

Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan: SYMS PENSION PLAN
1b Three-digit plan number (PN): 003
1c Effective date of plan: 01/01/1976
2a Plan sponsor's name (employer, if for a single-employer plan): SYMS CORP.
2b Employer Identification Number (EIN): 22-2465228
2c Plan Sponsor's telephone number: 608-698-5055
2d Business code (see instructions): 448140
C/O STEEL PARTNERS
590 MADISON AVE FL 32
NEW YORK, NY 10022-2524

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

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

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

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

Form 5500 (2024) v. 240311

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	526
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)	0
	6a(2)	0
	6b	247
	6c	46
	6d	293
	6e	
	6f	293
	6g(1)	
	6g(2)	
h		0
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:
1A 1H 1I 3D 3H

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 type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> General assets of the sponsor

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE SB (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>	Single-Employer Defined Benefit Plan Actuarial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500 or 5500-SF.	<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

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan <u>SYMS PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF <u>SYMS CORP.</u>	D Employer Identification Number (EIN) <u>22-2465228</u>	
E Type of plan: <input checked="" type="checkbox"/> Single <input type="checkbox"/> Multiple-A <input type="checkbox"/> Multiple-B	F Prior year plan size: <input type="checkbox"/> 100 or fewer <input type="checkbox"/> 101-500 <input checked="" type="checkbox"/> More than 500	

Part I Basic Information			
1 Enter the valuation date:	Month <u>01</u>	Day <u>01</u>	Year <u>2024</u>
2 Assets:			
a Market value	2a	<u>14163232</u>	
b Actuarial value	2b	<u>14163232</u>	
3 Funding target/participant count breakdown	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	<u>248</u>	<u>7588420</u>	<u>7588420</u>
b For terminated vested participants	<u>268</u>	<u>4212078</u>	<u>4212078</u>
c For active participants	<u>0</u>	<u>0</u>	<u>0</u>
d Total	<u>516</u>	<u>11800498</u>	<u>11800498</u>
4 If the plan is in at-risk status, check the box and complete lines (a) and (b)..... <input type="checkbox"/>			
a Funding target disregarding prescribed at-risk assumptions	4a		
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b		
5 Effective interest rate	5	<u>5.09 %</u>	
6 Target normal cost			
a Present value of current plan year accruals	6a	<u>0</u>	
b Expected plan-related expenses	6b	<u>0</u>	
c Target normal cost	6c	<u>0</u>	

Statement by Enrolled Actuary

To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		
	Signature of actuary	<u>06/24/2025</u> Date
	<u>DAN SHWEIGER</u> Type or print name of actuary	<u>23-08124</u> Most recent enrollment number
	<u>CEP CONSULTANTS INS</u> Firm name	<u>631-249-0500</u> Telephone number (including area code)
	<u>1373 VETERANS HIGHWAY SUITE 10 HAUPPAUGE, NY 11788</u> Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

Part II Beginning of Year Carryover and Prefunding Balances		(a) Carryover balance	(b) Prefunding balance
7	Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	507516
8	Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9	Amount remaining (line 7 minus line 8)	0	507516
10	Interest on line 9 using prior year's actual return of <u>-15.00</u> %	0	-76127
11	Prior year's excess contributions to be added to prefunding balance:		
	a Present value of excess contributions (line 38a from prior year)		0
	b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.16</u> %		0
	b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
	c Total available at beginning of current plan year to add to prefunding balance		0
	d Portion of (c) to be added to prefunding balance		0
12	Other reductions in balances due to elections or deemed elections	0	0
13	Balance at beginning of current year (line 9 + line 10 + line 11d – line 12)	0	431389

Part III Funding Percentages			
14	Funding target attainment percentage	14	116.36 %
15	Adjusted funding target attainment percentage	15	120.02 %
16	Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.00 %
17	If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls		18 Contributions made to the plan for the plan year by employer(s) and employees:					
(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees		
Totals ▶			18(b)			18(c)	

19 Discounted employer contributions – see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	0
b Contributions made to avoid restrictions adjusted to valuation date	19b	0
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	0

20 Quarterly contributions and liquidity shortfalls:

a Did the plan have a "funding shortfall" for the prior year? Yes No

b If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No

c If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year			
(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used to Determine Funding Target and Target Normal Cost

21 Discount rate:				
a Segment rates:	1st segment: 4.75 %	2nd segment: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 0
22 Weighted average retirement age				22 65
23 Mortality table(s) (see instructions)	<input type="checkbox"/> Prescribed - combined	<input checked="" type="checkbox"/> Prescribed - separate	<input type="checkbox"/> Substitute	

Part VI Miscellaneous Items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
26 Demographic and benefit information		
a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment.....	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment ...	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment.....	27	

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years	28	0
29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a).....	29	0
30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29).....	30	0

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):			
a Target normal cost (line 6c)	31a	0	
b Excess assets, if applicable, but not greater than line 31a	31b	0	
32 Amortization installments:	Outstanding Balance	Installment	
a Net shortfall amortization installment	0	0	
b Waiver amortization installment.....	0	0	
33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount	33		
34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33).....	34	0	
	Carryover balance	Prefunding balance	Total balance
35 Balances elected for use to offset funding requirement			
36 Additional cash requirement (line 34 minus line 35)	36	0	
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)	37	0	
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)	38a	0	
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances.....	38b	0	
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)	39	0	
40 Unpaid minimum required contributions for all years	40	0	

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. <input type="checkbox"/> 2019 <input type="checkbox"/> 2020 <input type="checkbox"/> 2021

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 SYMS PENSION PLAN	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 SYMS CORP.	D Employer Identification Number (EIN) 22-2465228	

Part I Service Provider Information (see instructions)

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

1 Information on Persons Receiving Only Eligible Indirect Compensation

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

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

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

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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)

CEP CONSULTANTS INC

11-2482296

(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?
64	RECORDKEEPER	188000	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan SYMS PENSION PLAN	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 SYMS CORP.	D Employer Identification Number (EIN) 22-2465228

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

Assets	(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a	
b Receivables (less allowance for doubtful accounts):		
(1) Employer contributions	1b(1)	
(2) Participant contributions	1b(2)	
(3) Other	1b(3)	
c General investments:		
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	1363167
(2) U.S. Government securities	1c(2)	9668804
(3) Corporate debt instruments (other than employer securities):		
(A) Preferred	1c(3)(A)	
(B) All other	1c(3)(B)	
(4) Corporate stocks (other than employer securities):		
(A) Preferred	1c(4)(A)	
(B) Common	1c(4)(B)	
(5) Partnership/joint venture interests	1c(5)	
(6) Real estate (other than employer real property)	1c(6)	
(7) Loans (other than to participants)	1c(7)	
(8) Participant loans	1c(8)	
(9) Value of interest in common/collective trusts	1c(9)	
(10) Value of interest in pooled separate accounts	1c(10)	
(11) Value of interest in master trust investment accounts	1c(11)	
(12) Value of interest in 103-12 investment entities	1c(12)	
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	16
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	
(15) Other.....	1c(15)	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	14163232	11031987
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	14163232	11031987

