

<p style="text-align: center;">Form 5500</p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p>Annual Return/Report of Employee Benefit Plan</p> <p style="font-size: x-small;">This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).</p> <p style="text-align: center;">▶ Complete all entries in accordance with the instructions to the Form 5500.</p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold; text-align: center;">2024</p> <hr/> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</p>
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Part I Annual Report Identification Information
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A This return/report is for: a multiemployer plan a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)

a single-employer plan a DFE (specify) _____

B This return/report is: the first return/report the final return/report

an amended return/report a short plan year return/report (less than 12 months)

C If the plan is a collectively-bargained plan, check here.

D Check box if filing under: Form 5558 automatic extension the DFVC program

special extension (enter description)

E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>QUALITY HEARING INSTRUMENTS LL 401(K) PROFIT SHARING PLAN & TRUST</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>001</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>QUALITY HEARING INSTRUMENTS LL</u></p> <p><u>131 ENTERPRISE RD</u> <u>JOHNSTOWN, NY 12095-3326</u></p>	<p>1c Effective date of plan <u>01/01/2002</u></p> <p>2b Employer Identification Number (EIN) <u>03-0390608</u></p> <p>2c Plan Sponsor's telephone number <u>518-736-2284</u></p> <p>2d Business code (see instructions) <u>339110</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/07/2025	ANTHONY M. WARD ESQ.
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor ERISA FIDUCIARY SERVICES, INC. 1373 VETERANS HIGHWAY SUITE 10 HAUPPAUGE, NY 11788	3b Administrator's EIN 47-1637791 3c Administrator's telephone number 631-249-0500
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4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name QUALITY HEARING INSTRUMENTS c Plan Name	4b EIN 4d PN
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5 Total number of participants at the beginning of the plan year	5	1068
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6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year	6a(1)	1012
a(2) Total number of active participants at the end of the plan year	6a(2)	1074
b Retired or separated participants receiving benefits	6b	0
c Other retired or separated participants entitled to future benefits	6c	101
d Subtotal. Add lines 6a(2) , 6b , and 6c	6d	1175
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	6e	0
f Total. Add lines 6d and 6e	6f	1175
g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item)	6g(1)	413
g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	6g(2)	515
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6h	0

7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7	
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8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:
 2E 2F 2J 2T 3H 2G 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) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	9b Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

<p>a Pension Schedules</p> <p>(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)</p> <p>(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary</p> <p>(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary</p> <p>(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____</p> <p>(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)</p>	<p>b General Schedules</p> <p>(1) <input checked="" type="checkbox"/> H (Financial Information)</p> <p>(2) <input type="checkbox"/> I (Financial Information – Small Plan)</p> <p>(3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u> 0 </u></p> <p>(4) <input checked="" type="checkbox"/> C (Service Provider Information)</p> <p>(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)</p> <p>(6) <input type="checkbox"/> G (Financial Transaction Schedules)</p>
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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 QUALITY HEARING INSTRUMENTS LL 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 QUALITY HEARING INSTRUMENTS LL	D Employer Identification Number (EIN) 03-0390608	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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(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)

CFM ADVISORS INC

1373 VETERANS HWY. SUITE 10
HAUPPAUGE, NY 11788

11-3237905

(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	ADVISOR	17609	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

PAYCHEX, INC.

911 PANORAMA TRAIL S
ROCHESTER, NY 14625

16-1124166

(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	RECORDKEEPER	35920	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" 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

(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 D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small>	DFE/Participating Plan 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.	OMB No. 1210-0110 <hr/> 2024 This Form is Open to Public Inspection.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>QUALITY HEARING INSTRUMENTS LL 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN)	<u>001</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>QUALITY HEARING INSTRUMENTS LL</u>	D Employer Identification Number (EIN) <u>03-0390608</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>METLIFE GAC SERIES 25053 0</u>		
b Name of sponsor of entity listed in (a): <u>RELIANCE TRUST</u>		
c EIN-PN <u>46-6625485-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>418390</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan QUALITY HEARING INSTRUMENTS LL 401(K) PROFIT SHARING PLAN & TRUST	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 QUALITY HEARING INSTRUMENTS LL	D Employer Identification Number (EIN) 03-0390608	

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
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	270986	298430
(9) Value of interest in common/collective trusts	1c(9)	458661	418390
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	10036155	13138172
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)	0	0

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(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	10765802 13854992
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	10765802 13854992

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers.....	2a(1)(A)	0
	(B) Participants.....	2a(1)(B)	2354965
	(C) Others (including rollovers).....	2a(1)(C)	155556
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)	2510521
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0
	(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)	21429
	(F) Other.....	2b(1)(F)	
	(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)	21429
(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)	442024
	(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)	442024
(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)	0
(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)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		11958
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		1293452
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		4279384

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	1073369	
(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)		1073369
f Corrective distributions (see instructions)	2f		56554
g Certain deemed distributions of participant loans (see instructions).....	2g		1428
h Interest expense.....	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	41234	
(3) Recordkeeping fees	2i(3)	0	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	17609	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(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)	0	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		58843
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		1190194

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		3089190
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: **BRYANS & GRAMUGLIA CPAS, LLC**

(2) EIN: **20-2954888**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<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>QUALITY HEARING INSTRUMENTS LL 401(K) PROFIT SHARING PLAN & TRUST</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>QUALITY HEARING INSTRUMENTS LL</u>	D Employer Identification Number (EIN) <u>03-0390608</u>	

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

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

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

1	
----------	--

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

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

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

3	
----------	--

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 08 / 31 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704150A.

