

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 <div style="font-size: 24pt; font-weight: bold; text-align: center;">2024</div> This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

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

a single-employer plan a DFE (specify) E

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

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

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

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

special extension (enter description)

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

Part II	Basic Plan Information—enter all requested information
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1a Name of plan <u>FIXED INCOME GROUP TRUST (A FUND WITHIN THE MARCO CONSULTING GROUP TRUST I)</u>	1b Three-digit plan number (PN) ▶ <u>002</u>
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>SEGAL ADVISORS, INC.</u> <u>550 WEST WASHINGTON BLVD,</u> <u>SUITE 400</u> <u>CHICAGO, IL 60661-2703</u>	1c Effective date of plan 2b Employer Identification Number (EIN) <u>27-6230536</u> 2c Plan Sponsor's telephone number <u>312-575-9000</u> 2d Business code (see instructions)

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

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

SIGN HERE		Date	Enter name of individual signing as plan administrator
	Signature of plan administrator		
SIGN HERE		Date	Enter name of individual signing as employer or plan sponsor
	Signature of employer/plan sponsor		
SIGN HERE	<u>Filed with authorized/valid electronic signature.</u>	<u>10/13/2025</u>	<u>DALIUS SAVICKAS</u>
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor SEGAL ADVISORS, INC. 333 WEST 34TH STREET NEW YORK, NY 10001	3b Administrator's EIN 27-6230536 3c Administrator's telephone number 212-251-5000																				
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN 4d PN																				
5 Total number of participants at the beginning of the plan year	5																				
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<table border="1" style="width:100%; border-collapse: collapse;"> <tr><td style="width:100%;">6a(1)</td><td></td></tr> <tr><td>6a(2)</td><td></td></tr> <tr><td>6b</td><td></td></tr> <tr><td>6c</td><td></td></tr> <tr><td>6d</td><td style="text-align: right;">0</td></tr> <tr><td>6e</td><td></td></tr> <tr><td>6f</td><td></td></tr> <tr><td>6g(1)</td><td></td></tr> <tr><td>6g(2)</td><td></td></tr> <tr><td>6h</td><td></td></tr> </table>	6a(1)		6a(2)		6b		6c		6d	0	6e		6f		6g(1)		6g(2)		6h	
6a(1)																					
6a(2)																					
6b																					
6c																					
6d	0																				
6e																					
6f																					
6g(1)																					
6g(2)																					
6h																					
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	7																				

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

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

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

a Pension Schedules (1) <input type="checkbox"/> R (Retirement Plan Information) (2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	b General Schedules (1) <input checked="" type="checkbox"/> H (Financial Information) (2) <input type="checkbox"/> I (Financial Information – Small Plan) (3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u> (4) <input checked="" type="checkbox"/> C (Service Provider Information) (5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information) (6) <input type="checkbox"/> G (Financial Transaction Schedules)
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Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

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

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

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

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

Receipt Confirmation Code _____

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

A Name of plan FIXED INCOME GROUP TRUST (A FUND WITHIN THE MARCO CONSULTING GROUP TRUST I)	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 SEGAL ADVISORS, INC.	D Employer Identification Number (EIN) 27-6230536	

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

BRIGADE LOAN FUND LTD.

98-1640935

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

WTC-CTF OPPORTUNISTIC FIXED

90-6110062

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

PIMCO COLLECTIVE INVESTMENT TRUST

27-0834899

(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)

PIMCO LLC

33-0629048

(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?
28 51	NONE	347387	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)

ROBERT W. BAIRD & CO.

39-6037917

(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?
28 51	NONE	310517	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)

WESTERN ASSET MANAGEMENT

95-2705767

(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?
28 51	NONE	276072	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"/>

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)

LOOMIS SAYLES & COMPANY, LP

04-3200030

(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?
28 51	NONE	251381	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)

MERGANSER CAPITAL MANAGEMENT

46-3651540

(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?
28 51	NONE	177616	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)

BANK OF NY MELLON

13-5160382

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
19 50	NONE	122908	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"/>

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)

COHNREZNICK LLP

22-1478099

(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?
10 50	NONE	79591	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)

FACTSET RESEARCH SYSTEMS

13-3362547

(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?
99 50	NONE	25602	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)

EISNER ADVISORY GROUP LLC

87-1353108

(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?
10 50	NONE	5776	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"/>

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)

INTEGRATED INVESTMENT

59-3809671

(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?
10 50	NONE	5250	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>FIXED INCOME GROUP TRUST (A FUND WITHIN THE MARCO CONSULTING GROUP TRUST I)</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>SEGAL ADVISORS, INC.</u>	D Employer Identification Number (EIN) <u>27-6230536</u>	

Part I	Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)
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a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WTC-CTF OPPORTUNISTIC FIXED INCOME</u>		
b Name of sponsor of entity listed in (a): <u>WELLINGTON TRUST COMPANY</u>		
c EIN-PN <u>90-6110062-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>79253290</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>LOOMIS SAYLES MULTISECTOR FULL DISC</u>		
b Name of sponsor of entity listed in (a): <u>LOOMIS SAYLES</u>		
c EIN-PN <u>84-6391546-007</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>80487855</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BRIGADE LOAN FUND LTD.</u>		
b Name of sponsor of entity listed in (a): <u>BRIGADE CAPITAL MANAGEMENT, LP</u>		
c EIN-PN <u>20-4895879-001</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>32099704</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>BNY MELLON EB TEMPORARY INVESTMENT</u>		
b Name of sponsor of entity listed in (a): <u>THE BANK OF NEW YORK MELLON</u>		
c EIN-PN <u>25-6078093-023</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>20552035</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>WESTERN ASSET US CORE PLUS, LLC</u>		
b Name of sponsor of entity listed in (a): <u>WAMCO</u>		
c EIN-PN <u>20-1575788-001</u>	d Entity code <u>E</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>0</u>
a Name of MTIA, CCT, PSA, or 103-12 IE: <u>PIMCO COLLECTIVE INVESTMENT TRUST</u>		
b Name of sponsor of entity listed in (a): <u>PIMCO</u>		
c EIN-PN <u>27-0834899-035</u>	d Entity code <u>C</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>240067480</u>
a Name of MTIA, CCT, PSA, or 103-12 IE:		
b Name of sponsor of entity listed in (a):		
c EIN-PN	d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