Part II Income and Expense Statement

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

Income		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers.....	2a(1)(A)	0	
(B) Participants.....	2a(1)(B)		
(C) Others (including rollovers).....	2a(1)(C)		
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		0
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)		
(B) U.S. Government securities.....	2b(1)(B)		
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)		
(F) Other.....	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		0
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	240482	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)		
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	14934027	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	12856955	
(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)	-1222682	
(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)		
(7) Net investment gain (loss) from pooled separate accounts	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		1094872

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	3906630	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		3906630
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)		
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	0	
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)	0	
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	319487	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		319487
j Total expenses. Add all expense amounts in column (b) and enter total	2j		4226117

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		-3131245
l Transfers of assets:			
(1) To this plan	2l(1)		
(2) From this plan	2l(2)		

Part III Accountant's Opinion

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

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

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

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

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

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

(1) Name: MICHAEL AVERSAÑO CPA PC

(2) EIN: 47-5684521

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		2000000
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.)			
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 0.

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 558509.

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.
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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>SYMS PENSION PLAN</u>	B Three-digit plan number (PN) ▶	<u>003</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>SYMS CORP.</u>	D Employer Identification Number (EIN) <u>22-2465228</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): 22-2465228

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	210
--	---	-----

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

a Name of contributing employer _____

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

Part VII IRS Compliance Questions

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

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

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 03 / 30 / 2018 (MM/DD/YYYY) and the Opinion Letter serial number J501366A.

SYMS PENSION PLAN

**FINANCIAL STATEMENTS
and
SUPPLEMENTAL SCHEDULES**

Years Ended December 31, 2024 and 2023

SYMS PENSION PLAN

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INDEPENDENT AUDITORS' REPORT

To the Plan Administrator of:
Syms Pension Plan:

Scope and Nature of the ERISA Section 103(a)(3)(C) Audit for the 2023 Financial Statements:

We have performed an audit of the financial statements of Syms Pension Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2024 & 2023, and the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audit of the 2024 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 audit 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 a certification from a qualified institution as of and for the year ended December 31, 2023, stating that the certified investment information, as described in Note 4 to the financial statements, is complete and accurate.

Opinion on the 2024/2023 Financial Statements:

In our opinion, based on our audit and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the 2024/2023 Financial Statements section:

- The amounts and disclosures in the accompanying 2024 and 2023 financial statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States of America.
- The information in the accompanying 2024/2023 financial statements 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 on the 2024/2023 Financial Statements:

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the 2023 Financial Statements section of our report. We are required to be independent of the Syms Pension Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the 2024/2023 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 Syms Pension Plan's ability to continue as a going concern for a period of one year from the date of these financial statements.

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

Auditor's Responsibilities for the Audit of the 2024/2023 Financial Statements:

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2024 and 2023 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements, as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting

from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements. In performing an audit in accordance with GAAS, we:

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

Our audit 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 2024/2023 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 Matters:

2024 Supplemental Schedules Required by ERISA:

The supplemental schedule of Assets held at December 31, 2023, are presented for purposes of additional analysis and are not a required part of the financial statements but are 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 schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

For information included in the supplemental schedules 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 schedules, we evaluated whether the supplemental schedules, other than the information agreed to or derived from the certified investment information, including their form and content, are 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 schedules, other than the information in the supplemental schedules 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 schedules 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).



Garden City, New York

June 25, 2025

SYMS PENSION PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

December 31,

ASSETS

	<u>2024</u>	<u>2023</u>
Investments, at fair value (Note 7):		
Cash & Cash Equivalents	\$ 11,031,971	\$ -
Money market	16	152,727
Shares of registered investment companies	-	8,312,908
Common stock	-	5,697,597
	<u> </u>	<u> </u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 11,031,987</u>	<u>\$ 14,163,232</u>

See accompanying independent auditors' report & notes to financial statements.

SYMS PENSION PLAN

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

Year Ended December 31,

Additions	2024	2023
Net (depreciation) appreciation in fair market value of investments (Note 6)	\$ (1,222,682)	\$ 1,569,019
Net realized gains on investments	2,077,072	27,139
Investment income:		
Dividend and interest income	240,482	568,324
Total Additions	1,094,872	2,164,482
Deductions		
Benefits paid to participants	3,906,630	853,391
Administrative expenses	319,487	165,439
Total Deductions	4,226,117	1,018,830
Increase (Decrease) in Net Assets	(3,131,245)	1,145,652
Net Assets Available for Benefits:		
Beginning of year	14,163,232	13,017,580
End of year	\$ 11,031,987	\$ 14,163,232

See accompanying independent auditors' report & notes to financial statements.

SYMS PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 1 – DESCRIPTION OF PLAN

The following brief description of the Syms Pension Plan (the “Plan”) is provided for general information purposes only. Participants should refer to the Plan document for more complete information.

General

The Plan was established on January 1, 1976. The Plan is a defined benefit plan for which all contributions are made by Steel Partners and or Trinity Place Holdings Inc., formally Syms Corp (the “Company” or the “Employer”). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”).

Eligibility

The Plan covers substantially all employees of the Company who have completed one year of service and have attained age 21. The Plan covered approximately 500 active, retired and terminated vested employees as of December 31, 2024, the date of the latest actuarial valuation. The Plan was closed to new participants and no existing participants shall accrue additional benefits after December 31, 2006.

Vesting

As noted above, benefit accruals were frozen. However, participants had accrued vesting in accordance with the Plan document. A participant was vested as follows:

<i>Years of Credited Service</i>	Vested Percentage
Less than 3 years	0%
3 years	20
4 years	40
5 years	60
6 years	80
7 or more years	100

SYMS PENSION PLAN
NOTES TO FINANCIAL STATEMENTS

NOTE 1 - Description of Plan (continued)

Pension Benefits

Under the amended terms of the Plan, each participant is entitled to an annual retirement benefit equal to 19% of the average compensation during the participant's five consecutive highest paid calendar years during the 10 years prior to retirement. Such benefit is reduced pro rata if the employee had completed less than 25 years of service. A participant is entitled to be paid full benefits upon retirement at age 65.

If a participant had completed at least 15 years of service, retirement is permissible upon reaching 55, but the benefits received will be actuarially reduced to reflect the longer period during which the participant will receive a benefit. A participant who leaves the Company for any reason other than death, disability or retirement will be entitled to receive the vested portion of his benefit payable over different periods of time depending on the aggregate amount vested and payment option elected in accordance with the Plan document.

