

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

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

a single-employer plan a DFE (specify) _____

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

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

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

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

special extension (enter description)

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

Part II Basic Plan Information—enter all requested information

<p>1a Name of plan <u>403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED</u></p>	<p>1b Three-digit plan number (PN) ▶ <u>002</u></p>
<p>2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) <u>LEGAL AID SOCIETY OF SUFFOLK C</u></p> <p><u>320 CARLETON AVE STE 2500</u> <u>CENTRAL ISLIP, NY 11722-4500</u></p>	<p>1c Effective date of plan <u>11/01/2010</u></p> <p>2b Employer Identification Number (EIN) <u>11-1844160</u></p> <p>2c Plan Sponsor's telephone number <u>631-630-3300</u></p> <p>2d Business code (see instructions) <u>624100</u></p>

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	KENNETH KOCH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/15/2025	KENNETH KOCH
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	3b Administrator's EIN	
	3c Administrator's telephone number	
4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: a Sponsor's name c Plan Name	4b EIN	
	4d PN	
5 Total number of participants at the beginning of the plan year	5	347
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	188
	6a(2)	201
	6b	32
	6c	123
	6d	356
	6e	1
	6f	357
	6g(1)	317
6g(2)	326	
6h	6	
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:
2G 3D 2J 2K 2E 2T

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

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code 0

<p>SCHEDULE A (Form 5500)</p> <p>Department of the Treasury Internal Revenue Service</p> <hr/> <p>Department of Labor Employee Benefits Security Administration</p> <hr/> <p>Pension Benefit Guaranty Corporation</p>	<p>Insurance Information</p> <p>This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).</p> <p>▶ File as an attachment to Form 5500.</p> <p>▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).</p>	<p>OMB No. 1210-0110</p> <hr/> <p>2024</p> <hr/> <p>This Form is Open to Public Inspection</p>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<p>A Name of plan 403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED</p>	<p>B Three-digit plan number (PN) ▶ 002</p>	
<p>C Plan sponsor's name as shown on line 2a of Form 5500 LEGAL AID SOCIETY OF SUFFOLK C</p>	<p>D Employer Identification Number (EIN) 11-1844160</p>	

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

1 Coverage Information:

(a) Name of insurance carrier
MUTUAL OF AMERICA SEC. CORP LLC

(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1614399	88668	901478	350	01/01/2024	12/31/2024

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

(a) Total amount of commissions paid 0	(b) Total amount of fees paid 2523
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3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

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

LONG ISLAND **900 STEWART AVENUE**
SUITE 510
GARDEN CITY, NY 11530

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	2523	PORTION OF INCENTIVE COMPENSATION	3

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

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

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

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

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

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

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

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

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

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

Part II	Investment and Annuity Contract Information	
	Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.	
4	Current value of plan's interest under this contract in the general account at year end	16181863
5	Current value of plan's interest under this contract in separate accounts at year end.....	39768884
6	Contracts With Allocated Funds:	
a	State the basis of premium rates ▶	
b	Premiums paid to carrier	6b
c	Premiums due but unpaid at the end of the year	6c
d	If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d
e	Type of contract: (1) <input type="checkbox"/> individual policies (2) <input type="checkbox"/> group deferred annuity (3) <input type="checkbox"/> other (specify) ▶	
f	If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ▶ <input type="checkbox"/>	
7	Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)	
a	Type of contract: (1) <input checked="" type="checkbox"/> deposit administration (2) <input type="checkbox"/> immediate participation guarantee (3) <input type="checkbox"/> guaranteed investment (4) <input type="checkbox"/> other ▶	
b	Balance at the end of the previous year	7b 15899293
c	(1) Contributions deposited during the year	7c(1) 507885
	(2) Dividends and credits.....	7c(2) 0
	(3) Interest credited during the year.....	7c(3) 460937
	(4) Transferred from separate account	7c(4) 259365
	(5) Other (specify below)..... ▶ ROLLOVER, LOANS, FORFEITURES	7c(5) 16122897
	(6) Total additions	7c(6) 17351084
d	Total of balance and additions (add lines 7b and 7c(6))	7d 33250377
e	Deductions:	
	(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1) 596261
	(2) Administration charge made by carrier.....	7e(2) 1638
	(3) Transferred to separate account	7e(3) 346948
	(4) Other (specify below)..... ▶ ROLLOVER, LOANS, FORFEITURES	7e(4) 16123667
(5) Total deductions	7e(5) 17068514	
f	Balance at the end of the current year (subtract line 7e(5) from line 7d).....	7f 16181863

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) <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 403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 LEGAL AID SOCIETY OF SUFFOLK C	D Employer Identification Number (EIN) 11-1844160	

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

DWS	210 WEST 10TH STREET KANSAS CITY, MO 64105
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

FIDELITY INVESTMENTS	82 DEVONSHIRE STREET BOSTON, MA 02109
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

GOLDMAN SACHS	200 WEST STREET NEW YORK, NY 10282
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

MUTUAL OF AMERICA	320 PARK AVE NEW YORK, NY 10022
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(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

NEUBERGER BERMAN

1290 AVENUE OF THE AMERICAS
NEW YORK, NY 10104

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

INVESCO

11 GREENWAY PLAZA
STE. 2500
HOUSTON, TX 77046

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

T. ROWE PRICE

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

VANGUARD

100 VANGUARD BOULEVARD
MALVERN, PA 19355

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

AMERICAN CENTURY INVESTMENTS

P.O. BOX 419200
4500 MAIN STREET
KANSAS CITY, MO 64141

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

MFS

111 HUNTINGTON AVENUE
BOSTON, MA 02199

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

DELAWARE FUNDS BY MACQUARIE

PO BOX 9876
PROVIDENCE, RI 02940

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

VICTORY CAPITAL MANAGEMENT INC.

