

Form 5500 Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Annual Return/Report of Employee Benefit Plan This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code). ▶ Complete all entries in accordance with the instructions to the Form 5500.	OMB Nos. 1210-0110 1210-0089 2024 This Form is Open to Public Inspection
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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) M
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
1a	Name of plan ASHLAND INC. MASTER TRUST
1b	Three-digit plan number (PN) ▶ 030
1c	Effective date of plan
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) ASHLAND INC. 500 HERCULES ROAD BUILDING 8145 WILMINGTON, DE 19808
2b	Employer Identification Number (EIN) 93-6421281
2c	Plan Sponsor's telephone number 844-592-5322
2d	Business code (see instructions)

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			
	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	Filed with authorized/valid electronic signature.	10/08/2025	DENISE BRADY
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ Same as Plan Sponsor	3b Administrator's EIN 3c Administrator's telephone number
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN
5 Total number of participants at the beginning of the plan year	5
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1) 6a(2) 6b 6c 6d 6e 6f 6g(1) 6g(2) 6h
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 ASHLAND INC. MASTER TRUST	B Three-digit plan number (PN) ▶	030
C Plan sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.	D Employer Identification Number (EIN) 93-6421281	

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
METROPOLITAN TOWER LIFE INSURANCE COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-3114906	97136	GAC 38059	2073	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☒ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	55520087
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c Additions: (1) Contributions deposited during the year	7c(1)		
	7c(2)		
	7c(3)	944148	
	7c(4)		
	7c(5)		

(6) Total additions	7c(6)	944148
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d Total of balance and additions (add lines 7b and 7c(6))	7d	56464235
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	8219754	
(2) Administration charge made by carrier	7e(2)		
(3) Transferred to separate account	7e(3)		
(4) Other (specify below)	7e(4)		

(5) Total deductions	7e(5)	8219754
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	48244481
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
 b ☐ Dental
 c ☐ Vision
 d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
 f ☐ Long-term disability
 g ☐ Supplemental unemployment
 h ☐ Prescription drug
i ☐ Stop loss (large deductible)
 j ☐ HMO contract
 k ☐ PPO contract
 l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 ASHLAND INC. MASTER TRUST	B Three-digit plan number (PN) ▶ 030
C Plan sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.	D Employer Identification Number (EIN) 93-6421281

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
THE PRUDENTIAL INSURANCE COMPANY OF AMERICA

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
22-1211670	68241	064234	2073	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☒ other ▶ **GENERAL ACCOUNT**

b Balance at the end of the previous year	7b	55275905
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c Additions: (1) Contributions deposited during the year	7c(1)		
	7c(2)		
	7c(3)	900674	
	7c(4)		
	7c(5)		

▶

(6) Total additions	7c(6)	900674
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d Total of balance and additions (add lines 7b and 7c(6))	7d	56176579
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year (2) Administration charge made by carrier	7e(1)		
	7e(2)		
	7e(3)		
	7e(4)	8181381	

(3) Transferred to separate account

(4) Other (specify below)

▶ **CASH**

(5) Total deductions	7e(5)	8181381
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	47995198
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Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	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 ASHLAND INC. MASTER TRUST	B Three-digit plan number (PN) ▶ 030
C Plan sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.	D Employer Identification Number (EIN) 93-6421281

Part I	Information Concerning Insurance Contract Coverage, Fees, and Commissions	Provide information for each contract on a separate Schedule A. Individual contracts grouped as a unit in Parts II and III can be reported on a single Schedule A.
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1 Coverage Information:

(a) Name of insurance carrier
VOYA RETIREMENT INSURANCE AND ANNUITY COMPANY

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
71-0294706	86509	060108	2073	01/01/2024	12/31/2024

2 Insurance fee and commission information. Enter the total fees and total commissions paid. List in line 3 the agents, brokers, and other persons in descending order of the amount paid.

(a) Total amount of commissions paid	(b) Total amount of fees paid

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

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	(c) Amount	(d) Purpose	

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	(c) Amount	(d) Purpose	

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	(c) Amount	(d) Purpose	

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	

6 Contracts With Allocated Funds:

a State the basis of premium rates ▶

b Premiums paid to carrier **6b**

c Premiums due but unpaid at the end of the year **6c**

d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. **6d**
Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity
(3) ☐ other (specify) ▶

f If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐

7 Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)

a Type of contract: (1) ☐ deposit administration (2) ☐ immediate participation guarantee
(3) ☐ guaranteed investment (4) ☐ other ▶

b Balance at the end of the previous year	7b	56316124
c Additions: (1) Contributions deposited during the year (2) Dividends and credits..... (3) Interest credited during the year..... (4) Transferred from separate account (5) Other (specify below)..... ▶	7c(1)	
	7c(2)	
	7c(3)	966669
	7c(4)	
	7c(5)	
(6) Total additions	7c(6)	966669
d Total of balance and additions (add lines 7b and 7c(6))	7d	57282793
e Deductions:		
(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	8338866
(2) Administration charge made by carrier.....	7e(2)	
(3) Transferred to separate account	7e(3)	
(4) Other (specify below)..... ▶	7e(4)	
(5) Total deductions	7e(5)	8338866
f Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f	48943927

Part III Welfare Benefit Contract Information

If more than one contract covers the same group of employees of the same employer(s) or members of the same employee organizations(s), the information may be combined for reporting purposes if such contracts are experience-rated as a unit. Where contracts cover individual employees, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

8 Benefit and contract type (check all applicable boxes)

- a** ☐ Health (other than dental or vision)
b ☐ Dental
c ☐ Vision
d ☐ Life insurance
e ☐ Temporary disability (accident and sickness)
f ☐ Long-term disability
g ☐ Supplemental unemployment
h ☐ Prescription drug
i ☐ Stop loss (large deductible)
j ☐ HMO contract
k ☐ PPO contract
l ☐ Indemnity contract
m ☐ Other (specify) ▶

9 Experience-rated contracts:

a Premiums: (1) Amount received	9a(1)		
(2) Increase (decrease) in amount due but unpaid	9a(2)		
(3) Increase (decrease) in unearned premium reserve	9a(3)		
(4) Earned ((1) + (2) - (3))		9a(4)	0
b Benefit charges (1) Claims paid	9b(1)		
(2) Increase (decrease) in claim reserves	9b(2)		
(3) Incurred claims (add (1) and (2))		9b(3)	0
(4) Claims charged		9b(4)	
c Remainder of premium: (1) Retention charges (on an accrual basis) --			
(A) Commissions	9c(1)(A)		
(B) Administrative service or other fees	9c(1)(B)		
(C) Other specific acquisition costs	9c(1)(C)		
(D) Other expenses	9c(1)(D)		
(E) Taxes	9c(1)(E)		
(F) Charges for risks or other contingencies	9c(1)(F)		
(G) Other retention charges	9c(1)(G)		
(H) Total retention		9c(1)(H)	0
(2) Dividends or retroactive rate refunds. (These amounts were ☐ paid in cash, or ☐ credited.)		9c(2)	
d Status of policyholder reserves at end of year: (1) Amount held to provide benefits after retirement		9d(1)	
(2) Claim reserves		9d(2)	
(3) Other reserves		9d(3)	
e Dividends or retroactive rate refunds due. (Do not include amount entered in line 9c(2).)		9e	

10 Nonexperience-rated contracts:

a Total premiums or subscription charges paid to carrier	10a	
b If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, other than reported in Part I, line 2 above, report amount. Specify nature of costs.	10b	

Part IV Provision of Information

11 Did the insurance company fail to provide any information necessary to complete Schedule A? ☐ Yes ☒ No

12 If the answer to line 11 is "Yes," specify the information not provided. ▶

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

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

A Name of plan ASHLAND INC. MASTER TRUST	B Three-digit plan number (PN) ▶ 030
C Plan sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.	D Employer Identification Number (EIN) 93-6421281

Part I

Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

- a Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions)..... ☒ Yes ☐ No
- b If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

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

(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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

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

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MARSICO FOCUS 235 WEST GALENA ST MILWAUKEE, WI 53212	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EVENTIDE BALANCED FD CL N 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMG YACHTMAN FD I 600 STEAMBOAT RD STE 300 GREENWICH, CT 06830	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FS MULTI STRATEGY ALTERNATIVES FD 1290 BROADWAY ST STE 1100 DENVER, CO 80203	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COLUMBIA OVERSEAS 19765N278D CL A 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FIRST EAGLE GLOBAL CL I 1345 AVE OF THE AMERICAS 48TH FLR NEW YORK, NY 10105	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG GLOBAL EQUITY INDEX STRATEGY C 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG MEEDER TACTICAL STRATEGY FD R 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG JP MORGAN TACTICMODERATE STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VERSUS CAPT REAL ESTATE FD 5555 DTC PARKWAY STE 330 GREENWOOD VILLAGE, CO 80111	0.20%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
APPLIED FIN EXPLORERFD INVT 8730 STONY POINT PKWY STE 205 RICHMOND, VA 23235	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GQG PARTNERS US QULTSELECT EQUITY 1 FREEDOM VALLEY DR OAKS, PA 19456	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COLUMBIA SELIGMAN TECH AND INFO CL 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FMI INTERNATIONAL 777 EAST WISCONSIN AVE MILWAUKEE, WI 53202	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
EVENTIDE DIVIDEND GROWTH FD CL N 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.40%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
GOLDMAN SACHS RISING DIVIDEND GROW 71 S. WACKER DR 4TH FL CHICAGO, IL 60606	0.12%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS HENDERSON GLBLEQUITY INC T 151 DETROIT ST. DENVER, CO 80206	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS CHINA SMCOMPANIES INVES 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS ASIA GROWTH INST L 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PARNASSUS CORE EQUITY INVT 1 MARKET ST STEUART TOWER STE 1600 SAN FRANCISCO, CA 94105	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BNY MELLON TECHNOLOGY GROWTH A 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HENNESSY CORNERSTONEGROWTH INV CL 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
KINETICS PARADIGM FD 470 PARK AVE SOUTH NEW YORK, NY 10016	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MSIF GLOBAL INSIGHT PORT CL A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EVENTIDE HEALTHCARE AND LIFE SCIEN 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VICTORY NASDAQ 100 INDEX FD CL A 4900 TIEDEMAN RD 4TH FL BROOKLYN, OH 44114	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VIRTUS ZEVENBERGEN INNOVATIVE GR S 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON PARTNERS FD 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON REAL ESTATE FD RETAIL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ISHARES RUSSELL 2000 SM CAP IDX I 40 EAST 52ND ST NEW YORK, NY 10022	0.30%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
CALAMOS PHINEUS LONG SHORT CL I 2020 CALAMOS COURT NAPERVILLE, IL 60563	0.08%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DIAMOND HILL SM MID CAP FD I 325 JOHN H MCCONNELL BLVD STE 200 COLUMBUS, OH 43215	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
FIRST EAGLE SM CAP OPPORTUNITY C 1345 AVE OF THE AMERICAS 48TH FLR NEW YORK, NY 10105	0.15%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FIRST EAGLE GOLD FD CL I 1345 AVE OF THE AMERICAS 48TH FLR NEW YORK, NY 10105	0.08%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JPMORGAN MID CAP EQUITY FD CL 1111 POLARIS PARKWAY COLUMBUS, OH 43240	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MORGAN STANLEY GROWTH PORTFOLIO A 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OBERWEIS INTL OPPORTUNITIES INVSTR 3333 WARRENVILLE RD STE. 500 LISLE, IL 60532	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE DIVIDEND GROWTH 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE SPECT MOD GRWTH ALLOC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
THORNBURG INTL EQUITY FD CL I 2300 NORTH RIDGETOP RD SANTA FE, NM 87506	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TOUCHSTONE MID CAP FD CL Z 303 BROADWAY STE 1100 CINCINNATI, OH 45202-4203	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON GLOBAL ADVANTAGE FD RETAIL 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PIMCO INC FD CL A 1633 BROADWAY NEW YORK, NY 10019	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMG YACHTMAN FOCUSED N 600 STEAMBOAT RD STE 300 GREENWICH, CT 06830	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ARTISAN SM CAP FD INVT CL 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.39%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS HENDERSON EUROPEAN FOCUS CL 151 DETROIT ST. DENVER, CO 80206	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRIMECAP ODYSSEY AGGRESSIVE GRWTH 2020 E. FINANCIAL WAY STE 100 GLEN DORA, CA 91741	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EVENTIDE EXPONENTIALTECHNOLOGIES F 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BITCOIN STRATEGY FD INVT 7501 WISCONSIN AVE STE 1000 E TOWNE BETHESDA, MD 20814	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE FINANCIAL SERVICES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VIRTUS SILVANT FOCUSED GROWTH A 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BROWN ADVISORY WMC STRAT EUROPN EQ 777 E. WISCONSIN AVE 4TH FL MILWAUKEE, WI 53202	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
AMERICAN CAPT WORLD GRWTH & INC 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COLUMBIA FLEXIBLE CAPT INC A 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COMMONWEALTH REAL ESTATE SECURITIE 2 EASTON OVAL STE 300 COLUMBUS, OH 43219	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
HENNESSY GAS UTILITY INVT CL 7250 REDWOOD BLVD. STE 200 NOVATO, CA 94945	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LOOMIS SAYLES BOND INSTL 399 BOYLSTON ST 8TH FL BOSTON, MA 02116	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS INDIA FD 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG JANUS HENDERSON BALANCED STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG TACTICAL INC STRATEGY CL R 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
SEGALL BRYANT HAMILL PLUS BOND INS 370 17TH ST STE 5000 DENVER, CO 80202	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WASATCH GLOBAL OPPORTUNITIES INSTL 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ADVISORS PREFERRED QUANTIFIED STF 1445 RESEARCH BLVD STE 530 ROCKVILLE, MD 20850	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FULLERTHALER BEHV SM CAP GROWTH 411 BOREL AVE STE 300 SAN MATEO, CA 94402	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
COLUMBIA GLOBAL TECHGROWTH CL A 225 FRANKLIN ST BX25 10320 BOSTON, MA 02110	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
DWS SCIENCE AND TECHNOLOGY FD A 280 PARK AVE 9TH FLR NEW YORK, NY 10026	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
KINETICS SM CAP OPPORTUNITIES 470 PARK AVE SOUTH NEW YORK, NY 10016	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
INVESCO GLOBAL A 11 GREENWAY PLAZA STE 100 HOUSTON, TX 77046	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
ARTISAN GLOBAL UNCONSTRAINED ADVSR 875 E WISCONSIN AVE STE 800 MILWAUKEE, WI 53202	0.10%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BNY MELLON NATURAL RESOURCES A 144 GLENN CURTISS BLVD 8TH FL UNIONDALE, NY 11556	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK EQUITY & INC INVT CL 111 SOUTH WACKER DR. CHICAGO, IL 60606	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BRANDYWINEGLOBAL CORPORATE CREDIT 100 FOUNTAIN PARKWAY ST. PETERSBURG, FL 33716	0.10%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS EMERG MRKTSSM COMPANIES I 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CREDIT SUISSE STRATEGIC INC A ONE MADISON AVE 10TH FL NEW YORK, NY 10010	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MATTHEWS ASIAN GROWTH & INC FD 4 EMBARCADERO CENTER STE 550 SAN FRANCISCO, CA 94111	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG BNY MELLON DIVERSIFIER STRAT R 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG ACTIVE CORE BOND STRATEGY FD 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE BLUE CHIP GROWTH INC 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
VAN ECK INTERNATN L INVTS GOLD 666 3RD AVE 9TH FL NEW YORK, NY 10017	0.38%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
VIRTUS DUFF & PHELPSSELECT MLP ENE 100 SUMMIT LAKE DR 201 GREENFIELD, MA 01301	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
WASATCH ULT GROWTH 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.40%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
OAKMARK FD INVT CL 111 SOUTH WACKER DR. CHICAGO, IL 60606	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS HENDERSON GL LIFE SCIENCES T 151 DETROIT ST. DENVER, CO 80206	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NATIONWIDE GQG US QUALITY EQUITY E 1000 CONTINENTAL DR STE 400 COLUMBUS, OH 43215	0.10%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
BARON ASSET 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
CARILLON SCOUT MID CAP FD CL I P. O. BOX 33022 ST PETERSBURG, FL 33733-8022	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
FRANKLIN UTILITIES CL A 100 FOUNTAIN PARKWAY ST. PETERSBURG, FL 33716	\$16.00