Death Benefits

The plan provides certain incidental death benefits pursuant to which the Plan may purchase life insurance contracts for eligible participants.

There were no life insurance contracts in the Plan for the years ended December 31, 2024 and 2023.

Disability Benefits

If the employee becomes permanently disabled prior to the normal retirement date, he or she becomes entitled to an actuarially reduced retirement pension.

NOTE 2 – SUMMARY OF ACCOUNTING POLICIES

Basis of Accounting

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

SYMS PENSION PLAN
NOTES TO FINANCIAL STATEMENTS

NOTE 2 – Summary of Accounting Policies (continued)

Investments Valuation and Income Recognition

The Plan's investments are stated at fair value. Shares of registered investment companies (mutual funds) are valued at quoted market prices which represent the net asset value of shares held by the Plan at year-end. Money market funds are valued at amortized cost, which approximates fair value.

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.

Use of Estimates

The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan's management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Risks and Uncertainties

The Plan utilizes various investment instruments. Investment securities, in general, are exposed to various risks, such as interest rate, credit, and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect the amounts reported in the financial statements.

Administrative Expenses

Administrative expenses of the Plan are paid by either the Plan or the Company, as provided in the Plan document. Expenses paid by the Plan amounted to \$319,487 and \$165,439 for the years ended December 31, 2024 and 2023, respectively.

Payment of Benefits

Benefits are recorded when paid.

SYMS PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 3 – FUNDING POLICY

Plan contributions are made by the employer to provide the Plan with assets sufficient to meet the benefits to be paid to Plan participants. Pension costs are computed on the basis of accepted actuarial methods and include current service costs (normal costs). The Employer's contributions have met the minimum funding requirements of ERISA for the years ended December 31, 2024 and 2023.

NOTE 4 – INFORMATION CERTIFIED BY THE PLAN'S TRUSTEE

The Plan administrator has elected the method of annual reporting compliance permitted by 29 CFR 2420.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Charles Schwab Bank, (the "Trustee") has certified that the following data included in the accompanying financial statements and supplemental schedules is complete and accurate.

<i>December 31,</i>	2024	2023
Cash Equivalents & Money Market	\$ 11,031,987	\$ 152,727
Shares of registered investment companies	\$ -	\$ 8,312,908
<u>Common stock</u>	<u>\$ -</u>	<u>\$ 5,697,597</u>

<i>Year ended December 31,</i>	2024	2023
Dividend and interest income	\$ 240,482	\$ 642,755
Net (depreciation) / appreciation in market value of <u>investments</u>	<u>(\$1,222,682)</u>	<u>\$ 1,569,019</u>

NOTE 5 – ACCUMULATED PLAN BENEFITS

Accumulated Plan benefits are those future periodic payments, including lump-sum distributions, that are attributable under the Plan's provisions to the service employees have rendered up to the date of the freeze. Accumulated Plan benefits include benefits expected to be paid to: (a) retired or terminated employees or their beneficiaries, (b) beneficiaries of employees who have died and (c) present employees and their beneficiaries. Benefits payable under all circumstances – retirement, death, disability,

SYMS PENSION PLAN
NOTES TO FINANCIAL STATEMENTS

NOTE 5 – Accumulated Plan Benefits (continued)

and termination of employment – are included to the extent they are deemed attributable to the employee service rendered to the freeze date.

The actuarial present value of accumulated Plan benefits calculated by the actuary, Comprehensive Consulting Group (“CCG”), is that amount which results from applying actuarial assumptions to adjust the accumulated Plan benefits to reflect the time value of money (through discounts for interest) and the probability of payment (by means of decrements such as for death, withdrawal, or retirement) between the valuation date and the expected date of payment.

The significant actuarial assumptions used in determining the present actuarial value of accumulated Plan benefits as of December 31, 2024 and 2023 were as follows.

1. Mortality: 2024 and 2023 Group Annuity Mortality Table for Males and Females.
2. Assumed discount rate: 5% compounded annually for both 2024 and 2023.
3. Expected long-term rate of return on Plan assets: 6% for both 2024 and 2023.
4. Withdrawal: Sarason T-1
5. Valuation of assets: Market value
6. Actuarial cost method: Projected Unit Credit as required by the FASB *Accounting Standards Codification* 715-20
7. Retirement age: 65
8. Assumed rate of increase in compensation: 0%

The foregoing actuarial assumptions are based on the presumption that the Plan will continue. Were the Plan to terminate, different actuarial assumptions and other factors might be applicable in determining the actuarial present value of accumulated Plan benefits.

SYMS PENSION PLAN
NOTES TO FINANCIAL STATEMENTS

NOTE 5 – Accumulated Plan Benefits (continued)

The actuarial present value of accumulated Plan benefits is as follows:

<u>December 31,</u>	<u>2024</u>	<u>2023</u>
Vested benefits:		
Other participants	\$ 2,469,445	\$ 3,641,653
Participants and/or beneficiaries currently receiving benefits	5,760,301	9,151,384
Total vested benefits	8,229,746	12,793,037
Non-vested benefits	-	-
Total actuarial present value of accumulated Plan benefits	\$ 8,229,746	\$ 12,793,037

The changes in the actuarial present value of the Plan’s accumulated Plan benefits are as follows:

<u>Year ended December 31,</u>	<u>2024</u>	<u>2023</u>
Actuarial present value of accumulated Plan benefits, beginning of year	\$12,793,037	\$13,268,261
Decrease in benefits accumulated	(1,100,325)	(263,911)
Interest due to decrease in discount period	444,289	642,078
Benefits paid	(3,907,255)	(853,391)
Net Decrease	(4,563,291)	(475,224)
Actuarial present value of accumulated Plan benefits, end of year	\$8,229,746	\$12,793,037

NOTE 6 – INVESTMENTS

The Plan’s investments which represented five percent or more of net assets available for benefits are as follows:

<u>December 31,</u>	<u>2024</u>	<u>2023</u>
	None	*None*

During 2024 and 2023, the Plan’s investments (including gains and losses on investments bought and sold, as well as held during the year, appreciated (depreciated) in value as follows:

<u>December 31,</u>	<u>2024</u>	<u>2023</u>
Registered investment companies	(\$1,222,682)	\$ 1,569,019

SYMS PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 7 – FAIR VALUE MEASUREMENTS

The Plan follows Accounting Standards Codification (“ASC”) 820, “Fair Value Measurements and Disclosures”, which establishes a fair value hierarchy for disclosure of fair value measurements as follows:

Level 1 – quoted prices in active markets for identical assets or liabilities.

Level 2 – quoted prices for similar assets and liabilities in active markets or inputs that are observable.

