

Form 5500

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security  
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110  
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: GNC LIVE WELL LATER 401K PLAN
1b Three-digit plan number (PN): 004
1c Effective date of plan: 01/01/1986
2a Plan sponsor's name (employer, if for a single-employer plan): GNC HOLDINGS LLC
2b Employer Identification Number (EIN): 85-3101739
2c Plan Sponsor's telephone number: 412-288-4600
2d Business code (see instructions): 446190

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

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

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

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

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	5465
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	4729
	<b>6a(2)</b>	3437
	<b>6b</b>	26
	<b>6c</b>	698
	<b>6d</b>	4161
	<b>6e</b>	6
	<b>6f</b>	4167
	<b>6g(1)</b>	1759
<b>6g(2)</b>	1650	
<b>6h</b>	3	
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	

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

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

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

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

**a Pension Schedules**

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

**b General Schedules**

- (1)  **H** (Financial Information)
- (2)  **I** (Financial Information – Small Plan)
- (3)  **A** (Insurance Information) – Number Attached 0
- (4)  **C** (Service Provider Information)
- (5)  **D** (DFE/Participating Plan Information)
- (6)  **G** (Financial Transaction Schedules)

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

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**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.

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**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 \_\_\_\_\_

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

<b>A</b> Name of plan <b>GNC LIVE WELL LATER 401K PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>004</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>GNC HOLDINGS LLC</b>	<b>D</b> Employer Identification Number (EIN) <b>85-3101739</b>	

**Part I Service Provider Information (see instructions)**

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

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

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

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

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

**FIDELITY INVESTMENTS INSTITUTIONAL**

**04-2647786**

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

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

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

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
37 64 65	RECORDKEEPER	136800	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

AON INVESTMENTS USA INC

36-3109431

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	115368	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

STRATEGIC ADVISORS, INC.

04-2654524

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
27	ADVISOR	85280	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**Part I Service Provider Information (continued)**

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

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

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

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE D</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>	<b>DFE/Participating Plan Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <hr/> <b>2024</b>  <hr/> <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>	
<b>A</b> Name of plan <u>GNC LIVE WELL LATER 401K PLAN</u>	<b>B</b> Three-digit plan number (PN) <span style="float: right;">▶</span> <u>004</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>GNC HOLDINGS LLC</u>	<b>D</b> Employer Identification Number (EIN) <u>85-3101739</u>

<b>Part I</b>	<b>Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs)</b> (Complete as many entries as needed to report all interests in DFEs)
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<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2015 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-025</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2020 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-026</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2025 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-027</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2055 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-033</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2035 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-029</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2045 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-031</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>AON INDEX 2060 RET I</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>AON TRUST COMPANY LLC</u>		
<b>c</b> EIN-PN <u>37-6543784-035</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON INDEX 2030 RET I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-028	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON INDEX 2040 RET I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-030	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON INDEX RET INC I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-023	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON INDEX 2050 RET I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-032	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 0
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2035 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-024	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 5756375
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS US BOND INDEX M		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 90-0337987-495	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4262207
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON CORE PLUS BOND I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-008	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 2471166
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS S&P 500 INDEX K		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 90-0337987-388	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 26738712
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2025 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-022	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3847099
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2045 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-026	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6161487

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS RSL SMMDCP IDX K		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 90-0337987-461	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 8239770
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2030 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-023	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4172165
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: AON INFLATION STR I		
<b>b</b> Name of sponsor of entity listed in (a): AON TRUST COMPANY LLC		
<b>c</b> EIN-PN 37-6543784-011	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 804387
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2050 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-027	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 4356024
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2060 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-029	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1960929
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET INC IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-030	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 622814
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2065 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-045	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 49618
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: INVESCO STBL VAL B1		
<b>b</b> Name of sponsor of entity listed in (a): INVESCO TRUST COMPANY		
<b>c</b> EIN-PN 84-1142974-001	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 9970713
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2020 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-021	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 1227135
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: SS TRGT RET 2040 IV		
<b>b</b> Name of sponsor of entity listed in (a): STATE STREET GLOBAL ADVISORS TRUST CO		
<b>c</b> EIN-PN 32-6528132-025	<b>d</b> Entity code C	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 3805913

**a** Name of MTIA, CCT, PSA, or 103-12 IE: **SS TRGT RET 2055 IV**

**b** Name of sponsor of entity listed in (a): **STATE STREET GLOBAL ADVISORS TRUST CO**

<b>c</b> EIN-PN <b>32-6528132-028</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>5486675</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **AON LARGE CAP EQ I**

**b** Name of sponsor of entity listed in (a): **AON TRUST COMPANY LLC**

<b>c</b> EIN-PN <b>37-6543784-002</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>17995803</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **SS GACEQ EX-US IDX K**

**b** Name of sponsor of entity listed in (a): **STATE STREET GLOBAL ADVISORS TRUST CO**

<b>c</b> EIN-PN <b>90-0337987-456</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>1970030</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **AON NON-US EQUITY I**

**b** Name of sponsor of entity listed in (a): **AON TRUST COMPANY LLC**

<b>c</b> EIN-PN <b>37-6543784-005</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>7728764</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE: **AON SM MID CAP EQ I**

**b** Name of sponsor of entity listed in (a): **AON TRUST COMPANY LLC**

<b>c</b> EIN-PN <b>37-6543784-003</b>	<b>d</b> Entity code <b>C</b>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <b>5062448</b>
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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**a** Name of MTIA, CCT, PSA, or 103-12 IE:

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

<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
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<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>GNC LIVE WELL LATER 401K PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>004</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>GNC HOLDINGS LLC</b>	<b>D</b> Employer Identification Number (EIN) <b>85-3101739</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
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**1** Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	0	0
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	0	0
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	0	0
<b>(3)</b> Other .....	<b>1b(3)</b>	0	0
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	0	0
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	0	0
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	0	0
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	0	0
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	0	0
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	0	0
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	0	0
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	0	0
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	0	0
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	1424194	1076417
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	10944256	122690234
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	0	0
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	0	0
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	0	0
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	105217383	0
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....	<b>1c(14)</b>	0	0
<b>(15)</b> Other.....	<b>1c(15)</b>	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation.....	1e	0	0
f Total assets (add all amounts in lines 1a through 1e).....	1f	117585833	123766651
<b>Liabilities</b>			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	2755	0
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	2755	0
<b>Net Assets</b>			
l Net assets (subtract line 1k from line 1f).....	1l	117583078	123766651

