
<i>Additions to Net Assets Attributed to:</i>		
Investment income		
Interest and dividends	\$ 1,060,534	\$ 666,392
Interest income on notes receivable from participants	11,037	8,540
Net appreciation in fair value of investments	2,761,821	2,650,941
Total investment income	3,833,392	3,325,873
Contributions		
Participant	719,490	582,593
Employer	900,000	850,000
Total contributions	1,619,490	1,432,593
Total income	5,452,882	4,758,466
<i>Deductions from Net Assets Attributed to:</i>		
Benefits paid to participants	1,766,918	921,634
Administrative expenses	43,160	28,613
Total deductions	1,810,078	950,247
Net increase	3,642,804	3,808,219
<i>Net Assets Available for Benefits</i>		
Beginning of year	22,120,864	18,312,645
End of year	\$ 25,763,668	\$ 22,120,864

See independent auditors' report and notes to financial statements.

Seal & Design, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements

1. Description of the Plan

The following description of the Seal & Design Inc. 401(k) Profit Sharing Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan agreement for a more complete description of the Plan’s provisions.

General – The Plan is a defined contribution plan covering substantially all employees of Seal & Design, Inc. (the “Plan Sponsor” or “Plan Administrator”) who have attained age 18 and have completed 60 days of service to contribute and receive the safe-harbor matching contributions but must be 21 and have completed at least 1 year of service in order to participate in the non-elective employer profit-sharing contributions. The Plan was established effective April 1, 1989 and was amended and restated effective January 1, 2021 to conform to the latest tax laws. The Plan was amended again on December 15, 2022 to allow certain employees from an acquired company to participate in the plan, on May 1, 2023 to change certain eligibility requirements to participate in the Plan and amended again on September 7, 2023 to comply with the SECURE Act and other law changes. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”) and the Internal Revenue Code (“IRC”).

Contributions – Participants may elect to contribute up to 100% of their annual compensation, as defined in the Plan, as a pre-tax or Roth contribution, limited to the amount imposed by law. Additionally, participants age 50 or older may elect to make a catch-up contribution. The Plan Sponsor may elect to make safe-harbor contributions to the Plan. For the years ended December 31, 2024 and 2023, the Plan Sponsor, made a safe-harbor contribution of 3% of eligible compensation totaling \$400,166 and \$343,825 respectively. Participants direct their contributions and employer safe-harbor contributions into various investment options offered by the Plan. The Plan allows discretionary profit-sharing contributions, determined by the Plan Sponsor’s management, and allocates them to participants based on eligible compensation and participant classification. Profit-sharing contributions are invested in a portfolio of investments as directed by the Plan Sponsor. For the years ended December 31, 2024 and 2023, the Plan Sponsor made a profit-sharing contribution totaling \$499,834 and \$506,175, respectively.

Participant Accounts – Individual accounts are maintained for each Plan participant. Participant accounts are increased by participant contributions, Plan Sponsor contributions and the participant’s share of Plan earnings. Participant accounts are decreased by participant distributions and each participant’s share of Plan expenses and losses. The allocation of earnings and losses to participant accounts is based upon the value of an individual account in relation to the total assets of the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant’s vested account.

Vesting – Participants are immediately vested in their deferral contributions, the Plan Sponsor’s safe-harbor contributions and actual earnings thereon. Vesting in the Plan Sponsor’s profit-sharing contribution portion of participant accounts is based on years of continuous service.

Seal & Design, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements (continued)

1. Description of the Plan (continued)

Participants are 20% vested in Plan Sponsor profit sharing contributions after their second year of service, and vest at the rate of 20% per year thereafter. Participants become fully vested after 6 years of credited service.

Notes Receivable from Participants – Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their account balances. Loan terms range from 1 to 5 years or up to 10 years for the purchase of a primary residence. The loans are secured by the balance in the participant’s account and bear interest at a rate commensurate with local prevailing rates as determined by the Plan Administrator. Principal and interest is paid ratably through monthly payroll deductions.