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

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

c EIN-PN

d Entity code

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

Part II	Information on Participating Plans (to be completed by DFEs, other than DCGs)	
	(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)	
a	Plan name 1199 SEIU REGIONAL PENSION FUND	
b	Name of plan sponsor TRUSTEES OF 1199 SEIU REGIONAL PENSION FUND	c EIN-PN 16-1112391-001
a	Plan name AMERICAN POSTAL WORKERS UNION EMPLOYEES RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN POSTAL WORKERS UNION, AFL-CIO	c EIN-PN 52-0913725-001
a	Plan name AMERICAN POSTAL WORKERS UNION HEALTH PLAN EMPLOYEES PENSION PLAN	
b	Name of plan sponsor AMERICAN POSTAL WORKERS UNION, AFL-CIO HEALTH PLAN	c EIN-PN 52-0940594-001
a	Plan name AMERICAN POSTAL WORKERS UNION HEALTH PLAN MANAGEMENT STAFF PENSION PLAN	
b	Name of plan sponsor AMERICAN POSTAL WORKERS UNION, AFL-CIO HEALTH PLAN	c EIN-PN 52-0940594-002
a	Plan name AMERICAN POSTAL WORKERS UNION OFFICERS QUALIFIED RETIREMENT PLAN	
b	Name of plan sponsor AMERICAN POSTAL WORKERS UNION, AFL-CIO	c EIN-PN 52-0913725-002
a	Plan name BAC LOCAL 23 NORTH SHORE CHAPTER PENSION FUND	
b	Name of plan sponsor JOINT BOARD OF TRUSTEES OF BAC LOCAL 23 NORTH SHORE CHAPTER PENSION FU	c EIN-PN 62-1523674-001
a	Plan name COLORADO IRON WORKERS DEFINED CONTRIBUTION FUND	
b	Name of plan sponsor TRUSTEES - COLORADO IRON WORKERS DEFINED CONTRIBUTION FUND	c EIN-PN 26-2458073-001
a	Plan name COLORADO IRON WORKERS INDIVIDUAL ACCOUNT TRUST FUND	
b	Name of plan sponsor TRUSTEES - COLORADO IRON WORKERS INDIVIDUAL ACCOUNT TRUST FUND	c EIN-PN 84-1230960-001
a	Plan name COMMUNICATIONS WORKERS LOCAL 1109 PENSION FUND	
b	Name of plan sponsor COMMUNICATIONS WORKERS LOCAL 1109	c EIN-PN 22-6298155-001
a	Plan name COMMUNICATIONS WORKERS OF AMERICA PLAN FOR EMPLOYEES PENSIONS	
b	Name of plan sponsor COMMUNICATIONS WORKERS OF AMERICA	c EIN-PN 53-0246709-001
a	Plan name CONNECTICUT HEALTH CARE ASSOCIATES PENSION FUND	
b	Name of plan sponsor CONNECTICUT HEALTH CARE ASSOCIATES PENSION FUND	c EIN-PN 06-1313462-001
a	Plan name DC 37 LOCAL 389 HOME CARE EMPLOYEES PENSION FUND	
b	Name of plan sponsor DC 37 LOCAL 389 HOME CARE EMPLOYEES PENSION FUND	c EIN-PN 13-3698650-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	I.U.O.E. LOCAL 57 ANNUITY PLAN	
b	Name of plan sponsor	BOARD OF TRUSTEES OF I.U.O.E. LOCAL 57	c EIN-PN 05-0446832-001
a	Plan name	I.U.O.E. LOCAL 57 PENSION PLAN	
b	Name of plan sponsor	TRUSTEES OF I.U.O.E. LOCAL 57	c EIN-PN 05-0298773-001
a	Plan name	IBEW LOCAL UNION NO. 237 PENSION PLAN	
b	Name of plan sponsor	IBEW LOCAL 237 PENSION PLAN BOARD OF TRUSTEES	c EIN-PN 16-6094914-001
a	Plan name	IBEW LOCAL UNION NO. 573 PENSION FUND	
b	Name of plan sponsor	IBEW LOCAL UNION NO. 573	c EIN-PN 34-6570323-001
a	Plan name	IBEW LOCAL UNION NO. 573 PROFIT SHARING PLAN	
b	Name of plan sponsor	IBEW LOCAL UNION NO. 573	c EIN-PN 34-1667617-002
a	Plan name	INTERNATIONAL BROTHERHOOD OF BOILERMAKERS OFFICERS' AND EMPLOYEES' PENSION PLAN	
b	Name of plan sponsor	TRUSTEES OF THE INTNL BROTHERHOOD OF BOILERMAKERS IRON SHIP BUILDERS	c EIN-PN 48-6031851-001
a	Plan name	INTERNATIONAL UNION, UNITED MINE WORKERS OF AMERICA PENSION PLAN	
b	Name of plan sponsor	UNITED MINE WORKERS OF AMERICA	c EIN-PN 53-0159200-001
a	Plan name	IRON WORKERS' LOCAL NO.15 AND 424 PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES -IRON WORKERS LOCALS NO.15&424 PENSION FUND	c EIN-PN 06-6077019-001
a	Plan name	IRON WORKERS PENSION TRUST FUND FOR COLORADO	
b	Name of plan sponsor	TRUSTEES - IRON WORKERS PENSION TRUST FUND FOR COLORADO	c EIN-PN 84-6099094-001
a	Plan name	KENT COUNTY EMPLOYEE RETIREMENT PROGRAM	
b	Name of plan sponsor	KENT COUNTY LEVY COURT	c EIN-PN 51-6000145-001
a	Plan name	KERN COUNTY ELECTRICAL WORKERS PENSION FUND	
b	Name of plan sponsor	JOINT BOARD OF TRUSTEES, KERN COUNTY ELECTRICAL WORKERS PENSION FUND	c EIN-PN 95-6123049-001
a	Plan name	LEAGUE ATPAM PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES LEAGUE ATPAM PENSION FUND	c EIN-PN 13-2928856-001

Part II		Information on Participating Plans (to be completed by DFEs, other than DCGs)	
(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)			
a	Plan name	LOCAL 803 PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES OF LOCAL 803 PENSION FUND	c EIN-PN 13-2851614-001
a	Plan name	NORTHERN VIRGINIA REGIONAL PARK AUTHORITY RETIREMENT PLAN	
b	Name of plan sponsor	NORTHERN VIRGINIA REGIONAL PARK AUTHORITY	c EIN-PN 54-0715585-002
a	Plan name	OMAHA CONSTRUCTION INDUSTRY PENSION PLAN	
b	Name of plan sponsor	OMAHA CONST. IND. PENSION PLAN JOINT BOARD OF TRUSTEES	c EIN-PN 47-0468085-001
a	Plan name	PLUMBERS & STEAMFITTERS LOCAL 131 PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES OF PLUMBERS & STEAMFITTERS LOCAL 131 PENSION FUND	c EIN-PN 51-6029575-001
a	Plan name	RHODE ISLAND SHEET METAL WORKERS LOCAL 17 ANNUITY FUND	
b	Name of plan sponsor	RI SHEET METAL WORKERS L17 ANNUITY FD, BOARD OF TRUSTEES	c EIN-PN 05-0398597-001
a	Plan name	SDC LEAGUE PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES SDC LEAGUE PENSION FUND	c EIN-PN 13-6634482-001
a	Plan name	SHEET METAL WORKERS LOCAL UNION NO. 17 SUPPLEMENTAL PENSION FUND	
b	Name of plan sponsor	BOT SHEET METAL WORKERS LOCAL UNION NO. 17 SUPPLEMENTAL PENSION FUND	c EIN-PN 20-0845880-001
a	Plan name	TEAMSTERS LOCAL 814 ANNUITY FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES OF TEAMSTERS LOCAL 814 ANNUITY FUND	c EIN-PN 11-6234357-002
a	Plan name	TEAMSTERS LOCAL 814 PENSION FUND	
b	Name of plan sponsor	BOARD OF TRUSTEES OF TEAMSTERS LOCAL 814 PENSION FUND	c EIN-PN 11-6234358-001
a	Plan name	TROPICANA CASINO AND RESORT VARIABLE ANNUITY PENSION PLAN	
b	Name of plan sponsor	TROPICANA ATLANTIC CITY CORP	c EIN-PN 27-1472063-002
a	Plan name	UNITED FOOD AND COMMERCIAL WORKERS PENSION PLAN FOR SALARIED STAFF	
b	Name of plan sponsor	UFCW PENSION PLAN FOR SALARIED STAFF	c EIN-PN 36-6508328-002
a	Plan name		
b	Name of plan sponsor		c EIN-PN