**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.

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	2523405	
(B) Participants.....	2a(1)(B)	5797120	
(C) Others (including rollovers).....	2a(1)(C)	228183	
(2) Noncash contributions.....	2a(2)	0	8548708
(3) Total contributions. Add lines 2a(1)(A), (B), (C), and line 2a(2).....	2a(3)		
<b>b Earnings on investments:</b>			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	102854
(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)	102854	
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F).....	2b(1)(G)		102854
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A), (B), and (C).....	2b(2)(D)		0
(3) Rents.....	2b(3)		0
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)	0	0
(B) Other.....	2b(5)(B)	0	
(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)	301968
(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)	15031584
<b>c</b> Other income .....	2c	0
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	2d	23985114

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers .....	2e(1)	17345184
(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)	17345184
<b>f</b> Corrective distributions (see instructions) .....	2f	0
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	2g	118908
<b>h</b> Interest expense .....	2h	0
<b>i</b> Administrative expenses:		
(1) Salaries and allowances .....	2i(1)	0
(2) Contract administrator fees .....	2i(2)	0
(3) Recordkeeping fees .....	2i(3)	136800
(4) IQPA audit fees .....	2i(4)	0
(5) Investment advisory and investment management fees .....	2i(5)	200649
(6) Bank or trust company trustee/custodial fees .....	2i(6)	0
(7) Actuarial fees .....	2i(7)	0
(8) Legal fees .....	2i(8)	0
(9) Valuation/appraisal fees .....	2i(9)	0
(10) Other trustee fees and expenses .....	2i(10)	0
(11) Other expenses .....	2i(11)	0
(12) Total administrative expenses. Add lines 2i(1) through (11) .....	2i(12)	337449
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	2j	17801541

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line 2j from line 2d .....	2k	6183573
<b>l</b> Transfers of assets:		
(1) To this plan .....	2l(1)	0
(2) From this plan .....	2l(2)	0

**Part III Accountant's Opinion**

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

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

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

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

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

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

(1) Name: S.R. SNODGRASS, P.C.

(2) EIN: 25-1616561

**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
<b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)		X	
<b>b</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	
<b>c</b> 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	
<b>d</b> 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	
<b>e</b> Was this plan covered by a fidelity bond?	X		5000000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> 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	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?	X		34
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code).  <b>▶ File as an attachment to Form 5500.</b>	OMB No. 1210-0110  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

<b>A</b> Name of plan <u>GNC LIVE WELL LATER 401K PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>004</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>GNC HOLDINGS LLC</u>	<b>D</b> Employer Identification Number (EIN) <u>85-3101739</u>	

<b>Part I</b>	<b>Distributions</b>
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**All references to distributions relate only to payments of benefits during the plan year.**

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

1	
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**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):  
EIN(s): 04-6568107

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

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

3	
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<b>Part II</b>	<b>Funding Information</b> (If the plan is not subject to the minimum funding requirements of section 412 of the Internal Revenue Code or ERISA section 302, skip this Part.)
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**4** Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....  Yes  No  N/A  
**If the plan is a defined benefit plan, go to line 8.**

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

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

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

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

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

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

<b>Part IV</b>	<b>ESOPs</b> (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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**10** Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....  Yes  No

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

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

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

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

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

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

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

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

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

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

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

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year .....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year .....	<b>15b</b>	

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

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

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

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

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

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

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

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

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

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

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

**Part VII IRS Compliance Questions**

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

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

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702438A.

# **GNC Live Well Later 401(k) Plan**

Pittsburgh, Pennsylvania

Financial Statements

December 31, 2024



GNC LIVE WELL LATER 401(K) PLAN  
DECEMBER 31, 2024

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## INDEPENDENT AUDITOR'S REPORT

Plan Administrator  
GNC Live Well Later 401(k) Plan

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

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

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

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

### **Opinion**

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

#### **PITTSBURGH, PA**

2009 Mackenzie Way • Suite 340  
Cranberry Township, PA 16066  
(724) 934-0344

#### **PHILADELPHIA, PA**

161 Washington Street • Suite 200  
Conshohocken, PA 19428  
(610) 278-9800

#### **WHEELING, WV**

980 National Road  
Wheeling, WV 26003  
(304) 233-5030

#### **STEUBENVILLE, OH**

511 N. Fourth Street  
Steubenville, OH 43952  
(304) 233-5030



### **Opinion (Continued)**

- The information in the accompanying financial statements related to assets held by and certified to by Fidelity Investments agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

### **Basis for Opinion**

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

### **Responsibilities of Management for the Financial Statements**

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

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

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

### **Auditor's Responsibilities for the Audit of the Financial Statements**

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



### **Auditor's Responsibilities for the Audit of the Financial Statements (Continued)**

In performing an audit in accordance with GAAS, we:

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

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

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

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



**Other Matters**

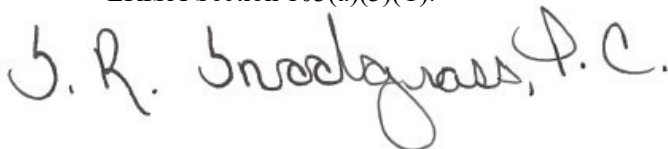
***Supplemental Schedule Required by ERISA***

The supplemental schedule of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from, and relates directly to, the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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



Cranberry Township, Pennsylvania  
September 26, 2025

GNC LIVE WELL LATER 401(K) PLAN  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2024	2023
<b>ASSETS</b>		
Mutual funds	\$ 112,719,521	\$ 105,217,383
Common/collective fund	9,970,713	10,944,256
Receivables:		
Employer contribution	-	135,515
Participant contribution	-	206,890
Notes from participants	1,076,417	1,424,194
Total receivables	1,076,417	1,766,599
<b>TOTAL ASSETS</b>	<b>123,766,651</b>	<b>117,928,238</b>
<b>LIABILITIES</b>		
Corrective distributions payable	-	2,755
<b>NET ASSETS AVAILABLE FOR BENEFITS</b>	<b>\$ 123,766,651</b>	<b>\$ 117,925,483</b>

The accompanying notes are an integral part of these financial statements.

GNC LIVE WELL LATER 401(K) PLAN  
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
FOR THE YEAR ENDED DECEMBER 31, 2024

ADDITIONS:

Investment income:	
Net appreciation in fair value of investments	\$ 15,031,584
Interest and dividends	<u>301,968</u>
Total investment income	15,333,552
Interest income on notes receivable from participants	<u>102,854</u>
Contributions:	
Employer contributions	2,387,890
Employee contributions	5,590,230
Rollovers	<u>228,183</u>
Total contributions	<u>8,206,303</u>
Total additions	<u>23,642,709</u>

DEDUCTIONS:

Benefits paid to participants	17,345,184
Deemed distributions	118,908
Administrative expenses	<u>337,449</u>
Total deductions	<u>17,801,541</u>
Net increase in net assets available for benefits	5,841,168

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of the year	<u>117,925,483</u>
End of the year	<u>\$ 123,766,651</u>

The accompanying notes are an integral part of these financial statements.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN**

The following brief description of the GNC Live Well Later 401(k) Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more comprehensive description of the Plan’s provisions.