Payment of Benefits – Upon termination of service due to death, disability or retirement, a participant may elect to receive a lump-sum amount equal to the value of the participant’s vested interest in his or her account, or annual installments over other allowed periods. For termination of service for other reasons, a participant may receive the value of the vested interest in his or her account as a lump-sum distribution. In-service and hardship distributions are also allowed under this Plan, with certain restrictions.

Forfeitures – The non-vested account balances of participants who have ceased employment with the Plan Sponsor are forfeited upon the distribution of vested balances. The Plan Sponsor may use forfeitures to pay Plan expenses or to reduce amounts otherwise required to be contributed to the Plan. Forfeited non-vested accounts amounted to \$20,810 and \$9,336 as of December 31, 2024 and 2023, respectively. During 2024 and 2023, the Plan utilized forfeited, non-vested accounts to reduce Plan expenses.

Tax Status – The Plan Sponsor obtained a letter dated June 30, 2020 in which the Internal Revenue Service (“IRS”) stated that the form of volume submitter plan is qualified under Section 401(a) of the Internal Revenue Code (the “Code”). Accordingly, no provision for income taxes has been included in the accompanying financial statements. The Plan has been amended since the effective date of the IRS letter. However, the Plan Administrator believes the Plan is currently designed and being operated in compliance with the requirements of the Code.

Plan Termination – Although it has not expressed any intent to do so, the Plan Sponsor has the right under the Plan agreement to discontinue its contributions at any time and to terminate its participation in the Plan, subject to the provisions of ERISA. In the event of partial or complete Plan termination, participants will become fully vested in their accounts.

Seal & Design, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies

Basis of Accounting – The accompanying financial statements are prepared using the accrual method of accounting in accordance with accounting principles generally accepted in the United States of America (“U.S. GAAP”).

Investment Valuation and Income Recognition – The Plan’s investments are stated at fair value. Inputs to the valuation methodology for mutual funds, common stock, corporate bonds, government securities and cash equivalents are unadjusted quoted prices for identical assets in active markets.

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

Notes Receivable from Participants – Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Delinquent participant loans are reclassified as distributions based upon terms in the plan document.

Benefit Payments – Benefit payments are recorded when paid.

Administrative Expenses – Certain accounting and administrative expenses of the Plan are paid by the Plan Sponsor. Expenses relating to investment activity are paid by the Plan.

Party-in-Interest Transactions – Certain Plan investments held in Fidelity brokerage accounts are also managed by Fidelity. Therefore, these transactions qualify as party-in-interest transactions.

Risks and Uncertainties – The Plan invests in various investment securities. Investments are exposed to various risks, such as interest rate, market and credit risks. Due to the level of risk associated with certain investments and the level of uncertainty related to changes in the value of investments, it is at least reasonably possible that changes in risks in the near term would materially affect participants’ account balances and the amounts reported in the statements of net assets available for benefits and the statements of changes in net assets available for benefits.

Use of Estimates – The preparation of financial statements in accordance with U.S. GAAP requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Seal & Design, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements (continued)

2. Summary of Significant Accounting Policies (continued)

Coronavirus Aid, Relief, and Economic Security (CARES) Act – The CARES Act was signed into law on March 27, 2020 in response to the impacts and anticipated impacts of the COVID-19 pandemic. The CARES Act temporarily waived all required minimum distributions for calendar year 2020 and provided participants with penalty-free access to, their balances up to \$100,000 subject to certain eligibility criteria if distributed prior to January 1, 2021. Plan management offered these relief options to participants in 2020 and will formally amend the Plan to reflect these changes prior to the IRS deadline of December 31, 2025.

Setting Every Community Up for Retirement Enhancement (SECURE) Act – The SECURE Act was signed into law on December 20, 2019. The SECURE Act increases the age for required minimum distributions (RMD) from age 70½ to age 72, creates penalty-free withdrawals for birth or adoption, and modifies certain aspects of plan administration and participant disclosures. These changes are effective for plan years beginning after December 31, 2019.