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan FIXED INCOME GROUP TRUST (A FUND WITHIN THE MARCO CONSULTING GROUP TRUST I)	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 SEGAL ADVISORS, INC.	D Employer Identification Number (EIN) 27-6230536

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

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

	(a) Beginning of Year	(b) End of Year
Assets		
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	2398254 5490466
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	34779383 20552035
(2) U.S. Government securities	1c(2)	147967659 132622787
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	87823640 101174281
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	155060161 191840849
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	97946307 93568530
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	128017689 240067480
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	16673489 25814522

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation.....	1e		
f Total assets (add all amounts in lines 1a through 1e).....	1f	670666582	811130950
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	585666	4247438
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	585666	4247438
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	670080916	806883512

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)		
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	-174	
(B) U.S. Government securities.....	2b(1)(B)	6029214	
(C) Corporate debt instruments.....	2b(1)(C)	5712305	
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	43021	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		11784366
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	3284585	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		3284585
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	141094346	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	141039176	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		55170
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	-6921668	
(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)		6782888
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		4820200
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		-1458151
c Other income	2c		749587
d Total income. Add all income amounts in column (b) and enter total	2d		19096977

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)		
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		0
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	1568722	
(6) Bank or trust company trustee/custodial fees	2i(6)	126445	
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	107512	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		1802679
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1802679

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		17294298
l Transfers of assets:			
(1) To this plan	2l(1)		156486117
(2) From this plan	2l(2)		36977819

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: COHNREZNICK LLP

(2) EIN: 22-1478099

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

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

Part IV Compliance Questions

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

During the plan year:

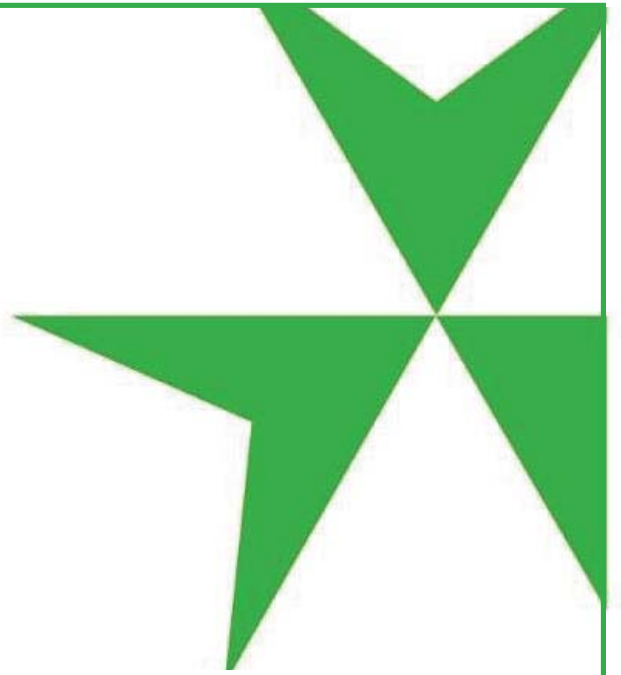
	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
b Were any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

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

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

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

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



Financial Statements & Independent Auditor's Report

FIXED INCOME GROUP TRUST

(A Fund within The Marco Consulting Group Trust I)

December 31, 2024

Segal Marco Advisors

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)

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Independent Auditor's Report

To the Investment Manager
Fixed Income Group Trust (A Fund within The Marco Consulting Group Trust I)

Opinion

We have audited the financial statements of Fixed Income Group Trust (a fund within The Marco Consulting Group Trust I) (the "Fund"), which comprise the statement of net assets, including the condensed schedule of investments, as of December 31, 2024, and the related statements of operations, and changes in net assets for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the financial position of Fixed Income Group Trust (a fund within The Marco Consulting Group Trust I) as of December 31, 2024, and the results of its operations and changes in its net assets for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

We conducted our audit 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 Fund and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Responsibilities of Management for the Financial Statements

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

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with 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 Fund'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 Fund's ability to continue as a going concern for a reasonable period of time.

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

CohnReznick LLP

Miami, Florida
June 11, 2025

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Statement of Net Assets
December 31, 2024

ASSETS

Investments in private investment funds, at fair value (cost \$432,694,290)	\$	431,908,329
Investments in securities, at fair value (cost \$370,195,589)		353,180,120
Cash and cash equivalents		20,552,035
Interest and dividend receivable		3,544,533
Receivable for investments sold		<u>1,945,933</u>
Total assets		<u>811,130,950</u>

LIABILITIES

Payable for securities purchased		3,933,821
Accrued management fees payable		215,454
Accrued expenses		<u>98,163</u>
Total liabilities		<u>4,247,438</u>
Net assets	\$	<u>806,883,512</u>
Net asset value per unit (55,525,411 units outstanding)	\$	<u>14.53</u>

The accompanying notes are an integral part of this statement.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Statement of Operations
Year ended December 31, 2024

INVESTMENT INCOME	
Interest	\$ 14,105,858
Dividends	7,812,042
Other	<u>84,982</u>
Total investment income	\$ 22,002,882
EXPENSES	
Management fees	1,568,722
Custodian fees	126,445
Professional fees and other	<u>107,512</u>
Total expenses	<u>1,802,679</u>
Net investment income	20,200,203
REALIZED LOSS AND CHANGE IN UNREALIZED LOSS FROM INVESTMENT TRANSACTIONS	
Net realized loss from investments, and foreign currency transactions	(12,846,346)
Net change in unrealized depreciation on investments, and foreign currency translation	<u>9,940,441</u>
Net realized loss and change in unrealized loss from investment transactions	<u>(2,905,905)</u>
Net increase in net assets resulting from operations	\$ <u>17,294,298</u>