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
JANUS HENDERSON GLOB TECH & INNOV 151 DETROIT ST. DENVER, CO 80206	0.35%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
LORD ABBETT BOND DEBENTURE CL I 90 HUDSON ST 10TH FL JERSEY CITY, NJ 07302	0.10%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
NYLI MACKAY CONVERTIBLE CL A 30 HUDSON ST 23RD FL ARLINGTON, NJ 07032	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
MORGAN STANLEY GLOBAL OPPORTUNITY 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PFG BR TRGT ALLOCAT EQ STRATEGY FD 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN CENTURY EQUITY INC INV 4400 MAIN ST 1ST FL KANSAS CITY, MO 64111	0.35%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
KINETICS GLOBAL FDNO LOAD CL S 470 PARK AVE SOUTH NEW YORK, NY 10016	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
EVENTIDE GILEAD FD CL N 80 ARKAY STE 110 HAUPPAUGE, NY 11788	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
T ROWE PRICE HEALTH SCIENCES 4515 PAINTERS MILL RD OWINGS MILLS, MD 21117	0.15%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
SPROTT GOLD EQUITY FD INVT 200 BAY ST STE 2600 TORONTO, ON M5J 2J1 CA	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AMERICAN MUTUAL FDCL F1 3500 WISEMAN BLVD SAN ANTONIO, TX 78251-4321	0.37%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BARON GROWTH 767 5TH AVE 49TH FL NEW YORK, NY 10153	0.40%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
CALAMOS MARKET NEUTRAL INC CL I 2020 CALAMOS COURT NAPERVILLE, IL 60563	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COHEN & STEERS REAL ESTATE SECURIT 280 PARK AVE 10TH FL NEW YORK, NY 10017	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DWS LATIN AMERICA EQUITY FD A 280 PARK AVE 9TH FLR NEW YORK, NY 10026	0.40%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
DIAMOND HILL LRG CAP FD CL I 325 JOHN H MCCONNELL BLVD STE 200 COLUMBUS, OH 43215	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
GOLDMAN SACHS MLP ENERGY INFRSTCTR 71 S. WACKER DR 4TH FL CHICAGO, IL 60606	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
JOHN HANCOCK REGIONAL BANK CL A 601 CONGRESS ST. 9TH FL. BOSTON, MA 02210	0.40%	

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
MORGAN STANLEY GROWTH PORTFOLIO I 522 FIFTH AVE 4TH FL NEW YORK, NY 10036	0.15%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PFG SECTOR EQUITY BUS CYCLE STRAT 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
PRINCIPAL BLUE CHIP FD CL A 620 COOLIDGE DR STE 300 FOLSOM, CA 95630	0.40%

Part I Service Provider Information (continued)

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

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
VALUE LINE ASSET ALLOCATION INVEST 7 TIMES SQUARE STE 1606 NEW YORK, NY 10036	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
WASATCH SM CAP VALUE INSTITUTION 505 WAKARA WAY STE 300 SALT LAKE CITY, UT 84108	0.15%

(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) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration	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 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 ASHLAND INC. MASTER TRUST		B Three-digit plan number (PN) ▶ 030
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.		D Employer Identification Number (EIN) 93-6421281
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)		
a Name of MTIA, CCT, PSA, or 103-12 IE: FID CONTRA POOL CL A		
b Name of sponsor of entity listed in (a): FIDELITY MANAGEMENT TRUST COMPANY		
c EIN-PN 04-3022712-133	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 252629258
a Name of MTIA, CCT, PSA, or 103-12 IE: VG IS TOT BD MKT IDX		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 81-6321044-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 37763441
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2020		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083983-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40049375
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2035		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083977-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 89260699
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2065		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 82-6190443-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 773626
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2025		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083981-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 77031250
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2030		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083979-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 102835974
For Paperwork Reduction Act Notice, see the Instructions for Form 5500.		
Schedule D (Form 5500) 2024 v. 240311		

a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET INC		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083968-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 40945606
a Name of MTIA, CCT, PSA, or 103-12 IE: VANG IS EXT MKT IDX		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 81-6324211-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 76775836
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2055		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 27-6715074-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 16546781
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2060		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 45-3799212-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 7633449
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2040		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083975-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 53462928
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2050		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083969-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 39010214
a Name of MTIA, CCT, PSA, or 103-12 IE: VG IS TL INTL STK MK		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 81-6317280-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 11746132
a Name of MTIA, CCT, PSA, or 103-12 IE: VANG INST 500 IDX TR		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 81-6327546-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 205364220
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2070		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 88-6095930-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 663541
a Name of MTIA, CCT, PSA, or 103-12 IE: VANGUARD TARGET 2045		
b Name of sponsor of entity listed in (a): VANGUARD FIDUCIARY TRUST COMPANY		
c EIN-PN 90-6083973-001	d Entity code C	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 47336234

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name INTERNATIONAL SPECIALTY PRODUCTS INC. 401(K) PLAN**b** Name of plan sponsor INTERNATIONAL SPECIALTY PRODUCTS, INC.**c** EIN-PN 51-0376469-013**a** Plan name ASHLAND EMPLOYEE SAVINGS PLAN**b** Name of plan sponsor ASHLAND INC.**c** EIN-PN 81-2587835-010**a** Plan name ASHLAND UNION EMPLOYEE SAVINGS PLAN**b** Name of plan sponsor ASHLAND INC.**c** EIN-PN 81-2587835-020**a** Plan name PHARMACHEM LABORATORIES, INC. PROFIT SHARING PLAN**b** Name of plan sponsor PHARMACHEM LABORATORIES, INC.**c** EIN-PN 22-1625213-002**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN**a** Plan name**b** Name of plan sponsor**c** EIN-PN

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection
For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024		
A Name of plan ASHLAND INC. MASTER TRUST		B Three-digit plan number (PN) ▶ 030
C Plan sponsor's name as shown on line 2a of Form 5500 ASHLAND INC.		D Employer Identification Number (EIN) 93-6421281

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.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	707666	323713
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	4309180	2002933
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	33347	149340
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	0	0
(9) Value of interest in common/collective trusts	1c(9)	1052022649	1099828564
(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)	164521789	162677725
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	166803576	144970393
(15) Other.....	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities	1d(1)	51228793	38371169
(2) Employer real property	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	1439627000	1448323837
Liabilities			
g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness	1i	0	0
j Other liabilities	1j	0	0
k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	1439627000	1448323837

Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	0	
(B) Participants	2a(1)(B)	0	
(C) Others (including rollovers)	2a(1)(C)	0	
(2) Noncash contributions	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit)	2b(1)(A)	444462	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans	2b(1)(E)	0	
(F) Other	2b(1)(F)	2534174	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		2978636
(2) Dividends: (A) Preferred stock	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	918225	
(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	10625775	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		11544000
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	8400859	
(B) Aggregate carrying amount (see instructions)	2b(4)(B)	7848747	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		552112
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	-7261712	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		183342656
(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)		8046281
c Other income	2c		1835148
d Total income. Add all income amounts in column (b) and enter total	2d		201037121

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	0	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		0
i Administrative expenses:			
(1) Salaries and allowances	2i(1)	0	
(2) Contract administrator fees	2i(2)	0	
(3) Recordkeeping fees	2i(3)	0	
(4) IQPA audit fees	2i(4)	0	
(5) Investment advisory and investment management fees	2i(5)	445754	
(6) Bank or trust company trustee/custodial fees	2i(6)	0	
(7) Actuarial fees	2i(7)	0	
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)	0	
(10) Other trustee fees and expenses	2i(10)	0	
(11) Other expenses	2i(11)	49731	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		495485
j Total expenses. Add all expense amounts in column (b) and enter total	2j		495485

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		200541636
l Transfers of assets:			
(1) To this plan	2l(1)		44309509
(2) From this plan	2l(2)		236154308

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:

(2) EIN:

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.)			
4a			
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	
4b			
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	
4c			
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	
4d			
e Was this plan covered by a fidelity bond?			
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
4f			
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?			
4g			
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?			
4h			
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		
4i			
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	
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k			
l Has the plan failed to provide any benefit when due under the plan?			
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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.			
4n			

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 _____.

Ashland Inc. Master Trust

Employer Identification Number 20-0865835

Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost^	Current Value
Common Stock:				
*		Company Stock Fund		\$ 38,337,847
Shares of Registered Investment Companies:				
*	FID INTL DISCOVERY K	Registered Investment Company		23,806,987
	Self-directed brokerage accounts	Registered Investment Company		29,285,003
*	MGL SM CAP CORE R6	Registered Investment Company		1,997,512
*	VANG WINDSOR II ADM	Registered Investment Company		97,972,359
*	VANG INFL PROT INST	Registered Investment Company		9,615,864
Total Shares of Registered Investment Companies				162,677,725
Common Collective Trusts:				
*	VG IS TL INTL STK MK	Common Collective Trust		11,746,132
*	VANG INST 500 IDX TR	Common Collective Trust		205,364,221
*	VG IS TOT BD MKT IDX	Common Collective Trust		37,763,441
*	VANG IS EXT MKT IDX	Common Collective Trust		76,775,836
*	FID CONTRA POOL CL A	Common Collective Trust		252,629,259
*	VANGUARD TARGET 2020	Common Collective Trust		40,049,375
*	VANGUARD TARGET 2025	Common Collective Trust		77,031,250
*	VANGUARD TARGET 2030	Common Collective Trust		102,835,974
*	VANGUARD TARGET 2035	Common Collective Trust		89,260,699
*	VANGUARD TARGET 2040	Common Collective Trust		53,462,928
*	VANGUARD TARGET 2045	Common Collective Trust		47,336,234
*	VANGUARD TARGET 2050	Common Collective Trust		39,010,214
*	VANGUARD TARGET 2055	Common Collective Trust		16,546,781
*	VANGUARD TARGET 2060	Common Collective Trust		7,633,449
*	VANGUARD TARGET 2065	Common Collective Trust		773,626
*	VANGUARD TARGET 2070	Common Collective Trust		663,541
*	VANGUARD TARGET INC	Common Collective Trust		40,945,606
Total Common Collective Trusts				1,099,828,564
Money Market Funds:				
*				
	Cash Portfolio	Short-term Investment Fund		2,189,016
Stable Value Fund Investments:				
	SURA ASSET MANAGEMENT SR UNSEC 144A	Emerging Markets		18,069
	FED HOME LN MTGE GLBL NT (1.035MMM)	Government Related		159,361
	FED HOME LN BK BD (600MM)	Government Related		84,110
	FIN FUT US 5YR CBT 03/31/25	Government Related		730,126
	FIN FUT US 2YR CBT 03/31/25	Government Related		12,197,091
	FIN FUT US 10YR CBT 03/20/25	Government Related		(18,071)
	FIN FUT US ULTRA 10YR CBT 03/20/25	Government Related		(690,535)
	FIN FUT US ULTRA 30YR CBT 03/20/25	Government Related		(992,306)
	U S TREASURY BOND	Government Related		475,192
	U S TREASURY NOTE	Government Related		237,073
	U S TREASURY NOTE	Government Related		12,543,773
	TENN VALLEY AUTHORITY SR UNSEC	Government Related		48,236
	RFR USD SOFR/3.32826 09/03/24-7Y* CME	Government Related		1,801
	RFR USD SOFR/3.51042 09/03/24-4Y* LCH	Government Related		2,201
	RFR USD SOFR/3.51453 09/03/24-4Y* LCH	Government Related		2,327
	RFR USD SOFR/3.43091 09/03/24-7Y* LCH	Government Related		2,487
	RFR USD SOFR/3.30000 12/02/24-7Y* CME	Government Related		5,656
	RFR USD SOFR/3.30000 12/02/24-4Y* CME	Government Related		6,974
	RFR USD SOFR/3.83000 03/03/25-4Y* LCH	Government Related		4,451
	RFR USD SOFR/3.79000 03/03/25-7Y* LCH	Government Related		13,557
	RFR USD SOFR/3.71000 03/03/25-7Y* LCH	Government Related		2,807