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust**

**Financial Statements and Supplemental Schedule
Year Ended December 31, 2024**



BRYANS & GRAMUGLIA
CPAs, LLC

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
December 31, 2024

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Independent Auditors' Report

To the Trustees of
Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust

Opinion

We have audited the accompanying financial statements of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but it 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 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 Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) is presented for the 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 has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

Bryans & Gramuglia CPAs, LLC

Albany, New York
October 6, 2025

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Statements of Net Assets Available for Benefits
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments		
Mutual funds at fair value	\$ 13,138,172	\$ 10,036,155
Investment contract at contract value	418,390	458,661
Total Investments	<u>13,556,562</u>	<u>10,494,816</u>
Receivables:		
Notes receivable from participants	298,430	270,986
Participant contributions	106,109	75,664
Total Receivables	<u>404,539</u>	<u>346,650</u>
TOTAL ASSETS	13,961,101	10,841,466
LIABILITIES		
Accrued expenses	<u>8,500</u>	<u>8,500</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 13,952,601</u>	<u>\$ 10,832,966</u>

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Statements of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2024 and 2023**

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Additions to net assets attributed to:		
Investment Income (Loss):		
Interest and dividends	\$ 442,024	\$ 277,603
Interest income on notes receivable from participants	21,429	12,113
Net appreciation (depreciation) in fair value of investments	1,305,410	1,399,371
Other income	-	13,011
Total Investment Income (Loss)	<u>1,768,863</u>	<u>1,702,098</u>
Contributions:		
Participant	2,385,410	1,994,060
Other (including rollovers)	155,556	5,765
Total Contributions	<u>2,540,966</u>	<u>1,999,825</u>
TOTAL ADDITIONS	<u>4,309,829</u>	<u>3,701,923</u>
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants and beneficiaries	1,073,369	1,061,449
Corrective distributions	56,554	-
Certain deemed distributions of participant loans	1,428	-
Administrative expenses	58,843	51,700
TOTAL DEDUCTIONS	<u>1,190,194</u>	<u>1,113,149</u>
NET INCREASE (DECREASE)	3,119,635	2,588,774
NET ASSETS AVAILABLE FOR BENEFITS, Beginning of Year	<u>10,832,966</u>	<u>8,244,192</u>
NET ASSETS AVAILABLE FOR BENEFITS, End of Year	<u>\$ 13,952,601</u>	<u>\$ 10,832,966</u>

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023**

1. DESCRIPTION OF PLAN

The following description of the Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust (the Plan), formerly known as BAINBRIDGE LLC 401(k) Profit Sharing Plan and Trust, provides only general information. Participants should refer to the plan document or summary plan description for a more complete description of the Plan's provisions.

General

The plan is a defined contribution plan that covers substantially all of the employees of Frasier Enterprises, a controlled group of limited liability companies detailed in the plan document (the Company). Employees become eligible to participate in the Plan's elective deferrals and receive an allocation of qualified non-elective contributions after attaining age 21 and completing two consecutive months of eligible service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participant

For each plan year, eligible participants may elect to contribute to the Plan an amount up to 25% of their earnings, as defined in the Plan. Participants may also contribute amounts representing distributions from other qualified defined benefit plans, defined contribution plans or 403(b) plans.

Employer

The Company may contribute a discretionary qualified non-elective contribution in the ratio that each qualifying participant's compensation for the plan year bears to the total compensation of all qualifying participants for the plan year. There were no employer discretionary qualified non-elective contributions for the years ended December 31, 2024 and 2023.

Participants Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contributions and (b) Plan earnings, and is charged with any investment or administrative fees. Allocations are based on participant earnings or account balances as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

1. DESCRIPTION OF PLAN

Participants Accounts

Participants may direct the investment of their account balances into various investment options offered by the Plan. Currently, the Plan offers forty mutual funds and an investment contract as investment options for participants.

Vesting

Participants are immediately and fully vested in their contributions plus actual earnings thereon. Vesting in the Company's qualified non-elective contributions is based on years of service. A participant becomes 100% vested after six years of credited service.

Notes Receivable from Participants

Participants may borrow from their accounts up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at rates that are commensurate with rates charged by other lenders on similar loans. Loan repayments are made ratably through payroll deductions over a period not to exceed five years, unless the loans were used to purchase a primary residence, in which case the loan term may exceed five years.