Level 3 – inputs that are unobservable (for example, cash flow modeling inputs based on assumptions).

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

The following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodology used as of December 31, 2024:

Registered Investment Companies

Registered investment companies (mutual funds) are valued at the net asset value of shares held by the Plan at year-end.

Money Market

Money market funds are valued at amortized cost, which approximates fair value.

The 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, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions used to determine the fair value of certain financial instruments could result in different fair value measurements as of the reporting date.

The following tables summarize investment assets measured at fair value at December 31, 2024 and 2023:

SYMS PENSION PLAN
NOTES TO FINANCIAL STATEMENTS

NOTE 7 – Fair Value Measurements (continued)

December 31, 2024

	Total	Level 1	Level 2	Level 3
Assets				
Mutual funds:				
Alternative	\$ -	\$ -	\$ -	\$ -
Common stock	-	-	-	-
Fixed income	-	-	-	-
Money market	16	-	16	-
Total	<u>\$ 16</u>	<u>\$ -</u>	<u>\$ 16</u>	<u>\$ -</u>

December 31, 2023

	Total	Level 1	Level 2	Level 3
Assets				
Mutual funds:				
Alternative	\$ 904,360	\$ 904,360	\$ -	\$ -
Common stock	6,857,181	6,857,181	-	-
Fixed income	6,248,964	6,248,964	-	-
Money market	152,727	-	152,727	-
Total	<u>\$ 14,163,232</u>	<u>\$ 14,010,505</u>	<u>\$ 152,727</u>	<u>\$ -</u>

There are no Plan liabilities required to be recorded at fair value at December 31, 2024 and 2023.

NOTE 8 – RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to those per the Form 5500:

<u>December 31,</u>	<u>2024</u>	<u>2023</u>
Net assets available for benefits per the financial statements	\$ 11,031,987	\$ 14,163,232
Net assets available for benefits per Form 5500	<u>\$ 11,031,987</u>	<u>\$ 14,163,232</u>

SYMS PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 9 – PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are shares of mutual funds managed by Charles Schwab Bank. Charles Schwab Bank is the trustee defined by the Plan and, therefore, these transactions qualify as party-in-interest transactions. Fees paid by the Plan for the investment management services were \$319,487 and \$165,439 for the years ended December 31, 2024 and 2023, respectively.

NOTE 10 – TAX STATUS

The Plan is intended to be qualified under Section 401(a) of the Internal Revenue Code of 1986 (the “IRC”) and is intended to be exempt from taxation under Section 501(a) of the IRC. The Plan received its latest determination letter on December 16, 2003, in which the Internal Revenue Service (“IRS”) states that the Plan, as designed, was in compliance with the applicable requirements of the IRC. The Plan has been amended since the date of the letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC; therefore, no provision for income taxes has been included in the Plan’s financial statements.

Accounting principles generally accepted in the United States of America require Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan administrator has analyzed the tax positions taken by the Plan, and has concluded that, as of December 31, 2024, there are no uncertain positions taken or expected to be taken that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The Plan administrator believes it is no longer subject to income tax examinations for years prior to 2012.

NOTE 11 – PLAN TERMINATION

The Company has the right under the Plan, in certain circumstances, to discontinue its contributions at any time and to terminate the Plan subject to the provisions set forth in ERISA. The Plan was closed to new entrants and no participant shall accrue benefits after December 31, 2006.

SYMS PENSION PLAN

NOTES TO FINANCIAL STATEMENTS

NOTE 11 – Plan Termination (continued)

As noted below, the company has decided to terminate the plan and distribute all assets to the participants in accordance with plan provisions and ERISA guidelines. During the year 2025, the net assets of the Plan will be allocated in accordance with the priorities specified in Section 4044 of ERISA. Generally, Section 4044 provides the following priorities:

1. The lowest benefit in pay status for at least three years (or which would have been in pay status if the participant had retired that long ago);
2. Other insured vested benefits;
3. Other noninsured vested benefits; and
4. All other non-vested benefits.

Certain benefits under the Plan are insured by the Pension Benefit Guaranty Corporation (“PBGC”) if the Plan is terminated. Generally, the PBGC guarantees most vested normal age retirement benefits, early retirement benefits, and certain disability and survivor’s pensions. However, the PBGC does not guarantee all types of benefits under the Plan, and the amount of benefits protection is subject to certain limitations. Vested benefits under the Plan are guaranteed at the level in effect on the date of the Plan’s termination. However, there is a statutory ceiling on the amount of an individual’s monthly benefit that the PBGC guarantees.

Whether all participants receive their benefits should the Plan be terminated at some future time will depend on the sufficiency, at that time, of the Plan’s net assets to provide those benefits and may also depend on the financial condition of the Plan sponsor and level of benefits guaranteed by the PBGC. Some benefits may be fully or partially provided for by the then existing assets and the PBGC guaranty while other benefits may not be provided for at all.

NOTE 12 – SUBSEQUENT EVENTS

In 2024, the Company began the process to terminate the Plan under a standard termination. The Company may be required to make additional contributions to the Plan so that the assets of the Plan are sufficient to satisfy all benefit liabilities as of the final termination date. The Company plans to continue to maintain the Syms pension plan and make all contributions required, if any, under applicable minimum funding rules through the Plan termination date.

There were no other events noted from year end (December 31, 2024) through the issuance of these financial statements that would require disclosure in the Notes to Financial Statements.

SYMS PENSION PLAN

**SCHEDULE OF REPORTABLE TRANSACTIONS
EIN: 22-2465228
Plan No.: 003**

Year ended December 31, 2024

(a) Identity of Party Involved	(b) Description of Asset	(c) Purchase Price	(d) Selling Price	(e) Lease Rental	(f) Expense Incurred With Transaction	(g) Cost of Asset	(h) Current Value of Asset on Transaction Date	(i) Net Gain
JP Morgan Chase	US Equity I - Ticker: JUESX	Various	23.55	N/A	976	633,135	948,432	315,297
Schwaab	S&P 500 Index Fund Ticker: SWPPX	Various	80.40	N/A	-	470,460	1,056,197	585,737
Schwaab	US Treasury Money Market	Various	80.40	N/A	-	9,668,805	9,668,805	-

See accompanying independent auditors' report.