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	RFR USD SOFR/3.74000 03/03/25-4Y* LCH	Government Related		6,681
	AES CORP/THE SR UNSEC	Invest. Grade Credit		37,136
	CONSUMERS ENERGY CO 1ST MTGE	Invest. Grade Credit		27,510
	ENI SPA SR UNSEC 144A	Invest. Grade Credit		98,628
	ENBRIDGE INC SR UNSEC	Invest. Grade Credit		48,975
	AMEREN MISSOURI SEC FU I SR SEC	Invest. Grade Credit		41,607
	CONSUMERS ENERGY CO 1ST MORTGAGE	Invest. Grade Credit		64,813
	BERKSHIRE HATHAWAY ENERG SR UNSEC	Invest. Grade Credit		2,869
	EMPIRE DISTRICT BONDCO SEC	Invest. Grade Credit		117,124
	FLORIDA POWER & LIGHT CO 1ST MTGE	Invest. Grade Credit		100,055
	NATIONAL RURAL UTIL COOP SR UNSEC	Invest. Grade Credit		65,148
	NSTAR ELECTRIC CO SR UNSEC	Invest. Grade Credit		65,271
	ONE GAS INC SR UNSEC	Invest. Grade Credit		33,484
	PACIFIC GAS & ELECTRIC SEC	Invest. Grade Credit		52,190
	PACIFIC GAS & ELECTRIC LIEN	Invest. Grade Credit		31,386
	PACIFIC GAS & ELECTRIC	Invest. Grade Credit		29,908
	PG&E RECOVERY FND LLC SR SEC	Invest. Grade Credit		73,365
	SOUTHERN CAL EDISON 1ST MTGE	Invest. Grade Credit		39,245
	SOUTHERN CAL EDISON 1ST MTGE	Invest. Grade Credit		129,676
	SWEPKO STORM RECOVERY FU SR UNSEC	Invest. Grade Credit		66,851
	TEXAS ELECTRIC MKT STABL SEC	Invest. Grade Credit		171,015
	VIRGINIA POWER FUEL SEC A1	Invest. Grade Credit		126,308
	VIRGINIA POWER FUEL SEC A2	Invest. Grade Credit		92,296
	WOODSIDE FINANCE LTD SR UNSEC 144A	Invest. Grade Credit		12,329
	WOODSIDE FINANCE LTD SR UNSEC	Invest. Grade Credit		35,146
	FACTSET RESEARCH SYSTEMS SMR	Invest. Grade Credit		8,156
	DELL INT LLC / EMC CORP	Invest. Grade Credit		21,627
	AMERICAN TOWER CORP SR UNSEC	Invest. Grade Credit		49,326
	COMCAST CORP SR UNSEC	Invest. Grade Credit		52,261
	META PLATFORMS INC SR UNSEC	Invest. Grade Credit		60,191
	FISERV INC SR UNSEC	Invest. Grade Credit		114,088
	T-MOBILE USA INC SR UNSEC	Invest. Grade Credit		46,490
	VERIZON COMMUNICATIONS SR UNSEC	Invest. Grade Credit		14,532
	COREBRIDGE GLOB FUNDING SR SEC 144A	Invest. Grade Credit		18,735
	COREBRIDGE GLOB FUNDING SR SEC 144A	Invest. Grade Credit		38,013
	AERCAP IRELAND CAP/GLOBA SR UNSEC	Invest. Grade Credit		8,948
	AERCAP IRELAND CAP/GLOBA SR UNSEC SMR	Invest. Grade Credit		84,900
	BANQUE FED CRED MUTUEL SR PREF 144A	Invest. Grade Credit		40,815
	BNP PARIBAS SR NON-PREFER 144A SOFR	Invest. Grade Credit		177,820
	BROOKFIELD FINANCE INC SR UNSEC	Invest. Grade Credit		19,636
	AMERICAN EXPRESS CO SR UNSEC	Invest. Grade Credit		110,497
	DEUTSCHE BANK NY SOFR	Invest. Grade Credit		53,842
	ATHENE GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		81,190
	BLACKSTONE HOLDINGS FINA SR UNSEC 144A	Invest. Grade Credit		41,128
	UBS GROUP AG SR UNSEC 144A SOFR	Invest. Grade Credit		107,826
	AVIATION CAPITAL GROUP SR UNSEC 144A	Invest. Grade Credit		14,689
	COREBRIDGE FINANCIAL INC SR UNSEC	Invest. Grade Credit		68,806
	UBS GROUP AG SR UNSEC 144A SOFR	Invest. Grade Credit		62,701
	BPCE SA SR PREF 144A	Invest. Grade Credit		31,467
	BPCE SA SR UNSEC 144A SOFR	Invest. Grade Credit		27,916
	BANCO SANTANDER SA SR NON PREF	Invest. Grade Credit		37,261
	CAPITAL ONE FINANCIAL CO SR UNSEC SOFR	Invest. Grade Credit		18,207
	BANK OF AMERICA CORP SR UNSEC TSFR3M	Invest. Grade Credit		35,999
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		113,914
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		108,545
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		52,825
	COOPERAT RABOBANK UA/NY SR PREF 3A2	Invest. Grade Credit		72,425
	BANK OF NOVA SCOTIA SR UNSEC SOFR	Invest. Grade Credit		51,174
	BANQUE FED CRED MUTUEL SR PREF 144A	Invest. Grade Credit		46,845
	DEUTSCHE BANK NY SR NON-PREF SOFR	Invest. Grade Credit		95,156
	FAIRFAX FINL HLDGS LTD SR UNSEC	Invest. Grade Credit		28,058
	BARCLAYS PLC SR UNSEC	Invest. Grade Credit		128,705
	BARCLAYS PLC SR UNSEC	Invest. Grade Credit		32,943

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	BARCLAYS PLC SOFRRATE	Invest. Grade Credit		82,625
	BRIGHTHSE FIN GLBL FUND	Invest. Grade Credit		93,151
	CHUBB INA HOLDINGS LLC SR UNSEC	Invest. Grade Credit		69,958
	CNO GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		18,808
	GA GLOBAL FUNDING TRUST SEC 144A	Invest. Grade Credit		59,432
	GLOBAL PAYMENTS INC SR UNSEC	Invest. Grade Credit		7,897
	GOLDMAN SACHS GROUP INC SR UNSEC SOFR	Invest. Grade Credit		86,699
	GOLDMAN SACHS GROUP INC SR UNSEC TSFR3M	Invest. Grade Credit		116,614
	GOLDMAN SACHS GROUP INC SOFR	Invest. Grade Credit		1,747
	GOLDMAN SACHS GROUP INC SOFR	Invest. Grade Credit		94,550
	GUARDIAN LIFE GLOB FUND SEC 144A	Invest. Grade Credit		76,153
	HCP INC SR UNSEC	Invest. Grade Credit		18,058
	HSBC HOLDINGS PLC SR UNSEC TSFR3M	Invest. Grade Credit		45,334
	HSBC HOLDINGS PLC SR UNSEC SOFR	Invest. Grade Credit		61,437
	HSBC HOLDINGS PLC SR UNSEC SOFR	Invest. Grade Credit		168,645
	ING GROEP NV SR UNSEC SOFR	Invest. Grade Credit		61,198
	INVITATION HOMES OP SR UNSEC	Invest. Grade Credit		5,911
	JPMORGAN CHASE & CO SR UNSEC TSFR3M	Invest. Grade Credit		77,154
	JPMORGAN CHASE & CO SR UNSEC SOFR	Invest. Grade Credit		85,089
	JPMORGAN CHASE & CO SR UNSEC SOFR	Invest. Grade Credit		184,647
	JPMORGAN CHASE & CO SR UNSEC SOFRRATE	Invest. Grade Credit		95,757
	JPMORGAN CHASE & CO SR UNSEC SOFRRATE	Invest. Grade Credit		84,514
	JACKSON NATL LIFE GLOBAL SEC 144A	Invest. Grade Credit		30,553
	LLOYDS BANKING GROUP PLC SR UNSEC	Invest. Grade Credit		69,346
	LLOYDS BANKING GROUP PLC SR UNSEC	Invest. Grade Credit		45,996
	MASSMUTUAL GLOBAL FUNDIN SEC 144A	Invest. Grade Credit		116,478
	MITSUBISHI UFJ FIN GRP SR UNSEC	Invest. Grade Credit		18,150
	MORGAN STANLEY SOFR SR UNSEC	Invest. Grade Credit		61,240
	MORGAN STANLEY SR UNSEC SOFR	Invest. Grade Credit		100,003
	FAIRFAX FINL HLDGS LTD SR UNSEC	Invest. Grade Credit		11,009
	MITSUBISHI UFJ FIN GRP SR UNSEC	Invest. Grade Credit		93,648
	MORGAN STANLEY SR UNSEC SOFR	Invest. Grade Credit		150,232
	MORGAN STANLEY SR UNSEC	Invest. Grade Credit		18,047
	MUTUAL OF OMAHA GLOBAL SEC 144A	Invest. Grade Credit		56,003
	NATWEST GROUP PLC SR UNSEC	Invest. Grade Credit		96,920
	NOMURA HOLDINGS INC SR UNSEC	Invest. Grade Credit		15,770
	NORTHWESTERN MUTUAL LIFE SEC 144A	Invest. Grade Credit		36,964
	PNC FINANCIAL SERVICES SR UNSEC SOFR	Invest. Grade Credit		60,523
	PACIFIC LIFE GF II SEC 144A	Invest. Grade Credit		21,279
	PACIFIC LIFE GF II SEC 144A	Invest. Grade Credit		45,596
	PHYSICIANS REALTY LP SR UNSEC	Invest. Grade Credit		12,788
	PROTECTIVE LIFE GLOBAL SEC 144A	Invest. Grade Credit		33,394
	LLOYDS BANKING GROUP PLC SR UNSEC	Invest. Grade Credit		72,752
	GOLDMAN SACHS GROUP INC SR UNSEC SOFR	Invest. Grade Credit		107,882
	COOPERATIEVE RABOBANK UA SR NONPREF 144A	Invest. Grade Credit		16,453
	REINSURANCE GRP OF AMER SR UNSEC	Invest. Grade Credit		5,465
	RGA GLOBAL FUNDING SEC 144A	Invest. Grade Credit		95,263
	RGA GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		37,470
	SANTANDER UK GROUP HLDGS SR UNSEC	Invest. Grade Credit		5,336
	SANTANDER UK GROUP HLDGS SR UNSEC SOFR	Invest. Grade Credit		17,586
	SANTANDER HOLDINGS USA SR UNSEC	Invest. Grade Credit		5,477
	SANTANDER HOLDINGS USA SR UNSEC	Invest. Grade Credit		17,927
	SANTANDER HOLDINGS USA SR UNSEC SOFR	Invest. Grade Credit		8,756
	SUMITOMO MITSUI FINL GRP SR UNSEC	Invest. Grade Credit		56,757
	UBS GROUP AG SR UNSEC 144A	Invest. Grade Credit		75,380
	HCA INC SR UNSEC	Invest. Grade Credit		35,534
	BAYER US FINANCE LLC SR UNSEC 144A	Invest. Grade Credit		116,692
	RELiance INC SR UNSEC	Invest. Grade Credit		7,889
	WRKCO INC SR UNSEC	Invest. Grade Credit		14,265
	AMER AIRLN 15-1 A PTT SEC	Invest. Grade Credit		17,595
	ADVENT HEALTH SYSTEM	Invest. Grade Credit		42,118
	ELEVANCE HEALTH INC SR UNSEC	Invest. Grade Credit		18,250
	EQUINIX INC SR UNSEC	Invest. Grade Credit		10,190

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	CORPORATE OFFICE PROP LP SR UNSEC	Invest. Grade Credit		11,139
	WELLTOWER INC SR UNSEC	Invest. Grade Credit		82,794
	JETBLUE 2019-1 CLASS AA EETC SEC	Invest. Grade Credit		40,748
	MARRIOTT INTERNATIONAL SR UNSEC	Invest. Grade Credit		13,678
	HYUNDAI CAPITAL AMERICA	Invest. Grade Credit		9,246
	NBN CO LTD SR UNSEC 144A	Invest. Grade Credit		17,668
	PROLOGIS TARGETED US SR UNSEC 144A	Invest. Grade Credit		63,504
	RTX CORP SR UNSEC	Invest. Grade Credit		56,410
	REALTY INCOME CORP	Invest. Grade Credit		12,012
	SUTTER HEALTH UNSEC	Invest. Grade Credit		44,971
	UNITED AIR 2019-1 A PTT	Invest. Grade Credit		19,961
	UNITED AIR 2020-1 A PTT EETC SEC	Invest. Grade Credit		22,321
	UNITED AIR 2019-2 AA EETC PTT	Invest. Grade Credit		5,118
	UNITED AIR 2019-2 A EETC PPT	Invest. Grade Credit		19,743
	FNMA PASS THRU 30YR #256022	Mortgage		48
	FNR 2020-77 DP WM50 WC3.3886	Mortgage		29,100
	FNR 2024-104 FA SOFR30A+105BP	Mortgage		36,776
	FNR 2019-33 FB SOFR30A+56.448BP	Mortgage		23,249
	FNMA PASS THRU 30YR #357595	Mortgage		2
	FNMA P-T DUS #AN5171	Mortgage		107,665
	FNMA P-T DUS #AN8717	Mortgage		45,626
	FNMA PASS THRU 30YR #828031	Mortgage		3
	FNMA PASS THRU 30YR #829245	Mortgage		205
	FNMA PASS THRU 30YR #842123	Mortgage		240
	FNMA PASS THRU 30YR #843342	Mortgage		56
	FNMA PASS THRU 30YR #848092	Mortgage		4
	FNMA PASS THRU 30YR #BN0761	Mortgage		2,652
	FNMA PASS THRU 15YR #FM3462	Mortgage		27,756
	FNMA PASS THRU 30YR #FM9482	Mortgage		153,875
	FNMA PASS THRU 15YR #FS8865	Mortgage		24,040
	FNMA PASS THRU 30YR #889610	Mortgage		160
	FNMA PASS THRU 30YR #985615	Mortgage		63
	FNMA PASS THRU 30YR #992254	Mortgage		306
	FNMA PASS THRU 30YR #AA2965	Mortgage		129
	FNMA PASS THRU 30YR #AB0532	Mortgage		54
	FNMA PASS THRU 30YR #AB8152	Mortgage		94
	FNMA PASS THRU 30YR #CB4800	Mortgage		727,140
	FNMA PASS THRU 30YR #MA3444	Mortgage		7,962
	FNMA PASS THRU 20YR #MA4632	Mortgage		89,556
	FNMA PASS THRU 20YR #MA4697	Mortgage		3,324
	FNMA PASS THRU 30YR #889584	Mortgage		146
	FNMA PASS THRU 15YR #MA3897	Mortgage		10,502
	FNMA PASS THRU 30YR #SD8298	Mortgage		141,740
	FHR 5042 CA WM33 WC5.8235	Mortgage		17,193
	FHLMC GOLD 30YR GNT #G0-8842	Mortgage		34,518
	FHLMC GOLD 30YR GNT #G0-8863	Mortgage		29,853
	FNMA PASS THRU 30YR #SD1610	Mortgage		124,058
	FNMA PASS THRU 30YR #SD8408	Mortgage		961,260
	FHLMC GOLD 30YR GNT #G0-8836	Mortgage		8,220
	FNMA PASS THRU 20YR #RB5175	Mortgage		22,723
	FNMA PASS THRU 30YR #SD8265	Mortgage		676,553
	FHLMC DUS #WN-2428	Mortgage		45,264
	FNMA PASS THRU 15YR #SB1240	Mortgage		16,175
	FHLMC DUS #WN-2427	Mortgage		105,888
	FHR 5050 YA WM37 WC4.9774	Mortgage		7,233
	FHR 5051 MA WM31 WC6.5566	Mortgage		7,832
	FHR 4736 CD WM39 WC4.9483	Mortgage		8,112
	FHR 4936 AP WM49 WC4.3880	Mortgage		23,300
	FHMS K506 A2	Mortgage		46,080
	FHMS KJ47 A2	Mortgage		48,993
	FHMS K509 A2	Mortgage		79,740
	FHLMC DUS #WN-2407	Mortgage		420
	GNR 2019-136 P WM45 WC3.8726	Mortgage		22,028