Plan Benefits

Upon termination of employment due to death, disability, retirement, or other separation, participants or their beneficiary may elect to receive an amount equal to the value of the participant's vested interest in his or her account in a lump sum payment. Additionally, under certain circumstances of financial hardship, the participant is allowed to withdraw funds from the Plan.

Corrective Distributions

The Plan is required by ERISA to pass the Actual Deferral Percentage Test (ADP) and the Actual Contribution Percentage Test (ACP). These tests provide a limit on the amount that certain benefits provided under the Plan to highly compensated employees may exceed the benefits provided to non-highly compensated employees. If the Plan is determined not to be in compliance, corrective distributions are made in the following year when testing is completed and the amount required to be distributed is known. These corrective distributions are paid back to the participants within 12 months and are subject to tax.

Administrative Expenses

Expenses associated with the administration of the Plan are to be deducted directly from the participant's account in the subsequent year based on the plan document. For the years ended December 31, 2024 and 2023, the expenses paid by the Plan were \$8,500. The plan has recorded an accrued expense for accumulated administrative expenses in the amount of \$8,500 as of December 31, 2024 and 2023, respectively.

1. DESCRIPTION OF PLAN

Forfeited Accounts

If a participant's employment is terminated, the non-vested portion of the participant's account balance shall become forfeiture in accordance with the provisions of the Plan and shall be applied to reduce future employer contributions. At December 31, 2024 and 2023, there were no forfeited non-vested accounts.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Date of Management's Review

Subsequent events were evaluated through October 6, 2025, which is the date the financial statements were available to be issued.

Use of Estimates

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balances plus any accrued unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2024 and 2023, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the plan document.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Investment Valuation and Income Recognition

The Plan's investments in mutual funds are stated at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Investment Committee determines the Plan's valuation policies. See Note 3 for discussions of fair value measurements.

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

Payment of Benefits

Benefits are recorded when paid.

Risks and Uncertainties

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

Parties-in-Interest

The following organizations are considered parties-in-interest based upon their relationship and services they provide to the Plan:

Quality Hearing Instruments LLC – Plan Sponsor
PayChex, Inc. – Third Party Administrator
Mid Atlantic Trust Company – Custodian of Plan Assets
CFM Advisors – Plan Advisors
Bryans & Gramuglia CPAs, LLC – Plan Audit Firm

For the years ended December 31, 2024 and 2023, there were no prohibited transactions between the Plan and the parties-in-interest.

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023

3. FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There are no Plan assets requiring the use of Level 2 or Level 3 inputs for the periods presented.

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

The following tables set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2024 and 2023:

	<u>Fair Value</u>	Fair Value Measurements at the End of the Reporting Period Using: Quoted Prices in Active Markets for Identical Assets (Level 1)
<u>December 31, 2024</u>		
Mutual Funds	<u>\$ 13,138,172</u>	<u>\$ 13,138,172</u>
<u>December 31, 2023</u>		
Mutual Funds	<u>\$ 10,036,155</u>	<u>\$ 10,036,155</u>

Gains and losses (realized and unrealized) included in changes in net assets available for benefits for the years ended December 31, 2024 and 2023 are reported in net appreciation (depreciation) in fair value of investments.

The Plan's policy is to recognize transfers between Levels 1 and 2 and into and out of Level 3 as of the date of the event or change in circumstances that caused the transfer. For the years ended December 31, 2024 and 2023, there were no transfers between Levels 1, 2 and 3.

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023

4. INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has an investment contract with Reliance Trust Company. MetLife administers the contract. MetLife maintains the contributions in the Reliance Trust Company Stable Value Fund Collective Investment Trust, Series 25053. The account is credited with earnings on the underlying investments and charged for Plan withdrawals and administrative expenses. This investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed by the Plan. The contract is included in the financial statements at contract value as reported to the Plan by Reliance Trust Company and MetLife. Contract value represents contributions made under the contract, plus earnings, less withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

As described in Note 2, because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for the portion of the net assets available for benefits attributable to the guaranteed investment contract.

Certain events limit the Plan's ability to transact at contract value with Reliance Trust Company. Such events include the following: (a) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (b) changes to the plan's prohibition on competing investment options or deletion of equity wash provisions, (c) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (d) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act of 1974. The Plan administrator does not believe that any events that would limit the Plan's ability to transact at contract value with Plan participants are probable of occurring.

The investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

There are no reserves against contract value for credit risk of the contract issuer or otherwise.

Average yields:	
Based on actual earnings	0.88%
Based on interest rate credited to participants	2.93%

5. PLAN TERMINATION

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

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023**

6. TAX STATUS

The Internal Revenue Service ruled on March 31, 2008 that the Prototype Standardized Profit Sharing Plan with CODA (the prototype plan of PayChex, Inc. upon which the Plan is based) qualifies under Section 401(a) of the Internal Revenue Code (IRC) and the related trust is, therefore, not subject to tax under present income tax law. The Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan administrator is not aware of any course of action or series of events that have occurred that might adversely affect the Plan's qualified status.