Schedule SB, Part V Summary of Plan Provisions

SYMS Pension Plan

22-2465228 / 003

For the plan year 01/01/2024 through 12/31/2024

<u>Employer:</u>	<p>Syms Corp.</p> <p>Type of Entity - S Corporation</p> <p>EIN: 22-2465228 TIN: Plan #: 003 Plan Type: Defined Benefit</p>														
<u>Dates:</u>	<p>Effective - 01/01/1976 Valuation - 01/01/2024</p>														
<u>Eligibility:</u>	<p>All employees excluding non-resident aliens, members of an excluded class and union</p> <p>Minimum age - 21 Months of service - 12</p> <p>Hours Required for - Eligibility - 1000 Benefit accrual - 1000 Vesting - 1000</p> <p>Plan Entry - First day of 1st or 7th month of plan year on or next following eligibility satisfaction</p>														
<u>Retirement:</u>	<p>Normal - First of month coincident with or next following attainment of age 65 and completion of 5 years of participation and completion of 21 years of service</p> <p>Early - First of month coincident with or next following attainment of age 55 and completion of 15 years of service</p>														
<u>Average Compensation:</u>	<p>Highest 3 consecutive years of participation</p> <p>Top Heavy Minimum Benefit - Highest 5 consecutive top heavy years of participation</p>														
<u>Plan Benefits:</u>	<p>Retirement - Frozen benefit formula</p> <p>Accrued Benefit - Frozen accrued benefit as of 10/01/2024</p> <p>Maximum allowable distribution is lump sum equivalent of normal form not to exceed 415 maximum allowable distribution, which is the lesser amount computed using a) 5.5% interest and the Applicable Mortality Table or b) the greater of plan actuarial equivalence interest and mortality or 417(e) Minimum</p> <p>Early Retirement - Accrued Benefit reduced by 1/15th per year for each of the first 0 years and then 1/30th per year for the years the Early Retirement Date precedes the Normal Retirement Date</p> <p>Death Benefit - Present Value of Accrued Benefit</p> <p>Disability Benefit - None</p>														
<u>Top Heavy Minimum:</u>	None														
<u>IRS Limitations:</u>	<p>415 Limits - Percent: 100 Dollar: \$275,000</p> <p>Maximum 401(a)(17) compensation - \$345,000</p>														
<u>PBGC:</u>	Plan is covered by Pension Benefit Guaranty Corporation														
<u>Normal Form:</u>	Life Annuity														
<u>Optional Forms:</u>	<p>Lump Sum</p> <p>Life Annuity Guaranteed for 0, 5, 10, 15 or 20 Years</p> <p>Annuity Guaranteed for 0 Years</p> <p>Joint with 0%, 50%, 66.67%, 75% or 100% Survivor Benefit</p>														
<u>Vesting Schedule:</u>	<table border="0"> <thead> <tr> <th>Years</th> <th>Percent</th> </tr> </thead> <tbody> <tr> <td>0-1</td> <td>0%</td> </tr> <tr> <td>2</td> <td>20%</td> </tr> <tr> <td>3</td> <td>40%</td> </tr> <tr> <td>4</td> <td>60%</td> </tr> <tr> <td>5</td> <td>80%</td> </tr> <tr> <td>6</td> <td>100%</td> </tr> </tbody> </table>	Years	Percent	0-1	0%	2	20%	3	40%	4	60%	5	80%	6	100%
Years	Percent														
0-1	0%														
2	20%														
3	40%														
4	60%														
5	80%														
6	100%														

Service is calculated using all years of service except years prior to plan effective date

Schedule SB, Part V Summary of Plan Provisions

SYMS Pension Plan 22-2465228 / 003

For the plan year 01/01/2024 through 12/31/2024

Present Value of Accrued Benefit: Based on the greater of 417(e) or Actuarial Equivalence

417(e):

Interest Rates -	First Month Prior to Plan Yr Beg		
	Segment #	Years	Rate %
	Segment 1	0 - 5	5.01
	Segment 2	6 - 20	5.13
	Segment 3	> 20	5.15

Mortality Table - 24E - 2024 Applicable Mortality Table for 417(e) (unisex)

Actuarial Equivalence:

Pre-Retirement -	Interest -	6.5%
	Mortality Table -	G83M - 1983 Group Annuity (male)
Post-Retirement -	Interest -	6.5%
	Mortality Table -	G83M - 1983 Group Annuity (male)

**SCHEDULE SB
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

**Single-Employer Defined Benefit Plan
Actuarial Information**

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6059 of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500 or 5500-SF.**

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

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

▶ **Round off amounts to nearest dollar.**

▶ **Caution:** A penalty of \$1,000 will be assessed for late filing of this report unless reasonable cause is established.

A Name of plan SYMS Pension Plan	B Three-digit plan number (PN) ▶ 003
C Plan sponsor's name as shown on line 2a of Form 5500 or 5500-SF SYMS Corp.	D Employer Identification Number (EIN) 22-2465228

E Type of plan: Single Multiple-A Multiple-B **F** Prior year plan size: 100 or fewer 101-500 More than 500

Part I Basic Information

1 Enter the valuation date: Month 01 Day 01 Year 2024

2 Assets:	
a Market value	2a 14,163,232
b Actuarial value	2b 14,163,232

3 Funding target/participant count breakdown:	(1) Number of participants	(2) Vested Funding Target	(3) Total Funding Target
a For retired participants and beneficiaries receiving payment	248	7,588,420	7,588,420
b For terminated vested participants	268	4,212,078	4,212,078
c For active participants	0	0	0
d Total	516	11,800,498	11,800,498

4 If the plan is in at-risk status, check the box and complete lines (a) and (b)

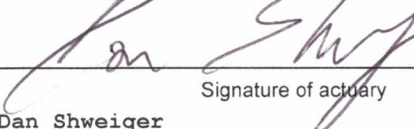
a Funding target disregarding prescribed at-risk assumptions	4a
b Funding target reflecting at-risk assumptions, but disregarding transition rule for plans that have been in at-risk status for fewer than five consecutive years and disregarding loading factor	4b

5 Effective interest rate **5** 5.09 %

6 Target normal cost

a Present value of current plan year accruals	6a 0
b Expected plan-related expenses	6b 0
c Target normal cost	6c 0

Statement by Enrolled Actuary
To the best of my knowledge, the information supplied in this schedule and accompanying schedules, statements and attachments, if any, is complete and accurate. Each prescribed assumption was applied in accordance with applicable law and regulations. In my opinion, each other assumption is reasonable (taking into account the experience of the plan and reasonable expectations) and such other assumptions, in combination, offer my best estimate of anticipated experience under the plan.