General

The Plan is a contributory defined contribution plan covering all employees, except for nonresident aliens, leased employees, and employees covered by a collective bargaining agreement of GNC Holdings, LLC (formerly General Nutrition Centers, Inc.) (the “Company”) who are 21 years of age or older and have completed at least 30 days of full-time employment with the Company without interruption or have completed 1,000 hours of service within a 12-month eligibility computation period for employees who are not full time and are age 21 or older. Eligible employees are entered into the Plan on the first day of the following month after reaching the necessary service requirement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan is a Fidelity Management Trust Company Volume Submitter Plan.

The Plan allows for full-time employees who are 21 years of age or older and have completed at least 12 months of service to receive discretionary matching contributions. The Plan also allows for the Company to make an additional matching contribution on behalf of each eligible participant in an amount equal to a percentage of the eligible contributions made by each eligible participant during the Plan year. This additional matching contribution may be limited to match-only contributions up to a specified percentage of compensation or limit the amount of the match to a specified dollar amount. An eligible participant must be employed on the last day of the contribution period, as defined in the Plan document, to receive the additional matching contribution.

On December 20, 2019, the Setting Every Community Up for Retirement Enhancement Act (the “SECURE Act”) Act was signed into legislation. The SECURE Act expands retirement access to both employers and employees by changing the rules with respect to required minimum distributions, among others. The SECURE Act includes both required and optional provisions, some of which became effective immediately, and others with various effective dates beginning after December 31, 2019. The required provisions of the SECURE Act that were effective immediately or beginning no later than January 1, 2020, or for Plan years beginning after December 31, 2019, were operationalized accordingly. As of September 16, 2024, the Plan adopted an optional provision amendment, which stated that, in lieu of sending the notices contemplated in the agreement, Fidelity will prepare and distribute an annual reminder notice annually to unenrolled participants. A draft annual reminder notice will be produced and sent to the employer via electronic services.

Contributions

Participants may contribute up to 80 percent of pretax compensation, up to the annual limitations specified by the Internal Revenue Code (IRC) (\$23,000 for 2024 and \$22,500 for 2023). Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan provides for a discretionary match up to a specified percentage of compensation or to a specific dollar amount.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Contributions (Continued)

The Company may also contribute a nonelective contribution and an additional matching contribution as discussed above. In 2024 and 2023, the Company did not make a nonelective contribution or an additional matching contribution.

All participants who have attained age 50 before the close of the Plan year are eligible to make catch-up contributions in accordance with, and subject to the limitations of, IRC Section 414(v). The maximum additional elective deferral for both 2024 and 2023 is limited to \$7,500.

The annual addition (which includes employee and employer contributions) that may be contributed or allocated to a participant's account under the Plan for any limitation year shall not exceed the lesser of \$69,000 and \$66,000 for 2024 and 2023, respectively, as adjusted for increases in the cost of living under Code Section 415(d), or 100 percent of the participant's compensation within the meaning of IRC Section 415(c)(3), for the limitation year.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of (a) the Company's match and nonelective contributions and (b) Plan income, and losses are charged with an allocation of Plan expenses. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is equivalent to the participant's vested account.

Investment Options

Participants may invest their voluntary contributions, rollover contributions, and the Company's contributions, plus actual earnings thereon, into any of the investment options provided by Fidelity Management Trust Company (the "Trustee"). The participants may change their investment election for new contributions and existing balances daily. Redemption fees are applied to specific investments due to a participant invoking an investment change without allowing the investment holding period to expire. The period of time in which the investment must be held, and the fee charged, is determined by the investment.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. The Company’s discretionary matching contribution portion of each participant’s account is subject to the following vesting requirements:

Completed Years of Service*	Percentage of Company’s Contributions Vested
Less than one	0 %
One, but less than two	33 %
Two, but less than three	66 %
Three or more	100 %

\*A completed year of service equates to 1,000 hours of service completed by the participant in a vesting computation period.

Payment of Benefits

A participant who has attained age 59½ or has incurred a hardship (as defined in the Plan document) may receive a disbursement from the Plan. The Plan provides for lump-sum distributions, installment payments, or partial withdrawals for retirement, permanent disability, death, and termination of employment. Upon termination of employment, if the participant’s account balance is \$1,000 or less, a participant will automatically receive a lump-sum payment, less applicable withholding tax. If the participant’s account balance exceeds \$1,000 but is less than \$5,000, a participant’s account will be rolled over to an IRA or other eligible retirement plan as soon as reasonably practicable following the date that employment terminates. A minimum required distribution from the Plan is required, unless the participant is a 5 percent owner of the Company, no later than April 1 of the calendar year following the calendar year that the participant turns 72 or terminates employment, whichever is later. If a participant is a 5 percent owner of the Company, the participant must start receiving a distribution no later than April 1 of the calendar year following the calendar year that the participant turns 72. Once a minimum required distribution is received, subsequent distributions should be received at least annually until all assets in the participant’s account are distributed.

Notes Receivable from Participants

Upon proper application, the Plan provides for notes to be made to participants. The minimum note that a participant may take is \$1,000. Participants may only have one loan outstanding at any given time. The total note from the Plan to a participant will not exceed the lesser of the following amounts:

\$50,000, reduced by the highest outstanding loan balance during the previous 12-month period or an amount equal to 50 percent of any participant’s current vested interest in his/her account.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO THE FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Notes Receivable from Participants (Continued)

The notes bear interest at a fixed rate, which is determined by the Plan Administrator to be a reasonable rate of interest, taking into account the rate that would be charged by commercial lenders for money loaned under similar circumstances. Generally, notes are repayable over a specified period not to exceed five years. However, if the note is to be used for the purchase of a participant's principal residence, the note is repayable over a specified period not to exceed ten years. Notes are secured by promissory notes providing for repayment of principal and interest through payroll deductions. As collateral for the note, the participant gives the Company a security interest in his/her vested accrued benefit in the Plan in an amount equal to the outstanding principal balance of the note plus accrued interest. No other property is given as collateral for the note.

Plan Administration Expenses

Expenses incurred by the Plan Administrator and Trustee for their services and costs in administering the Plan may be paid out of the Plan; however, the Company may pay the Plan expenses directly. A quarterly fee was also deducted from all Plan participants to cover the Plan's administrative costs.