15935 LA CANTERA PARKWAY
BUILDING TWO
SAN ANTONIO, TX 78256

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

PIMCO
840 NEWPORT CENTER DRIVE
SUITE 100
NEWPORT BEACH, CA 92660

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

AMERICAN FUNDS
333 SOUTH HOPE STREET
LOS ANGELES, CA 90071-1406

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

CALVERT RESEARCH AND MANAGEMENT
1825 CONNECTICUT AVENUE NW
SUITE 400
WASHINGTON, DC 20009

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

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

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

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

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

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

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

MUTUAL OF AMERICA INVESTMENT CORP

320 PARK AVENUE
NEW YORK, NY 10022

(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?
12 15 37 65	RECORD KEEPER	4665	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" 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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

A Name of plan <u>403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED</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>LEGAL AID SOCIETY OF SUFFOLK C</u>	D Employer Identification Number (EIN) <u>11-1844160</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)
---------------	--

a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>SEPARATE ACCOUNT NUMBER SA2</u>	
b Name of sponsor of entity listed in (a):	<u>MUTUAL OF AMERICA</u>	
c EIN-PN <u>13-1614399-002</u>	d Entity code <u>P</u>	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>39768884</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)

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan 403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED	B Three-digit plan number (PN) ▶ 002
C Plan sponsor's name as shown on line 2a of Form 5500 LEGAL AID SOCIETY OF SUFFOLK C	D Employer Identification Number (EIN) 11-1844160

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)	1477160	1687124
(2) Participant contributions	1b(2)	33768	40478
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	350372	355791
(9) Value of interest in common/collective trusts	1c(9)	0	0
(10) Value of interest in pooled separate accounts	1c(10)	34113217	39768884
(11) Value of interest in master trust investment accounts	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	0	0
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	15548923	15826072
(15) Other	1c(15)	0	0

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	51523440	57678349
Liabilities			
g Benefit claims payable.....	1g		
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j		
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	0	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	51523440	57678349

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)	1687319	
(B) Participants.....	2a(1)(B)	859795	
(C) Others (including rollovers).....	2a(1)(C)	84628	
(2) Noncash contributions.....	2a(2)	0	
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		2631742
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments.....	2b(1)(C)	0	
(D) Loans (other than to participants).....	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	0	
(F) Other.....	2b(1)(F)	460937	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		460937
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock.....	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	0	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		0
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result.....	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets:			
(A) Real estate.....	2b(5)(A)		
(B) Other.....	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

	(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)	0
(7) Net investment gain (loss) from pooled separate accounts	2b(7)	5090967
(8) Net investment gain (loss) from master trust investment accounts	2b(8)	0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)	0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)	0
c Other income	2c	0
d Total income. Add all income amounts in column (b) and enter total.....	2d	8183646

Expenses

e Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	2024476
(2) To insurance carriers for the provision of benefits	2e(2)	0
(3) Other.....	2e(3)	0
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)	2024476
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)	0
(4) IQPA audit fees	2i(4)	0
(5) Investment advisory and investment management fees	2i(5)	0
(6) Bank or trust company trustee/custodial fees	2i(6)	0
(7) Actuarial fees	2i(7)	
(8) Legal fees	2i(8)	
(9) Valuation/appraisal fees	2i(9)	
(10) Other trustee fees and expenses	2i(10)	
(11) Other expenses.....	2i(11)	4261
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)	4261
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j	2028737

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d.....	2k	6154909
l Transfers of assets:		
(1) To this plan.....	2l(1)	0
(2) From this plan	2l(2)	

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: GRASSI & CO. CPA'S PC

(2) EIN: 11-3266575

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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

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

A Name of plan <u>403(B) THRIFT PLAN FOR EMPLOYEES OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED</u>	B Three-digit plan number (PN) ▶	<u>002</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LEGAL AID SOCIETY OF SUFFOLK C</u>	D Employer Identification Number (EIN) <u>11-1844160</u>	

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
---	---	---

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 13-3590259

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

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	31
--	---	----

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

a The corresponding number for the plan year immediately preceding the current plan year	15a	0.00
b The corresponding number for the second preceding plan year	15b	

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 03 / 31 / 2017 (MM/DD/YYYY) and the Opinion Letter serial number J300870A.

**403(b) THRIFT PLAN OF
LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
FINANCIAL STATEMENTS
DECEMBER 31, 2024**

403(b) THRIFT PLAN OF
LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED

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INDEPENDENT AUDITORS' REPORT

To The Board of Trustees
403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated
Central Islip, New York

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

We have performed audits of the accompanying financial statements of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from Mutual of America Life Insurance Company as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is 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 generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated'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 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Grassi & Co, CPAs, P.C.

GRASSI & CO., CPAs, P.C.

Jericho, New York
October 14, 2025

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
 DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
<u>ASSETS</u>		
INVESTMENTS, AT FAIR VALUE:		
Separate account funds	\$ 39,768,884	\$ 34,113,217
General account funds	<u>16,181,863</u>	<u>15,899,295</u>
Total Investments, at Fair Value	<u>55,950,747</u>	<u>50,012,512</u>
RECEIVABLES:		
Employer contributions	1,687,124	1,477,160
Participant contributions	<u>40,478</u>	<u>33,768</u>
Total Receivables	<u>1,727,602</u>	<u>1,510,928</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 57,678,349</u>	<u>\$ 51,523,440</u>

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

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2024

ADDITIONS TO PLAN ASSETS ATTRIBUTED TO:

Investment income:

Net appreciation in fair value of investments	\$ 5,090,967
Interest income	<u>460,937</u>

Total Investment Income	<u>5,551,904</u>
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Contributions:

Employer	1,687,719
Participant	859,395
Rollovers	<u>84,628</u>

Total Contributions	<u>2,631,742</u>
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Other income	<u>10</u>
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Total Additions	<u>8,183,656</u>
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DEDUCTIONS FROM PLAN ASSETS ATTRIBUTED TO:

Benefits paid directly to participants	2,024,476
Administrative expenses	<u>4,271</u>

Total Deductions	<u>2,028,747</u>
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NET INCREASE	6,154,909
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	<u>51,523,440</u>
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End of year	<u><u>\$ 57,678,349</u></u>
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The accompanying notes are an integral part of these financial statements.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan

The following description of the 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan, which was established on November 1, 2010, is a defined contribution plan established under Internal Revenue Code (the "Code") Section 403(b), covering all eligible employees of Legal Aid Society of Suffolk County, Incorporated (the "Sponsor") who are age 21 and older and have completed their first day of employment, with the exception of nonresident aliens with no U.S. source of income and employees who are eligible to make contributions to another employer or government plan as defined by the Plan. There is a one-year service requirement, accomplished after completing 1,000 hours during the first 12 months of employment, to receive Sponsor-based and matching contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Sponsor previously sponsored a Tax Deferred Annuity 403(b) Plan ("TDA"), amended and restated on January 1, 2009, which allowed for employees to make salary reduction contributions but did not provide for any Sponsor contributions. Effective November 1, 2010, the TDA contract was incorporated under the Plan in order to provide for Sponsor contributions.

The Sponsor is responsible for the oversight of the Plan. The Sponsor determines the appropriateness of the Plan's investment offerings, monitors investment performance and provides reports to the Plan's Finance Committee. The custodian and recordkeeper of the Plan is Mutual of America Life Insurance Company ("MOA").

Contributions

Each year, participants may contribute 100% of eligible annual compensation, as defined in the Plan, provided that such contributions do not exceed the limitations under the Code for 2024 of \$23,000, plus a maximum of \$7,500 in catch-up contributions for participants who have attained age 50 before the end of the Plan year. Contributions may be made as a pre-tax deferral. Highly compensated employees are subject to additional limits set forth in the Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor may make discretionary contributions which are allocated to the accounts of eligible participants on the basis of the ratio that each eligible participant's compensation bears to the total compensation of all participants for the Plan year. These contributions will be made whether or not the participant is making contributions, or the eligible participant is employed on the last day of the Plan year. Employer contributions receivable at December 31, 2024 amounted to \$1,687,124, which represents profit sharing contributions of \$1,855,836 net of forfeitures of \$168,712, to be funded in 2025. Employer contributions receivable at December 31, 2023 amounted to \$1,477,160, which represents profit sharing contributions of \$1,557,987 net of forfeitures of \$80,827 to be applied in 2024.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan (cont'd.)

Contributions (cont'd.)

For the year ended December 31, 2024, the employer contributions recognized on the statement of changes in net assets available for benefits totaled \$1,687,719, which includes profiting sharing contributions, which is net of forfeitures for current and prior year of \$79,820.

The Sponsor may make discretionary matching contributions allocated to each participant who is eligible if the participant is an employee on the last day of the Plan year. Sponsor matching contributions are allocated to the accounts of eligible participants on the basis of the ratio that each eligible participant's salary reduction contribution amount bears to the total salary reduction contribution amount of all participants for the Plan year. There were no matching contributions made to the Plan for the year ended December 31, 2024.

The discretionary contributions and matching contributions are invested as directed by the participant.

Participant Accounts

Each participant account is credited with the participant's contributions and rollover contributions and an allocation of employer contributions, if any, as well as allocations of the Plan's earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants shall have a vested percentage in the Sponsor's matching contribution accounts according to a graded vesting schedule based on years of service as follows:

<u>Years of Service</u>	<u>Percent Vested</u>
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5	100%

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan (cont'd.)

Loans to Participants

Participants may borrow from their fund accounts one loan at any given time of a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loan is secured by the balance in the participant's account equal to 120% of the loan balance and bears a reasonable rate of interest, as defined by the Plan. The interest rate is determined as of the date of origination and is fixed for the loan term. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the funds are used to acquire a principal residence, in which case the maximum repayment period is ten years.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant or their beneficiary is entitled to receive an amount equal to the value of the participant's vested interest in his or her account as a lump-sum distribution. For termination of service due to other reasons, a participant will receive the value of the vested interest in his or her account as a lump-sum distribution. The Plan also allows certain withdrawals at age 59½ and hardship withdrawals.

Forfeited Accounts

At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$14,814 and \$12,813. During the year ended December 31, 2024, participant forfeitures of \$80,827 in nonvested accounts were used to offset the 2024 accrued employer contributions.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 2 - Summary of Significant Accounting Policies (cont'd.)

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the Plan's investment advisers. See Note 4 for a discussion of fair value measurement.

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

Loans to Participants

Loans to participants are not separately stated as an asset on the statements of net assets available for benefits, as they are loans borrowed directly from MOA collateralized by the participants' vested account balances. At December 31, 2024 and 2023, \$355,791 and \$350,372 was outstanding, respectively. The collateral of 120% of the loan balance is transferred from the separate investment account funds to the interest accumulation account. Loan interest rates are variable at prevailing interest rates and could be increased or decreased by MOA. At December 31, 2024, the interest rates on the loans ranged from 4.20% to 4.85%.

Delinquent loans are reclassified as distributions once the participant is no longer employed by the Sponsor. Principal and interest are paid ratably by the participant directly to MOA.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Sponsor and are excluded from these financial statements. Fees related to the administration of loans or benefits paid to participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation or depreciation in fair value of investments. Certain administrative functions are performed by officers or employees of the Sponsor. No such officer or employee receives compensation from the Plan.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 NOTES TO FINANCIAL STATEMENTS
 DECEMBER 31, 2024

Note 3 - Information Certified by Custodian

The following information, including investments at December 31, 2024 and 2023, and investment income for the year ended December 31, 2024, was obtained by management and agreed to or derived from information certified as complete and accurate by MOA, the custodian of the Plan.

	<u>2024</u>	<u>2023</u>
Investments, at fair value:		
Separate account funds	\$ 39,768,884	\$ 34,113,217
General account funds	<u>16,181,863</u>	<u>15,899,295</u>
Total Investments, at Fair Value	<u>\$ 55,950,747</u>	<u>\$ 50,012,512</u>
Investment income:		
Net appreciation in fair value of investments	\$ 5,090,967	
Dividend and interest income	<u>460,937</u>	
Total Investment Income	<u>\$ 5,551,904</u>	

Note 4 - Fair Value Measurement

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under Financial Accounting Standards Board (“FASB”) Accounting Standards Codification (“ASC”) Topic 820 are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

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

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 4 - Fair Value Measurement (cont'd.)