SIGN HERE		<u>06/24/2025</u>
	Signature of actuary	Date
	Dan Shweiger	<u>23-08124</u>
	Type or print name of actuary	Most recent enrollment number
	CEP Consultants Ins	(631) 249-0500
	Firm name	Telephone number (including area code)
	1373 Veterans Highway	
	Suite 10	
	US Hauppauge NY 11788	
	Address of the firm	

If the actuary has not fully reflected any regulation or ruling promulgated under the statute in completing this schedule, check the box and see instructions

Part II Beginning of Year Carryover and Prefunding Balances

	(a) Carryover balance	(b) Prefunding balance
7 Balance at beginning of prior year after applicable adjustments (line 13 from prior year)	0	507,516
8 Portion elected for use to offset prior year's funding requirement (line 35 from prior year)	0	0
9 Amount remaining (line 7 minus line 8)	0	507,516
10 Interest on line 9 using prior year's actual return of <u>-15.00</u> %	0	(76,127)
11 Prior year's excess contributions to be added to prefunding balance:		
a Present value of excess contributions (line 38a from prior year)		0
b(1) Interest on the excess, if any, of line 38a over line 38b from prior year Schedule SB, using prior year's effective interest rate of <u>5.16</u> % ...		0
b(2) Interest on line 38b from prior year Schedule SB, using prior year's actual return		0
c Total available at beginning of current plan year to add to prefunding balance		0
d Portion of (c) to be added to prefunding balance		0
12 Other reductions in balances due to elections or deemed elections	0	0
13 Balance at beginning of current year (line 9 + line 10 + line 11d - line 12)	0	431,389

Part III Funding Percentages

14 Funding target attainment percentage	14	116.36 %
15 Adjusted funding target attainment percentage	15	120.02 %
16 Prior year's funding percentage for purposes of determining whether carryover/prefunding balances may be used to reduce current year's funding requirement	16	100.00 %
17 If the current value of the assets of the plan is less than 70 percent of the funding target, enter such percentage	17	%

Part IV Contributions and Liquidity Shortfalls

18 Contributions made to the plan for the plan year by employer(s) and employees:

(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees	(a) Date (MM-DD-YYYY)	(b) Amount paid by employer(s)	(c) Amount paid by employees
Totals ▶			18(b)		18(c)

19 Discounted employer contributions -- see instructions for small plan with a valuation date after the beginning of the year:

a Contributions allocated toward unpaid minimum required contributions from prior years	19a	
b Contributions made to avoid restrictions adjusted to valuation date	19b	
c Contributions allocated toward minimum required contribution for current year adjusted to valuation date	19c	

20 Quarterly contributions and liquidity shortfalls:

- a** Did the plan have a "funding shortfall" for the prior year? Yes No
- b** If line 20a is "Yes," were required quarterly installments for the current year made in a timely manner? Yes No
- c** If line 20a is "Yes," see instructions and complete the following table as applicable:

Liquidity shortfall as of end of quarter of this plan year

(1) 1st	(2) 2nd	(3) 3rd	(4) 4th

Part V Assumptions Used To Determine Funding Target and Target Normal Cost

21 Discount rate:

a Segment rates:	1st segment: 4.75 %	2nd segment: 4.96 %	3rd segment: 5.59 %	<input type="checkbox"/> N/A, full yield curve used
b Applicable month (enter code)				21b 0

22 Weighted average retirement age **22** 65

23 Mortality table(s) (see instructions) Prescribed - combined Prescribed - separate Substitute

Part VI Miscellaneous items

24 Has a change been made in the non-prescribed actuarial assumptions for the current plan year? If "Yes," see instructions regarding required attachment Yes No

25 Has a method change been made for the current plan year? If "Yes," see instructions regarding required attachment Yes No

26 Demographic and benefit information

a Is the plan required to provide a Schedule of Active Participants? If "Yes," see instructions regarding required attachment Yes No

b Is the plan required to provide a projection of expected benefit payments? If "Yes," see instructions regarding required attachment Yes No

27 If the plan is subject to alternative funding rules, enter applicable code and see instructions regarding attachment **27**

Part VII Reconciliation of Unpaid Minimum Required Contributions For Prior Years

28 Unpaid minimum required contributions for all prior years **28**

29 Discounted employer contributions allocated toward unpaid minimum required contributions from prior years (line 19a) **29**

30 Remaining amount of unpaid minimum required contributions (line 28 minus line 29) **30**

Part VIII Minimum Required Contribution For Current Year

31 Target normal cost and excess assets (see instructions):

a Target normal cost (line 6c)	31a	0
b Excess assets, if applicable, but not greater than line 31a	31b	0

32 Amortization installments:

	Outstanding Balance	Installment
a Net shortfall amortization installment	0	0
b Waiver amortization installment		

33 If a waiver has been approved for this plan year, enter the date of the ruling letter granting the approval (Month _____ Day _____ Year _____) and the waived amount **33**

34 Total funding requirement before reflecting carryover/prefunding balances (lines 31a - 31b + 32a + 32b - 33) **34** 0

	Carryover balance	Prefunding Balance	Total balance
35 Balances elected for use to offset funding requirement			
36 Additional cash requirement (line 34 minus line 35)			36 0
37 Contributions allocated toward minimum required contribution for current year adjusted to valuation date (line 19c)			37
38 Present value of excess contributions for current year (see instructions)			
a Total (excess, if any, of line 37 over line 36)			38a 0
b Portion included in line 38a attributable to use of prefunding and funding standard carryover balances			38b 0
39 Unpaid minimum required contribution for current year (excess, if any, of line 36 over line 37)			39 0
40 Unpaid minimum required contributions for all years			40 0

Part IX Pension Funding Relief Under the American Rescue Plan Act of 2021 (See Instructions)

41 If an election was made to use the extended amortization rule for a plan year beginning on or before December 31, 2021, check the box to indicate the first plan year for which the rule applies. 2019 2020 2021

Schedule SB, Part V

Statement of Actuarial Assumptions/Methods

SYMS Pension Plan

22-2465228 / 003

For the plan year 01/01/2024 through 12/31/2024

Valuation Date: 01/01/2024

Funding Method: As prescribed in IRC Section 430
 Age - Eligibility age at last birthday and other ages at nearest birthday
 New participants are not included in current year's valuation
 Retrospective Compensation - Highest 3 consecutive years of participation
 Form of Payment - Assumed form of payment for funding is Life Annuity

Interest Rates -

Segment rates for the Valuation Date as permitted under IRC 430(h)(2)(C)

Segment #	Year	Rate %
Segment 1	0 - 5	4.37
Segment 2	6 - 20	4.96
Segment 3	> 20	4.95

Segment rates as of September 30, 2023 As permitted under IRC 430(h)(2)(C)(iv)(II) - ARP

Segment #	Year	Rate %
Segment 1	0 - 5	4.75
Segment 2	6 - 20	4.96
Segment 3	> 20	5.59

Pre-Retirement - Mortality Table - None
 Improvement Scale - None
 Early Retirement Table - None
 Turnover Table - None
 Disability Table - None
 Salary Scale - None
 Expense Load - None
 Ancillary Ben Load - None