Forfeited Accounts

Any forfeitures occurring during a Plan year shall first be used to pay administrative expenses, if so directed by the Company. To the extent that the forfeitures are not used to reduce administrative expenses, they may be applied to reduce the employer contributions. Forfeited nonvested accounts were used to pay Plan expenses of \$16,884 and \$56,249 for 2024 and 2023, respectively. At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$57,388 and \$40,125, respectively.

**NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Basis of Accounting

The accounts of the Plan are maintained on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of additions and deductions in net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value, as disclosed in Note 4. The Plan presents, in the Statement of Changes in Net Assets Available for Benefits, the net appreciation in the fair value of its investments, which consists of the realized gains and losses from sales of investments and unrealized appreciation on investments. The net change in unrealized appreciation in the fair value of investments is determined by the change in the fair value from the beginning of the year to the end of the year or from the date of purchase to the end of the year. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned on the accrual basis. Dividend income is recorded on the ex-dividend date.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. Delinquent notes receivable from participants are recorded as a deemed distribution based upon the terms of the Plan document. Deemed distributions were \$118,908 for the year ended December 31, 2024.

Corrective Distributions Payable

Amounts payable to participants totaled \$0 and \$2,755 at December 31, 2024 and 2023, respectively, for contributions in excess of amounts allowed by the Internal Revenue Service (IRS). These amounts are recorded as corrective distributions payable, with a corresponding reduction from net assets available from benefits.

Payment of Benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation of fair value of investments.

New Accounting Pronouncements

During 2024 and 2023, various new Accounting Standard Updates (ASUs) were issued by the Financial Accounting Standards Board (FASB). The Plan Administrator of the Plan has determined, based on their review, that no new accounting pronouncements that were issued were applicable to the Plan. As new accounting pronouncements are released, management will assess if they are applicable, and, if they are applicable, their effect will be included in the Notes to Financial Statements.

**NOTE 3 – CERTIFICATIONS BY TRUSTEE**

At December 31, 2024 and 2023, the Plan's investments, notes receivable from participants, and executed transactions therein were held by the Trustee. The following is a summary of the Plan's financial information that is included in the financial statements and supplemental schedule based on information certified by the Trustee as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 3 – CERTIFICATIONS BY TRUSTEE (Continued)**

At December 31, 2024 and 2023, the Plan’s investments and notes receivable from the participants consisted of the following:

	2024	2023
Mutual funds	\$ 112,719,521	\$ 105,217,383
Common/collective fund	9,970,713	10,944,256
Total investments	\$ 122,690,234	\$ 116,161,639
Notes receivable from participants	\$ 1,076,417	\$ 1,424,194

The Plan’s investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$15,031,584 and generated \$301,968 of income from interest and dividends during the year ended December 31, 2024.

The Plan’s notes receivable from participants generated \$102,854 of interest income during the year ended December 31, 2024.

The Plan’s independent auditors did not perform auditing procedures with respect to the investments and notes receivable from participants that were certified by the Trustee at December 31, 2024 and 2023, except for comparing such information to the related information included in the financial statements and supplemental schedule.

**NOTE 4 – FAIR VALUE MEASUREMENTS**

Accounting Standards Codification (ASC) Topic 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level II) and the lowest priority to unobservable inputs (Level III). The three levels of the fair value hierarchy under FASB ASC Topic 820 are described as follows:

Level I            Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level II            Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level II input must be observable for substantially the full term of the asset or liability.

Level III            Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 4 – FAIR VALUE MEASUREMENTS (Continued)**

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

The common/collective funds are valued at the net asset value (NAV) obtained directly from the fund house or other insurance provider. The NAV is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported NAV. Participant transactions (purchases and sales) may occur daily.

The valuation of investments at December 31, 2024 and 2023, is prepared by the Trustee.

The Plan’s investments at fair value, within the fair value hierarchy, are as follows as of December 31, 2024 and 2023:

	December 31, 2024			
	Level I	Level II	Level III	Total
Mutual funds	\$ 112,719,521	\$ -	\$ -	\$ 112,719,521
Common/collective funds (a)	-	-	-	9,970,713
Total assets in the fair value hierarchy	\$ -	\$ -	\$ -	\$ 122,690,234
	December 31, 2023			
	Level I	Level II	Level III	Total
Mutual funds	\$ 105,217,383	\$ -	\$ -	\$ 105,217,383
Common/collective funds (a)	-	-	-	10,944,256
Total assets in the fair value hierarchy	\$ -	\$ -	\$ -	\$ 116,161,639

- (a) In accordance with Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the Statements of Net Assets Available for Benefits.

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

Mutual Funds

Valued at the daily closing price, as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission (SEC). These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common/Collective Funds

Common/collective funds represent investments held in pooled funds that are valued based on the NAV provided by the funds as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund, less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective funds, a twelve-month notice period for \$9,970,713 invested in the Invesco Stable Value Fund would be required. There were no other significant redemption restrictions or unfunded commitments on these investments as of December 31, 2024.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 5 – RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

**NOTE 6 – TAX STATUS**

Although the Plan has not requested a determination from the IRS as to the Plan's tax-exempt status, the volume submitter plan from which the Plan was drafted has received a favorable determination letter from the IRS dated June 30, 2020. The prototype plan has been amended since receiving its determination letter. The Plan Administrator believes that the Plan, as amended, is designed to operate in accordance with all applicable provisions of the IRC. Therefore, the Plan Administrator believes that the Plan is qualified and that the related trust is exempt from taxation under the IRC.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Company has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator believes as of December 31, 2024 and 2023, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes that it is no longer subject to income tax examinations for years prior to 2021.

**NOTE 7 – PARTY-IN-INTEREST TRANSACTIONS**

Certain Plan investments are managed by the Trustee as defined by the Plan document. Transactions with the Trustee qualify as party-in-interest transactions. Fees for investment management services are included in administrative expenses. Direct fees paid by the Plan for trustee, recordkeeping services, investments management services, and audit services were \$337,449 for the year ended December 31, 2024. The Company absorbs certain costs incurred in relation to the administration of the Plan. Such costs include accounting fees. These costs amounted to \$25,000 for the year ended December 31, 2024. These transactions are party-in-interest transactions under ERISA.