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	FNMA TBA 3.0% FEB 30YR	Mortgage		682,970
	FNMA TBA 4.0% FEB 30YR	Mortgage		183,950
	COMM 2018-COR3 ASB	Mortgage		15,336
	BANK 2018-BN13 A5	Mortgage		125,331
	BMARK 2019-B10 ASB	Mortgage		63,419
	BANK 2019-BN18 ASB	Mortgage		40,733
	BANK 2017-BNK9 A3	Mortgage		13,317
	BMO 2024-5C8 A2	Mortgage		36,926
	CGCMT 2017-C4 AAB	Mortgage		44,286
	COMM 2015-3BP A WM15 144A	Mortgage		88,556
	BMO 2024-5C5 A2	Mortgage		74,757
	BANK 2019-BN17 ASB	Mortgage		46,516
	BMO 2024-5C7 A2	Mortgage		64,622
	BANK 2019-BN16 A4	Mortgage		125,446
	BANK 2019-BN21 ASB	Mortgage		41,812
	BANK 2019-BN22 A4WM29 WC3.4826	Mortgage		208,392
	BMO 2024-5C7 A3 WM29 WC6.3827	Mortgage		18,783
	BBCMS 2024-5C31 A2 WM29 WC6.6063	Mortgage		40,726
	HILT 2016-HHV A 144A	Mortgage		35,914
	JPMCC 2018-WPT AFX WM22 WC5.3020	Mortgage		48,570
	JPMDB 2017-C7 ASB	Mortgage		10,844
	MSSG 2017-237P A 144A	Mortgage		57,846
	JPMDB 2017-C7 A5 WM27 WC4.2015	Mortgage		35,029
	AACMT 2005-C6A A2 WM35 WC5.701 144A	Mortgage		39,243
	UBSCM 2017-C3 ASB	Mortgage		25,901
	UBSCM 2018-C8 ASB	Mortgage		17,886
	UBSCM 2018-C11 ASB	Mortgage		25,252
	UBSCM 2019-C16 ASB	Mortgage		48,735
	WFCM 2017-C41 ASB	Mortgage		11,682
	WFCM 2018-C45 ASB	Mortgage		7,545
	WFCM 2024-5C2 A2	Mortgage		76,572
	WFCM 2024-5C2 A3	Mortgage		51,399
	AESOP 2023-8A A 144A	Mortgage		125,594
	COMET 2023-A1 A	Mortgage		103,441
	AESOP 2023-1A A 144A	Mortgage		74,677
	AESOP 2023-3A A 144A	Mortgage		74,775
	BAAT 2023-2A A4 144A	Mortgage		37,619
	AESOP 2023-5A A 144A	Mortgage		120,547
	AESOP 2024-1A A 144A	Mortgage		131,273
	BACCT 2023-A1 A1	Mortgage		103,889
	COPAR 2023-2 A3	Mortgage		65,799
	CARMX 2023-4 A3	Mortgage		94,012
	CFII 2024-1A A1 144A	Mortgage		38,842
	GMREV 2023-2 A 144A	Mortgage		114,925
	GMCAR 2023-4 A3	Mortgage		88,274
	HERTZ 2023-4A A 144A	Mortgage		64,651
	HAROT 2024-3 A3	Mortgage		68,406
	HALST 2023-C A4 144A	Mortgage		162,941
	FORDR 2023-2 A 144A	Mortgage		69,624
	NAVSL 2023-BA A1A 144A	Mortgage		16,041
	NALT 2024-A A3	Mortgage		111,336
	SFAST 2023-1A A4 144A	Mortgage		60,039
	SYNIT 2023-A2 A	Mortgage		69,646
	VZMT 2024-6 A1A	Mortgage		71,376
	VZMT 2024-7 A 144A	Mortgage		45,308
	WOART 2023-C A3	Mortgage		81,844
	PROVINCE OF QUEBEC GLBL NT	Municipal/Other		39,630
	SVB FINANCIAL TRUST CLASS A	Municipal/Other		14,706
	FL ST BRD ADMIN FIN-A	Municipal/Other		63,470
	HOUSTON CMNTY CLG SYS	Municipal/Other		33,808
	MIAMI DADE CO-A-REF	Municipal/Other		12,280
	LA LOCAL GOVT ENVRN-A	Municipal/Other		38,485
	NY URBAN DEV-B	Municipal/Other		125,697

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	NEW YORK ST URBAN DEV	Municipal/Other		40,975
	OR ST DEPT TRANSPRTN	Municipal/Other		33,611
	TOBACCO SETTLEMENT-A	Municipal/Other		14,147
	TOBACCO SETTLEMENT-A	Municipal/Other		4,747
	UNIV OF CALIFORNIA-BG	Municipal/Other		44,619
	UNIV MA BLDG-BABS	Municipal/Other		647
	WILLIAMSON CNTY TX	Municipal/Other		44,361
	WISCONSIN ST GEN FUND	Municipal/Other		9,720
	MNSN HOLDINGS INC	Municipal/Other		103
	STIF FUND (JPY) (SSKC)	Net Cash Equivalents		0
	STATE STREET UNINVESTED CASH - USD	Net Cash Equivalents		10,164
	U S TREASURY BILLS	Net Cash Equivalents		29,621
	U S TREASURY BILLS	Net Cash Equivalents		10,434
	U S TREASURY BILLS	Net Cash Equivalents		5,682
	AREIT 2021-CRE5 A TSFR1M+119.448BP 144A	Net Cash Equivalents		19,170
	AREIT 2022-CRE7 A TSFR1M+224BP 144A	Net Cash Equivalents		129,588
	ESA 2021-ESH A TSFR1M+119.448BP 144A	Net Cash Equivalents		88,745
	AREIT 2022-CRE6 A SOFR30A+125BP 144A	Net Cash Equivalents		40,144
	BDS 2022-FL12 A TSFR1M+213.65BP 144A	Net Cash Equivalents		39,408
	CGCMT 2017-P8 AAB	Net Cash Equivalents		12,182
	CSAIL 2016-C7 ASB	Net Cash Equivalents		19,172
	EQUUS 2021-EQAZ A TSFR1M+86.928BP 144A	Net Cash Equivalents		127,331
	FNR 2016-100 WF SOFR30A+61.448BP	Net Cash Equivalents		7,420
	BX 2021-21M A TSFR1M+84.448BP 144A	Net Cash Equivalents		16,116
	FNR 2016-76 CF SOFR30A+56.448BP	Net Cash Equivalents		9,230
	FH ARM 1Q1534 H15T1Y+223.1 10.274	Net Cash Equivalents		986
	BACM 2015-UBS7 A3 WM15	Net Cash Equivalents		40,059
	BX 2022-FOX2 A2 TSFR1M+74.92BP 144A	Net Cash Equivalents		26,987
	BX 2021-ARIA A TSFR1M+101.358BP 144A	Net Cash Equivalents		152,888
	FHR 4637 WF SOFR30A+61.448BP	Net Cash Equivalents		11,145
	BBCMS 2017-C1 ASB	Net Cash Equivalents		12,031
	COMM 2016-DC2 ASB	Net Cash Equivalents		3,665
	BX 2021-SDMF A TSFR1M+70.348BP 144A	Net Cash Equivalents		158,221
	BX 2021-CIP A TSFR1M+103.548BP 144A	Net Cash Equivalents		67,561
	FNR 2016-88 AF SOFR30A+55.448BP	Net Cash Equivalents		7,272
	FHR 5440 F SOFR30A+105BP	Net Cash Equivalents		35,147
	FHR 5439 FK SOFR30A+100BP	Net Cash Equivalents		57,538
	FN ARM AL7090 H15T1Y+224.1 9.49	Net Cash Equivalents		799
	FNR 2007-50 FN SOFR30A+35.448BP	Net Cash Equivalents		614
	FNR 2011-15 AF SOFR30A+62.448BP	Net Cash Equivalents		13,419
	FN 793029 RFUCCT6M+159.2BP 10.869	Net Cash Equivalents		455
	GNR 2013-H16 FA TSFR1M+65.448BP	Net Cash Equivalents		1,510
	GNR 2015-H08 FD TSFR1M+71.448BP	Net Cash Equivalents		16,041
	GNR 2017-H02 FJ TSFR1M+111.448BP	Net Cash Equivalents		14,357
	GNR 2015-H14 FA TSFR1M+68.448BP	Net Cash Equivalents		8,468
	GNR 2015-H15 FC TSFR1M+69.448BP	Net Cash Equivalents		7,664
	GNR 2015-H22 FD TSFR1M+58.448BP	Net Cash Equivalents		6,174
	GNR 2015-H26 FA TSFR1M+63.448BP	Net Cash Equivalents		18,853
	GNR 2016-H07 FM TSFR1M+88.448BP	Net Cash Equivalents		51
	GNR 2016-H09 FB TSFR1M+101.448BP	Net Cash Equivalents		34,152
	GNR 2017-H07 FG TSFR1M+57.448BP	Net Cash Equivalents		7,111
	GNR 2015-H04 FA TSFR1M+76.448BP	Net Cash Equivalents		16,808
	GNR 2018-H18 FC TSFR1M+46.448BP	Net Cash Equivalents		4,838
	HHT 2019-MAUI A TSFR1M+119.701BP 144A	Net Cash Equivalents		62,823
	TOWN 2022-STAY A TSFR1M+248.86BP 144A	Net Cash Equivalents		74,042
	JPMCC 2018-WPT AFL TSFR1M+143.9BP 144A	Net Cash Equivalents		19,174
	JPMCC 2021-1440 A TSFR1M+141.448BP 144A	Net Cash Equivalents		69,825
	MF1 2021-FL5 A (1MSOFR+11)+85BP 144A	Net Cash Equivalents		10,240
	MSC 2016-BNK2 ASB WM26 WC3.9333	Net Cash Equivalents		16,606
	FHS 330 F4 SOFR30A+46.448BP	Net Cash Equivalents		8,463
	GNR 2016-H10 FA TSFR1M+99.448BP	Net Cash Equivalents		25,553
	GNR 2015-H31 FT TSFR1M+76.448BP	Net Cash Equivalents		1,175
	MSC 2016-UB11 ASB WM26 WC4.229962719	Net Cash Equivalents		3,062

Ashland Inc. Master Trust

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December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	MSC 2021-230P A TSFR1M+128.368BP 144A	Net Cash Equivalents		83,678
	NOHT 2019-HNLA A TSFR1M+103.571BP 144A	Net Cash Equivalents		49,153
	PFP 2022-9 A TSFR1M+217.52BP 144A	Net Cash Equivalents		62,509
	GNR 2015-H15 FJ TSFR1M+55.448BP	Net Cash Equivalents		4,092
	RCMT 2021-FL6 A TSFR1M+106.448BP 144A	Net Cash Equivalents		5,469
	RCMT 2022-FL10 A TSFR1M+255.2BP 144A	Net Cash Equivalents		38,704
	SFO 2021-555 A TSFR1M+126.448BP 144A	Net Cash Equivalents		37,868
	SMRT 2022-MINI A TSFR1M+100BP 144A	Net Cash Equivalents		35,490
	SREIT 2021-IND A TSFR1M+81.448BP 144A	Net Cash Equivalents		44,110
	STWD 2021-LIH A TSFR1M+97.248BP 144A	Net Cash Equivalents		46,758
	SGCP 2022-FL4 A 144A TSFR1M+229.60	Net Cash Equivalents		96,381
	AOTA 2015-1211 A1A2 WM15 144A	Net Cash Equivalents		127,570
	VMC 2021-FL4 A TSFR1M+121.448BP 144A	Net Cash Equivalents		896
	WBHT 2019-WBM A TSFR1M+116.448BP 144A	Net Cash Equivalents		96,702
	WFCM 2016-C34 ASB WM25 WC5.0518	Net Cash Equivalents		3,824
	WFCM 2016-BNK1 ASB WM26 WC4.289273	Net Cash Equivalents		5,126
	ECMC 2017-2A A SOFR30A+116.448BP 144A	Net Cash Equivalents		11,727
	AMXCA 2022-4 A	Net Cash Equivalents		70,435
	DLLMT 2023-1A A3 144A	Net Cash Equivalents		120,774
	ECMC 2018-2A A SOFR30A+91.448BP 144A	Net Cash Equivalents		29,860
	CCCIT 2023-A1 A1	Net Cash Equivalents		72,494
	ECMC 2020-3A A1B SOFR30A+111.448BP 144A	Net Cash Equivalents		18,059
	CARMX 2024-1 A2A	Net Cash Equivalents		66,308
	DLLAD 2021-1A A3 144A	Net Cash Equivalents		12,501
	ECMC 2018-1A A SOFR30A+86.448BP 144A	Net Cash Equivalents		17,860
	COMET 2022-A3 A	Net Cash Equivalents		96,385
	ECMC 2019-1A A1B SOFR30A+111.448BP 144A	Net Cash Equivalents		39,594
	DEFT 2022-2 A3 WM27 WC7.6000 144A	Net Cash Equivalents		12,150
	DLLST 2022-1A A4 144A	Net Cash Equivalents		7,586
	FORDL 2024-A A3	Net Cash Equivalents		111,355
	NAVSL 2015-BA A3 TSFR1M+156.448BP 144A	Net Cash Equivalents		23,645
	NAVSL 2017-1A A3 SOFR30A+126.448BP 144A	Net Cash Equivalents		67,274
	NSLT 2021-A A2 TSFR1M+114.448BP 144A	Net Cash Equivalents		88,192
	SFAST 2023-1A A3 144A	Net Cash Equivalents		55,904
	SLMA 2010-C A5 TSFR1M+486.448BP 144A	Net Cash Equivalents		34,604
	SMB 2021-A A2A1 TSFR1M+84.448BP 144A	Net Cash Equivalents		39,883
	SMB 2018-C A2A 144A	Net Cash Equivalents		60,905
	SMB 2022-B A1B 144A SOFR	Net Cash Equivalents		13,173
	TLOT 2023-B A3 144A	Net Cash Equivalents		37,261
	BANK OF AMERICA CORP SR UNSEC SOFR	Net Cash Equivalents		147,724
	AMERICAN EXPRESS CO SR UNSEC SOFR	Net Cash Equivalents		16,829
	HSBC HOLDINGS PLC SR UNSEC TSFR3M	Net Cash Equivalents		23,900
	ATCLO 2019-15A A1R TSFR3M+122BP 144A	Net Cash Equivalents		99,923
	ACREC 2021-FL1 A TSFR1M+126.448BP 144A	Net Cash Equivalents		17,504
	CGMS 2014-3RA A1A TSFR3M+131.161BP 144A	Net Cash Equivalents		17,142
	BPCRE 2022-FL2 A 144A TSFR1M+240BP	Net Cash Equivalents		27,260
	BGCLO 19A A1RR TSFR3M+159BP 144A	Net Cash Equivalents		76,481
	BSPRT 2022-FL9 A TSFR1M+229.6BP 144A	Net Cash Equivalents		53,646
	FSRIA 2022-FL4 A SOFR30A+190BP 144A	Net Cash Equivalents		73,616
	ATCLO 2018-10A A TSFR3M+135.161BP 144A	Net Cash Equivalents		8,316
	ARCLO 2021-FL4 A TSFR1M+146.448BP 144A	Net Cash Equivalents		44,542
	ARES 2019-52A A1R TSFR3M+131.161BP 144A	Net Cash Equivalents		28,541
	ATCLO 2019-13A A1NR TSFR3M+134.161BP 144	Net Cash Equivalents		11,658
	BDS 2022-FL11 ATS 144A TSFR1M+180BP	Net Cash Equivalents		96,170
	AWPT 2022-16A A1AR TSFR3M+113BP 144A	Net Cash Equivalents		27,695
	BABSN 2015-1A AR TSFR3M+125.161BP 144A	Net Cash Equivalents		17,069
	DEN14 2016-1A AR2 TSFR3M+140.161BP 144A	Net Cash Equivalents		39,513
	CIFC 2018-3A A TSFR3M+136.161BP 144A	Net Cash Equivalents		28,852
	BDS 2021-FL10 A TSFR1M+146.448BP 144A	Net Cash Equivalents		50,623
	CBAM 2019-9A AR TSFR3M+163BP 144A	Net Cash Equivalents		111,525
	FORT 2022-FL3 A 144A SOFR	Net Cash Equivalents		15,250
	HGI 2022-FL3 A 144A SOFR	Net Cash Equivalents		46,433
	LCM 30A AR TSFR3M+134.161BP 144A	Net Cash Equivalents		29,161