The accompanying notes are an integral part of this statement.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Statement of Changes in Net Assets
Year ended December 31, 2024

INCREASE IN NET ASSETS RESULTING FROM OPERATIONS

Net investment income	\$ 20,200,203
Net realized loss from investments, and foreign currency transactions	(12,846,346)
Net change in unrealized depreciation on investments, and foreign currency translation	<u>9,940,441</u>
Net increase in net assets resulting from operations	\$ 17,294,298

CAPITAL TRANSACTIONS

Subscriptions (10,816,738 units)	156,486,117
Redemptions (2,577,534 units)	<u>(36,977,819)</u>
Net increase in net assets resulting from capital transactions	<u>119,508,298</u>
Net increase in net assets	136,802,596
Net assets, beginning of year (47,286,207 units outstanding)	<u>670,080,916</u>
Net assets, end of year (55,525,411 units outstanding)	<u>\$ 806,883,512</u>

The accompanying notes are an integral part of this statement.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Condensed Schedule of Investments
December 31, 2024

Description	Cost	Fair value	Percentage of net assets
Investments in private investment funds, at fair value			
United States			
PIMCO Total Return Collective Trust (16,499,483 shares) *	\$ 246,000,000	\$ 240,067,480	29.75 %
Loomis Sayles Multisector Full Discretion (2,881,771 shares) *	76,306,217	80,487,855	9.98
Wellington Opportunistic Fixed Income (6,512,185 shares) *	85,019,687	79,253,290	9.82
Brigade Loan Fund, Ltd. (26,000 shares)	<u>25,368,386</u>	<u>32,099,704</u>	<u>3.98</u>
Total investments in private investment funds, at fair value	\$ <u>432,694,290</u>	\$ <u>431,908,329</u>	<u>53.53 %</u>
Investments in securities, at fair value			
Mortgage-backed securities			
United States			
Banking and finance		\$ 375,322	0.05 %
FHLMC multiclass		5,149,024	0.64
FHLMC pools		24,775,434	3.07
FNMA pools		44,828,761	5.55
GNMA multi-family pools		6,690,678	0.83
Whole loan - CMO		<u>11,749,311</u>	<u>1.46</u>
Total mortgage-backed securities	\$ <u>99,341,717</u>	<u>93,568,530</u>	<u>11.60</u>

* No component of the underlying Private Investment Fund's portfolio is greater than 5% of net assets.

The accompanying notes are an integral part of this schedule.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Condensed Schedule of Investments
December 31, 2024

Description	Cost	Fair value	Percentage of net assets
Investments in securities, at fair value (continued)			
Corporate bonds			
Australia			
Banking and finance	\$ 650,000	\$ 639,735	0.08 %
Canada			
Banking and finance	2,688,972	2,695,131	0.33
Cayman Islands			
Mining	747,341	743,864	0.09
France			
Banking and finance	2,538,774	2,530,456	0.31
Ireland			
Banking and finance	1,715,289	1,734,275	0.21
Japan			
Banking and finance	600,000	590,060	0.07
Luxembourg			
Capital goods	874,464	866,358	0.11
Mexico			
Manufacturing	1,013,224	847,403	0.11
Netherlands			
Banking and finance	1,952,238	1,820,102	0.23
Norway			
Oil and gas	578,801	552,548	0.07
Spain			
Banking and finance	800,000	803,691	0.10
Sweden			
Banking and finance	715,993	734,251	0.09
Switzerland			
Banking and finance	1,990,389	1,894,726	0.23

The accompanying notes are an integral part of this schedule.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Condensed Schedule of Investments
December 31, 2024

Description	Cost	Fair value	Percentage of net assets
Investments in securities, at fair value (continued)			
Corporate bonds (continued)			
United Kingdom			
Banking and finance		\$ 1,452,879	0.17 %
Insurance		1,251,677	0.16
Manufacturing		696,119	0.09
Telephone utilities		69,076	0.01
Total United Kingdom	\$ 3,494,749	3,469,751	0.43
United States			
Automotive		2,009,503	0.25
Banking and finance		25,181,151	3.13
Capital goods		1,682,357	0.21
Chemicals		905,039	0.11
Electric utilities		6,692,242	0.83
Food beverage and tobacco		521,383	0.06
Food products		1,202,825	0.15
Gas utilities		1,452,000	0.18
Health care		5,510,267	0.68
Insurance		6,257,062	0.78
Manufacturing		1,866,568	0.23
News media		1,258,209	0.16
Oil and gas		7,959,721	0.99
Technology		1,963,595	0.24
Telephone utilities		5,252,094	0.65
Total United States	73,305,637	69,714,016	8.65
Total corporate bonds	93,665,871	89,636,367	11.11
Asset-backed securities			
United States			
Automotive		4,816,147	0.60
Banking and finance		20,998,375	2.60
Total asset-backed securities	25,863,799	25,814,522	3.20
Collateralized mortgage-backed securities			
United States			
Conduit		11,537,914	1.43
Total collateralized mortgage-backed securities	11,699,145	11,537,914	1.43

The accompanying notes are an integral part of this schedule.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Condensed Schedule of Investments
December 31, 2024

<u>Description</u>	<u>Cost</u>	<u>Fair value</u>	<u>Percentage of net assets</u>
Investments in securities, at fair value (continued)			
U.S. government securities			
United States			
U.S. treasury notes with coupon rates ranging from 0.625-4.625% and maturities from 6/30/2026-8/15/2034	\$ 85,249,926	\$ 84,344,490	10.45 %
U.S. treasury bonds with coupon rates ranging from 1.375-4.625% and maturities from 8/15/2041-8/15/2054	<u>54,375,131</u>	<u>48,278,297</u>	<u>5.98</u>
Total U.S. government securities	<u>139,625,057</u>	<u>132,622,787</u>	<u>16.43</u>
Total investments in securities, at fair value	<u>\$ 370,195,589</u>	<u>\$ 353,180,120</u>	<u>43.77 %</u>

The accompanying notes are an integral part of this schedule.

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Notes to Financial Statements
December 31, 2024

1. ORGANIZATION

The Fixed Income Group Trust (the “Fund”) (a fund within The Marco Consulting Group Trust I) (the “Trust”) was established by the Marco Consulting Group Inc. and the Bank of New York Mellon, as trustee of the Trust (the “Trustee”). The Bank of New York Mellon (“BNY Mellon”) serves as Custodian, and performs accounting and record keeping functions for the Fund. The Fund is one of two Funds offered within the Trust. The other fund offered within the Trust is the Equity Group Trust. The Trust is a group trust designed to permit qualified employee benefit plans and certain governmental plans and collective trusts (“Participating Trusts”) to commingle their assets for investment purposes on a tax-exempt basis. The Fund commenced operations on August 9, 2010.