**NOTE 8 – PLAN TERMINATION**

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event the Plan is terminated, participants would become fully vested in their employer contributions. Assets will be allocated to each participant based on their respective account balance after payment of all final liquidation or termination expenses, pursuant to the directions of the Plan Administrator.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 9 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500**

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the year ended December 31, 2024 and 2023, to Form 5500:

	2024
Net increase in net assets available for benefits per the financial statements	\$ 5,841,168
Prior-year employer contribution receivable at December 31, 2023	135,515
Prior-year participant contribution receivable at December 31, 2023	206,890
Net increase in net assets available for benefits per the Form 5500	\$ 6,183,573
	2023
Net assets available for benefits per the financial statements	\$ 117,925,483
Employer contribution receivable at December 31, 2022	(135,515)
Participant match contribution receivable at December 31, 2022	(206,890)
Net increase in net assets available for benefits per the Form 5500	\$ 117,583,078

**NOTE 10 – SUBSEQUENT EVENTS**

The Plan Administrator has evaluated subsequent events in accordance with ASC Topic 855, *Subsequent Events*, through September 26, 2025, which is the date the financial statements were available to be issued, and no subsequent events occurred requiring accrual or disclosure.

SUPPLEMENTAL INFORMATION

GNC LIVE WELL LATER 401(K) PLAN  
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)  
YEAR ENDED DECEMBER 31, 2024  
PLAN NUMBER – 004  
EIN 85-3101739

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investments	(d) Cost	(e) Current Value
<u>Mutual funds</u>				
	Aon Hewill	Aon Hewill Core Plus Bond – Class I	215,071 shares	N/R \$ 2,471,166
	Aon Hewill	Aon Hewill Inflation Strategy – Class I	64,818 shares	N/R 804,387
	Aon Hewill	Aon Hewill Large Cap Equity – Class I	440,642 shares	N/R 17,995,803
	Aon Hewill	Aon Hewill Non-US Equity – Class I	396,550 shares	N/R 7,728,764
	Aon Hewill	Aon Hewill Small & Mid Cap Equity – Class I	202,174 shares	N/R 5,062,448
	State Street	State Street Global All Cap Equity Ex-US Index Non-Lending Series Fund Class K	125,504 shares	N/R 1,970,030
	State Street	State Street Russell Small/Mid Cap Index Non-Lending Series Fund Class K	310,829 shares	N/R 8,239,770
	State Street	State Street S&P 500 Index Non-Lending Series Fund Class K	472,850 shares	N/R 26,738,712
	State Street	State Street US Bond Index Non-Lending Series Fund Class M	379,065 shares	N/R 4,262,207
	State Street	State Street Ret Inc IV	44,196 shares	N/R 622,814
	State Street	State Street Retirement 2020 IV	82,591 shares	N/R 1,227,135
	State Street	State Street Retirement 2025 IV	240,279 shares	N/R 3,847,099
	State Street	State Street Retirement 2030 IV	246,451 shares	N/R 4,172,165
	State Street	State Street Retirement 2035 IV	329,916 shares	N/R 5,756,375
	State Street	State Street Retirement 2040 IV	211,722 shares	N/R 3,805,913
	State Street	State Street Retirement 2045 IV	334,155 shares	N/R 6,161,487
	State Street	State Street Retirement 2050 IV	232,111 shares	N/R 4,356,024
	State Street	State Street Retirement 2055 IV	291,953 shares	N/R 5,486,675
	State Street	State Street Retirement 2060 IV	104,349 shares	N/R 1,960,929
	State Street	State Street Retirement 2065 IV	3,388 shares	N/R 49,618
		Total Mutual Funds:		112,719,521
<u>Common/collective funds</u>				
	Invesco	Invesco Stable Value	9,970,713 shares	N/R 9,970,713
<u>Loans</u>				
*	Participant loans	Interest rates of 4.25% – 9.5% maturity dates vary from years 2025 to 2034		1,076,417
				\$ 123,766,651

\* Party in interest

N/R – not required

# **GNC Live Well Later 401(k) Plan**

Pittsburgh, Pennsylvania

Financial Statements

December 31, 2024



GNC LIVE WELL LATER 401(K) PLAN  
DECEMBER 31, 2024

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## INDEPENDENT AUDITOR'S REPORT

Plan Administrator  
GNC Live Well Later 401(k) Plan

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

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

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

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

### **Opinion**

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

- The amounts and disclosures in the accompanying financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

#### **PITTSBURGH, PA**

2009 Mackenzie Way • Suite 340  
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(724) 934-0344

#### **PHILADELPHIA, PA**

161 Washington Street • Suite 200  
Conshohocken, PA 19428  
(610) 278-9800

#### **WHEELING, WV**

980 National Road  
Wheeling, WV 26003  
(304) 233-5030

#### **STEUBENVILLE, OH**

511 N. Fourth Street  
Steubenville, OH 43952  
(304) 233-5030

**Opinion (Continued)**

- The information in the accompanying financial statements related to assets held by and certified to by Fidelity Investments agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

**Basis for Opinion**

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

**Responsibilities of Management for the Financial Statements**

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

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

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

**Auditor's Responsibilities for the Audit of the Financial Statements**

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



### **Auditor's Responsibilities for the Audit of the Financial Statements (Continued)**

In performing an audit in accordance with GAAS, we:

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

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

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

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



**Other Matters**

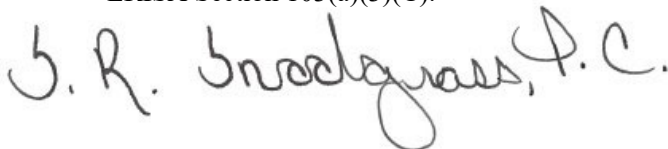
***Supplemental Schedule Required by ERISA***

The supplemental schedule of Schedule H, Line 4i – Schedule of Assets (Held at End of Year) as of December 31, 2024, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from, and relates directly to, the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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



Cranberry Township, Pennsylvania  
September 26, 2025

GNC LIVE WELL LATER 401(K) PLAN  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

	December 31,	
	2024	2023
<b>ASSETS</b>		
Mutual funds	\$ 112,719,521	\$ 105,217,383
Common/collective fund	9,970,713	10,944,256
Receivables:		
Employer contribution	-	135,515
Participant contribution	-	206,890
Notes from participants	1,076,417	1,424,194
Total receivables	1,076,417	1,766,599
<b>TOTAL ASSETS</b>	<b>123,766,651</b>	<b>117,928,238</b>
<b>LIABILITIES</b>		
Corrective distributions payable	-	2,755
<b>NET ASSETS AVAILABLE FOR BENEFITS</b>	<b>\$ 123,766,651</b>	<b>\$ 117,925,483</b>

The accompanying notes are an integral part of these financial statements.