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	LCCM 2021-FL2 A TSFR1M+131.45BP 144A	Net Cash Equivalents		3,708
	LNCR 2022-CRE7 A 144A SOFR	Net Cash Equivalents		37,380
	LNCR 2021-CRE6 A TSFR1M+141.448BP 144A	Net Cash Equivalents		39,294
	MF1 2022-FL8 A TSFR1M+135BP 144A	Net Cash Equivalents		84,919
	MDPK 2018-29A AR TSFR3M+118BP 144A	Net Cash Equivalents		48,090
	MIAMI DADE CO-A-REF	Net Cash Equivalents		36,042
	MCLO 2019-1A AAR2 TSFR3M+120BP 144A	Net Cash Equivalents		31,379
	NEUB 2013-15A A1R2 TSFR3M+118.161BP 144A	Net Cash Equivalents		23,326
	NBCLO 2017-1A A1R TSFR3M+123.161BP 144A	Net Cash Equivalents		8,342
	OSD 2021-23A A TSFR3M+113.161BP 144A	Net Cash Equivalents		22,284
	OZLM 2019-24A A1AR TSFR3M+142.161BP 144A	Net Cash Equivalents		29,933
	PLMRS 2013-2A A1A3 TSFR3M+126.161BP 144A	Net Cash Equivalents		23,797
	PSTAT 2021-4A A1 TSFR3M+106.161BP 144A	Net Cash Equivalents		6,212
	MF1 2022-FL10 A TSFR1M+263.5BP 144A	Net Cash Equivalents		53,900
	MAGNE 2015-12A AR4 TSFR3M+115BP 144A	Net Cash Equivalents		22,138
	STWD 2021-FL2 A TSFR1M+131.448BP 144A	Net Cash Equivalents		83,970
	SRANC 2018-6A A1R TSFR3M+140.161BP 144A	Net Cash Equivalents		35,943
	TRTX 2022-FL5 A TSFR1M+165BP 144A	Net Cash Equivalents		73,807
	VENTR 2017-28A A1R TSFR3M+125.161BP 144A	Net Cash Equivalents		35,473
	VENTR 2019-38A A1R TSFR3M+142.161BP 144A	Net Cash Equivalents		37,013
	BVSTAT 2024-1A A TSFR3M 144A	Net Cash Equivalents		75,288
	CASH COLLATERAL CME BCY USD	Net Cash Equivalents		57,272
	CASH COLLATERAL LCH BCY USD	Net Cash Equivalents		61,316
	CASH COLLATERAL FUT BCY USD	Net Cash Equivalents		96,174
	CASH COLLATERAL ICE BCY USD	Net Cash Equivalents		75,181
	U S TREASURY REPO	Net Cash Equivalents		2,994,701
	U S TREASURY REPO	Net Cash Equivalents		528,042
	U S TREASURY REPO	Net Cash Equivalents		1,846
	U S TREASURY REPO	Net Cash Equivalents		3,009,472
	VM CASH FUT DOM BCY USD	Net Cash Equivalents		19,549
	VM CASH CCP CME BCY USD	Net Cash Equivalents		2,792
	VM CASH CCP ICE BCY USD	Net Cash Equivalents		4,917
	VM CASH CCP LCH BCY USD	Net Cash Equivalents		6,243
	BOEING CO/THE SNR S* ICE	Net Cash Equivalents		138
	VERIZON COMMUNICATIONS INC SNR S* ICE	Net Cash Equivalents		591
	FIN FUT US 5YR CBT 03/31/25	Government Related		3,781,603
	FIN FUT US 2YR CBT 03/31/25	Government Related		8,247,996
	FIN FUT US 10YR CBT 03/20/25	Government Related		2,732,427
	FIN FUT US ULTRA 10YR CBT 03/20/25	Government Related		132,632
	FIN FUT US ULTRA 30YR CBT 03/20/25	Government Related		(1,513,312)
	TENN VALLEY AUTH GLOBAL BONDS	Government Related		193,766
	TENN VALLEY AUTHORITY SR UNSEC	Government Related		53,471
	U S TREASURY BOND	Government Related		516,438
	U S TREASURY NOTE	Government Related		4,155,655
	U S TREASURY NOTE	Government Related		171,984
	U S TREASURY NOTE	Government Related		1,811,851
	U S TREASURY NOTE	Government Related		2,230,334
	U S TREASURY NOTE	Government Related		308,556
	RFR USD SOFR/3.80000 09/05/23-5Y LCH	Government Related		29,778
	RFR USD SOFR/3.30000 12/02/24-4Y* CME	Government Related		7,610
	RFR USD SOFR/3.71000 03/03/25-7Y* LCH	Government Related		46,423
	AMER AIRLN 13-1 A PASS T	High Yield Credit		18,965
	AES CORP/THE SR UNSEC	Invest. Grade Credit		43,417
	AMEREN MISSOURI SEC FU I SR SEC	Invest. Grade Credit		60,910
	CONSUMERS ENERGY CO 1ST MORTGAGE	Invest. Grade Credit		91,796
	CONSUMERS ENERGY CO 1ST MTGE	Invest. Grade Credit		30,018
	CONSUMERS 23 SECURE FUND A1	Invest. Grade Credit		69,604
	DTE ELECT SECUR FND II SR SEC	Invest. Grade Credit		78,916
	ENI SPA SR UNSEC 144A	Invest. Grade Credit		138,371
	EMPIRE DISTRICT BONDCO SEC	Invest. Grade Credit		171,166
	EVERGY METRO SEC	Invest. Grade Credit		15,577
	EVERSOURCE ENERGY SR UNSEC	Invest. Grade Credit		51,794
	FLORIDA POWER & LIGHT CO 1ST MTGE	Invest. Grade Credit		148,681

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	GREENSAIF PIPELINES BIDC SR SEC 144A	Invest. Grade Credit		25,599
	NATIONAL GRID PLC SR UNSEC	Invest. Grade Credit		54,589
	NATIONAL RURAL UTIL COOP SR UNSEC	Invest. Grade Credit		139,275
	NY STATE ELECTRIC & GAS SR UNSEC 144A	Invest. Grade Credit		35,382
	ONE GAS INC SR UNSEC	Invest. Grade Credit		46,977
	PACIFIC GAS & ELECTRIC SR SEC	Invest. Grade Credit		50,019
	PACIFIC GAS & ELECTRIC	Invest. Grade Credit		38,842
	PACIFIC GAS & ELECTRIC	Invest. Grade Credit		61,192
	PACIFIC GAS & ELECTRIC 1ST MTGE	Invest. Grade Credit		21,469
	PACIFIC GAS & ELECTRIC 1ST MTGE	Invest. Grade Credit		34,614
	PACIFIC GAS & ELECTRIC 1ST MTGE	Invest. Grade Credit		51,115
	PACIFICORP 1ST MTGE 1L	Invest. Grade Credit		38,356
	PG&E RECOVERY FND LLC SR SEC	Invest. Grade Credit		129,517
	PUBLIC SERVICE ENTERPRIS 1ST MTGE	Invest. Grade Credit		62,184
	PUGET SOUND ENERGY INC SR SEC	Invest. Grade Credit		32,661
	SAN DIEGO G & E SEC	Invest. Grade Credit		18,623
	SEMPRA ENERGY SR UNSEC	Invest. Grade Credit		80,151
	SOUTHERN CAL EDISON 1ST MTGE	Invest. Grade Credit		17,327
	SWEPKO STORM RECOVERY FU SR UNSEC	Invest. Grade Credit		96,324
	TEXAS ELECTRIC MKT STABL SEC	Invest. Grade Credit		158,497
	TEXAS ELECTRIC MKT STABL SEC	Invest. Grade Credit		76,795
	VIRGINIA POWER FUEL SEC A1	Invest. Grade Credit		73,836
	VIRGINIA POWER FUEL SEC A2	Invest. Grade Credit		86,325
	WOODSIDE FINANCE LTD SR UNSEC	Invest. Grade Credit		106,836
	AMERICAN TOWER CORP SR UNSEC	Invest. Grade Credit		16,590
	COMCAST CORP SR UNSEC	Invest. Grade Credit		73,320
	CROWN CASTLE INTL CORP SR UNSEC	Invest. Grade Credit		24,939
	META PLATFORMS INC SR UNSEC	Invest. Grade Credit		90,416
	FISERV INC SR UNSEC	Invest. Grade Credit		140,853
	FISERV INC SR UNSEC	Invest. Grade Credit		20,267
	SBA TOWER TRUST 144A	Invest. Grade Credit		133,886
	T-MOBILE USA INC SR UNSEC	Invest. Grade Credit		54,767
	COREBRIDGE GLOB FUNDING SR SEC 144A	Invest. Grade Credit		105,140
	COREBRIDGE GLOB FUNDING SR SEC 144A	Invest. Grade Credit		35,553
	AERCAP IRELAND CAP/GLOBA SR UNSEC SMR	Invest. Grade Credit		127,383
	AERCAP IRELAND CAP/GLOBA SR UNSEC	Invest. Grade Credit		61,693
	AMERICAN EXPRESS CO SR UNSEC SOFR	Invest. Grade Credit		38,785
	AMERIPRISE FINANCIAL INC SR UNSEC	Invest. Grade Credit		23,136
	ATHENE GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		115,632
	AVIATION CAPITAL GROUP SR UNSEC 144A	Invest. Grade Credit		10,304
	BPCE SA SR NON PREF 144A SOFR	Invest. Grade Credit		20,554
	BPCE SA 144A	Invest. Grade Credit		34,478
	BANCO BILBAO VIZCAYA ARG SR PREF	Invest. Grade Credit		52,300
	BANK OF AMERICA CORP SR UNSEC TSFR3M	Invest. Grade Credit		41,797
	BANK OF AMERICA CORP SR UNSEC TSFR3M	Invest. Grade Credit		96,714
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		41,859
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		198,053
	BANK OF AMERICA CORP SR UNSEC SOFR	Invest. Grade Credit		102,110
	BANK OF NOVA SCOTIA SR UNSEC SOFR	Invest. Grade Credit		75,214
	BANK OF NOVA SCOTIA SR UNSEC SOFR	Invest. Grade Credit		33,473
	BANQUE FED CRED MUTUEL SR PREF 144A	Invest. Grade Credit		60,463
	BANQUE FED CRED MUTUEL SR PREF 144A	Invest. Grade Credit		97,883
	BARCLAYS PLC SR UNSEC	Invest. Grade Credit		20,501
	BARCLAYS PLC SR UNSEC	Invest. Grade Credit		116,719
	BARCLAYS PLC SR UNSEC	Invest. Grade Credit		176,847
	BNP PARIBAS SR NON-PREFER 144A SOFR	Invest. Grade Credit		67,846
	BNP PARIBAS SR NON PREF 144A TSFR3M	Invest. Grade Credit		103,558
	BNP PARIBAS SR NON-PREFER REGS SOFR	Invest. Grade Credit		93,454
	BRIGHTHSE FIN GLBL FUND SR SEC 144A	Invest. Grade Credit		104,502
	BROOKFIELD FINANCE INC SR UNSEC	Invest. Grade Credit		9,161
	CAIXABANK SA SR NON PREF 144A SOFR	Invest. Grade Credit		87,235
	CAPITAL ONE FINANCIAL CO SR UNSEC SOFR	Invest. Grade Credit		48,398
	CAPITAL ONE FINANCIAL CO SR UNSEC SOFR	Invest. Grade Credit		59,136

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	CHUBB INA HOLDINGS LLC SR UNSEC	Invest. Grade Credit		94,704
	CITIGROUP INC SR UNSEC SOFR	Invest. Grade Credit		99,415
	CITIGROUP INC SR UNSEC SOFR	Invest. Grade Credit		56,550
	CNO GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		35,183
	COOPERAT RABOBANK UA/NY SR PREF 3A2	Invest. Grade Credit		67,739
	UBS GROUP AG SR UNSEC 144A SOFR	Invest. Grade Credit		99,244
	DEUTSCHE BANK NY SR NON-PREF SOFR	Invest. Grade Credit		170,880
	FIRST AMERICAN FINANCIAL SR UNSEC	Invest. Grade Credit		29,873
	GOLDMAN SACHS GROUP INC SR UNSEC TSFR3M	Invest. Grade Credit		120,396
	GOLDMAN SACHS GROUP INC SR UNSEC TSFR3M	Invest. Grade Credit		67,241
	GOLDMAN SACHS GROUP INC SOFR SR UNSEC	Invest. Grade Credit		66,327
	GOLDMAN SACHS GROUP INC SOFR	Invest. Grade Credit		241,780
	GOLDMAN SACHS GROUP INC SOFR	Invest. Grade Credit		44,217
	GUARDIAN LIFE GLOB FUND SEC 144A	Invest. Grade Credit		106,840
	HSBC HOLDINGS PLC SR UNSEC TSFR3M	Invest. Grade Credit		136,988
	HSBC HOLDINGS PLC SOFR SR UNSEC	Invest. Grade Credit		23,508
	ING GROEP NV SR UNSEC SOFR	Invest. Grade Credit		130,147
	ING GROEP NV SR UNSEC SOFR	Invest. Grade Credit		77,346
	INVITATION HOMES OP SR UNSEC	Invest. Grade Credit		25,277
	JPMORGAN CHASE & CO SR UNSEC SOFR TSFR3M	Invest. Grade Credit		42,019
	JPMORGAN CHASE & CO SR UNSEC SOFR	Invest. Grade Credit		199,091
	JPMORGAN CHASE & CO SR UNSEC SOFR	Invest. Grade Credit		132,640
	JPMORGAN CHASE & CO SR UNSEC SOFR	Invest. Grade Credit		52,924
	JPMORGAN CHASE & CO SR UNSEC SOFRRATE	Invest. Grade Credit		66,276
	JPMORGAN CHASE & CO SR UNSEC SOFRRATE	Invest. Grade Credit		88,107
	JACKSON NATL LIFE GLOBAL SEC 144A	Invest. Grade Credit		45,386
	KKR GRP FIN CO VI LLC SR UNSEC 144A	Invest. Grade Credit		26,176
	LSEGA FINANCING PLC SR UNSEC 144A	Invest. Grade Credit		22,083
	LLOYDS BANKING GROUP PLC SR UNSEC	Invest. Grade Credit		129,452
	LLOYDS BANKING GROUP PLC SR UNSEC	Invest. Grade Credit		33,915
	MASSMUTUAL GLOBAL FUNDIN SR SEC 144A	Invest. Grade Credit		50,784
	MASSMUTUAL GLOBAL FUNDIN SEC 144A	Invest. Grade Credit		145,257
	MET LIFE GLOB FUNDING I SEC 144A	Invest. Grade Credit		89,970
	MITSUBISHI UFJ FIN GRP SR UNSEC	Invest. Grade Credit		88,694
	MIZUHO FINANCIAL GROUP SR UNSEC TSFR3M	Invest. Grade Credit		29,070
	MIZUHO FINANCIAL GROUP SR UNSEC	Invest. Grade Credit		222,120
	MORGAN STANLEY SOFR SR UNSEC	Invest. Grade Credit		15,752
	MORGAN STANLEY SOFR SR UNSEC	Invest. Grade Credit		329,134
	MORGAN STANLEY SR UNSEC SOFRRATE	Invest. Grade Credit		35,164
	MUTUAL OF OMAHA GLOBAL SEC 144A	Invest. Grade Credit		38,506
	NATWEST GROUP PLC SR UNSEC	Invest. Grade Credit		164,819
	NOMURA HOLDINGS INC SR UNSEC	Invest. Grade Credit		43,766
	NORTHWESTERN MUTUAL LIFE SEC 144A	Invest. Grade Credit		69,145
	PNC FINANCIAL SERVICES SR UNSEC SOFR	Invest. Grade Credit		30,481
	PACIFIC LIFE GF II SEC 144A	Invest. Grade Credit		87,852
	PROTECTIVE LIFE GLOBAL SEC 144A	Invest. Grade Credit		49,806
	PROTECTIVE LIFE GLOBAL SEC 144A	Invest. Grade Credit		17,568
	PROTECTIVE LIFE GLOBAL SEC 144A	Invest. Grade Credit		31,234
	RGA GLOBAL FUNDING SEC 144A	Invest. Grade Credit		39,495
	RGA GLOBAL FUNDING SEC 144A	Invest. Grade Credit		89,100
	RGA GLOBAL FUNDING SR SEC 144A	Invest. Grade Credit		73,597
	NATWEST GROUP PLC SR UNSEC	Invest. Grade Credit		103,639
	SMBC AVIATION CAPITAL FI SR UNSEC 144A	Invest. Grade Credit		67,910
	SAFEHOLD GL HOLDINGS LLC SR UNSEC	Invest. Grade Credit		102,089
	SANTANDER UK GROUP HLDGS SR UNSEC	Invest. Grade Credit		66,538
	SANTANDER UK GROUP HLDGS SR UNSEC	Invest. Grade Credit		33,757
	SANTANDER UK GROUP HLDGS SR UNSEC SOFR	Invest. Grade Credit		16,448
	SANTANDER UK GROUP HLDGS SR UNSEC SOFR	Invest. Grade Credit		44,200
	SUMITOMO MITSUI FINL GRP SR UNSEC	Invest. Grade Credit		119,002
	UBS GROUP AG SR UNSEC 144A	Invest. Grade Credit		171,121
	UBS GROUP AG SR UNSEC 144A	Invest. Grade Credit		127,250
	WELLS FARGO & COMPANY SR UNSEC TSFR3M	Invest. Grade Credit		32,307
	WELLS FARGO & COMPANY SR UNSEC TSFR3M	Invest. Grade Credit		167,294