Segal Advisors, Inc., d/b/a Segal Marco Advisors (the “Investment Manager”), is the sponsor of the Marco Consulting Group Trust I. The Investment Manager is registered with the U.S. Securities and Exchange Commission as an investment adviser under the Investment Advisers Act of 1940.

2. SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of the significant accounting policies followed by the Fund in the preparation of its financial statements.

Basis of Presentation

The Fund’s financial statements have been prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America (“U.S. GAAP”). The Fund is considered an investment company under U.S. GAAP and follows the specialized accounting and reporting guidance in the Financial Accounting Standards Board Accounting Standards Codification 946, Financial Services – Investment Companies.

Use of Estimates

In accordance with U.S. GAAP, management is required to make estimates and assumptions in determining the reported amounts of assets and liabilities, including the fair value of investments, and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Valuation of Investments in Securities at Fair Value

The Fund utilizes various methods to measure the fair value of its investments on a recurring basis. U.S. GAAP establishes a hierarchy that prioritizes inputs to valuation methods. Fair value is defined as the price that would be received to sell an asset or paid to transfer a liability (i.e., the “exit price”) in an orderly transaction between market participants at the measurement date. The three levels of inputs are:

FIXED INCOME GROUP TRUST
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Level 1 - Unadjusted quoted prices in active markets for identical assets or liabilities that the Fund has the ability to access.

Level 2 - Observable inputs other than quoted prices included in Level 1 that are observable for the asset or liability, either directly or indirectly. These inputs may include quoted prices for the identical instrument on an inactive market, prices for similar instruments, interest rates, prepayment speeds, credit risk, yield curves, default rates and similar data.

Level 3 - Unobservable inputs for the asset or liability, to the extent relevant observable inputs are not available, representing the Fund's own assumptions about the assumptions a market participant would use in valuing the asset or liability, and would be based on the best information available.

The availability of observable inputs can vary from security to security and is affected by a wide variety of factors, including, for example, the type of security, whether the security is new and not yet established in the marketplace, the liquidity of markets, and other characteristics particular to the security. To the extent that valuation is based on models or inputs that are less observable or unobservable in the market, the determination of fair value requires more judgment. Accordingly, the degree of judgment exercised in determining fair value is greatest for instruments categorized in Level 3.

The inputs used to measure fair value may fall into different levels of the fair value hierarchy. In such cases, for disclosure purposes, the level in the fair value hierarchy within which the fair value measurement falls in its entirety is determined based on the lowest level input that is significant to the fair value measurement in its entirety.

Investments in securities listed on a national exchange are valued at the composite close price on the day of valuation. Securities traded in the over-the-counter market and listed securities for which no sale is reported on that date are stated at a mean of the current bid and ask prices. The resulting unrealized gains and losses are reflected in the statement of operations. The Fund values government bonds using quoted prices when traded in active markets. When quoted prices are not available, the Fund uses an independent pricing service to value government bonds based on a discounted cash flow model that uses inputs that include interest rate yield curves; cross-currency basis index spreads; and sovereign credit spreads similar to the bond in terms of issuer, maturity, and seniority. U.S. government bonds are categorized as Level 1. Non-U.S. government bonds are generally categorized in Level 2 of the fair value hierarchy.

Debt securities, including restricted debt securities, are valued based on evaluated prices received from independent pricing services or from dealers who make markets in such securities. For corporate bonds, bank notes, floating rate loans, municipal securities, preferred securities, supranational obligations, sovereign loan participations, pricing services utilize matrix pricing which considers yield or price of bonds of comparable quality, coupon, maturity and type as well as dealer supplied prices and are generally categorized as Level 2 in the hierarchy. For asset-backed securities, collateralized mortgage obligations, commercial mortgage securities, and U.S. government agency mortgage securities, pricing services utilize matrix pricing which considers prepayment speed assumptions, attributes of the collateral, yield or price of bonds of comparable quality, coupon, maturity and type as well as dealer supplied prices and,

FIXED INCOME GROUP TRUST
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December 31, 2024

accordingly, such securities are generally categorized as Level 2 in the hierarchy. Swaps are marked-to-market daily based on valuations from independent pricing services or dealer-supplied valuations and changes in value are recorded as unrealized appreciation (depreciation). Pricing services utilize matrix pricing which considers comparisons to interest rate curves, credit spread curves, default possibilities and recovery rates and, as a result, swaps are generally categorized as Level 2 in the hierarchy. When independent prices are unavailable or unreliable, debt securities and swaps may be valued utilizing pricing matrices which consider similar factors that would be used by independent pricing services. These are categorized as Level 2 in the hierarchy.

Private Investment Funds

Investments in Private Investment Funds are valued, as a practical expedient, utilizing the net asset valuations provided by the underlying funds, without adjustment, when the net asset valuations of the investments are calculated (or adjusted by the Fund if necessary) in a manner consistent with U.S. GAAP for investment companies. The Fund applies the practical expedient to its investments in Private Investment Funds on an investment-by-investment basis, and consistently with the Fund's entire position in a particular investment, unless it is probable that the Fund will sell a portion of an investment at an amount different from the net asset valuation or in other situations where the practical expedient is not available. Investments in Private Investment Funds are included in Practical Expedient net asset value ("NAV") of the fair value hierarchy.

In accordance with U.S. GAAP, as a practical expedient, an entity holding investments in certain entities that calculate NAV per share or its equivalent, for which the fair value is not readily determinable, is permitted to measure the fair value of such investments on the basis of that NAV per share or its equivalent without adjustment. The Fund's investments in private investment funds are carried at NAV. In addition, the Investment Manager takes into consideration other information as well as any specific conditions and events affecting the manager of the private investment fund. As of December 31, 2024, the Investment Manager concluded that for all private investment funds, the NAV as reported by the respective fund is a practical expedient of fair value. If the practical expedient NAV is not as of the Fund's measurement date, then the NAV is adjusted to reflect any significant events that may change the valuation. In addition, if the practical expedient NAV reported by the private investment funds is not calculated in a manner consistent with the measurement principle for investment companies under U.S. GAAP, then the NAV is also adjusted to reflect the impact of those measurement principles.

Amounts shown as expenses in the statement of operations and financial highlights include only those expenses charged directly to the Fund and do not reflect all fees and expenses incurred by the private investment funds in which the Fund is invested. These amounts are included in net change in unrealized depreciation on investments in the accompanying statement of operations.