On December 29, 2022, the SECURE 2.0 Act was signed into law to address additional retirement issues. SECURE 2.0 Act includes provisions to help participants increase retirement savings and simplify and clarify certain retirement plan rules. SECURE Act 2.0 increases the age for RMDs to age 73, effective January 1, 2023 and increasing it to age 75 by 2033. Plan management is currently reviewing SECURE 2.0 provisions and will amend the plan as required.

Subsequent Events – The Plan Administrator has evaluated subsequent events, for recognition or disclosure, through August 18, 2025, the date the accompanying financial statements were available to be issued and determined that no additional recognition or disclosure was necessary.

3. Information Certified by the Trustee (Unaudited)

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor (“DOL”) Rules and Regulations for Reporting and Disclosure under ERISA for the years ended December 31, 2024 and 2023. Accordingly, Newport Trust Company (the “Trustee”) has certified that the following data included in the accompanying financial statements and supplementary schedule of assets (held at end of year) is complete and accurate.

Seal & Design, Inc. 401(k) Profit Sharing Plan
Notes to Financial Statements (continued)

3. Information Certified by the Trustee (Unaudited) (continued)

	2024	2023
Fair value at end of year		
Mutual funds	\$ 12,186,414	\$ 10,387,945
Exchange traded funds	1,507,112	917,644
Common stock	6,683,061	5,301,338
Preferred stock	139,640	140,738
Corporate bonds	2,542,471	2,716,709
Government securities	1,252,984	1,416,962
Cash equivalents	339,796	212,107
Participant loans	177,626	130,274
 Total fair value at end of year	 \$ 24,829,104	 \$ 21,223,717
 Total investment income	 \$ 3,833,392	 \$ 3,325,873

4. Investments

ASC Topic 820, *Fair Value Measurement*, 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** – Unadjusted quoted prices in active markets for identical, unrestricted assets or liabilities that are accessible at the measurement date. Investments utilizing Level 1 inputs as its primary measure of fair value include mutual funds, common stock, corporate bonds, government securities and money market funds totaling \$24,651,478 and \$21,093,443 at December 31, 2024 and 2023, respectively.

- **Level 2** – Quoted prices for similar assets or liabilities in active markets or quoted prices for identical or similar assets or liabilities in markets that are not active. This level also includes inputs other than quoted prices that are observable, either directly or indirectly, for substantially the full term through corroboration with observable, independent market data. This includes investments valued at quoted prices adjusted for legal or contractual restrictions specific to the security. There are no assets of the Plan that utilized Level 2 inputs as its primary basis for calculating fair value as of December 31, 2024 and 2023.

Seal & Design, Inc. 401(k) Profit Sharing Plan

Notes to Financial Statements (continued)

4. Investments (continued)

- **Level 3** – Pricing inputs are unobservable for the asset or liability. That is, inputs that reflect the reporting entity's own assumptions about the assumptions that market participants would use in pricing the asset or liability. There are no assets of the Plan that utilized Level 3 inputs as its primary measure of fair value as of December 31, 2024 and 2023.

The asset or liability's fair-value measurement level within the fair-value hierarchy is based on the lowest level of any input that is significant to the fair-value measurement. Valuation techniques 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.

Stocks and Exchange Traded Funds: Valued at the closing price reported on the active market on which the individual securities are traded.

Mutual Funds: 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. These 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.

Corporate Bonds: Valued using pricing models maximizing the use of observable inputs for similar securities. This includes basing yields currently available on comparable securities of issuers with similar credit ratings.