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	WELLS FARGO & COMPANY SOFR SR UNSEC	Invest. Grade Credit		45,550
	CVS PASS-THROUGH TRUST CO GTD 144A	Invest. Grade Credit		15,672
	SMITH & NEPHEW PLC SR UNSEC	Invest. Grade Credit		69,444
	STRYKER CORP SR UNSEC	Invest. Grade Credit		30,266
	BAYER US FINANCE LLC SR UNSEC 144A	Invest. Grade Credit		35,551
	BAYER US FINANCE LLC SR UNSEC 144A	Invest. Grade Credit		31,632
	ADVENT HEALTH SYSTEM	Invest. Grade Credit		67,740
	AIR CANADA 2015-2AA PTT 144A	Invest. Grade Credit		5,381
	AMER AIRLINE 17-1 AA PTT	Invest. Grade Credit		32,596
	AMER AIRLN 15-1 A PTT SEC	Invest. Grade Credit		52,272
	AMER AIRLINE 21-1A EETC	Invest. Grade Credit		21,597
	ANDREW W MELLON FOUNDATI UNSEC	Invest. Grade Credit		110,423
	ANTHEM INC SR UNSEC	Invest. Grade Credit		47,448
	ELEVANCE HEALTH INC SR UNSEC	Invest. Grade Credit		54,000
	BON SECOURS MERCY SEC	Invest. Grade Credit		195,354
	BRITISH AIR 21-1 A EETC 144A	Invest. Grade Credit		9,227
	CHRISTUS HEALTH SEC	Invest. Grade Credit		50,791
	COMMONSPIRIT HEALTH SEC	Invest. Grade Credit		71,897
	GEORGETOWN UNIVERSITY SR UNSEC	Invest. Grade Credit		68,067
	JETBLUE 2019-1 CLASS AA EETC SEC	Invest. Grade Credit		92,391
	NBN CO LTD SR UNSEC 144A	Invest. Grade Credit		49,576
	NBN CO LTD SR UNSEC 144A	Invest. Grade Credit		23,443
	PRICOA GLOBAL FUNDING 1 SEC 144A	Invest. Grade Credit		72,243
	PROLOGIS TARGETED US SR UNSEC 144A	Invest. Grade Credit		96,892
	PROV ST JOSEPH HLTH OBL SR UNSEC	Invest. Grade Credit		51,812
	SUTTER HEALTH UNSEC	Invest. Grade Credit		21,555
	SUTTER HEALTH UNSEC	Invest. Grade Credit		115,669
	UPMC SEC	Invest. Grade Credit		22,099
	UNITED AIR 2019-1 A PTT	Invest. Grade Credit		52,713
	UNITED AIR 2020-1 A PTT EETC SEC	Invest. Grade Credit		73,874
	UNITED AIR 2016-1 AA PTT EETC	Invest. Grade Credit		12,402
	UNITED AIR 2016-1 A PTT EETC	Invest. Grade Credit		9,209
	UNITED AIR 2019-2 AA EETC PTT	Invest. Grade Credit		23,936
	VENTAS REALTY LP SR UNSEC	Invest. Grade Credit		17,140
	FNR 2020-77 DP WM50 WC3.3886	Mortgage		168,405
	FNR 2024-104 FA SOFR30A+105BP	Mortgage		44,716
	FNMA PASS THRU 20YR #257057	Mortgage		143
	FNMA PASS THRU 20YR #257325	Mortgage		300
	FNMA PASS THRU 30YR #AH6113	Mortgage		219
	FNMA PASS THRU 30YR #AJ9872	Mortgage		1,041
	FNMA PASS THRU 30YR #AK6475	Mortgage		243
	FNMA PASS THRU 30YR #AL0484	Mortgage		448
	FNMA PASS THRU 20YR #AL1768	Mortgage		352
	FNMA PASS THRU 30YR #AL6273	Mortgage		2,415
	FNMA PASS THRU 30YR #AL5853	Mortgage		2,116
	FNMA PASS THRU 30YR #AL7203	Mortgage		24,963
	FNMA PASS THRU 30YR #AL7579	Mortgage		3,571
	FNMA P-T DUS #AN5171	Mortgage		107,424
	FNMA P-T DUS #AN8612	Mortgage		100,787
	FNMA P-T DUS #AN8717	Mortgage		16
	FNMA P-T DUS #AN9215	Mortgage		1,080
	FNMA PASS THRU 30YR #AS0837	Mortgage		3,566
	FNMA PASS THRU 30YR #AS0924	Mortgage		1,223
	FNMA PASS THRU 30YR #AS1338	Mortgage		4,908
	FNMA PASS THRU 30YR #AS1594	Mortgage		964
	FNMA PASS THRU 30YR #AS2740	Mortgage		593
	FNMA PASS THRU 30YR #AS2741	Mortgage		834
	FNMA PASS THRU 30YR #AT2016	Mortgage		5,073
	FNMA PASS THRU 30YR #AX5297	Mortgage		1,902
	FNMA PASS THRU 30YR #841471	Mortgage		371
	FNMA PASS THRU 30YR #845182	Mortgage		578
	FNMA PASS THRU 30YR #BK7608	Mortgage		58,939
	FNMA PASS THRU 30YR #BP7009	Mortgage		2,434

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	FNMA PASS THRU 30YR #BP9421	Mortgage		511
	FNMA PASS THRU 30YR #BQ3719	Mortgage		1,597
	FNMA PASS THRU 30YR #BR6304	Mortgage		53,086
	FNMA PASS THRU 30YR #BR9366	Mortgage		454
	FNMA P-T DUS #BS8896	Mortgage		122,154
	FNMA PASS THRU 30YR #BU8884	Mortgage		9,247
	FNMA PASS THRU 30YR #BV0951	Mortgage		7,628
	FNMA PASS THRU 30YR #BV2584	Mortgage		525
	FNMA PASS THRU 30YR #BV2634	Mortgage		381
	FNMA PASS THRU 30YR #BV3853	Mortgage		6,955
	FNMA PASS THRU 30YR #BV5332	Mortgage		7,998
	FNMA PASS THRU 30YR #BV8024	Mortgage		28,910
	FNMA PASS THRU 30YR #BV7912	Mortgage		125,503
	FNMA PASS THRU 30YR #BV8126	Mortgage		131,514
	FNMA PASS THRU 30YR #BW4142	Mortgage		9,963
	FNMA PASS THRU 30YR #BW4871	Mortgage		5,427
	FNMA PASS THRU 30YR #BW4938	Mortgage		11,733
	FNMA PASS THRU 30YR #BW7326	Mortgage		45,383
	FNMA PASS THRU 30YR #CA4979	Mortgage		2,489
	FNMA PASS THRU 30YR #CA9390	Mortgage		384
	FNMA PASS THRU 30YR #CB0396	Mortgage		43,811
	FNMA PASS THRU 30YR #CB2666	Mortgage		1,272,758
	FNMA PASS THRU 30YR #CB2301	Mortgage		46,847
	FNMA PASS THRU 30YR #CB2429	Mortgage		1,116,845
	FNMA PASS THRU 30YR #CB2929	Mortgage		4,671
	FNMA PASS THRU 30YR #CB3169	Mortgage		64,478
	FNMA PASS THRU 30YR #CB3364	Mortgage		61,961
	FNMA PASS THRU 30YR #CB4379	Mortgage		6,995
	FNMA PASS THRU 30YR #CB4109	Mortgage		122,836
	FNMA PASS THRU 30YR #CB4118	Mortgage		825
	FNMA PASS THRU 30YR #CB4121	Mortgage		7,311
	FNMA PASS THRU 30YR #CB4800	Mortgage		108,890
	FNMA PASS THRU 30YR #CB5985	Mortgage		2,077
	FNMA PASS THRU 30YR #CB6418	Mortgage		15,978
	FNMA PASS THRU 30YR #CB6832	Mortgage		16,028
	FNMA PASS THRU 15YR #FM1796	Mortgage		33,254
	FNMA PASS THRU 15YR #FM1843	Mortgage		29,410
	FNMA PASS THRU 30YR #FM3004	Mortgage		355,853
	FNMA PASS THRU 30YR #FM3241	Mortgage		205,823
	FNMA PASS THRU 30YR #FM4165	Mortgage		2,006
	FNMA PASS THRU 30YR #FM4595	Mortgage		3,014
	FNMA PASS THRU 30YR #FM7740	Mortgage		13,203
	FNMA PASS THRU 30YR #FM8692	Mortgage		3,473
	FNMA PASS THRU 30YR #FS1374	Mortgage		394,866
	FNMA PASS THRU 30YR #FS1630	Mortgage		5,406
	FNMA PASS THRU 30YR #FS2619	Mortgage		15,380
	FNMA PASS THRU 30YR #FS3425	Mortgage		22,984
	FNMA PASS THRU 30YR #FS5365	Mortgage		45,394
	FNMA PASS THRU 30YR #FS4711	Mortgage		12,178
	FNMA PASS THRU 30YR #FS4972	Mortgage		448,658
	FNMA PASS THRU 30YR #FS5027	Mortgage		84,974
	FNMA PASS THRU 30YR #FS5125	Mortgage		8,502
	FNMA PASS THRU 30YR #FS6035	Mortgage		58,494
	FNMA PASS THRU 30YR #FS6048	Mortgage		48,327
	FNMA PASS THRU 30YR #889170	Mortgage		521
	FNMA PASS THRU 30YR #889561	Mortgage		1,932
	FNMA PASS THRU 30YR #890607	Mortgage		482
	FNMA PASS THRU 30YR #933796	Mortgage		441
	FNMA PASS THRU 30YR #973023	Mortgage		524
	FNMA PASS THRU 30YR #981194	Mortgage		764
	FNMA PASS THRU 30YR #AA1614	Mortgage		594
	FNMA PASS THRU 30YR #AA9716	Mortgage		1,174
	FNMA PASS THRU 30YR #MA3414	Mortgage		9,720

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	FNMA PASS THRU 30YR #MA3444	Mortgage		59,574
	FNMA PASS THRU 30YR #MA4438	Mortgage		8,072
	FNMA PASS THRU 15YR #MA3897	Mortgage		39,596
	FNMA PASS THRU 30YR #MA5271	Mortgage		519,652
	FNMA PASS THRU 30YR #MA4512	Mortgage		384
	FNMA PASS THRU 30YR #MA4548	Mortgage		3,812
	FNMA PASS THRU 30YR #MA4623	Mortgage		14,155
	FNMA PASS THRU 30YR #MA4652	Mortgage		5,062
	FNMA PASS THRU 30YR #MA4732	Mortgage		456,892
	FNMA PASS THRU 30YR #MA4804	Mortgage		5,559
	FNMA PASS THRU 30YR #MA4840	Mortgage		489,676
	FNMA PASS THRU 30YR #MA5119	Mortgage		1,779
	FNMA PASS THRU 30YR #AD0362	Mortgage		540
	FNMA PASS THRU 30YR #AD2694	Mortgage		348
	FNMA PASS THRU 30YR #AD4085	Mortgage		1,585
	FNMA PASS THRU 30YR #AD7136	Mortgage		1,331
	FNMA PASS THRU 30YR #AD8950	Mortgage		582
	FNMA PASS THRU 30YR #AE0154	Mortgage		1,203
	FHLMC GOLD 30YR GNT #G0-8769	Mortgage		3,053
	FHLMC GOLD 30YR GNT #G0-8783	Mortgage		539
	FHLMC GOLD 30YR GNT #G0-8799	Mortgage		20,474
	FHLMC GOLD 30YR GNT #G0-8803	Mortgage		127,322
	FHLMC GOLD 30YR GNT #G0-8836	Mortgage		17,939
	FHLMC GOLD 30YR GNT #G0-8841	Mortgage		1,292
	FHLMC GOLD 30YR GNT #G0-8863	Mortgage		43,557
	FHLMC GOLD 30YR GNT #G0-8877	Mortgage		48,567
	FHLMC GOLD 30YR GNT #G0-8591	Mortgage		1,190
	FHLMC GOLD 30YR GNT #G0-8687	Mortgage		745
	FHLMC GOLD 30YR GNT #G0-8693	Mortgage		10,180
	FHLMC GOLD 30YR GNT #G0-8726	Mortgage		233
	FNMA PASS THRU 30YR #ZS4718	Mortgage		12,296
	FNMA PASS THRU 30YR #SD2613	Mortgage		269,562
	FNMA PASS THRU 30YR #SD1967	Mortgage		111,309
	FNMA PASS THRU 30YR #SD3478	Mortgage		202,272
	FNMA PASS THRU 30YR #SD2864	Mortgage		253,350
	FNMA PASS THRU 30YR #SD2963	Mortgage		991
	FNMA PASS THRU 30YR #SD3417	Mortgage		700
	FNMA PASS THRU 30YR #SD8205	Mortgage		12,487
	FNMA PASS THRU 30YR #SD8238	Mortgage		31,676
	FNMA PASS THRU 30YR #SD8291	Mortgage		4,268
	FNMA PASS THRU 30YR #SD8262	Mortgage		94,848
	FNMA PASS THRU 30YR #SD8265	Mortgage		539,234
	FNMA PASS THRU 30YR #SD8266	Mortgage		877,726
	FNMA PASS THRU 30YR #SD8271	Mortgage		13,330
	FNMA PASS THRU 30YR #SD8275	Mortgage		121,085
	FNMA PASS THRU 30YR #SD8283	Mortgage		12,165
	FNMA PASS THRU 30YR #SD8323	Mortgage		371,158
	FNMA PASS THRU 30YR #SD8299	Mortgage		292,059
	FNMA PASS THRU 30YR #SD8329	Mortgage		114,430
	FNMA PASS THRU 30YR #SD3942	Mortgage		60,245
	FNMA PASS THRU 30YR #SD3953	Mortgage		222,665
	FNMA PASS THRU 30YR #SD4115	Mortgage		53,724
	FHLMC GOLD 30YR #V8-3788	Mortgage		5,738
	FHLMC GOLD 30YR #Q6-0419	Mortgage		63,544
	FHLMC GOLD 30YR #Q5-1371	Mortgage		9,310
	FHLMC GOLD 30YR #Q5-2305	Mortgage		193
	FHLMC GOLD 30YR #Q5-3483	Mortgage		16,048
	FHLMC GOLD 30YR #Q5-3775	Mortgage		4,416
	FHLMC GOLD 30YR #Q5-6691	Mortgage		4,653
	FHLMC GOLD 30YR #Q5-9148	Mortgage		6,993
	FNMA PASS THRU 30YR #QB1701	Mortgage		1,738
	FNMA PASS THRU 30YR #QC0373	Mortgage		5,360
	FNMA PASS THRU 30YR #QC0416	Mortgage		3,766