The Plan administrator had analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2021.

7. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The reconciliation of the financial statements to the Form 5500 for the year ended December 31, 2024 is as follows:

	<u>Financial Statements</u>	<u>Form 5500</u>	<u>Difference</u>
Receivables - participant contributions	\$ <u>106,109</u>	\$ <u>-</u>	\$ <u>106,109</u> (1)
Accrued expenses	\$ <u>8,500</u>	\$ <u>-</u>	\$ <u>8,500</u> (1)
Participant contributions	\$ <u>2,385,410</u>	\$ <u>2,354,965</u>	\$ <u>30,445</u> (1)

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023

7. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The reconciliation of the financial statements to the Form 5500 for the year ended December 31, 2023 is as follows:

	<u>Financial Statements</u>	<u>Form 5500</u>	<u>Difference</u>
Receivables - participant contributions	\$ <u>75,664</u>	\$ <u>-</u>	\$ <u>75,664</u> (1)
Accrued expenses	\$ <u>8,500</u>	\$ <u>-</u>	\$ <u>8,500</u> (1)
Participant contributions	\$ <u>1,994,060</u>	\$ <u>1,982,753</u>	\$ <u>11,307</u> (1)
Other income	\$ <u>13,011</u>	\$ <u>-</u>	\$ <u>13,011</u> (1)
Corrective distributions	\$ <u>-</u>	\$ <u>69,706</u>	\$ <u>(69,706)</u> (1)

(1) The differences are the result of the Form 5500 being prepared on the cash basis of accounting and the financial statements being prepared on the accrual basis of accounting for the years ended December 31, 2024 and 2023.

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Supplemental Schedule
December 31, 2024

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

Employer Identification Number: 03-0390608
Plan Number: 001
Form: 5500

(a)	Identity of Issue Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
Investment Contracts:				
	Reliance Trust Stable Value Fd - MetLife Series 25053 Class 0	Investment Contract, 2,074 shares	\$ -	\$ 418,390
Mutual Funds:				
	DFA U.S. Vector Equity Portfolio Institutional Class	Mutual Fund, 5,275 shares	-	144,170
	DFA Global Equity Portfolio Institutional Class	Mutual Fund, 664 shares	-	22,618
	DFA U.S. Small Cap Portfolio Institutional Class	Mutual Fund, 11,289 shares	-	552,378
	DFA U.S. Large Company Portfolio Institutional Class	Mutual Fund, 2,530 shares	-	98,672
	Empower Real Estate Index Fund Institutional Class	Mutual Fund, 2,116 shares	-	17,481
	PGIM Jennison Mid-Cap Growth Fund - Class R6	Mutual Fund, 28,020 shares	-	638,877
	Schwab S&P 500 Index Fund	Mutual Fund, 8,119 shares	-	732,904
	Nuveen Large Cap Growth Index Fund R6 Class	Mutual Fund, 37,339 shares	-	2,500,608
	Vanguard Explorer Fund Admiral Shares	Mutual Fund, 1,142 shares	-	122,045
	Vanguard Small Cap Value Index Fund Admiral Shares	Mutual Fund, 916 shares	-	78,057
	Vanguard Strategic Equity Fund Investor Shares	Mutual Fund, 4,519 shares	-	163,321
	Vanguard Value Index Fund Admiral Shares	Mutual Fund, 21,050 shares	-	1,390,170
	Fidelity Global ex US Index Fund	Mutual Fund, 861 shares	-	40,946
	American Funds New World Fund Class R-6	Mutual Fund, 1,773 shares	-	136,540
	Vanguard International Growth Fund Admiral Shares	Mutual Fund, 2,557 shares	-	259,745
	Vanguard Developed Markets Index Fund Admiral Shares	Mutual Fund, 2,078 shares	-	31,931
	Macquarie Extended Duration Bond Fund Class R6	Mutual Fund, 1,992 shares	-	27,741
	PIMCO Income Fund Institutional Class	Mutual Fund, 15,127 shares	-	159,140
	Vanguard Intermediate-Term Bond Index Fund Admiral Shares	Mutual Fund, 13,132 shares	-	133,031
	Vanguard Inflation-Protected Securities Fund Admiral Shares	Mutual Fund, 954 shares	-	21,498

The cost of participant-directed investments is not required to be disclosed.