Futures and Commodity Interests

The Fund may use futures contracts for hedging and non-hedging purposes. Upon entering into futures contracts, the Fund is required to deposit with the broker an amount ("initial margin") equal to a certain percentage of the contract value. Pursuant to the contracts, the Fund agrees to receive from, or pay to, the

FIXED INCOME GROUP TRUST
(A Fund within The Marco Consulting Group Trust I)
Notes to Financial Statements
December 31, 2024

broker an amount of cash equal to the daily fluctuation in the value of the contract. Such receipts or payments are known as “variation margin” and are recorded by the Fund as unrealized appreciation (depreciation) on the statement of operations. When the contract is closed, the Fund records a realized gain or loss equal to the difference between the value of the contract at the time it was opened and the value at the time it was closed. The use of futures transactions includes the risk of imperfect correlation in movements in the price of futures contracts, interest rates, and the underlying assets.

The Fund may utilize currency hedging for defensive purposes to protect the Fund’s value in U.S. dollars. Currency hedging techniques may include; (i) purchasing and selling currency futures contracts and options thereon, (ii) purchasing and selling currency forward contracts, and (iii) engaging in foreign currency exchange transactions on a spot (i.e., cash) basis at the spot rate prevailing in the foreign currency exchange market. Other strategies that may be used to protect capital or enhance returns include out-of-the-money puts, hedging of ETFs, selling market indices, and holding cash.

Foreign Currency Forward Contracts

The Fund may use foreign currency contracts to facilitate transactions in foreign securities and to manage the Fund’s currency exposure. Contracts to buy generally are used to acquire exposure to foreign currencies, while contracts to sell are used to hedge the Fund’s investments against currency fluctuations. Also, a contract to buy or sell can offset a previous contract. The use of foreign currency forward contracts does not eliminate fluctuations in the underlying prices of the Fund’s portfolio securities, but it does establish a rate of exchange that can be achieved in the future. Although foreign currency forward contracts limit the risk of loss due to a decline in the value of the hedged currency, they also limit any potential gain that might result should the value of the currency increase. Losses may arise from changes in the value of the foreign currency or if the counterparties do not perform under the contract’s terms.

Options

The Fund is subject to equity price risk, and foreign currency exchange rate risk in the normal course of pursuing its investment objectives. The Fund may enter into options to speculate on the price movements of the financial instrument, commodity, or currency underlying the option, or for use as an economic hedge against certain positions held in the Fund’s portfolio holdings. Options purchased give the Fund the right, but not the obligation, to buy or sell within a limited time, a financial instrument, commodity or currency at a contracted price that may also be settled in cash, based on differentials between specified indices or prices.

Options written obligate the Fund to buy or sell within a limited time, a financial instrument, commodity or currency at a contracted price that may also be settled in cash, based on differentials between specified indices or prices. When the Fund writes an option, an amount equal to the premium received by the Fund is recorded as a liability and is subsequently adjusted to the current fair value of the option written. Options written by the Fund may expose the Fund to market risk of an unfavorable change in the financial instrument underlying the written option. For some OTC options, the Fund may be exposed to counterparty risk from the potential that a seller of an option does not sell or purchase the underlying asset as agreed under the terms of the option contract.

FIXED INCOME GROUP TRUST
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Notes to Financial Statements
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The maximum risk of loss from counterparty risk to the Fund is the fair value of the contracts and the premiums paid to purchase its open options. In these instances, the Fund considers the credit risk of the intermediary counterparty to its option transactions in evaluating potential credit risk.

Foreign Currency Translation

The accounting records of the Fund are maintained in U.S. dollars. Investment securities and other assets and liabilities denominated in a foreign currency are translated into U.S. dollars at the prevailing rates of exchange at year-end. Purchases and sales of securities, income receipts and expense payments are translated into U.S. dollars at the prevailing exchange rate on the respective dates of the transactions. Net realized gains and losses on foreign currency transactions result from the disposition of foreign currencies, currency gains and losses realized between the trade and settlement dates on securities transactions, and the difference between the amount of net investment income accrued and the U.S. dollar amount actually received. Further, the effects of the changes in foreign currency exchange rates on investments in securities are not segregated in the statement of operations from the effects of changes in market prices of those securities, but are included with the net realized and change in unrealized gain (loss) on investments. There were no foreign currency transactions for the year ended December 31, 2024.

Security Transactions and Investment Income

The Fund records its securities on a trade-date basis. Dividends are recorded on the ex-dividend date. Interest income is accrued as it is earned. Discounts and premiums to the face amount of debt securities are accreted and amortized using the effective interest rate method over the lives of the respective debt securities. Realized gains and losses from securities transactions are determined on the basis of specific identified cost.

Income Tax Status

The Trust provides certain qualified trusts, as defined in the Agreement of Trust and as further described in Internal Revenue Service Revenue Ruling 81-100, with a means to pool their funds for investment. The Trust is exempt from federal income taxes under Section 501(a) of the Internal Revenue Code (“IRC”). The Trust limits participation to pension or profit-sharing plans that are qualified under 401(a) of the IRC that are tax-exempt under Section 501(a) of the IRC, and to state or local government plans. The Trust has received a favorable determination letter from the Internal Revenue Service.

The Investment Manager believes that the Trust is currently being operated in compliance with the requirements of Revenue Ruling 81-100. Pursuant to the subject of Revenue Ruling, the Trust will file and pay income tax on any Unrelated Business Taxable Income (“UBTI”). As a group trust the Trust is not required to file income tax returns unless it incurs UBTI.

The Investment Manager has processes presently in place to ensure the maintenance of its tax-exempt status; to identify and report unrelated income; to determine its filing and tax obligations in jurisdictions for which it was nexus; and to identify and evaluate other matters that may be considered tax positions. Management has determined that there are no material uncertain tax positions that require recognition or disclosure in the financial statements for the year ending December 31, 2024. Accordingly, no provision has been made in the accompanying financial statements for uncertain tax positions.

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Notes to Financial Statements
December 31, 2024

Participants' Transactions

Units are offered on a continuous basis at their NAV. The NAV of units is determined by dividing the then fair value of the net assets of the Fund by the number of units then outstanding.

Income Allocation

Net income or loss is allocated to participants, using the participants' pro rata capital balances after reflecting capital subscriptions and redemptions.

Withholding Taxes

Dividends from non-U.S. sources received by the Fund may be subject to non-U.S. withholding taxes at rates ranging up to 30%. Such withholding taxes may be reduced or eliminated under the terms of applicable U.S. income tax treaties.

Cash and Cash Equivalents

Cash represents cash deposits held at financial institutions. Cash equivalents consist of highly-liquid investments with a maturity of three months or less when acquired. The Fund considers its investments in short-term money market funds to be cash equivalents.