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	FNMA PASS THRU 30YR #QC8521	Mortgage		36,667
	FNMA PASS THRU 30YR #QD4256	Mortgage		5,932
	FNMA PASS THRU 30YR #QD7266	Mortgage		15,895
	FNMA PASS THRU 30YR #QD9682	Mortgage		8,216
	FNMA PASS THRU 30YR #QE1102	Mortgage		21,458
	FNMA PASS THRU 30YR #QE1488	Mortgage		8,937
	FNMA PASS THRU 30YR #QE2112	Mortgage		342
	FNMA PASS THRU 30YR #QE8001	Mortgage		219,889
	FNMA PASS THRU 30YR #QE8026	Mortgage		3,567
	FNMA PASS THRU 30YR #QE8522	Mortgage		9,316
	FNMA PASS THRU 30YR #QE9261	Mortgage		8,876
	FNMA PASS THRU 30YR #QF0923	Mortgage		5,211
	FNMA PASS THRU 30YR #QF4602	Mortgage		696
	FNMA PASS THRU 30YR #QF6264	Mortgage		13,757
	FNMA PASS THRU 30YR #QF7428	Mortgage		113,839
	FNMA PASS THRU 30YR #QG5000	Mortgage		13,303
	FNMA PASS THRU 30YR #QH3374	Mortgage		392
	FNMA PASS THRU 30YR #RA2797	Mortgage		133,867
	FNMA PASS THRU 30YR #RA6486	Mortgage		427,346
	FNMA PASS THRU 30YR #RA7026	Mortgage		154,044
	FNMA PASS THRU 30YR #RA7346	Mortgage		129,604
	FNMA PASS THRU 30YR #RA8676	Mortgage		381
	FNMA PASS THRU 30YR #RA8828	Mortgage		9,699
	FNMA PASS THRU 30YR #RA9338	Mortgage		28,132
	FNMA PASS THRU 30YR #RA9541	Mortgage		18,844
	FHR 5042 CA WM33 WC5.8235	Mortgage		78,308
	FHR 5050 YA WM37 WC4.9774	Mortgage		32,474
	FHR 5051 MA WM31 WC6.5566	Mortgage		31,690
	FHR 4936 AP WM49 WC4.3880	Mortgage		56,101
	FHR 5092 XA WM39 WC4.4218	Mortgage		63,961
	FHR 5104 UB WM42 WC5.0083	Mortgage		19,017
	FHR 5115 CD WM39 WC4.8841	Mortgage		27,642
	FHR 5115 DA WM32 WC5.9051	Mortgage		36,748
	FHMS K506 A2	Mortgage		82,749
	FHMS KJ47 A2	Mortgage		52,874
	FHMS K509 A2	Mortgage		24,282
	FNMA PASS THRU 30YR #RJ0049	Mortgage		176,019
	FNMA PASS THRU 30YR #RJ0137	Mortgage		253,477
	FNMA PASS THRU 30YR #RJ0147	Mortgage		3,601
	GNMA II TBA 3.0% JAN 30YR JMBO	Mortgage		-
	GNMA II TBA 3.0% FEB 30YR JMBO	Mortgage		1,797,426
	GNMA II MULTPL SGL 30YR #MA3105M	Mortgage		20,122
	GNR 2017-H03 HA WM66 WC4.9216	Mortgage		52,090
	GNR 2019-136 P WM45 WC3.8726	Mortgage		71,011
	FNMA TBA 2.5% JAN 30YR	Mortgage		-
	FNMA TBA 2.5% FEB 30YR	Mortgage		1,076,926
	FNMA TBA 3.0% JAN 30YR	Mortgage		-
	FNMA TBA 3.0% FEB 30YR	Mortgage		344,300
	FNMA TBA 3.5% JAN 30YR	Mortgage		-
	FNMA TBA 3.5% FEB 30YR	Mortgage		1,167,898
	FNMA TBA 4.0% JAN 30YR	Mortgage		-
	FNMA TBA 4.0% FEB 30YR	Mortgage		1,191,873
	FNMA TBA 4.0% MAR 30YR	Mortgage		2,023,400
	BMO 2024-5C5 A3	Mortgage		106,197
	BANK 2019-BN20 ASB	Mortgage		161,275
	BANK 2019-BN19 A3 WM29 WC4.0549	Mortgage		66,640
	BANK 2024-BNK48 A4	Mortgage		49,913
	BANK 2020-BN29 ASB	Mortgage		94,732
	BBCMS 2024-5C31 A3	Mortgage		89,919
	BMARK 2018-B2 ASB WM26 WC4.2188	Mortgage		10,813
	BMARK 2019-B13 ASB	Mortgage		68,124
	BMARK 2018-B8 A5	Mortgage		94,315
	BMARK 2019-B14 ASB	Mortgage		99,358

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	BMARK 2021-B31 AAB WM31 WC3.4050	Mortgage		25,417
	BMO 2024-5C7 A3 WM29 WC6.3827	Mortgage		122,975
	BMO 2024-5C8 A3	Mortgage		79,201
	CF 2019-CF2 ASB	Mortgage		132,464
	COMM 2014-UBS4 A5	Mortgage		3,158
	COMM 2016-COR1 A4	Mortgage		61,643
	COMM 2017-COR2 A3 WM27 WC4.5805	Mortgage		68,993
	COMM 2018-COR3 A3 WM28 WC4.57635829	Mortgage		62,646
	CSAIL 2019-C17 ASB	Mortgage		141,572
	COMM 2019-GC44 ASB	Mortgage		27,675
	IPT 2018-INDP A 144A	Mortgage		55,730
	JPMDB 2016-C2 A4 WM25 WC4.67051	Mortgage		48,589
	JPMCC 2020-MKST A TSFR1M+121.448BP 144A	Mortgage		76,420
	JPMDB 2019-COR6 ASB	Mortgage		51,509
	MSWF 2023-2 A5	Mortgage		72,849
	MSBAM 2015-C22 A4 WM24 WC4.26626	Mortgage		34,344
	MSC 2017-HR2 A4 144A	Mortgage		11,580
	MSC 2019-L3 ASB	Mortgage		100,796
	LBTY 2016-225L A	Mortgage		19,664
	UBSCM 2018-C8 ASB	Mortgage		39,034
	UBSCM 2019-C17 ASB	Mortgage		109,350
	UBSCM 2019-C18 ASB	Mortgage		15,439
	UBSCM 2018-C12 ASB	Mortgage		18,949
	WSTN 2023-MAUI A 144A	Mortgage		52,544
	WFCM 2015-C28 A4 WM25 WC4.1714	Mortgage		25,757
	WFCM 2016-BNK1 A3 WM26 WC4.289	Mortgage		26,545
	WFCM 2018-C45 ASB	Mortgage		16,465
	WFCM 2019-C51 A4 WM29 WC4.5365	Mortgage		74,877
	WFCM 2020-C55 ASB	Mortgage		22,914
	WFCM 2024-5C2 A3	Mortgage		176,270
	AMXCA 2023-1 A	Mortgage		173,670
	AMXCA 2023-2 A	Mortgage		34,809
	AMXCA 2024-2 A	Mortgage		105,957
	AESOP 2023-1A A 144A	Mortgage		104,768
	AESOP 2023-3A A 144A	Mortgage		87,422
	AESOP 2023-6A A 144A	Mortgage		140,546
	AESOP 2023-8A A 144A	Mortgage		62,770
	AESOP 2024-1A A 144A	Mortgage		192,940
	BACCT 2023-A1 A1	Mortgage		218,628
	BAAT 2023-2A A4 144A	Mortgage		69,490
	COMET 2023-A1 A	Mortgage		143,395
	COPAR 2023-2 A3	Mortgage		94,951
	CARMX 2023-4 A3	Mortgage		140,688
	CFII 2024-1A A1 144A	Mortgage		50,861
	DLLMT 2023-1A A4 144A	Mortgage		98,658
	FORDR 2023-2 A 144A	Mortgage		66,880
	GMREV 2023-2 A 144A	Mortgage		96,741
	GMREV 2024-1 A 144A	Mortgage		109,851
	GMREV 2024-2 A 144A	Mortgage		114,497
	GMCAR 2023-4 A3	Mortgage		35,133
	GMCAR 2023-4 A4	Mortgage		88,497
	HERTZ 2023-2A A 144A	Mortgage		139,232
	HERTZ 2023-4A A 144A	Mortgage		60,468
	HAROT 2024-3 A3	Mortgage		81,273
	HAROT 2024-3 A4	Mortgage		17,225
	NAVSL 2020-IA A1B TSFR1M+111.448BP 144A	Mortgage		24,836
	NAVSL 2023-BA A1A 144A	Mortgage		21,928
	NALT 2024-A A3	Mortgage		173,555
	NALT 2024-A A4	Mortgage		38,158
	SFAST 2024-1A A3 144A	Mortgage		15,608
	SFAST 2024-1A A4 144A	Mortgage		8,671
	SBALT 2023-A A4 144A	Mortgage		17,689
	SYNIT 2023-A2 A	Mortgage		88,027

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	TSET 2024-1A A2 144A	Mortgage		8,632
	VZMT 2024-7 A 144A	Mortgage		127,131
	VALET 2023-1 A3	Mortgage		76,447
	WOART 2023-C A3	Mortgage		41,754
	WOART 2023-C A4	Mortgage		15,646
	ALABAMA ECON SETTLEME	Municipal/Other		58,571
	CA ST UNIV-D	Municipal/Other		15,821
	CA ST UNIV-D	Municipal/Other		83,143
	CA ST UNIV-D	Municipal/Other		66,195
	CA ST UNIV-D	Municipal/Other		37,986
	FL ST BRD ADMIN FIN-A	Municipal/Other		89,046
	FRESNO PENSION-CABS-A	Municipal/Other		67,414
	GOLDEN ST TOBACCO-A1	Municipal/Other		14,944
	GOLDEN ST TOBACCO-A1	Municipal/Other		62,198
	HOUSTON CMNTY CLG SYS	Municipal/Other		35,134
	LA LOCAL GOVT ENVRN-A	Municipal/Other		73,835
	MARIN CNTY TXB-PENSIO	Municipal/Other		23,989
	MIAMI DADE CO-A-REF	Municipal/Other		15,665
	MICHIGAN ST FIN AUTH	Municipal/Other		23,463
	MONTEREY PK TXBL - A	Municipal/Other		3,903
	MONTEREY PK TXBL - A	Municipal/Other		4,460
	NYC TRANS FIN AUTH-A2	Municipal/Other		15,601
	NYC TRANSTNL FIN-C2	Municipal/Other		115,837
	NYC TRANSITIONAL-C-2	Municipal/Other		87,318
	NEW YORK ST URBAN DEV	Municipal/Other		152,405
	RIVERSIDE ELEC-BABS	Municipal/Other		10,156
	RIVERSIDE CO-TXBL-REV	Municipal/Other		15,429
	EDUCTNL ENH FUNDING -	Municipal/Other		41,443
	TX NATURAL GAS SECZ	Municipal/Other		80,249
	TOBACCO SETTLEMENT-A	Municipal/Other		54,581
	TOBACCO SETTLEMENT-A	Municipal/Other		70,741
	TOBACCO SETTLEMENT-A	Municipal/Other		47,225
	UNIV OF CALIFORNIA-BF	Municipal/Other		48,277
	UNIV OF CALIFORNIA-BG	Municipal/Other		19,261
	UTAH ST MUNI PWR AGY	Municipal/Other		33,035
	WISCONSIN ST	Municipal/Other		54,158
	WISCONSIN ST	Municipal/Other		33,755
	WYANDOTTE CO UNIF-B	Municipal/Other		31,425
	WYANDOTTE CO UNIF-B	Municipal/Other		9,207
	AT&T INC SNR S* ICE	Net Cash Equivalents		182
	AT&T INC SNR S* ICE	Net Cash Equivalents		232
	AT&T INC SNR S* ICE	Net Cash Equivalents		475
	BOEING CO/THE SNR S* ICE	Net Cash Equivalents		439
	AT&T INC SNR S* ICE	Net Cash Equivalents		1,242
	AT&T INC SNR S* ICE	Net Cash Equivalents		102
	STIF FUND (JPY) (SSKC)	Net Cash Equivalents		0
	STATE STREET UNINVESTED CASH - USD	Net Cash Equivalents		5,309
	AREIT 2022-CRE7 A TSFR1M+224BP 144A	Net Cash Equivalents		55,408
	AREIT 2023-CRE8 A TSFR1M+211.18BP 144A	Net Cash Equivalents		35,915
	AREIT 2021-CRE5 A TSFR1M+119.448BP 144A	Net Cash Equivalents		10,049
	AREIT 2022-CRE6 A SOFR30A+125BP 144A	Net Cash Equivalents		64,367
	AHT1 2018-KEYS A TSFR1M+117.2BP 144A	Net Cash Equivalents		6,974
	BX 2021-ARIA A TSFR1M+101.358BP 144A	Net Cash Equivalents		51,686
	BXMT 2020-FL3 A TSFR1M+151.45BP 144A	Net Cash Equivalents		70,099
	BX 2021-21M A TSFR1M+84.448BP 144A	Net Cash Equivalents		18,552
	BACM 2015-UBS7 A3 WM15	Net Cash Equivalents		63,684
	BDS 2022-FL12 A TSFR1M+213.65BP 144A	Net Cash Equivalents		50,680
	BX 2021-CIP A TSFR1M+103.548BP 144A	Net Cash Equivalents		41,033
	COMM 2015-CR23 A4	Net Cash Equivalents		25,814
	COMM 2015-PC1 A5 WM24 WC4.4562	Net Cash Equivalents		36,977
	COMM 2015-CR24 A4	Net Cash Equivalents		14,980
	CSAIL 2015-C4 A4	Net Cash Equivalents		95,865
	CSMC 2020-FACT A TSFR1M+146.448BP 144A	Net Cash Equivalents		89,543