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

Separate Account Funds

MOA's Separate Account values its investments at fair value in accordance with U.S. GAAP. Fair value is an estimate of the price the Separate Account would receive upon selling a security in an orderly, arm's-length transaction. Separate Account investments consist solely of investments in mutual funds registered with the Securities and Exchange Commission and are carried at the net asset value at which the mutual fund shares are actively traded.

MOA is the custodian of assets of the Separate Accounts and handles the collection and distribution of proceeds of shares of the underlying funds bought and sold by the Separate Accounts. The account value is represented by Accumulation Units. Each Subaccount's Accumulation Units has a different value, based on the value of the Subaccount's investment in shares of the related Underlying Fund and the charges deducted from the Separate Accounts. To determine the change in a Subaccount's Accumulation Unit value from the close of one valuation day to the close of the next valuation day ("Valuation Period"), an Accumulation Unit Change Factor is used.

For Subaccounts that invest in shares of the Mutual of America Investment Corporation funds, the Accumulation Unit Change Factor for each Subaccount for any Valuation Period is:

- (a) the ratio of (i) the asset value of the Underlying Fund at the end of the current Valuation Period before any amounts are allocated to or withdrawn from the Subaccount with respect to that Valuation Period, to (ii) the asset value of the Underlying Fund at the end of the preceding Valuation Period, after all allocations and withdrawals were made for that period, divided by,
- (b) 1.000000 plus the component of the annual rate of expense risk, distribution expense and Separate Account administrative charges against the Subaccount's assets for the number of days from the end of the preceding Valuation Period to the end of the current Valuation Period.

For the Subaccounts that invest in shares of various mutual funds, the Accumulation Unit Change Factor for each Subaccount for any Valuation Period is:

- (a) the ratio of (i) the share value of the Underlying Fund at the end of the current Valuation Period, adjusted by the Cumulative Dividend Multiplier for the current Valuation Period, to (ii) the share value of the Underlying Fund at the end of the preceding Valuation Period, adjusted for the Cumulative Dividend Multiplier for the preceding Valuation Period, divided by,
- (b) 1.000000 plus the component of the annual rate of expense risk, distribution expense and Separate Account administrative charges against the Subaccount's assets for the number of days from the end of the preceding Valuation Period to the end of the current Valuation Period.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 4 - Fair Value Measurement (cont'd.)

General Account Funds

The MOA General Account (i.e., the Interest Accumulation Account) is part of MOA's general assets, which are segregated from the separate investment account funds. The General Account, which is comparable to a cash equivalent, includes liquid assets and is not subject to any form of interest rate adjustment, "haircut" or loading charge. The crediting interest rate is a current rate, determined by MOA from time to time. MOA bears the full investment risk for the amount's participants allocate to the interest accumulation account. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments at the account value. The amount included in the financial statements is the accumulated contribution plus interest credited less administrative expenses, which approximates fair value.

The preceding methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value at December 31, 2024 and 2023. Classification within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. For the year ended December 31, 2024, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3.

	<u>Assets at Fair Value at December 31, 2024</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Separate account funds	<u>\$ 39,768,884</u>	<u>\$ -</u>	<u>\$ -</u>	\$ 39,768,884
Interest accumulation account (a)				<u>16,181,863</u>
 Total Investments, at Fair Value				 <u>\$ 55,950,747</u>

	<u>Assets at Fair Value at December 31, 2023</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Separate account funds	<u>\$ 34,113,217</u>	<u>\$ -</u>	<u>\$ -</u>	\$ 34,113,217
Interest accumulation account (a)				<u>15,899,295</u>
 Total Investments, at Fair Value				 <u>\$ 50,012,512</u>

- (a) MOA's General Account ("Interest Accumulation Account") includes liquid assets and is not subject to any form of interest rate adjustments, "haircut" or loading charge. The General Account is comparable to a cash equivalent and therefore exempt from hierarchy leveling requirements of FASB ASC Subtopic 820-10.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 5 - Related Party Transactions and Party-In-Interest Transactions

Certain Plan investments are shares of mutual funds and a guaranteed investment contract managed by MOA, which is the recordkeeper and custodian of the Plan. Therefore, the transactions related to these investments qualify as party-in-interest transactions.

Note 6 - Plan Termination

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

Note 7 - Tax Status

The Plan has been designed to qualify under Section 403(b) of the Code. The terms of the Plan have been prepared to conform to the sample language provided by the Internal Revenue Service in Revenue Procedure 2007-71 and the draft Listing of Required Modifications issued December 17, 2007. The Plan is required to operate in conformity with the Code to maintain the tax-exempt status for Plan participants under Section 403(b). The Plan administrator and Sponsor believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by a government authority. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that at December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset, or require disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2021.

Note 8 - Risks and Uncertainties

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

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 NOTES TO FINANCIAL STATEMENTS
 DECEMBER 31, 2024

Note 9 - Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of the value of funds held in the general fund accounts per the financial statements at December 31, 2024 and 2023 to Part I of Schedule H of Form 5500:

	<u>2024</u>	<u>2023</u>
Value of funds held in general fund accounts per the financial statements	\$ 16,181,863	\$ 15,899,295
Employee loans held by the Custodian	<u>(355,790)</u>	<u>(350,372)</u>
 Value of funds held in insurance company general account per Schedule H of Form 5500	 <u>\$ 15,826,073</u>	 <u>\$ 15,548,923</u>

Note 10 - Subsequent Events

The Plan administrator has evaluated all events or transactions that occurred after December 31, 2024 through October 14, 2025, which is the date that the financial statements were available to be issued. During this period, there were no material subsequent events requiring disclosure, except in 2025 the Plan changed custodians.