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Supplemental Schedule
December 31, 2024**

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

Employer Identification Number: 03-0390608
Plan Number: 001
Form: 5500

(a)	Identity of Issue Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
Mutual Funds:				
	Vanguard High-Yield Corporate Fund Admiral Shares	Mutual Fund, 18,264 shares	-	\$ 98,996
	Vanguard GNMA Fund Admiral Shares	Mutual Fund, 2,994 shares	-	27,306
	Dimensional Retirement Income Fund Institutional Class	Mutual Fund, 22 shares	-	258
	Dimensional 2065 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 7,049 shares	-	104,267
	Dimensional 2060 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 34,588 shares	-	678,275
	Dimensional 2055 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 29,482 shares	-	574,605
	Dimensional 2050 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 27,113 shares	-	516,248
	Dimensional 2045 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 40,404 shares	-	746,276
	Dimensional 2040 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 52,366 shares	-	822,681
	Dimensional 2035 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 41,005 shares	-	549,069
	Dimensional 2030 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 53,406 shares	-	628,591
	Dimensional 2025 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 14,464 shares	-	157,085
	Dimensional 2020 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 3,959 shares	-	42,767
	Dimensional 2015 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 1,164 shares	-	12,652
	Fidelity Multi-Asset Index Fund	Mutual Fund, 5,169 shares	-	298,549
	Empower Conservative Profile Fund Institutional Class	Mutual Fund, 2,354 shares	-	22,841
	Nuveen Lifecycle Index 2040 Fund R6 Class	Mutual Fund, 1,270 shares	-	37,207
	Vanguard Balanced Index Fund Admiral Shares	Mutual Fund, 9,791 shares	-	474,681
	Vanguard Wellesley Income Admiral Shares	Mutual Fund, 539 shares	-	32,356
	Vanguard Tax-Managed Balanced Admiral Shares	Mutual Fund, 919 shares	-	41,589
	Total Mutual Funds		<u>\$ -</u>	<u>\$ 13,138,172</u>
	Notes Receivable From Participants	4.25% to 9.5%	<u>\$ -</u>	<u>\$ 298,430</u>

The cost of participant-directed investments is not required to be disclosed.

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust**

**Financial Statements and Supplemental Schedule
Year Ended December 31, 2024**



BRYANS & GRAMUGLIA
CPAs, LLC

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
December 31, 2024

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Independent Auditors' Report

To the Trustees of
Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust

Opinion

We have audited the accompanying financial statements of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but it 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 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 Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust's ability to continue as a going concern for a reasonable period of time.

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

Supplemental Schedule Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedule of assets (held at end of year) is presented for the 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 has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

Bryans & Gramuglia CPAs, LLC

Albany, New York
October 6, 2025

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Statements of Net Assets Available for Benefits
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments		
Mutual funds at fair value	\$ 13,138,172	\$ 10,036,155
Investment contract at contract value	418,390	458,661
Total Investments	<u>13,556,562</u>	<u>10,494,816</u>
Receivables:		
Notes receivable from participants	298,430	270,986
Participant contributions	106,109	75,664
Total Receivables	<u>404,539</u>	<u>346,650</u>
TOTAL ASSETS	13,961,101	10,841,466
LIABILITIES		
Accrued expenses	<u>8,500</u>	<u>8,500</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 13,952,601</u>	<u>\$ 10,832,966</u>

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Statements of Changes in Net Assets Available for Benefits
For the Years Ended December 31, 2024 and 2023**

	<u>2024</u>	<u>2023</u>
ADDITIONS		
Additions to net assets attributed to:		
Investment Income (Loss):		
Interest and dividends	\$ 442,024	\$ 277,603
Interest income on notes receivable from participants	21,429	12,113
Net appreciation (depreciation) in fair value of investments	1,305,410	1,399,371
Other income	-	13,011
Total Investment Income (Loss)	<u>1,768,863</u>	<u>1,702,098</u>
Contributions:		
Participant	2,385,410	1,994,060
Other (including rollovers)	155,556	5,765
Total Contributions	<u>2,540,966</u>	<u>1,999,825</u>
TOTAL ADDITIONS	<u>4,309,829</u>	<u>3,701,923</u>
DEDUCTIONS		
Deductions from net assets attributed to:		
Benefits paid to participants and beneficiaries	1,073,369	1,061,449
Corrective distributions	56,554	-
Certain deemed distributions of participant loans	1,428	-
Administrative expenses	58,843	51,700
TOTAL DEDUCTIONS	<u>1,190,194</u>	<u>1,113,149</u>
NET INCREASE (DECREASE)	3,119,635	2,588,774
NET ASSETS AVAILABLE FOR BENEFITS, Beginning of Year	<u>10,832,966</u>	<u>8,244,192</u>
NET ASSETS AVAILABLE FOR BENEFITS, End of Year	<u>\$ 13,952,601</u>	<u>\$ 10,832,966</u>

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023**

1. DESCRIPTION OF PLAN

The following description of the Quality Hearing Instruments LL 401(k) Profit Sharing Plan and Trust (the Plan), formerly known as BAINBRIDGE LLC 401(k) Profit Sharing Plan and Trust, provides only general information. Participants should refer to the plan document or summary plan description for a more complete description of the Plan's provisions.