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	CSWF 2021-SOP2 A TSFR1M+108.136BP 144A	Net Cash Equivalents		1,465
	ESA 2021-ESH A TSFR1M+119.448BP 144A	Net Cash Equivalents		394,456
	FHS 330 F4 SOFR30A+46.448BP	Net Cash Equivalents		40,082
	FNR 2015-79 FE SOFR30A+36.448BP	Net Cash Equivalents		5,437
	FNR 2015-87 BF SOFR30A+41.448BP	Net Cash Equivalents		3,202
	FNR 2016-11 CF SOFR30A+46.448BP	Net Cash Equivalents		6,201
	FNR 2016-40 AF SOFR30A+56.448BP	Net Cash Equivalents		1,252
	FNR 2016-87 AF SOFR30A+51.448BP	Net Cash Equivalents		2,532
	FNR 2016-76 CF SOFR30A+56.448BP	Net Cash Equivalents		43,240
	FNR 2016-82 FM SOFR30A+51.448BP	Net Cash Equivalents		2,468
	FNR 2016-100 WF SOFR30A+61.448BP	Net Cash Equivalents		27,760
	FNR 2016-84 DF SOFR30A+53.448BP	Net Cash Equivalents		23,647
	FNR 2016-97 CF SOFR30A+53.448BP	Net Cash Equivalents		18,859
	FNR 2016-88 AF SOFR30A+55.448BP	Net Cash Equivalents		29,756
	FNMA PASS THRU 20YR #256555	Net Cash Equivalents		140
	FNMA PASS THRU 20YR #255731	Net Cash Equivalents		20
	FNMA PASS THRU 20YR #256064	Net Cash Equivalents		14
	FHR 3688 NF SOFR30A+58.448BP	Net Cash Equivalents		668
	FHR 3843 FE SOFR30A+66.448BP	Net Cash Equivalents		3,131
	FHR 3843 FG SOFR30A+66.448BP	Net Cash Equivalents		3,131
	FHR 3838 PF SOFR30A+56.448BP	Net Cash Equivalents		762
	FHR 4400 FA SOFR30A+51.448BP	Net Cash Equivalents		2,502
	FHR 4559 AF SOFR30A+61.448BP	Net Cash Equivalents		28,844
	FHR 4638 FA SOFR30A+55.448BP	Net Cash Equivalents		26,408
	FHR 4637 WF SOFR30A+61.448BP	Net Cash Equivalents		41,694
	FHR 4989 FA SOFR30A+46.448BP	Net Cash Equivalents		15,704
	FHR 4989 FB SOFR30A+46.448BP	Net Cash Equivalents		13,760
	FHR 5440 F SOFR30A+105BP	Net Cash Equivalents		48,527
	FHR 5439 FK SOFR30A+100BP	Net Cash Equivalents		81,450
	FN ARM AL7090 H15T1Y+224.1 9.49	Net Cash Equivalents		2,242
	FNR 2005-21 FM SOFR30A+46.448BP	Net Cash Equivalents		344
	FHR 3034 FL SOFR30A+41.448BP	Net Cash Equivalents		102
	FNR 2007-50 FN SOFR30A+35.448BP	Net Cash Equivalents		2,036
	FNR 2010-107 KF SOFR30A+51.448BP	Net Cash Equivalents		3,945
	FNR 2010-58 FY SOFR30A+84.448BP	Net Cash Equivalents		2,220
	FN 793029 RFUCCT6M+159.2BP 10.869	Net Cash Equivalents		1,216
	FNMA PASS THRU 10YR #MA2336	Net Cash Equivalents		10
	GPMT 2021-FL3 A TSFR1M+136.448BP 144A	Net Cash Equivalents		58,770
	GNR 2013-H16 FA TSFR1M+65.448BP	Net Cash Equivalents		5,384
	GNR 2013-H25 SA TSFR1M+86.448BP	Net Cash Equivalents		1,444
	GNR 2013-H24 FB TSFR1M+84.448BP	Net Cash Equivalents		216
	GNR 2015-H08 FD TSFR1M+71.448BP	Net Cash Equivalents		40,700
	GNR 2016-H11 F TSFR1M+91.448BP	Net Cash Equivalents		33,493
	GNR 2017-H02 FJ TSFR1M+111.448BP	Net Cash Equivalents		50,491
	GNR 2015-H14 FA TSFR1M+68.448BP	Net Cash Equivalents		60,984
	GNR 2015-H22 FD TSFR1M+58.448BP	Net Cash Equivalents		23,100
	GNR 2015-H27 FA TSFR1M+86.448BP	Net Cash Equivalents		2,959
	GNR 2015-H30 FA TSFR1M+79.448BP	Net Cash Equivalents		12
	GNR 2015-H31 FT TSFR1M+76.448BP	Net Cash Equivalents		4,396
	GNR 2017-H01 FC TSFR1M+106.448BP	Net Cash Equivalents		40,860
	GNR 2017-H03 FB TSFR1M+76.448BP	Net Cash Equivalents		8,663
	GNR 2016-H07 FE TSFR1M+126.448BP	Net Cash Equivalents		24,793
	GNR 2016-H07 FM TSFR1M+88.448BP	Net Cash Equivalents		148
	GNR 2016-H06 FD TSFR1M+103.448BP	Net Cash Equivalents		1,978
	GNR 2016-H09 FB TSFR1M+101.448BP	Net Cash Equivalents		62,575
	GNR 2016-H10 FA TSFR1M+99.448BP	Net Cash Equivalents		62,238
	GNR 2016-H17 FM TSFR1M+56.448BP	Net Cash Equivalents		10
	GNR 2015-H04 FA TSFR1M+76.448BP	Net Cash Equivalents		40,175
	JPMBB 2014-C24 A5	Net Cash Equivalents		4,456
	JPMBB 2015-C29 A4 WM25 WC4.2210	Net Cash Equivalents		34,376
	JPMBB 2015-C31 A3 WM25 WC4.663916155	Net Cash Equivalents		21,026
	JPMDB 2016-C4 ASB	Net Cash Equivalents		2,078
	MF1 2021-FL5 A (1MSOFR+11)+85BP 144A	Net Cash Equivalents		41,565

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	MSC 2015-UBS8 A4 WM25 WC4.6066	Net Cash Equivalents		34,056
	MSC 2016-UB11 ASB WM26 WC4.229962719	Net Cash Equivalents		6,683
	MSC 2021-230P A TSFR1M+128.368BP 144A	Net Cash Equivalents		138,212
	NYO 2021-1290 A TSFR1M+120.95BP 144A	Net Cash Equivalents		305,134
	PFP 2022-9 A TSFR1M+217.52BP 144A	Net Cash Equivalents		38,130
	SFO 2021-555 A TSFR1M+126.448BP 144A	Net Cash Equivalents		119,748
	SREIT 2021-IND A TSFR1M+81.448BP 144A	Net Cash Equivalents		60,166
	UBSCM 2017-C4 ASB	Net Cash Equivalents		24,044
	UBSCM 2017-C6 ASB	Net Cash Equivalents		75,386
	VMC 2021-FL4 A TSFR1M+121.448BP 144A	Net Cash Equivalents		4,107
	WBHT 2019-WBM A TSFR1M+116.448BP 144A	Net Cash Equivalents		171,624
	WFCM 2015-C28 ASB	Net Cash Equivalents		86
	WFCM 2015-NXS2 ASB WM15	Net Cash Equivalents		213
	WFCM 2016-C35 ASB WM16 WC0.0	Net Cash Equivalents		844
	AMXCA 2022-4 A	Net Cash Equivalents		43,341
	CCCIT 2023-A1 A1	Net Cash Equivalents		166,902
	DLLMT 2023-1A A3 144A	Net Cash Equivalents		67,777
	ECMC 2018-1A A SOFR30A+86.448BP 144A	Net Cash Equivalents		48,110
	ECMC 2017-2A A SOFR30A+116.448BP 144A	Net Cash Equivalents		41,681
	ECMC 2018-2A A SOFR30A+91.448BP 144A	Net Cash Equivalents		65,670
	ECMC 2020-3A A1B SOFR30A+111.448BP 144A	Net Cash Equivalents		85,920
	MMAF 2022-B A3 144A	Net Cash Equivalents		69,995
	NAVSL 2015-BA A3 TSFR1M+156.448BP 144A	Net Cash Equivalents		32,916
	NAVSL 2017-5A A SOFR30A+91.448BP 144A	Net Cash Equivalents		33,700
	NAVSL 2019-A A2B TSFR1M+101.448BP 144A	Net Cash Equivalents		7,223
	PWNE 2022-1 A3 144A	Net Cash Equivalents		20,989
	SLMA 2010-C A5 TSFR1M+486.448BP 144A	Net Cash Equivalents		46,391
	SMB 2021-A A2A1 TSFR1M+84.448BP 144A	Net Cash Equivalents		45,303
	SMB 2020-PTA A2B TSFR1M+96.448BP 144A	Net Cash Equivalents		8,748
	TLOT 2023-B A3 144A	Net Cash Equivalents		34,851
	BANK OF AMERICA CORP SR UNSEC SOFR	Net Cash Equivalents		16,990
	GA GLOBAL FUNDING TRUST SEC 144A	Net Cash Equivalents		26,695
	HSBC HOLDINGS PLC SR UNSEC TSFR3M	Net Cash Equivalents		25,793
	HSBC HOLDINGS PLC SOFR SR UNSEC	Net Cash Equivalents		85,500
	PEACEHEALTH OBLIGATED GR SR UNSEC	Net Cash Equivalents		51,895
	COOPERATIEVE RABOBANK UA SR NONPREF 144A	Net Cash Equivalents		33,952
	EXPORT-IMPORT BANK KOREA SR UNSEC	Net Cash Equivalents		110,134
	U S TREASURY BILLS	Net Cash Equivalents		19,090
	ACREC 2021-FL1 A TSFR1M+126.448BP 144A	Net Cash Equivalents		48,023
	AIMCO 2015-AA AR3 TSFR3M+125BP 144A	Net Cash Equivalents		103,104
	ANCHC 2015-6A AR3 TSFR3M+144BP 144A	Net Cash Equivalents		45,001
	APEXC 2018-2A A1RR TSFR3M+124BP 144A	Net Cash Equivalents		22,843
	ARCLO 2021-FL4 A TSFR1M+146.448BP 144A	Net Cash Equivalents		123,593
	ARES 2019-52A A1R TSFR3M+131.161BP 144A	Net Cash Equivalents		80,084
	BDS 2021-FL10 A TSFR1M+146.448BP 144A	Net Cash Equivalents		44,044
	BGCLO 19A A1RR TSFR3M+159BP 144A	Net Cash Equivalents		108,172
	CIFC 2018-3A A TSFR3M+136.161BP 144A	Net Cash Equivalents		39,768
	CGMS 2014-3RA A1A TSFR3M+131.161BP 144A	Net Cash Equivalents		21,863
	CRMN 2014-1A A1AR TSFR3M+136.161BP 144A	Net Cash Equivalents		65,484
	CBAM 2019-9A AR TSFR3M+163BP 144A	Net Cash Equivalents		159,942
	AWPT 2018-3A A1R2 TSFR3M+130BP 144A	Net Cash Equivalents		78,264
	AWPT 2022-16A A1AR TSFR3M+113BP 144A	Net Cash Equivalents		37,991
	GPMT 2021-FL4 A TSFR1M+146.448BP 144A	Net Cash Equivalents		15,842
	GALL 2017-1A A1R TSFR3M+135.161BP 144A	Net Cash Equivalents		48,251
	ICG 2021-3A AR TSFR3M+115BP 144A	Net Cash Equivalents		77,709
	JTWN 2021-16A AR TSFR3M+112BP 144A	Net Cash Equivalents		55,260
	KKR 18 AR TSFR3M+120.161BP 144A	Net Cash Equivalents		11,412
	LCCM 2021-FL2 A TSFR1M+131.45BP 144A	Net Cash Equivalents		1,770
	LNCR 2021-CRE6 A TSFR1M+141.448BP 144A	Net Cash Equivalents		48,737
	MF1 2021-FL7 A TSFR1M+119.448BP 144A	Net Cash Equivalents		33,337
	MF1 2022-FL10 A TSFR1M+263.5BP 144A	Net Cash Equivalents		45,687
	MDPK 2018-29A AR TSFR3M+118BP 144A	Net Cash Equivalents		67,469
	MAGNE 2015-12A AR4 TSFR3M+115BP 144A	Net Cash Equivalents		31,551

Ashland Inc. Master Trust

Employer Identification Number 20-0865835
Plan Number 030

Schedule H; Line 4i - Schedule of Assets (Held at End of Year)

December 31, 2024

(a)	(b)	(c)	(d)	(e)
	Identity of Issue	Description of Investment	Cost [^]	Current Value
	MCLO 2019-1A AAR2 TSFR3M+120BP 144A	Net Cash Equivalents		43,160
	MF1 2020-FL4 A (1MSOFR+11)+170BP 144A	Net Cash Equivalents		35,195
	MICHIGAN ST FIN AUTH	Net Cash Equivalents		18,679
	NEUB 2013-15A A1R2 TSFR3M+118.161BP 144A	Net Cash Equivalents		27,150
	NYC TRANS FIN AUTH-A4	Net Cash Equivalents		51,398
	OSD 2021-23A A TSFR3M+113.161BP 144A	Net Cash Equivalents		61,692
	OCP 2014-7A A1RR TSFR3M+138.161BP 144A	Net Cash Equivalents		8,886
	OZLM 2019-24A A1AR TSFR3M+142.161BP 144A	Net Cash Equivalents		80,879
	OFSBS 2021-10A AR TSFR3M+127BP 144A	Net Cash Equivalents		60,563
	PLMRS 2013-2A A1A3 TSFR3M+126.161BP 144A	Net Cash Equivalents		33,110
	PSTAT 2021-3A A1 TSFR3M+106.161BP 144A	Net Cash Equivalents		15,771
	RAD 2019-5A AR TSFR3M+138.161BP 144A	Net Cash Equivalents		40,938
	REG15 2018-4A A1R TSFR3M+120BP 144A	Net Cash Equivalents		25,996
	RMRK 2017-1A A1R TSFR3M+129.161BP 144A	Net Cash Equivalents		28,264
	STWD 2021-FL2 A TSFR1M+131.448BP 144A	Net Cash Equivalents		112,196
	SAN FRANCISCO UTILS-B	Net Cash Equivalents		23,816
	SRANC 2018-6A A1R TSFR3M+140.161BP 144A	Net Cash Equivalents		16,008
	EDUCTNL ENH FUNDING -	Net Cash Equivalents		30,687
	TCW 2019-1A ASNR TSFR3M+148.161BP 144A	Net Cash Equivalents		45,003
	TRTX 2022-FL5 A TSFR1M+165BP 144A	Net Cash Equivalents		84,186
	TX ST TRANSN-1ST TIER	Net Cash Equivalents		19,650
	TRNTS 2020-14A A1R TSFR3M+134BP 144A	Net Cash Equivalents		117,634
	UNIV CA-AX-TXBL	Net Cash Equivalents		89,268
	UT ST-BABS-B	Net Cash Equivalents		1,693
	VENTR 2017-28A A1R TSFR3M+125.161BP 144A	Net Cash Equivalents		88,752
	VENTR 2017-27A AR TSFR3M+131.161BP 144A	Net Cash Equivalents		39,204
	VENTR 2019-38A A1R TSFR3M+142.161BP 144A	Net Cash Equivalents		51,928
	BVSTAT 2024-1A A TSFR3M 144A	Net Cash Equivalents		103,949
	VOYA 2017-1A A1R TSFR3M+121.161BP 144A	Net Cash Equivalents		30,335
	CASH COLLATERAL CME WFS USD	Net Cash Equivalents		5,422
	CASH COLLATERAL LCH WFS USD	Net Cash Equivalents		40,011
	CASH COLLATERAL FUT WFS USD	Net Cash Equivalents		35,383
	CASH COLLATERAL ICE WFS USD	Net Cash Equivalents		90,677
	U S TIPS REPO	Net Cash Equivalents		1,727
	U S TREASURY REPO	Net Cash Equivalents		3,472,709
	U S TREASURY REPO	Net Cash Equivalents		609,580
	U S TREASURY REPO	Net Cash Equivalents		3,493,431
	VM CASH FUT DOM WFS USD	Net Cash Equivalents		15,596
	VM CASH CCP CME WFS USD	Net Cash Equivalents		10,077
	VM CASH CCP ICE WFS USD	Net Cash Equivalents		10,798
	VM CASH CCP LCH WFS USD	Net Cash Equivalents		11,671
	Contract value adjustment for FBRICs	Other		12,706,626
				145,255,552
				\$ 1,448,288,704

* Indicates parties-in-interest to the Plan

[^] Required for nonparticipant-directed investments only