SUPPLEMENTAL SCHEDULE

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of Issuer	Description of Investment	Cost**	Current Value	
<i>Separate Accounts Funds:</i>				
* Mutual of America	MoA Aggressive Allocation Fund	**	\$ 1,699,214	
* Mutual of America	MoA All America Fund	**	290,885	
* Mutual of America	MoA Balanced Fund	**	290,470	
* Mutual of America	MoA Clear Passage 2015 Fund	**	1,792,609	
* Mutual of America	MoA Clear Passage 2020 Fund	**	1,175,053	
* Mutual of America	MoA Clear Passage 2025 Fund	**	1,052,828	
* Mutual of America	MoA Clear Passage 2030 Fund	**	2,506,506	
* Mutual of America	MoA Clear Passage 2035 Fund	**	1,402,580	
* Mutual of America	MoA Clear Passage 2040 Fund	**	1,371,404	
* Mutual of America	MoA Clear Passage 2045 Fund	**	1,523,251	
* Mutual of America	MoA Clear Passage 2050 Fund	**	1,116,782	
* Mutual of America	MoA Clear Passage 2055 Fund	**	1,270,970	
* Mutual of America	MoA Clear Passage 2060 Fund	**	618,728	
* Mutual of America	MoA Clear Passage 2065 Fund	**	124,449	
* Mutual of America	MoA Conservative Allocation Fund	**	168,682	
* Mutual of America	MoA Core Bond Fund	**	1,339,635	
* Mutual of America	MoA Equity Index Fund	**	3,173,662	
* Mutual of America	MoA Intermediate Bond Fund	**	510,530	
* Mutual of America	MoA International Fund	**	136,765	
* Mutual of America	MoA Mid Cap Equity Index Fund	**	768,468	
* Mutual of America	MoA Mid Cap Value Fund	**	402,865	
* Mutual of America	MoA Moderate Allocation Fund	**	2,198,842	
* Mutual of America	MoA Money Market Fund	**	183,028	
* Mutual of America	MoA Retirement Income Fund	**	177,158	
* Mutual of America	MoA Small Cap Equity Index Fund	**	36,576	
* Mutual of America	MoA Small Cap Growth Fund	**	389,510	
* Mutual of America	MoA Small Cap Value Fund	**	447,186	
Neuberger	Neuberger Berman AMT Sustainable Equity Portfolio	**	5,351	
PIMCO	PIMCO VIT Real Return Portfolio	**	64,736	
T. Rowe	T. Rowe Price Blue Chip Growth Portfolio	**	1,316,326	
Vanguard	Vanguard VIF Diversified Value Portfolio	**	1,991,997	
Vanguard	Vanguard VIF International Portfolio	**	1,596,776	
Vanguard	Vanguard VIF Real Estate Index Portfolio	**	86,797	
Vanguard	Vanguard VIF Total Bond Market Index Portfolio	**	56,753	
American Century	American Century Investments VP Capital Appreciation Fund	**	1,226,411	
American Funds	American Funds Insurance Series New World Fund	**	23,534	
Calvert	Calvert VP SRI Balanced Portfolio	**	84,265	
Delaware	Delaware VIP Small Cap Value Series	**	78	
DWS	DWS Capital Growth VIP	**	1,266,013	
Fidelity	Fidelity VIP Asset Manager Portfolio	**	663,041	
Fidelity	Fidelity VIP Contrafund Portfolio	**	2,432,479	
Fidelity	Fidelity VIP Equity-Income Portfolio	**	614,053	
Fidelity	Fidelity VIP Mid Cap Portfolio	**	1,572,946	
Goldman Sachs	Goldman Sachs VIT US Equity Insights Fund	**	700	
Invesco	Invesco V.I. Main Street Fund	**	597,992	
	Total Investments		39,768,884	
<i>Stable value collective trust funds:</i>				
* Mutual of America	Mutual of America Interest Accumulation Account	**	16,181,863	
			<u>\$ 55,950,747</u>	

* Indicates a party-in-interest to the Plan.

** Cost information is not required for participant-directed investments.

See independent auditors' report.

**403(b) THRIFT PLAN OF
LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
FINANCIAL STATEMENTS
DECEMBER 31, 2024**

403(b) THRIFT PLAN OF
LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED

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INDEPENDENT AUDITORS' REPORT

To The Board of Trustees
403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated
Central Islip, New York

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

We have performed audits of the accompanying financial statements of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan ("investment information") by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA ("qualified institution").

Management has obtained certifications from Mutual of America Life Insurance Company as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

- the amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- the information in the financial statements referred to above related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is 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 generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated'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 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States of America.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the financial statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of December 31, 2024 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Grassi & Co., CPAs, P.C.

GRASSI & CO., CPAs, P.C.

Jericho, New York
October 14, 2025

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
 DECEMBER 31, 2024 AND 2023

	<u>2024</u>	<u>2023</u>
<u>ASSETS</u>		
INVESTMENTS, AT FAIR VALUE:		
Separate account funds	\$ 39,768,884	\$ 34,113,217
General account funds	<u>16,181,863</u>	<u>15,899,295</u>
Total Investments, at Fair Value	<u>55,950,747</u>	<u>50,012,512</u>
RECEIVABLES:		
Employer contributions	1,687,124	1,477,160
Participant contributions	<u>40,478</u>	<u>33,768</u>
Total Receivables	<u>1,727,602</u>	<u>1,510,928</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 57,678,349</u>	<u>\$ 51,523,440</u>

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

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2024

ADDITIONS TO PLAN ASSETS ATTRIBUTED TO:

Investment income:

Net appreciation in fair value of investments	\$ 5,090,967
Interest income	<u>460,937</u>

Total Investment Income	<u>5,551,904</u>
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Contributions:

Employer	1,687,719
Participant	859,395
Rollovers	<u>84,628</u>

Total Contributions	<u>2,631,742</u>
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Other income	<u>10</u>
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Total Additions	<u>8,183,656</u>
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DEDUCTIONS FROM PLAN ASSETS ATTRIBUTED TO:

Benefits paid directly to participants	2,024,476
Administrative expenses	<u>4,271</u>

Total Deductions	<u>2,028,747</u>
------------------	------------------

NET INCREASE	6,154,909
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	<u>51,523,440</u>
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End of year	<u><u>\$ 57,678,349</u></u>
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The accompanying notes are an integral part of these financial statements.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan

The following description of the 403(b) Thrift Plan of Legal Aid Society of Suffolk County, Incorporated (the "Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan, which was established on November 1, 2010, is a defined contribution plan established under Internal Revenue Code (the "Code") Section 403(b), covering all eligible employees of Legal Aid Society of Suffolk County, Incorporated (the "Sponsor") who are age 21 and older and have completed their first day of employment, with the exception of nonresident aliens with no U.S. source of income and employees who are eligible to make contributions to another employer or government plan as defined by the Plan. There is a one-year service requirement, accomplished after completing 1,000 hours during the first 12 months of employment, to receive Sponsor-based and matching contributions. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

The Sponsor previously sponsored a Tax Deferred Annuity 403(b) Plan ("TDA"), amended and restated on January 1, 2009, which allowed for employees to make salary reduction contributions but did not provide for any Sponsor contributions. Effective November 1, 2010, the TDA contract was incorporated under the Plan in order to provide for Sponsor contributions.

The Sponsor is responsible for the oversight of the Plan. The Sponsor determines the appropriateness of the Plan's investment offerings, monitors investment performance and provides reports to the Plan's Finance Committee. The custodian and recordkeeper of the Plan is Mutual of America Life Insurance Company ("MOA").

Contributions

Each year, participants may contribute 100% of eligible annual compensation, as defined in the Plan, provided that such contributions do not exceed the limitations under the Code for 2024 of \$23,000, plus a maximum of \$7,500 in catch-up contributions for participants who have attained age 50 before the end of the Plan year. Contributions may be made as a pre-tax deferral. Highly compensated employees are subject to additional limits set forth in the Code. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or defined contribution plans. Participants direct the investment of their contributions into various investment options offered by the Plan.

The Sponsor may make discretionary contributions which are allocated to the accounts of eligible participants on the basis of the ratio that each eligible participant's compensation bears to the total compensation of all participants for the Plan year. These contributions will be made whether or not the participant is making contributions, or the eligible participant is employed on the last day of the Plan year. Employer contributions receivable at December 31, 2024 amounted to \$1,687,124, which represents profit sharing contributions of \$1,855,836 net of forfeitures of \$168,712, to be funded in 2025. Employer contributions receivable at December 31, 2023 amounted to \$1,477,160, which represents profit sharing contributions of \$1,557,987 net of forfeitures of \$80,827 to be applied in 2024.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan (cont'd.)

Contributions (cont'd.)

For the year ended December 31, 2024, the employer contributions recognized on the statement of changes in net assets available for benefits totaled \$1,687,719, which includes profiting sharing contributions, which is net of forfeitures for current and prior year of \$79,820.

The Sponsor may make discretionary matching contributions allocated to each participant who is eligible if the participant is an employee on the last day of the Plan year. Sponsor matching contributions are allocated to the accounts of eligible participants on the basis of the ratio that each eligible participant's salary reduction contribution amount bears to the total salary reduction contribution amount of all participants for the Plan year. There were no matching contributions made to the Plan for the year ended December 31, 2024.

The discretionary contributions and matching contributions are invested as directed by the participant.

Participant Accounts

Each participant account is credited with the participant's contributions and rollover contributions and an allocation of employer contributions, if any, as well as allocations of the Plan's earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Participants shall have a vested percentage in the Sponsor's matching contribution accounts according to a graded vesting schedule based on years of service as follows:

<u>Years of Service</u>	<u>Percent Vested</u>
Less than 1	0%
1	20%
2	40%
3	60%
4	80%
5	100%

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 1 - Description of Plan (cont'd.)

Loans to Participants

Participants may borrow from their fund accounts one loan at any given time of a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loan is secured by the balance in the participant's account equal to 120% of the loan balance and bears a reasonable rate of interest, as defined by the Plan. The interest rate is determined as of the date of origination and is fixed for the loan term. Principal and interest are paid ratably through payroll deductions over a period not to exceed five years, unless the funds are used to acquire a principal residence, in which case the maximum repayment period is ten years.

Payment of Benefits

On termination of service due to death, disability, or retirement, a participant or their beneficiary is entitled to receive an amount equal to the value of the participant's vested interest in his or her account as a lump-sum distribution. For termination of service due to other reasons, a participant will receive the value of the vested interest in his or her account as a lump-sum distribution. The Plan also allows certain withdrawals at age 59½ and hardship withdrawals.

Forfeited Accounts

At December 31, 2024 and 2023, forfeited nonvested accounts totaled \$14,814 and \$12,813. During the year ended December 31, 2024, participant forfeitures of \$80,827 in nonvested accounts were used to offset the 2024 accrued employer contributions.

Note 2 - Summary of Significant Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 2 - Summary of Significant Accounting Policies (cont'd.)

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the Plan's investment advisers. See Note 4 for a discussion of fair value measurement.

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

Loans to Participants

Loans to participants are not separately stated as an asset on the statements of net assets available for benefits, as they are loans borrowed directly from MOA collateralized by the participants' vested account balances. At December 31, 2024 and 2023, \$355,791 and \$350,372 was outstanding, respectively. The collateral of 120% of the loan balance is transferred from the separate investment account funds to the interest accumulation account. Loan interest rates are variable at prevailing interest rates and could be increased or decreased by MOA. At December 31, 2024, the interest rates on the loans ranged from 4.20% to 4.85%.

Delinquent loans are reclassified as distributions once the participant is no longer employed by the Sponsor. Principal and interest are paid ratably by the participant directly to MOA.