General

The plan is a defined contribution plan that covers substantially all of the employees of Frasier Enterprises, a controlled group of limited liability companies detailed in the plan document (the Company). Employees become eligible to participate in the Plan's elective deferrals and receive an allocation of qualified non-elective contributions after attaining age 21 and completing two consecutive months of eligible service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions

Participant

For each plan year, eligible participants may elect to contribute to the Plan an amount up to 25% of their earnings, as defined in the Plan. Participants may also contribute amounts representing distributions from other qualified defined benefit plans, defined contribution plans or 403(b) plans.

Employer

The Company may contribute a discretionary qualified non-elective contribution in the ratio that each qualifying participant's compensation for the plan year bears to the total compensation of all qualifying participants for the plan year. There were no employer discretionary qualified non-elective contributions for the years ended December 31, 2024 and 2023.

Participants Accounts

Each participant's account is credited with the participant's contributions and allocations of (a) the Company's contributions and (b) Plan earnings, and is charged with any investment or administrative fees. Allocations are based on participant earnings or account balances as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

1. DESCRIPTION OF PLAN

Participants Accounts

Participants may direct the investment of their account balances into various investment options offered by the Plan. Currently, the Plan offers forty mutual funds and an investment contract as investment options for participants.

Vesting

Participants are immediately and fully vested in their contributions plus actual earnings thereon. Vesting in the Company's qualified non-elective contributions is based on years of service. A participant becomes 100% vested after six years of credited service.

Notes Receivable from Participants

Participants may borrow from their accounts up to a maximum equal to the lesser of \$50,000 or 50% of their account balance. The loans are secured by the balance in the participant's account and bear interest at rates that are commensurate with rates charged by other lenders on similar loans. Loan repayments are made ratably through payroll deductions over a period not to exceed five years, unless the loans were used to purchase a primary residence, in which case the loan term may exceed five years.

Plan Benefits

Upon termination of employment due to death, disability, retirement, or other separation, participants or their beneficiary may elect to receive an amount equal to the value of the participant's vested interest in his or her account in a lump sum payment. Additionally, under certain circumstances of financial hardship, the participant is allowed to withdraw funds from the Plan.

Corrective Distributions

The Plan is required by ERISA to pass the Actual Deferral Percentage Test (ADP) and the Actual Contribution Percentage Test (ACP). These tests provide a limit on the amount that certain benefits provided under the Plan to highly compensated employees may exceed the benefits provided to non-highly compensated employees. If the Plan is determined not to be in compliance, corrective distributions are made in the following year when testing is completed and the amount required to be distributed is known. These corrective distributions are paid back to the participants within 12 months and are subject to tax.

Administrative Expenses

Expenses associated with the administration of the Plan are to be deducted directly from the participant's account in the subsequent year based on the plan document. For the years ended December 31, 2024 and 2023, the expenses paid by the Plan were \$8,500. The plan has recorded an accrued expense for accumulated administrative expenses in the amount of \$8,500 as of December 31, 2024 and 2023, respectively.

1. DESCRIPTION OF PLAN

Forfeited Accounts

If a participant's employment is terminated, the non-vested portion of the participant's account balance shall become forfeiture in accordance with the provisions of the Plan and shall be applied to reduce future employer contributions. At December 31, 2024 and 2023, there were no forfeited non-vested accounts.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for that portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Date of Management's Review

Subsequent events were evaluated through October 6, 2025, which is the date the financial statements were available to be issued.

Use of Estimates

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balances plus any accrued unpaid interest. Interest income is recorded on the accrual basis. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2024 and 2023, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the plan document.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Investment Valuation and Income Recognition

The Plan's investments in mutual funds are stated at fair value, except for fully benefit-responsive investment contracts, which are reported at contract value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Investment Committee determines the Plan's valuation policies. See Note 3 for discussions of fair value measurements.

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

Payment of Benefits

Benefits are recorded when paid.

Risks and Uncertainties

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

Parties-in-Interest

The following organizations are considered parties-in-interest based upon their relationship and services they provide to the Plan:

Quality Hearing Instruments LLC – Plan Sponsor
PayChex, Inc. – Third Party Administrator
Mid Atlantic Trust Company – Custodian of Plan Assets
CFM Advisors – Plan Advisors
Bryans & Gramuglia CPAs, LLC – Plan Audit Firm

For the years ended December 31, 2024 and 2023, there were no prohibited transactions between the Plan and the parties-in-interest.

Quality Hearing Instruments LL
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December 31, 2024 and 2023

3. FAIR VALUE MEASUREMENTS

The fair value measurement accounting literature establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level 2 inputs consist of observable inputs other than quoted prices for identical assets (Level 1). Level 3 inputs are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. Level 2 inputs are used for investments for which Level 1 inputs were not available. Level 3 inputs would only be used if Level 1 or Level 2 inputs were not available. There are no Plan assets requiring the use of Level 2 or Level 3 inputs for the periods presented.

Level 1 Fair Value Measurements

The fair value of mutual funds is based on quoted net asset values of the shares as reported by the fund. The mutual funds held by the Plan are open-end mutual funds registered with the U.S. Securities and Exchange Commission. The funds must publish their daily net asset value and transact at that price. The mutual funds held by the Plan are considered to be actively traded.