Post-Retirement - Mortality Table - 24A - 2012 base table for Annuitant
 Improvement Scale - N21 - 2024 Adjusted Scale MP-2021 Rates Generational
 Cost of Living - None

Asset Valuation Method: Fair market value of assets adjusted for contributions under IRC 430(g)(4)

Discrimination Test Assumptions:

HCE Determination - Based on all employees

Otherwise Excludable - Otherwise Excludable HCEs are included with the Not Otherwise Excludable employees

410(b)/401(a)(4) Testing:

Pre-Retirement - Interest - 8.5%
 Post-Retirement - Interest - 8.5%
 Mortality Table - U84 - 1984 Unisex

Permissively Aggregated Plans - Tested as a Single Plan

Compensation - Use current compensation to calculate the benefit accrual rate (annual method)

Testing Age - Normal retirement age or attained age, if older

Testing Service - Separate benefiting service for DC and for DB for Accrued-to-Date Method

Normal Form for MVAR - Joint with 100% Survivor Benefits

401(a)(26) Testing:

Compensation - Use current compensation to calculate the benefit accrual rate for 401(a)(26)

Testing Age - Normal retirement age or attained age, if older



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 104

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
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REGULATED INVESTMENT COMPANIES

* COLUMBIA QUALITY INCOME A TICKER: AUGAX	0	0	0	0	0	0	0	0	0
--	---	---	---	---	---	---	---	---	---

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

HELD AT START OBTAINED IN PERIOD <-----COMBINED-----> <-----TOTAL HELD + OBTAINED----->

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
* COLUMBIA QUALITY INCOME A TICKER: AUGAX	232,418	3,145	226,979	-8,584	235,563	226,979	-8,584

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
------------	------------------	---------------	------------------	---------------	---------------	------------------	-------------	------------------	--------------

*ALLSPRING DISCIPLINED US CORE FD A TICKER: EVSAX	0	0	0	0	0	0	0	0	0
--	---	---	---	---	---	---	---	---	---

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

HELD AT START OBTAINED IN PERIOD <-----COMBINED-----> <-----TOTAL HELD + OBTAINED----->

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*ALLSPRING DISCIPLINED US CORE FD A TICKER: EVSAX	524,259	0	587,137	62,878	524,259	587,137	62,878

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 105

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*AMERICAN BEACON INTL EQTY Y TICKER: ABEYX		0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*AMERICAN BEACON INTL EQTY Y TICKER: ABEYX	9,086	0	9,756	670	9,086	9,756	670

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*AMERICAN FD NEW WORLD FD R4 TICKER: RNWEX		0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*AMERICAN FD NEW WORLD FD R4 TICKER: RNWEX	229,137	0	244,669	15,532	229,137	244,669	15,532

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*AMERICAN FUNDS NEW PERSPECTIVE R4 TICKER: RNPEX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*AMERICAN FUNDS NEW PERSPECTIVE R4 TICKER: RNPEX	439,627	0	478,559	38,932	439,627	478,559	38,932

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*BNY MELLON MIDCAP INDEX FD INV TICKER: PESPX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*BNY MELLON MIDCAP INDEX FD INV TICKER: PESPX	605,563	0	653,500	47,938	605,563	653,500	47,937

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*CROMWELL CENTERSQUARE RE INV TICKER: MRESX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*CROMWELL CENTERSQUARE RE INV TICKER: MRESX	380,045	1,863	369,349	-12,559	381,908	369,349	-12,559

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*DELAWARE CLIMATE SOLUTIONS FUND Y TICKER: IEYYX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*DELAWARE CLIMATE SOLUTIONS FUND Y TICKER: IEYYX	122,951	0	127,356	4,405	122,951	127,356	4,405

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN

ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*FEDERATED HIGH YIELD TRUST SS TICKER: FHYTX	0	0	0	2	2	0	2	2	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*FEDERATED HIGH YIELD TRUST SS TICKER: FHYTX	268,786	4,669	272,615	-840	273,455	272,615	-840

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*FIDELITY ADV INTL GROWTH FD CL I TICKER: FIIIX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*FIDELITY ADV INTL GROWTH FD CL I TICKER: FIIIX	312,199	0	316,830	4,631	312,199	316,830	4,631

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*GOLDMAN SACHS INTL SM CAP INSIGHTS A TICKER: GICAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*GOLDMAN SACHS INTL SM CAP INSIGHTS A TICKER: GICAX	312,178	0	333,874	21,697	312,178	333,874	21,696

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*GOLDMAN SACHS SMALL MID CAP GWTH A TICKER: GSMAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*GOLDMAN SACHS SMALL MID CAP GWTH A TICKER: GSMAX	524,296	0	570,827	46,530	524,296	570,827	46,531

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*GOLDMAN SACHS US MORTGAGES A TICKER: GSUAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*GOLDMAN SACHS US MORTGAGES A TICKER: GSUAX	112,476	1,598	111,078	-2,997	114,074	111,078	-2,996

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*HARTFORD GROWTH OPPORTUNITIES Y TICKER: HGOYX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*HARTFORD GROWTH OPPORTUNITIES Y TICKER: HGOYX	563,961	0	655,461	91,499	563,961	655,461	91,500

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*INVESCO DIVERSIFIED DIVIDEND FD CL A TICKER: LCEAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*INVESCO DIVERSIFIED DIVIDEND FD CL A TICKER: LCEAX	605,782	2,506	648,480	40,193	608,288	648,480	40,192

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*JANUS HENDERSON GBL EQTY INCM A TICKER: HFQAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*JANUS HENDERSON GBL EQTY INCM A TICKER: HFQAX	175,997	2,691	186,559	7,871	178,688	186,559	7,871

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*JANUS HENDERSON TRITON FD CL N TICKER: JGMNX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*JANUS HENDERSON TRITON FD CL N TICKER: JGMNX	590,494	0	606,909	16,415	590,494	606,909	16,415

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*JPMORGAN GRWTH ADVANTAGE I TICKER: JGASX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*JPMORGAN GRWTH ADVANTAGE I TICKER: JGASX	522,012	0	587,384	65,372	522,012	587,384	65,372

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*JPMORGAN INFLATION MANAGED BOND ETF TICKER: JCPI	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*JPMORGAN INFLATION MANAGED BOND ETF TICKER: JCPI	110,287	0	110,537	250	110,287	110,537	250

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*JPMORGAN US EQUITY I SHRS TICKER: JUESX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*JPMORGAN US EQUITY I SHRS TICKER: JUESX	855,004	888	948,432	92,540	855,892	948,432	92,540

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 114

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*LOOMIS SAYLES GLOBAL ALLOC CL A TICKER: LGMAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*LOOMIS SAYLES GLOBAL ALLOC CL A TICKER: LGMAX	378,258	0	403,900	25,642	378,258	403,900	25,642