Payment of Benefits

Benefits are recorded when paid.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Sponsor and are excluded from these financial statements. Fees related to the administration of loans or benefits paid to participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation or depreciation in fair value of investments. Certain administrative functions are performed by officers or employees of the Sponsor. No such officer or employee receives compensation from the Plan.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 NOTES TO FINANCIAL STATEMENTS
 DECEMBER 31, 2024

Note 3 - Information Certified by Custodian

The following information, including investments at December 31, 2024 and 2023, and investment income for the year ended December 31, 2024, was obtained by management and agreed to or derived from information certified as complete and accurate by MOA, the custodian of the Plan.

	<u>2024</u>	<u>2023</u>
Investments, at fair value:		
Separate account funds	\$ 39,768,884	\$ 34,113,217
General account funds	<u>16,181,863</u>	<u>15,899,295</u>
Total Investments, at Fair Value	<u>\$ 55,950,747</u>	<u>\$ 50,012,512</u>
Investment income:		
Net appreciation in fair value of investments	\$ 5,090,967	
Dividend and interest income	<u>460,937</u>	
Total Investment Income	<u>\$ 5,551,904</u>	

Note 4 - Fair Value Measurement

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under Financial Accounting Standards Board (“FASB”) Accounting Standards Codification (“ASC”) Topic 820 are described as follows:

Level 1 - Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access.

Level 2 - Inputs to the valuation methodology include:

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

If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.

Level 3 - Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 4 - Fair Value Measurement (cont'd.)

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

Separate Account Funds

MOA's Separate Account values its investments at fair value in accordance with U.S. GAAP. Fair value is an estimate of the price the Separate Account would receive upon selling a security in an orderly, arm's-length transaction. Separate Account investments consist solely of investments in mutual funds registered with the Securities and Exchange Commission and are carried at the net asset value at which the mutual fund shares are actively traded.

MOA is the custodian of assets of the Separate Accounts and handles the collection and distribution of proceeds of shares of the underlying funds bought and sold by the Separate Accounts. The account value is represented by Accumulation Units. Each Subaccount's Accumulation Units has a different value, based on the value of the Subaccount's investment in shares of the related Underlying Fund and the charges deducted from the Separate Accounts. To determine the change in a Subaccount's Accumulation Unit value from the close of one valuation day to the close of the next valuation day ("Valuation Period"), an Accumulation Unit Change Factor is used.

For Subaccounts that invest in shares of the Mutual of America Investment Corporation funds, the Accumulation Unit Change Factor for each Subaccount for any Valuation Period is:

- (a) the ratio of (i) the asset value of the Underlying Fund at the end of the current Valuation Period before any amounts are allocated to or withdrawn from the Subaccount with respect to that Valuation Period, to (ii) the asset value of the Underlying Fund at the end of the preceding Valuation Period, after all allocations and withdrawals were made for that period, divided by,
- (b) 1.000000 plus the component of the annual rate of expense risk, distribution expense and Separate Account administrative charges against the Subaccount's assets for the number of days from the end of the preceding Valuation Period to the end of the current Valuation Period.

For the Subaccounts that invest in shares of various mutual funds, the Accumulation Unit Change Factor for each Subaccount for any Valuation Period is:

- (a) the ratio of (i) the share value of the Underlying Fund at the end of the current Valuation Period, adjusted by the Cumulative Dividend Multiplier for the current Valuation Period, to (ii) the share value of the Underlying Fund at the end of the preceding Valuation Period, adjusted for the Cumulative Dividend Multiplier for the preceding Valuation Period, divided by,
- (b) 1.000000 plus the component of the annual rate of expense risk, distribution expense and Separate Account administrative charges against the Subaccount's assets for the number of days from the end of the preceding Valuation Period to the end of the current Valuation Period.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 4 - Fair Value Measurement (cont'd.)

General Account Funds

The MOA General Account (i.e., the Interest Accumulation Account) is part of MOA's general assets, which are segregated from the separate investment account funds. The General Account, which is comparable to a cash equivalent, includes liquid assets and is not subject to any form of interest rate adjustment, "haircut" or loading charge. The crediting interest rate is a current rate, determined by MOA from time to time. MOA bears the full investment risk for the amount's participants allocate to the interest accumulation account. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investments at the account value. The amount included in the financial statements is the accumulated contribution plus interest credited less administrative expenses, which approximates fair value.

The preceding methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The following tables set forth by level, within the fair value hierarchy, the Plan's assets at fair value at December 31, 2024 and 2023. Classification within the fair value hierarchy is based on the lowest level of any input that is significant to the fair value measurement. For the year ended December 31, 2024, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3.

	<u>Assets at Fair Value at December 31, 2024</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Separate account funds	<u>\$ 39,768,884</u>	<u>\$ -</u>	<u>\$ -</u>	\$ 39,768,884
Interest accumulation account (a)				<u>16,181,863</u>
 Total Investments, at Fair Value				 <u>\$ 55,950,747</u>

	<u>Assets at Fair Value at December 31, 2023</u>			
	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Separate account funds	<u>\$ 34,113,217</u>	<u>\$ -</u>	<u>\$ -</u>	\$ 34,113,217
Interest accumulation account (a)				<u>15,899,295</u>
 Total Investments, at Fair Value				 <u>\$ 50,012,512</u>

- (a) MOA's General Account ("Interest Accumulation Account") includes liquid assets and is not subject to any form of interest rate adjustments, "haircut" or loading charge. The General Account is comparable to a cash equivalent and therefore exempt from hierarchy leveling requirements of FASB ASC Subtopic 820-10.

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
NOTES TO FINANCIAL STATEMENTS
DECEMBER 31, 2024

Note 5 - Related Party Transactions and Party-In-Interest Transactions

Certain Plan investments are shares of mutual funds and a guaranteed investment contract managed by MOA, which is the recordkeeper and custodian of the Plan. Therefore, the transactions related to these investments qualify as party-in-interest transactions.