The following tables set forth, by level within the fair value hierarchy, the Plan's investments at fair value as of December 31, 2024 and 2023:

	<u>Fair Value</u>	Fair Value Measurements at the End of the Reporting Period Using: Quoted Prices in Active Markets for Identical Assets (Level 1)
<u>December 31, 2024</u>		
Mutual Funds	<u>\$ 13,138,172</u>	<u>\$ 13,138,172</u>
<u>December 31, 2023</u>		
Mutual Funds	<u>\$ 10,036,155</u>	<u>\$ 10,036,155</u>

Gains and losses (realized and unrealized) included in changes in net assets available for benefits for the years ended December 31, 2024 and 2023 are reported in net appreciation (depreciation) in fair value of investments.

The Plan's policy is to recognize transfers between Levels 1 and 2 and into and out of Level 3 as of the date of the event or change in circumstances that caused the transfer. For the years ended December 31, 2024 and 2023, there were no transfers between Levels 1, 2 and 3.

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December 31, 2024 and 2023

4. INVESTMENT CONTRACT WITH INSURANCE COMPANY

The Plan has an investment contract with Reliance Trust Company. MetLife administers the contract. MetLife maintains the contributions in the Reliance Trust Company Stable Value Fund Collective Investment Trust, Series 25053. The account is credited with earnings on the underlying investments and charged for Plan withdrawals and administrative expenses. This investment contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed by the Plan. The contract is included in the financial statements at contract value as reported to the Plan by Reliance Trust Company and MetLife. Contract value represents contributions made under the contract, plus earnings, less withdrawals and administrative expenses. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

As described in Note 2, because the guaranteed investment contract is fully benefit-responsive, contract value is the relevant measurement attribute for the portion of the net assets available for benefits attributable to the guaranteed investment contract.

Certain events limit the Plan's ability to transact at contract value with Reliance Trust Company. Such events include the following: (a) amendments to the plan documents (including complete or partial plan termination or merger with another plan), (b) changes to the plan's prohibition on competing investment options or deletion of equity wash provisions, (c) bankruptcy of the plan sponsor or other plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the plan, or (d) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under the Employee Retirement Income Security Act of 1974. The Plan administrator does not believe that any events that would limit the Plan's ability to transact at contract value with Plan participants are probable of occurring.

The investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

There are no reserves against contract value for credit risk of the contract issuer or otherwise.

Average yields:	
Based on actual earnings	0.88%
Based on interest rate credited to participants	2.93%

5. PLAN TERMINATION

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

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Notes to Financial Statements
December 31, 2024 and 2023**

6. TAX STATUS

The Internal Revenue Service ruled on March 31, 2008 that the Prototype Standardized Profit Sharing Plan with CODA (the prototype plan of PayChex, Inc. upon which the Plan is based) qualifies under Section 401(a) of the Internal Revenue Code (IRC) and the related trust is, therefore, not subject to tax under present income tax law. The Plan is required to operate in conformity with the IRC to maintain its qualification. The Plan administrator is not aware of any course of action or series of events that have occurred that might adversely affect the Plan's qualified status.

The Plan administrator had analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2021.

7. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The reconciliation of the financial statements to the Form 5500 for the year ended December 31, 2024 is as follows:

	<u>Financial Statements</u>	<u>Form 5500</u>	<u>Difference</u>
Receivables - participant contributions	\$ <u>106,109</u>	\$ <u>-</u>	\$ <u>106,109</u> (1)
Accrued expenses	\$ <u>8,500</u>	\$ <u>-</u>	\$ <u>8,500</u> (1)
Participant contributions	\$ <u>2,385,410</u>	\$ <u>2,354,965</u>	\$ <u>30,445</u> (1)

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Notes to Financial Statements
December 31, 2024 and 2023

7. RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The reconciliation of the financial statements to the Form 5500 for the year ended December 31, 2023 is as follows:

	<u>Financial Statements</u>	<u>Form 5500</u>	<u>Difference</u>
Receivables - participant contributions	\$ <u>75,664</u>	\$ <u>-</u>	\$ <u>75,664</u> (1)
Accrued expenses	\$ <u>8,500</u>	\$ <u>-</u>	\$ <u>8,500</u> (1)
Participant contributions	\$ <u>1,994,060</u>	\$ <u>1,982,753</u>	\$ <u>11,307</u> (1)
Other income	\$ <u>13,011</u>	\$ <u>-</u>	\$ <u>13,011</u> (1)
Corrective distributions	\$ <u>-</u>	\$ <u>69,706</u>	\$ <u>(69,706)</u> (1)

(1) The differences are the result of the Form 5500 being prepared on the cash basis of accounting and the financial statements being prepared on the accrual basis of accounting for the years ended December 31, 2024 and 2023.

Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Supplemental Schedule
December 31, 2024

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

Employer Identification Number: 03-0390608
Plan Number: 001
Form: 5500

(a)	Identity of Issue Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
Investment Contracts:				
	Reliance Trust Stable Value Fd - MetLife Series 25053 Class 0	Investment Contract, 2,074 shares	\$ -	\$ 418,390
Mutual Funds:				
	DFA U.S. Vector Equity Portfolio Institutional Class	Mutual Fund, 5,275 shares	-	144,170
	DFA Global Equity Portfolio Institutional Class	Mutual Fund, 664 shares	-	22,618
	DFA U.S. Small Cap Portfolio Institutional Class	Mutual Fund, 11,289 shares	-	552,378
	DFA U.S. Large Company Portfolio Institutional Class	Mutual Fund, 2,530 shares	-	98,672
	Empower Real Estate Index Fund Institutional Class	Mutual Fund, 2,116 shares	-	17,481
	PGIM Jennison Mid-Cap Growth Fund - Class R6	Mutual Fund, 28,020 shares	-	638,877
	Schwab S&P 500 Index Fund	Mutual Fund, 8,119 shares	-	732,904
	Nuveen Large Cap Growth Index Fund R6 Class	Mutual Fund, 37,339 shares	-	2,500,608
	Vanguard Explorer Fund Admiral Shares	Mutual Fund, 1,142 shares	-	122,045
	Vanguard Small Cap Value Index Fund Admiral Shares	Mutual Fund, 916 shares	-	78,057
	Vanguard Strategic Equity Fund Investor Shares	Mutual Fund, 4,519 shares	-	163,321
	Vanguard Value Index Fund Admiral Shares	Mutual Fund, 21,050 shares	-	1,390,170
	Fidelity Global ex US Index Fund	Mutual Fund, 861 shares	-	40,946
	American Funds New World Fund Class R-6	Mutual Fund, 1,773 shares	-	136,540
	Vanguard International Growth Fund Admiral Shares	Mutual Fund, 2,557 shares	-	259,745
	Vanguard Developed Markets Index Fund Admiral Shares	Mutual Fund, 2,078 shares	-	31,931
	Macquarie Extended Duration Bond Fund Class R6	Mutual Fund, 1,992 shares	-	27,741
	PIMCO Income Fund Institutional Class	Mutual Fund, 15,127 shares	-	159,140
	Vanguard Intermediate-Term Bond Index Fund Admiral Shares	Mutual Fund, 13,132 shares	-	133,031
	Vanguard Inflation-Protected Securities Fund Admiral Shares	Mutual Fund, 954 shares	-	21,498

The cost of participant-directed investments is not required to be disclosed.

**Quality Hearing Instruments LL
401(k) Profit Sharing Plan and Trust
Supplemental Schedule
December 31, 2024**

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

Employer Identification Number: 03-0390608
Plan Number: 001
Form: 5500

(a)	Identity of Issue Borrower, Lessor, or Similar Party (b)	Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value (c)	Cost (d)	Current Value (e)
Mutual Funds:				
	Vanguard High-Yield Corporate Fund Admiral Shares	Mutual Fund, 18,264 shares	-	\$ 98,996
	Vanguard GNMA Fund Admiral Shares	Mutual Fund, 2,994 shares	-	27,306
	Dimensional Retirement Income Fund Institutional Class	Mutual Fund, 22 shares	-	258
	Dimensional 2065 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 7,049 shares	-	104,267
	Dimensional 2060 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 34,588 shares	-	678,275
	Dimensional 2055 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 29,482 shares	-	574,605
	Dimensional 2050 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 27,113 shares	-	516,248
	Dimensional 2045 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 40,404 shares	-	746,276
	Dimensional 2040 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 52,366 shares	-	822,681
	Dimensional 2035 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 41,005 shares	-	549,069
	Dimensional 2030 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 53,406 shares	-	628,591
	Dimensional 2025 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 14,464 shares	-	157,085
	Dimensional 2020 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 3,959 shares	-	42,767
	Dimensional 2015 Target Date Retirement Income Fund Institutional Class	Mutual Fund, 1,164 shares	-	12,652
	Fidelity Multi-Asset Index Fund	Mutual Fund, 5,169 shares	-	298,549
	Empower Conservative Profile Fund Institutional Class	Mutual Fund, 2,354 shares	-	22,841
	Nuveen Lifecycle Index 2040 Fund R6 Class	Mutual Fund, 1,270 shares	-	37,207
	Vanguard Balanced Index Fund Admiral Shares	Mutual Fund, 9,791 shares	-	474,681
	Vanguard Wellesley Income Admiral Shares	Mutual Fund, 539 shares	-	32,356
	Vanguard Tax-Managed Balanced Admiral Shares	Mutual Fund, 919 shares	-	41,589
	Total Mutual Funds		<u>\$ -</u>	<u>\$ 13,138,172</u>
	Notes Receivable From Participants	4.25% to 9.5%	<u>\$ -</u>	<u>\$ 298,430</u>

The cost of participant-directed investments is not required to be disclosed.