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

Seal & Design, Inc. 401(k) Profit Sharing Plan
Notes to Financial Statements (continued)

5. Nonparticipant-Directed Investments

Information about the net assets and the significant components of the changes in net assets relating to the nonparticipant-directed investments is as follows:

	2024	2023
Net Assets		
Exchange traded funds	\$ 1,507,112	\$ 917,644
Common stock	6,683,061	5,301,338
Preferred stock	139,640	140,738
Corporate bonds	2,542,471	2,716,709
Government securities	1,252,984	1,416,962
Cash equivalents	326,929	200,516
	\$ 12,452,197	\$ 10,693,907
Changes in Net Assets		
Contributions	\$ 510,337	\$ 465,324
Net appreciation in fair value of investments	1,752,622	1,191,399
Interest and dividend income	260,251	248,797
Benefits paid to participants	(764,045)	(412,839)
Transaction costs and fees	(875)	(1,338)
	\$ 1,758,290	\$ 1,491,343

Nonparticipant-directed investments are held in Fidelity brokerage accounts. One account is maintained for assets transferred from a prior money purchase pension plan. Another account is maintained for the discretionary profit-sharing contributions made by the Plan Sponsor.

Supplementary Schedule

Seal & Design, Inc. 401(k) Profit Sharing Plan

Form 5500, Schedule H, Line 4i

Schedule of Assets (Held at End of Year)

December 31, 2024

EIN # 16-1340721

Plan #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	American Century Heritage Inv	Mutual Fund	\$ N/A	\$ 810,192
	American Fundamental Investors R5	Mutual Fund	N/A	1,693,422
	American Funds Balanced R5	Mutual Fund	N/A	353,431
	American Funds Europacific Growth R5	Mutual Fund	N/A	1,193,813
	American Growth Fund of America R5	Mutual Fund	N/A	1,961,890
	Cohen & Steers Realty Shares	Mutual Fund	N/A	196,742
*	Fidelity Extended Market Index	Mutual Fund	N/A	913,775
*	Fidelity International Index	Mutual Fund	N/A	421,981
*	Fidelity US Bond Index	Mutual Fund	N/A	211,143
	Franklin Gold & Precious Metals Adv	Mutual Fund	N/A	200,016
	Loomis Sayles Core Plus Bond Y	Mutual Fund	N/A	332,993
	Marquarie Small Cap Value	Mutual Fund	N/A	569,640
	PGIM Jennison Fund Class Z	Mutual Fund	N/A	965,130
	Vanguard Large Cap Index Admiral	Mutual Fund	N/A	1,652,634
	Wasatch Core Growth	Mutual Fund	N/A	709,612
			N/A	12,186,414
	Invesco Exchange Traded Fd Tr S&P500	Exchange Traded Products	228,754	225,442
	Ishares S&P 100 ETF	Exchange Traded Products	664,792	658,578
	Ishares Core S&P Small Cap	Exchange Traded Products	238,776	256,365
	Vancek ETF Trust MRNGSTR WDE MOAT	Exchange Traded Products	296,609	366,727
			1,428,931	1,507,112
	Alphabet Inc.	Common Stock	183,129	293,278
	Amazon Inc.	Common Stock	281,210	449,750
	Apple Inc.	Common Stock	182,729	388,151
	Berkshire Hathaway Inc. Class B	Common Stock	167,220	339,960
	Broadcom Inc.	Common Stock	70,733	481,068
	Chevron Corp.	Common Stock	177,212	217,260
	Costco Wholesale Corp.	Common Stock	126,548	339,020
	Eaton Corp.	Common Stock	93,945	265,496
	EOG Resources Inc.	Common Stock	164,312	212,063
	General Dynamics Corp Com USD	Common Stock	169,997	197,618
	Home Depot Inc.	Common Stock	109,060	186,715
	Honeywell International Inc.	Common Stock	136,507	175,065
	Houlihan Lokey Inc. Class A	Common Stock	52,873	156,294

See independent auditors' report.