3. INVESTMENTS

The following table presents information about the Fund's assets measured at fair value as of December 31, 2024:

	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Practical Expedient NAV</u>	<u>Total</u>
Assets					
Investments in private investment funds, at fair value					
Private investment funds	\$ -	\$ -	\$ -	\$ 431,908,329	\$ 431,908,329
Total Investments in private investment funds, at fair value	<u>\$ -</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 431,908,329</u>	<u>\$ 431,908,329</u>
Investments in securities, at fair value					
Mortgage-backed securities	\$ -	\$ 93,568,530	\$ -	\$ -	\$ 93,568,530
Corporate bonds	-	89,636,367	-	-	89,636,367
Asset-backed securities	-	25,814,522	-	-	25,814,522
Collateralized mortgage-backed securities	-	11,537,914	-	-	11,537,914
U.S. Government securities	<u>132,622,787</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>132,622,787</u>
Total investments in securities, at fair value	<u>\$ 132,622,787</u>	<u>\$ 220,557,333</u>	<u>\$ -</u>	<u>\$ -</u>	<u>\$ 353,180,120</u>

All transfers are recognized by the Fund at the end of each reporting period. There were no transfers into or out of any level of the fair value hierarchy during the year ended December 31, 2024. During the year ended December 31, 2024, the Fund purchased no investment valued using Level 3 inputs.

Included in investments in securities as of December 31, 2024 is \$51,849,849 of securities restricted for trade between qualified institutional investors under the provisions of Rule 144A of the Securities Act of 1933.

FIXED INCOME GROUP TRUST
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Notes to Financial Statements
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Investment in private investment funds

As of December 31, 2024, the Fund is invested in 4 private investment funds, which have a variety of investment objectives. The private investment funds in which the Fund invests charge management fees at varying rates based on periodic NAVs. Such effective fees range primarily from 0.20% to 0.40% annually. The trust or operating agreements of the private investment funds in which the Fund invests do not include incentive fees.

Withdrawals from these private investment funds are subject to the terms of the respective agreements and/or private placement memoranda ("Governing Documents"). The stated redemption frequency from these funds, with one exception, is daily with a one-day notice requirement. The Brigade Loan Fund mandates at least 30 day's notice requirement. Most of the Governing Documents contain provisions that allow the investment manager to limit or suspend redemptions.

The following represents the investment objective of the private investment funds that represent more than 5% of net assets of the Fund.

Wellington Opportunistic Fixed Income Portfolio

The Wellington Opportunistic Fixed Income Portfolio seeks long-term total returns by providing long and short exposure in an unconstrained manner, either directly or via derivatives, to a broad range of fixed income securities and strategies across multiple geographies, including securities with both investment grade and non-investment grade credit ratings.

Loomis Sayles Multisector Full Discretion Trust

The Loomis Sayles Multisector Full Discretion Trust's investment objective is total return and to outperform the Bloomberg Barclays U.S. Government/Credit Index.

PIMCO Total Return Collective Trust

The PIMCO Total Return Collective Trust seeks maximum total return, with the goal of outperforming the Bloomberg Barclays U.S. Aggregate Index.

4. DERIVATIVE CONTRACTS

In the normal course of business, the Fund enters into trading activities, which may include foreign currency forward contracts, futures contracts and options contracts, which are forms of derivative financial instruments.

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Derivative financial instruments base their value upon an underlying asset, index or reference rate. These instruments are subject to various risks, including leverage, market, credit, liquidity and operational risks. Changes in the market value of these instruments, subsequent to year-end, may be in excess of amounts recognized in the Fund's statement of net assets. The Fund manages the risks associated with derivatives on an aggregate basis, along with the risks associated with its trading and as part of its overall risk management policies.

Derivatives are generally based upon notional values. Notional amounts are not recorded on the statement of net assets, but rather are utilized solely as a basis for determining future cash flows to be exchanged.

As of December 31, 2024, the Fund held no open derivative financial instruments, nor were any derivative contracts traded during the year ended December 31, 2024.

5. OFFSETTING ASSETS AND LIABILITIES

The Fund is required to disclose the impact of offsetting assets and liabilities represented in the statement of net assets to enable users of the financial statements to evaluate the effect or potential effect of netting arrangements on its financial position for recognized assets and liabilities. These recognized assets and liabilities are financial instruments and derivative instruments that are either subject to an enforceable master netting arrangement or similar agreement or meet the following right of setoff criteria: the amounts owed by the Fund to another party are determinable, the Fund has the right to set off the amounts owed with the amounts owed by the other party, the Fund intends to set off, and the Fund's right of setoff is enforceable by law.

As of December 31, 2024, the Fund did not hold any derivative instruments that are eligible for offset in the statement of net assets and are subject to a master netting arrangement. The master netting arrangement allows the counterparty to net applicable collateral held on behalf of the Fund against applicable liabilities or payment obligations of the Fund to the counterparty. These arrangements also allow the counterparty to net any of its applicable liabilities or payment obligations they have to the Fund against any collateral sent to the Fund.

6. RISKS AND UNCERTAINTIES

The Fund uses various investment instruments. These, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that the values of investment securities may decline during some periods and such changes could materially affect the amounts reported in the statement of net assets.

In the normal course of business, the Fund maintains its cash balances in financial institutions, which at times may exceed Federally insured limits. The Fund is subject to credit risk to the extent any financial institution with which it conducts business is unable to fulfill contractual obligations on its behalf. The Fund's management monitors the financial condition of such financial institutions and does not anticipate any losses from these counterparties.

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7. MANAGEMENT FEES AND EXPENSES

The Fund does not pay the Investment Manager, Segal Marco Advisors, a management fee. The Fund pursues its investment objective by allocating its capital to various sub-advisers (“Fund Managers”). The Fund pays the Fund Managers an asset-based management fee. The effective management fee varies and is typically 0.15% to 0.40% of the Fund’s net assets. The Fund may also pay its Fund Managers performance fees typically based on a percentage of gains earned over a period of time. Performance fees may be subject to “high water marks”, hurdles and other features that are commonly used by alternative managers. For the year ended December 31, 2024, the Fund did not pay any performance fees. The Fund bears the brokerage commissions and other transactional costs incurred in connection with the Fund’s investment activities. The Fund also bears the ordinary and customary expenses incurred in the operation of the Fund, including without limitation custodial fees, administrative expenses, taxes or assessments, legal and auditing services, expenses associated with the continuing offering of units, and any extraordinary expenses. The Trustee incorporates all of these expenses into the Fund’s daily NAV calculation.

8. WITHDRAWALS

In accordance with the Agreement of Trust, in order to withdraw all or part of its interest in the Fund, a Participating Trust must provide such notice as set forth in the applicable Fund’s Disclosure Statement. Any withdrawal shall be as of the close of business on the Valuation Date following the Trustee’s receipt of notice. Payment of proceeds upon withdrawal will be made as soon as practicable after that Valuation Date. No interest will be paid between the date of withdrawal and the payment of withdrawal proceeds. Payment may also be delayed (with no interest thereon) if the Trustee determines that it cannot reasonably make such distribution on account of any legal impediment or any other cause reasonably beyond its control. The Trustee may withhold a portion of the withdrawal proceeds to secure the payment of actual or contingent expenses and fees payable to the Trustee or the Fund Managers.