GNC LIVE WELL LATER 401(K) PLAN  
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
FOR THE YEAR ENDED DECEMBER 31, 2024

ADDITIONS:

Investment income:	
Net appreciation in fair value of investments	\$ 15,031,584
Interest and dividends	<u>301,968</u>
Total investment income	15,333,552
Interest income on notes receivable from participants	<u>102,854</u>
Contributions:	
Employer contributions	2,387,890
Employee contributions	5,590,230
Rollovers	<u>228,183</u>
Total contributions	<u>8,206,303</u>
Total additions	<u>23,642,709</u>

DEDUCTIONS:

Benefits paid to participants	17,345,184
Deemed distributions	118,908
Administrative expenses	<u>337,449</u>
Total deductions	<u>17,801,541</u>
Net increase in net assets available for benefits	5,841,168

NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of the year	<u>117,925,483</u>
End of the year	<u>\$ 123,766,651</u>

The accompanying notes are an integral part of these financial statements.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN**

The following brief description of the GNC Live Well Later 401(k) Plan (the “Plan”) provides only general information. Participants should refer to the Plan document for a more comprehensive description of the Plan’s provisions.

General

The Plan is a contributory defined contribution plan covering all employees, except for nonresident aliens, leased employees, and employees covered by a collective bargaining agreement of GNC Holdings, LLC (formerly General Nutrition Centers, Inc.) (the “Company”) who are 21 years of age or older and have completed at least 30 days of full-time employment with the Company without interruption or have completed 1,000 hours of service within a 12-month eligibility computation period for employees who are not full time and are age 21 or older. Eligible employees are entered into the Plan on the first day of the following month after reaching the necessary service requirement. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan is a Fidelity Management Trust Company Volume Submitter Plan.

The Plan allows for full-time employees who are 21 years of age or older and have completed at least 12 months of service to receive discretionary matching contributions. The Plan also allows for the Company to make an additional matching contribution on behalf of each eligible participant in an amount equal to a percentage of the eligible contributions made by each eligible participant during the Plan year. This additional matching contribution may be limited to match-only contributions up to a specified percentage of compensation or limit the amount of the match to a specified dollar amount. An eligible participant must be employed on the last day of the contribution period, as defined in the Plan document, to receive the additional matching contribution.

On December 20, 2019, the Setting Every Community Up for Retirement Enhancement Act (the “SECURE Act”) Act was signed into legislation. The SECURE Act expands retirement access to both employers and employees by changing the rules with respect to required minimum distributions, among others. The SECURE Act includes both required and optional provisions, some of which became effective immediately, and others with various effective dates beginning after December 31, 2019. The required provisions of the SECURE Act that were effective immediately or beginning no later than January 1, 2020, or for Plan years beginning after December 31, 2019, were operationalized accordingly. As of September 16, 2024, the Plan adopted an optional provision amendment, which stated that, in lieu of sending the notices contemplated in the agreement, Fidelity will prepare and distribute an annual reminder notice annually to unenrolled participants. A draft annual reminder notice will be produced and sent to the employer via electronic services.

Contributions

Participants may contribute up to 80 percent of pretax compensation, up to the annual limitations specified by the Internal Revenue Code (IRC) (\$23,000 for 2024 and \$22,500 for 2023). Participants may also contribute amounts representing distributions from other qualified defined benefit or contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan. The Plan provides for a discretionary match up to a specified percentage of compensation or to a specific dollar amount.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Contributions (Continued)

The Company may also contribute a nonelective contribution and an additional matching contribution as discussed above. In 2024 and 2023, the Company did not make a nonelective contribution or an additional matching contribution.

All participants who have attained age 50 before the close of the Plan year are eligible to make catch-up contributions in accordance with, and subject to the limitations of, IRC Section 414(v). The maximum additional elective deferral for both 2024 and 2023 is limited to \$7,500.

The annual addition (which includes employee and employer contributions) that may be contributed or allocated to a participant's account under the Plan for any limitation year shall not exceed the lesser of \$69,000 and \$66,000 for 2024 and 2023, respectively, as adjusted for increases in the cost of living under Code Section 415(d), or 100 percent of the participant's compensation within the meaning of IRC Section 415(c)(3), for the limitation year.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of (a) the Company's match and nonelective contributions and (b) Plan income, and losses are charged with an allocation of Plan expenses. Allocations are based on participant earnings or account balances, as defined in the Plan document. The benefit to which a participant is entitled is equivalent to the participant's vested account.

Investment Options

Participants may invest their voluntary contributions, rollover contributions, and the Company's contributions, plus actual earnings thereon, into any of the investment options provided by Fidelity Management Trust Company (the "Trustee"). The participants may change their investment election for new contributions and existing balances daily. Redemption fees are applied to specific investments due to a participant invoking an investment change without allowing the investment holding period to expire. The period of time in which the investment must be held, and the fee charged, is determined by the investment.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Vesting

Participants are vested immediately in their contributions plus actual earnings thereon. The Company’s discretionary matching contribution portion of each participant’s account is subject to the following vesting requirements:

<u>Completed Years of Service*</u>	<u>Percentage of Company’s Contributions Vested</u>
Less than one	0 %
One, but less than two	33 %
Two, but less than three	66 %
Three or more	100 %

\*A completed year of service equates to 1,000 hours of service completed by the participant in a vesting computation period.

Payment of Benefits

A participant who has attained age 59½ or has incurred a hardship (as defined in the Plan document) may receive a disbursement from the Plan. The Plan provides for lump-sum distributions, installment payments, or partial withdrawals for retirement, permanent disability, death, and termination of employment. Upon termination of employment, if the participant’s account balance is \$1,000 or less, a participant will automatically receive a lump-sum payment, less applicable withholding tax. If the participant’s account balance exceeds \$1,000 but is less than \$5,000, a participant’s account will be rolled over to an IRA or other eligible retirement plan as soon as reasonably practicable following the date that employment terminates. A minimum required distribution from the Plan is required, unless the participant is a 5 percent owner of the Company, no later than April 1 of the calendar year following the calendar year that the participant turns 72 or terminates employment, whichever is later. If a participant is a 5 percent owner of the Company, the participant must start receiving a distribution no later than April 1 of the calendar year following the calendar year that the participant turns 72. Once a minimum required distribution is received, subsequent distributions should be received at least annually until all assets in the participant’s account are distributed.