Seal & Design, Inc. 401(k) Profit Sharing Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year) (continued)
December 31, 2024

EIN # 16-1340721
Plan #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	JP Morgan Chase & Co.	Common Stock	\$ 177,209	\$ 383,536
	Mastercard Incorporated Class A	Common Stock	140,750	221,159
	McDonalds Corp.	Common Stock	119,040	174,224
	Microsoft Corp.	Common Stock	150,848	326,663
	Nvidia Corp.	Common Stock	56,838	496,873
	Republic Services Inc.	Common Stock	123,791	278,634
	Transdigm Group Inc.	Common Stock	150,396	152,074
	Unitedhealth Group Inc.	Common Stock	147,466	245,848
	Visa Inc.	Common Stock	138,986	268,634
	Walmart Inc.	Common Stock	224,588	433,678
			3,345,387	6,683,061
	Allstate Corp.	Preferred Stock	62,422	60,170
	Apollo Global Management Inc.	Preferred Stock	76,135	79,470
			138,557	139,640
	Anheuser-Busch Inbev Inc., 1/23/29, 4.75%	Corporate Bond	49,342	49,980
	McDonalds Corp., 5/26/25, 3.375%	Corporate Bond	77,596	76,587
	PayPal Holdings Inc., 6/1/25, 1.65%	Corporate Bond	50,134	49,350
	Stryker Corp., 6/15/25, 1.150%	Corporate Bond	75,026	73,800
	National Rural Utilities, 11/1/25, 3.25%	Corporate Bond	50,408	49,393
	National Rural Utilities, 2/7/31, 5.00%	Corporate Bond	49,900	50,263
	BP Capital Markets America Inc., 2/11/26, 3.41%	Corporate Bond	97,351	98,774
	PPG Industries Inc., 3/15/26, 1.2%	Corporate Bond	142,326	143,676
	United Parcel Service Inc., 11/15/26, 2.4%	Corporate Bond	50,285	48,199
	Exxon Mobil Corp., 8/16/26, 2.275%	Corporate Bond	46,843	48,341
	American Honda Finance Corp, 1/8/27, 2.35%	Corporate Bond	49,831	47,722
	Progressive Corp., 1/15/27, 2.45%	Corporate Bond	77,202	71,891
	Exelon Corp., 3/15/28, 5.15%	Corporate Bond	74,442	75,437

See independent auditors' report.

Seal & Design, Inc. 401(k) Profit Sharing Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year) (continued)
December 31, 2024

EIN # 16-1340721
Plan #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Snap On Inc., 3/1/27, 3.25%	Corporate Bond	\$ 77,015	\$ 72,860
	Charles Schwab Corp., 4/1/27, 3.3%	Corporate Bond	76,356	72,845
	PNC Financial Services Group Inc., 5/19/27, 3.15%	Corporate Bond	51,783	48,237
	Costco Wholesale Corp., 6/20/27, 1.375%	Corporate Bond	50,022	46,480
	John Deere Capital Corp., 3/3/25, 5.15%	Corporate Bond	50,002	50,050
	Amazon Com Inc., 8/22/27, 3.15%	Corporate Bond	47,754	48,276
	Zeotis Inc., 9/12/27, 3.0%	Corporate Bond	51,639	47,918
	JP Morgan Chase & Co., 12/1/27, 3.625%	Corporate Bond	48,869	48,569
	Bristol Myers Squibb Co., 2/20/28, 3.9%	Corporate Bond	71,421	73,428
	Apple Inc., 5/10/33, 4.30%	Corporate Bond	49,976	48,786
	Fifth Third Bancorp, 4/25/28, 4.055%	Corporate Bond	47,498	48,929
	Unitedhealth Group Inc., 12/15/28, 3.875%	Corporate Bond	47,076	48,352
	Emerson Electric Co., 12/21/28, 2.0%	Corporate Bond	45,595	45,147
	Keycorp, 10/1/29, 2.55%	Corporate Bond	85,411	88,950
	Dominion Energy Inc., 4/1/30, 3.375%	Corporate Bond	47,550	45,991
	Blackrock Inc., 1/28/31, 1.9%	Corporate Bond	40,244	42,132
	State Street Corp., 3/3/31, 2.2%	Corporate Bond	61,386	63,782
	Appalachian Power Co., 8/1/32, 4.5%	Corporate Bond	50,192	47,042
	Duke Energy Progress LLC, 9/1/28, 3.70%	Corporate Bond	71,323	72,249
	Allstate Corp., 3/30/33, 5.25%	Corporate Bond	99,871	99,814
	3M Co., 4/15/25, 2.65%	Corporate Bond	50,281	49,666
	Amgen Inc., 5/1/25, 3.125%	Corporate Bond	50,370	49,723
	The Cigna Group, 3/15/26, 5.685%	Corporate Bond	99,942	100,031
	Stryker Corp., 3/15/26, 3.50%	Corporate Bond	25,327	24,666
	Goldman Sachs Group Inc., 2/24/33, 3.102%	Corporate Bond	64,800	64,640
	PNC Financial Services Group Inc., 1/24/34, 5.068%	Corporate Bond	49,638	48,711
	Unitedhealth Group Inc., 3/15/26, 3.10%	Corporate Bond	25,243	24,633
	Virginia Electric & Power Co., 3/15/27, 3.50%	Corporate Bond	23,982	24,364
	Prologis L.P., 12/15/27, 3.375%	Corporate Bond	25,528	24,188
	Zeotis Inc., 8/20/28, 3.90%	Corporate Bond	26,075	24,235
	PNC Financial Services Group Inc., 4/23/29, 3.45%	Corporate Bond	23,313	23,657
	Allstate Corp., 12/15/30, 1.45%	Corporate Bond	46,654	40,707
			2,572,822	2,542,471