Note 6 - Plan Termination

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

Note 7 - Tax Status

The Plan has been designed to qualify under Section 403(b) of the Code. The terms of the Plan have been prepared to conform to the sample language provided by the Internal Revenue Service in Revenue Procedure 2007-71 and the draft Listing of Required Modifications issued December 17, 2007. The Plan is required to operate in conformity with the Code to maintain the tax-exempt status for Plan participants under Section 403(b). The Plan administrator and Sponsor believe that the Plan is designed and is currently being operated in compliance with the applicable requirements of the Code.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by a government authority. The Plan administrator has analyzed the tax positions taken by the Plan and has concluded that at December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability or asset, or require disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes the Plan is no longer subject to income tax examinations for years prior to 2021.

Note 8 - Risks and Uncertainties

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

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
 NOTES TO FINANCIAL STATEMENTS
 DECEMBER 31, 2024

Note 9 - Reconciliation of Financial Statements to Schedule H of Form 5500

The following is a reconciliation of the value of funds held in the general fund accounts per the financial statements at December 31, 2024 and 2023 to Part I of Schedule H of Form 5500:

	<u>2024</u>	<u>2023</u>
Value of funds held in general fund accounts per the financial statements	\$ 16,181,863	\$ 15,899,295
Employee loans held by the Custodian	<u>(355,790)</u>	<u>(350,372)</u>
 Value of funds held in insurance company general account per Schedule H of Form 5500	 <u>\$ 15,826,073</u>	 <u>\$ 15,548,923</u>

Note 10 - Subsequent Events

The Plan administrator has evaluated all events or transactions that occurred after December 31, 2024 through October 14, 2025, which is the date that the financial statements were available to be issued. During this period, there were no material subsequent events requiring disclosure, except in 2025 the Plan changed custodians.

SUPPLEMENTAL SCHEDULE

403(b) THRIFT PLAN OF LEGAL AID SOCIETY OF SUFFOLK COUNTY, INCORPORATED
SUPPLEMENTAL SCHEDULE
SCHEDULE OF ASSETS (HELD AT END OF YEAR)
AT DECEMBER 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of Issuer	Description of Investment	Cost**	Current Value	
<i>Separate Accounts Funds:</i>				
* Mutual of America	MoA Aggressive Allocation Fund	**	\$ 1,699,214	
* Mutual of America	MoA All America Fund	**	290,885	
* Mutual of America	MoA Balanced Fund	**	290,470	
* Mutual of America	MoA Clear Passage 2015 Fund	**	1,792,609	
* Mutual of America	MoA Clear Passage 2020 Fund	**	1,175,053	
* Mutual of America	MoA Clear Passage 2025 Fund	**	1,052,828	
* Mutual of America	MoA Clear Passage 2030 Fund	**	2,506,506	
* Mutual of America	MoA Clear Passage 2035 Fund	**	1,402,580	
* Mutual of America	MoA Clear Passage 2040 Fund	**	1,371,404	
* Mutual of America	MoA Clear Passage 2045 Fund	**	1,523,251	
* Mutual of America	MoA Clear Passage 2050 Fund	**	1,116,782	
* Mutual of America	MoA Clear Passage 2055 Fund	**	1,270,970	
* Mutual of America	MoA Clear Passage 2060 Fund	**	618,728	
* Mutual of America	MoA Clear Passage 2065 Fund	**	124,449	
* Mutual of America	MoA Conservative Allocation Fund	**	168,682	
* Mutual of America	MoA Core Bond Fund	**	1,339,635	
* Mutual of America	MoA Equity Index Fund	**	3,173,662	
* Mutual of America	MoA Intermediate Bond Fund	**	510,530	
* Mutual of America	MoA International Fund	**	136,765	
* Mutual of America	MoA Mid Cap Equity Index Fund	**	768,468	
* Mutual of America	MoA Mid Cap Value Fund	**	402,865	
* Mutual of America	MoA Moderate Allocation Fund	**	2,198,842	
* Mutual of America	MoA Money Market Fund	**	183,028	
* Mutual of America	MoA Retirement Income Fund	**	177,158	
* Mutual of America	MoA Small Cap Equity Index Fund	**	36,576	
* Mutual of America	MoA Small Cap Growth Fund	**	389,510	
* Mutual of America	MoA Small Cap Value Fund	**	447,186	
Neuberger	Neuberger Berman AMT Sustainable Equity Portfolio	**	5,351	
PIMCO	PIMCO VIT Real Return Portfolio	**	64,736	
T. Rowe	T. Rowe Price Blue Chip Growth Portfolio	**	1,316,326	
Vanguard	Vanguard VIF Diversified Value Portfolio	**	1,991,997	
Vanguard	Vanguard VIF International Portfolio	**	1,596,776	
Vanguard	Vanguard VIF Real Estate Index Portfolio	**	86,797	
Vanguard	Vanguard VIF Total Bond Market Index Portfolio	**	56,753	
American Century	American Century Investments VP Capital Appreciation Fund	**	1,226,411	
American Funds	American Funds Insurance Series New World Fund	**	23,534	
Calvert	Calvert VP SRI Balanced Portfolio	**	84,265	
Delaware	Delaware VIP Small Cap Value Series	**	78	
DWS	DWS Capital Growth VIP	**	1,266,013	
Fidelity	Fidelity VIP Asset Manager Portfolio	**	663,041	
Fidelity	Fidelity VIP Contrafund Portfolio	**	2,432,479	
Fidelity	Fidelity VIP Equity-Income Portfolio	**	614,053	
Fidelity	Fidelity VIP Mid Cap Portfolio	**	1,572,946	
Goldman Sachs	Goldman Sachs VIT US Equity Insights Fund	**	700	
Invesco	Invesco V.I. Main Street Fund	**	597,992	
	Total Investments		39,768,884	
<i>Stable value collective trust funds:</i>				
* Mutual of America	Mutual of America Interest Accumulation Account	**	16,181,863	
			<u>\$ 55,950,747</u>	

* Indicates a party-in-interest to the Plan.

** Cost information is not required for participant-directed investments.

See independent auditors' report.