Notes Receivable from Participants

Upon proper application, the Plan provides for notes to be made to participants. The minimum note that a participant may take is \$1,000. Participants may only have one loan outstanding at any given time. The total note from the Plan to a participant will not exceed the lesser of the following amounts:

\$50,000, reduced by the highest outstanding loan balance during the previous 12-month period or an amount equal to 50 percent of any participant’s current vested interest in his/her account.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO THE FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 1 – DESCRIPTION OF PLAN (Continued)**

Notes Receivable from Participants (Continued)

The notes bear interest at a fixed rate, which is determined by the Plan Administrator to be a reasonable rate of interest, taking into account the rate that would be charged by commercial lenders for money loaned under similar circumstances. Generally, notes are repayable over a specified period not to exceed five years. However, if the note is to be used for the purchase of a participant's principal residence, the note is repayable over a specified period not to exceed ten years. Notes are secured by promissory notes providing for repayment of principal and interest through payroll deductions. As collateral for the note, the participant gives the Company a security interest in his/her vested accrued benefit in the Plan in an amount equal to the outstanding principal balance of the note plus accrued interest. No other property is given as collateral for the note.

Plan Administration Expenses

Expenses incurred by the Plan Administrator and Trustee for their services and costs in administering the Plan may be paid out of the Plan; however, the Company may pay the Plan expenses directly. A quarterly fee was also deducted from all Plan participants to cover the Plan's administrative costs.

Forfeited Accounts

Any forfeitures occurring during a Plan year shall first be used to pay administrative expenses, if so directed by the Company. To the extent that the forfeitures are not used to reduce administrative expenses, they may be applied to reduce the employer contributions. Forfeited nonvested accounts were used to pay Plan expenses of \$16,884 and \$56,249 for 2024 and 2023, respectively. At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$57,388 and \$40,125, respectively.

**NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES**

Basis of Accounting

The accounts of the Plan are maintained on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and disclosure of contingent assets and liabilities as of the date of the financial statements and the reported amounts of additions and deductions in net assets available for benefits during the reporting period. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments are reported at fair value, as disclosed in Note 4. The Plan presents, in the Statement of Changes in Net Assets Available for Benefits, the net appreciation in the fair value of its investments, which consists of the realized gains and losses from sales of investments and unrealized appreciation on investments. The net change in unrealized appreciation in the fair value of investments is determined by the change in the fair value from the beginning of the year to the end of the year or from the date of purchase to the end of the year. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded as earned on the accrual basis. Dividend income is recorded on the ex-dividend date.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 2 – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)**

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Related fees are charged directly to the borrowing participant's account and are included in administrative expenses when incurred. Delinquent notes receivable from participants are recorded as a deemed distribution based upon the terms of the Plan document. Deemed distributions were \$118,908 for the year ended December 31, 2024.

Corrective Distributions Payable

Amounts payable to participants totaled \$0 and \$2,755 at December 31, 2024 and 2023, respectively, for contributions in excess of amounts allowed by the Internal Revenue Service (IRS). These amounts are recorded as corrective distributions payable, with a corresponding reduction from net assets available from benefits.

Payment of Benefits

Benefits are recorded when paid.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation of fair value of investments.

New Accounting Pronouncements

During 2024 and 2023, various new Accounting Standard Updates (ASUs) were issued by the Financial Accounting Standards Board (FASB). The Plan Administrator of the Plan has determined, based on their review, that no new accounting pronouncements that were issued were applicable to the Plan. As new accounting pronouncements are released, management will assess if they are applicable, and, if they are applicable, their effect will be included in the Notes to Financial Statements.

**NOTE 3 – CERTIFICATIONS BY TRUSTEE**

At December 31, 2024 and 2023, the Plan's investments, notes receivable from participants, and executed transactions therein were held by the Trustee. The following is a summary of the Plan's financial information that is included in the financial statements and supplemental schedule based on information certified by the Trustee as complete and accurate in accordance with Section 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 3 – CERTIFICATIONS BY TRUSTEE (Continued)**

At December 31, 2024 and 2023, the Plan’s investments and notes receivable from the participants consisted of the following:

	2024	2023
Mutual funds	\$ 112,719,521	\$ 105,217,383
Common/collective fund	9,970,713	10,944,256
Total investments	\$ 122,690,234	\$ 116,161,639
Notes receivable from participants	\$ 1,076,417	\$ 1,424,194

The Plan’s investments (including gains and losses on investments bought and sold, as well as held during the year) appreciated in value by \$15,031,584 and generated \$301,968 of income from interest and dividends during the year ended December 31, 2024.

The Plan’s notes receivable from participants generated \$102,854 of interest income during the year ended December 31, 2024.

The Plan’s independent auditors did not perform auditing procedures with respect to the investments and notes receivable from participants that were certified by the Trustee at December 31, 2024 and 2023, except for comparing such information to the related information included in the financial statements and supplemental schedule.

**NOTE 4 – FAIR VALUE MEASUREMENTS**

Accounting Standards Codification (ASC) Topic 820, *Fair Value Measurements and Disclosures*, establishes a framework for measuring fair value. The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level II) and the lowest priority to unobservable inputs (Level III). The three levels of the fair value hierarchy under FASB ASC Topic 820 are described as follows:

Level I            Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.

Level II            Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in inactive markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from or corroborated by observable market data by correlation or other means.

If the asset or liability has a specified (contractual) term, the Level II input must be observable for substantially the full term of the asset or liability.

Level III            Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO THE FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 4 – FAIR VALUE MEASUREMENTS (Continued)**

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

The common/collective funds are valued at the net asset value (NAV) obtained directly from the fund house or other insurance provider. The NAV is used as a practical expedient to estimate fair value. This practical expedient would not be used if it is determined to be probable that the fund will sell the investment for an amount different from the reported NAV. Participant transactions (purchases and sales) may occur daily.

The valuation of investments at December 31, 2024 and 2023, is prepared by the Trustee.

The Plan’s investments at fair value, within the fair value hierarchy, are as follows as of December 31, 2024 and 2023:

	December 31, 2024			
	Level I	Level II	Level III	Total
Mutual funds	\$ 112,719,521	\$ -	\$ -	\$ 112,719,521
Common/collective funds (a)	-	-	-	9,970,713
Total assets in the fair value hierarchy	\$ -	\$ -	\$ -	\$ 122,690,234
	December 31, 2023			
	Level I	Level II	Level III	Total
Mutual funds	\$ 105,217,383	\$ -	\$ -	\$ 105,217,383
Common/collective funds (a)	-	-	-	10,944,256
Total assets in the fair value hierarchy	\$ -	\$ -	\$ -	\$ 116,161,639

- (a) In accordance with Subtopic 820-10, certain investments that were measured at NAV per share (or its equivalent) have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the line items presented in the Statements of Net Assets Available for Benefits.