See independent auditors' report.

Seal & Design, Inc. 401(k) Profit Sharing Plan
Form 5500, Schedule H, Line 4i
Schedule of Assets (Held at End of Year) (continued)
December 31, 2024

EIN # 16-1340721
Plan #001

(a)	(b) Identity of Issue, Borrower, Lessor, or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Triborough Bridge & Tunnel Authority, 11/15/2025, 4.434%	Government Security	\$ 25,184	\$ 25,046
	Atlanta, GA Tax Allocation, 1/1/2026, 3.979%	Government Security	25,186	24,861
	Texas Transportation Commission St Highway Fund, 4/1/2026, 5.028%	Government Security	25,545	25,060
	New York, NY City Transitional Finance Authority, 5/1/2027, 5.267%	Government Security	52,418	50,462
	Long Island Power Authority, 9/1/25, 3.983%	Government Security	25,170	24,933
	United States Treasury Notes, 9/15/25, 3.50%	Government Security	49,547	49,734
	United States Treasury Notes, 11/30/26, 1.625%	Government Security	73,950	71,417
	Federal Farms Credit Bank, 2/2/27, 0.69%	Government Security	122,853	116,018
	Federal Home Loan Mtg Corp, 2/27/29, 4.125%	Government Security	74,583	73,591
	Federal Farms Credit Bank, 4/28/27, 1.20%	Government Security	124,739	116,558
	United States Treasury Notes, 9/30/27, 0.375%	Government Security	49,606	44,994
	United States Treasury Notes, 5/31/29, 2.75%	Government Security	48,736	46,749
	United States Treasury Notes, 2/15/33, 3.50%	Government Security	100,189	93,029
	United States Treasury Notes, 2/15/26, 4%	Government Security	100,288	99,737
	United States Treasury Notes, 5/15/32, 2.875%	Government Security	49,103	44,905
	United States Treasury Notes, 5/15/33, 3.375%	Government Security	120,315	114,873
	United States Treasury Notes, 8/15/32, 2.75%	Government Security	71,566	66,512
	Tennessee Valley Authority Notes, 8/1/34, 4.375%	Government Security	124,431	120,780
	Federal National Mortgage Association Note, 9/28/28, 0.87%	Government Security	49,990	43,725
			<u>1,313,399</u>	<u>1,252,984</u>
*	Fidelity Government Cash Reserves	Money Market	N/A	326,929
*	Fidelity Government Money Market Fund	Money Market	N/A	12,867
			<u>N/A</u>	<u>339,796</u>
*	Participant Loans	5.25% - 10.50%	N/A	177,626
	Total assets held for investment		<u>\$ 8,799,096</u>	<u>\$ 24,829,104</u>

* Party-in-interest

See independent auditors' report.