9. INDEMNIFICATIONS

Under the Trust agreement, the Fund and each other agent of the Fund (including persons who serve at the Fund or at the Fund’s request as directors, officers or funds of another organization in which the Fund has any interest as a shareholder, creditor or otherwise), the Investment Manager and the Custodian and all of the directors, officers and partners of all of them, and their respective successors and assigns (the “Indemnified Parties”) are indemnified against certain liabilities arising out of the performance of their duties to the Fund. Additionally, in the normal course of business, the Fund enters into contracts with service providers that contain general indemnification clauses. The Fund’s maximum exposure under these arrangements is unknown as this would involve future claims that may be made against the Fund that have not yet occurred. However, based on experience the Fund expects the risk of loss to be remote.

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10. FINANCIAL HIGHLIGHTS

Financial highlights for the Fund for the year ended December 31, 2024 are as follows:

Per unit operating performance

Net asset value, beginning of year	\$	14.17
Income from investment operations		
Net investment income		0.39
Net realized and unrealized loss from investments		<u>(0.03)</u>
Net increase in net assets resulting from operations		<u>0.36</u>
Net asset value, end of year	\$	<u><u>14.53</u></u>
Total return		<u><u>2.55 %</u></u>
Ratio to average net assets:		
Expenses		0.25 %
Net investment income		2.76 %

The expenses and net investment income ratios do not reflect the income and expenses incurred by the underlying private investment funds, which are not charged directly to the Fund. The per unit information and the ratios are calculated based on daily units outstanding and average net assets during the period, respectively. Total return is calculated based on the change in net asset value per unit during the period and is reflected after all investment related and operating expenses. The information reflected above is calculated for all of the unit holders taken as a whole. An individual unit holder's results may vary based on a variety of factors, including the timing of capital transactions.

11. SUBSEQUENT EVENTS

Management of the Fund has evaluated events or transactions that may have occurred since December 31, 2024 through June 11, 2025, the date the financial statements were available for issuance. The Investment Manager has determined that there are no material events that would require disclosure in the Fund's financial statements other than those listed below.

During the period from January 1, 2025 to June 11, 2025, capital subscriptions and capital redemptions amounted to \$15,847,818 and \$20,539,561, respectively.

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Description	Cost	Fair value	Percentage of net assets
Investments in private investment funds, at fair value			
United States			
PIMCO Total Return Collective Trust (16,499,483 shares) *	\$ 246,000,000	\$ 240,067,480	29.75 %
Loomis Sayles Multisector Full Discretion (2,881,771 shares) *	76,306,217	80,487,855	9.98
Wellington Opportunistic Fixed Income (6,512,185 shares) *	85,019,687	79,253,290	9.82
Brigade Loan Fund, Ltd. (26,000 shares)	<u>25,368,386</u>	<u>32,099,704</u>	<u>3.98</u>
Total investments in private investment funds, at fair value	\$ <u>432,694,290</u>	\$ <u>431,908,329</u>	<u>53.53 %</u>
Investments in securities, at fair value			
Mortgage-backed securities			
United States			
Banking and finance		\$ 375,322	0.05 %
FHLMC multiclass		5,149,024	0.64
FHLMC pools		24,775,434	3.07
FNMA pools		44,828,761	5.55
GNMA multi-family pools		6,690,678	0.83
Whole loan - CMO		<u>11,749,311</u>	<u>1.46</u>
Total mortgage-backed securities	\$ <u>99,341,717</u>	<u>93,568,530</u>	<u>11.60</u>

* No component of the underlying Private Investment Fund's portfolio is greater than 5% of net assets.

The accompanying notes are an integral part of this schedule.

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Description	Cost	Fair value	Percentage of net assets
Investments in securities, at fair value (continued)			
Corporate bonds			
Australia			
Banking and finance	\$ 650,000	\$ 639,735	0.08 %
Canada			
Banking and finance	2,688,972	2,695,131	0.33
Cayman Islands			
Mining	747,341	743,864	0.09
France			
Banking and finance	2,538,774	2,530,456	0.31
Ireland			
Banking and finance	1,715,289	1,734,275	0.21
Japan			
Banking and finance	600,000	590,060	0.07
Luxembourg			
Capital goods	874,464	866,358	0.11
Mexico			
Manufacturing	1,013,224	847,403	0.11
Netherlands			
Banking and finance	1,952,238	1,820,102	0.23
Norway			
Oil and gas	578,801	552,548	0.07
Spain			
Banking and finance	800,000	803,691	0.10
Sweden			
Banking and finance	715,993	734,251	0.09
Switzerland			
Banking and finance	1,990,389	1,894,726	0.23

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Description	Cost	Fair value	Percentage of net assets
Investments in securities, at fair value (continued)			
Corporate bonds (continued)			
United Kingdom			
Banking and finance		\$ 1,452,879	0.17 %
Insurance		1,251,677	0.16
Manufacturing		696,119	0.09
Telephone utilities		69,076	0.01
Total United Kingdom	\$ 3,494,749	3,469,751	0.43
United States			
Automotive		2,009,503	0.25
Banking and finance		25,181,151	3.13
Capital goods		1,682,357	0.21
Chemicals		905,039	0.11
Electric utilities		6,692,242	0.83
Food beverage and tobacco		521,383	0.06
Food products		1,202,825	0.15
Gas utilities		1,452,000	0.18
Health care		5,510,267	0.68
Insurance		6,257,062	0.78
Manufacturing		1,866,568	0.23
News media		1,258,209	0.16
Oil and gas		7,959,721	0.99
Technology		1,963,595	0.24
Telephone utilities		5,252,094	0.65
Total United States	73,305,637	69,714,016	8.65
Total corporate bonds	93,665,871	89,636,367	11.11
Asset-backed securities			
United States			
Automotive		4,816,147	0.60
Banking and finance		20,998,375	2.60
Total asset-backed securities	25,863,799	25,814,522	3.20
Collateralized mortgage-backed securities			
United States			
Conduit		11,537,914	1.43
Total collateralized mortgage-backed securities	11,699,145	11,537,914	1.43

The accompanying notes are an integral part of this schedule.

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Description	Cost	Fair value	Percentage of net assets
Investments in securities, at fair value (continued)			
U.S. government securities			
United States			
U.S. treasury notes with coupon rates ranging from 0.625-4.625% and maturities from 6/30/2026-8/15/2034	\$ 85,249,926	\$ 84,344,490	10.45 %
U.S. treasury bonds with coupon rates ranging from 1.375-4.625% and maturities from 8/15/2041-8/15/2054	<u>54,375,131</u>	<u>48,278,297</u>	<u>5.98</u>
Total U.S. government securities	<u>139,625,057</u>	<u>132,622,787</u>	<u>16.43</u>
Total investments in securities, at fair value	<u>\$ 370,195,589</u>	<u>\$ 353,180,120</u>	<u>43.77 %</u>

The accompanying notes are an integral part of this schedule.