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

Mutual Funds

Valued at the daily closing price, as reported by the fund. Mutual funds held by the Plan are open-end mutual funds that are registered with the Securities and Exchange Commission (SEC). These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Common/Collective Funds

Common/collective funds represent investments held in pooled funds that are valued based on the NAV provided by the funds as a practical expedient to estimate fair value. The NAV is based on the fair value of the underlying investments held by the fund, less its liabilities. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the collective funds, a twelve-month notice period for \$9,970,713 invested in the Invesco Stable Value Fund would be required. There were no other significant redemption restrictions or unfunded commitments on these investments as of December 31, 2024.

GNC LIVE WELL LATER 401(K) PLAN  
NOTES TO FINANCIAL STATEMENTS (Continued)  
FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 5 – RISKS AND UNCERTAINTIES**

The Plan invests in various investment securities. Investment securities are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the Statements of Net Assets Available for Benefits.

**NOTE 6 – TAX STATUS**

Although the Plan has not requested a determination from the IRS as to the Plan's tax-exempt status, the volume submitter plan from which the Plan was drafted has received a favorable determination letter from the IRS dated June 30, 2020. The prototype plan has been amended since receiving its determination letter. The Plan Administrator believes that the Plan, as amended, is designed to operate in accordance with all applicable provisions of the IRC. Therefore, the Plan Administrator believes that the Plan is qualified and that the related trust is exempt from taxation under the IRC.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Company has taken an uncertain tax position that more likely than not would not be sustained upon examination by the IRS. The Plan Administrator believes as of December 31, 2024 and 2023, there are no uncertain tax positions taken or expected to be taken that would require recognition of a liability or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan Administrator believes that it is no longer subject to income tax examinations for years prior to 2021.

**NOTE 7 – PARTY-IN-INTEREST TRANSACTIONS**

Certain Plan investments are managed by the Trustee as defined by the Plan document. Transactions with the Trustee qualify as party-in-interest transactions. Fees for investment management services are included in administrative expenses. Direct fees paid by the Plan for trustee, recordkeeping services, investments management services, and audit services were \$337,449 for the year ended December 31, 2024. The Company absorbs certain costs incurred in relation to the administration of the Plan. Such costs include accounting fees. These costs amounted to \$25,000 for the year ended December 31, 2024. These transactions are party-in-interest transactions under ERISA.

**NOTE 8 – PLAN TERMINATION**

Although it has not expressed any intention to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event the Plan is terminated, participants would become fully vested in their employer contributions. Assets will be allocated to each participant based on their respective account balance after payment of all final liquidation or termination expenses, pursuant to the directions of the Plan Administrator.

GNC LIVE WELL LATER 401(K) PLAN  
 NOTES TO FINANCIAL STATEMENTS (Continued)  
 FOR THE YEAR ENDED DECEMBER 31, 2024

**NOTE 9 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500**

The following is a reconciliation of changes in net assets available for benefits per the financial statements for the year ended December 31, 2024 and 2023, to Form 5500:

	2024
Net increase in net assets available for benefits per the financial statements	\$ 5,841,168
Prior-year employer contribution receivable at December 31, 2023	135,515
Prior-year participant contribution receivable at December 31, 2023	206,890
Net increase in net assets available for benefits per the Form 5500	\$ 6,183,573
	2023
Net assets available for benefits per the financial statements	\$ 117,925,483
Employer contribution receivable at December 31, 2022	(135,515)
Participant match contribution receivable at December 31, 2022	(206,890)
Net increase in net assets available for benefits per the Form 5500	\$ 117,583,078

**NOTE 10 – SUBSEQUENT EVENTS**

The Plan Administrator has evaluated subsequent events in accordance with ASC Topic 855, *Subsequent Events*, through September 26, 2025, which is the date the financial statements were available to be issued, and no subsequent events occurred requiring accrual or disclosure.

SUPPLEMENTAL INFORMATION

GNC LIVE WELL LATER 401(K) PLAN  
SCHEDULE H, LINE 4i – SCHEDULE OF ASSETS (HELD AT END OF YEAR)  
YEAR ENDED DECEMBER 31, 2024  
PLAN NUMBER – 004  
EIN 85-3101739

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investments	(d) Cost	(e) Current Value
<u>Mutual funds</u>				
	Aon Hewill	Aon Hewill Core Plus Bond – Class I	215,071 shares	N/R \$ 2,471,166
	Aon Hewill	Aon Hewill Inflation Strategy – Class I	64,818 shares	N/R 804,387
	Aon Hewill	Aon Hewill Large Cap Equity – Class I	440,642 shares	N/R 17,995,803
	Aon Hewill	Aon Hewill Non-US Equity – Class I	396,550 shares	N/R 7,728,764
	Aon Hewill	Aon Hewill Small & Mid Cap Equity – Class I	202,174 shares	N/R 5,062,448
	State Street	State Street Global All Cap Equity Ex-US Index Non-Lending Series Fund Class K	125,504 shares	N/R 1,970,030
	State Street	State Street Russell Small/Mid Cap Index Non-Lending Series Fund Class K	310,829 shares	N/R 8,239,770
	State Street	State Street S&P 500 Index Non-Lending Series Fund Class K	472,850 shares	N/R 26,738,712
	State Street	State Street US Bond Index Non-Lending Series Fund Class M	379,065 shares	N/R 4,262,207
	State Street	State Street Ret Inc IV	44,196 shares	N/R 622,814
	State Street	State Street Retirement 2020 IV	82,591 shares	N/R 1,227,135
	State Street	State Street Retirement 2025 IV	240,279 shares	N/R 3,847,099
	State Street	State Street Retirement 2030 IV	246,451 shares	N/R 4,172,165
	State Street	State Street Retirement 2035 IV	329,916 shares	N/R 5,756,375
	State Street	State Street Retirement 2040 IV	211,722 shares	N/R 3,805,913
	State Street	State Street Retirement 2045 IV	334,155 shares	N/R 6,161,487
	State Street	State Street Retirement 2050 IV	232,111 shares	N/R 4,356,024
	State Street	State Street Retirement 2055 IV	291,953 shares	N/R 5,486,675
	State Street	State Street Retirement 2060 IV	104,349 shares	N/R 1,960,929
	State Street	State Street Retirement 2065 IV	3,388 shares	N/R 49,618
		Total Mutual Funds:		112,719,521
<u>Common/collective funds</u>				
	Invesco	Invesco Stable Value	9,970,713 shares	N/R 9,970,713
<u>Loans</u>				
*	Participant loans	Interest rates of 4.25% – 9.5% maturity dates vary from years 2025 to 2034		1,076,417
				\$ 123,766,651

\* Party in interest

N/R – not required