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*LORD ABBETT BOND DEBENTURE CL A TICKER: LBNDX	0	0	0	4	4	0	4	4	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*LORD ABBETT BOND DEBENTURE CL A TICKER: LBNDX	514,328	11,396	527,242	1,518	525,724	527,242	1,518

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*LORD ABBETT FLOATING RATE A TICKER: LFRAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*LORD ABBETT FLOATING RATE A TICKER: LFRAX	122,207	3,312	126,067	548	125,519	126,067	548

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*MFS TECHNOLOGY FD CL I TICKER: MTCIX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*MFS TECHNOLOGY FD CL I TICKER: MTCIX	499,253	0	573,852	74,599	499,253	573,852	74,599

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 116

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PGIM JENNISON UTILITY A TICKER: PRUAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PGIM JENNISON UTILITY A TICKER: PRUAX	181,328	855	209,610	27,428	182,183	209,610	27,427

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PGIM TOTAL RETURN BD Z TICKER: PDBZX	0	0	0	3	3	0	3	3	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PGIM TOTAL RETURN BD Z TICKER: PDBZX	477,272	8,730	476,486	-9,516	486,002	476,486	-9,516

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 117

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PIMCO INCM CL A TICKER: PONAX	0	0	0	4	4	0	4	4	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PIMCO INCM CL A TICKER: PONAX	519,062	11,488	527,654	-2,896	530,550	527,654	-2,896

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PIMCO INVESTMENT GRADE CR BD I2 TICKER: PBDPX	0	0	0	1	1	0	1	1	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PIMCO INVESTMENT GRADE CR BD I2 TICKER: PBDPX	295,158	4,579	295,150	-4,587	299,737	295,150	-4,587

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PIMCO MORTGAGE OPPTY & BOND A TICKER: PMZAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PIMCO MORTGAGE OPPTY & BOND A TICKER: PMZAX	120,183	2,786	122,076	-893	122,969	122,076	-893

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*PIONEER FUNDAMENTAL GROWTH Y TICKER: FUNYX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*PIONEER FUNDAMENTAL GROWTH Y TICKER: FUNYX	509,484	0	563,486	54,002	509,484	563,486	54,002

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*SCHWAB BALANCED FUND I TICKER: SWOBX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HOLD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*SCHWAB BALANCED FUND I TICKER: SWOBX	158,776	0	168,380	9,604	158,776	168,380	9,604

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*SCHWAB INTERNATIONAL CORE EQUITY FD TICKER: SICNX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HOLD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*SCHWAB INTERNATIONAL CORE EQUITY FD TICKER: SICNX	108,813	0	119,924	11,112	108,813	119,924	11,112

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*SCHWAB S&P 500 INDEX FUND - SELECT S TICKER: SWPPX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*SCHWAB S&P 500 INDEX FUND - SELECT S TICKER: SWPPX	960,298	0	1,056,197	95,898	960,298	1,056,197	95,899

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*SCHWAB SMALL CAP INDEX SELECT TICKER: SWSSX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*SCHWAB SMALL CAP INDEX SELECT TICKER: SWSSX	301,118	0	307,787	6,669	301,118	307,787	6,669

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN

ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
 PAGE : 121

5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
SCHWAB US TRSY MONEY INV TICKER: SNSXX	0	0	0	9,668,804	9,668,804	0	9,668,804	9,668,804	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
SCHWAB US TRSY MONEY INV TICKER: SNSXX	0	0	0	0	0	0	0

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*TCW METWEST TOTAL RETURN BD M TICKER: MWTRX	0	0	0	1	1	0	1	1	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*TCW METWEST TOTAL RETURN BD M TICKER: MWTRX	221,640	3,338	218,710	-6,268	224,978	218,710	-6,268

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*UNDISCOVERED MANAGERS FDSBEHAVIOR TICKER: UBVAX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*UNDISCOVERED MANAGERS FDSBEHAVIOR TICKER: UBVAX	318,483	0	336,738	18,256	318,483	336,738	18,255

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*VANGUARD WELLESLEY INCOME FUND INV TICKER: VWINX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*VANGUARD WELLESLEY INCOME FUND INV TICKER: VWINX	121,692	1,033	124,896	2,171	122,725	124,896	2,171

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*VAUGHAN NELSON VALUE OPPORTUNITY Y TICKER: VNVYX	0	0	0	0	0	0	0	0	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*VAUGHAN NELSON VALUE OPPORTUNITY Y TICKER: VNVYX	369,705	62	398,168	28,401	369,767	398,168	28,401

* - FOR THIS ASSET, AVERAGE PRICES WERE USED

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
*WESTERN ASSET CORE BD FDA TICKER: WABAX	0	0	0	1	1	0	1	1	0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
*WESTERN ASSET CORE BD FDA TICKER: WABAX	336,397	4,689	331,414	-9,672	341,086	331,414	-9,672

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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5500 REPORT DETAIL FOR BANK: CHARLES SCHWAB TRUST BANK 212506

ASSETS HELD AT END OF PERIOD 12/31/23 - 12/31/24

<---ASSETS HELD AT START---><---ASSETS OBTAINED IN PERIOD---><---TOTAL HELD + OBTAINED--->

ASSET NAME	BEGINNING MARKET	ENDING MARKET	UNREAL GAIN/LOSS	PURCHASE COST	ENDING MARKET	UNREAL GAIN/LOSS	TOTAL VALUE	AGGREGATE MARKET	TOTAL UNREAL
** GRAND TOTAL ALL ASSETS **		0		9,668,820			0	9,668,820	
	0		0	9,668,820			9,668,820		0

ASSETS DISPOSED DURING PERIOD 12/31/23 - 12/31/24

ASSET NAME	HELD AT START	OBTAINED IN PERIOD	<-----COMBINED----->		<-----TOTAL HELD + OBTAINED----->		
	BEGINNING MARKET	PURCHASE COST	SALE PROCEEDS	REALIZED GAIN/LOSS	AGGREGATE COSTS	AGGREGATE PROCEEDS	REALIZED GAIN/LOSS
** GRAND TOTAL ALL ASSETS **		69,628		854,389		14,934,028	
	14,010,013		14,934,028		14,079,641		854,387

* - FOR THIS ASSET, AVERAGE PRICES WERE USED



TRUST BANK

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SCHEDULE OF REPORTABLE 5% TRANSACTIONS
 BY ISSUE
 COMPUTED ON A 12/31/23 VALUE OF \$14,163,231.88

TRADE DATE	SHARES/PV	PURCHASE/SALE PRICE	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
JPMORGAN US EQUITY I SHRS TICKER: JUESX =====					
3/26/24	41.781	PURCHASED 0.00	0.00	-976.01	976.01
5/13/24	40,273.107	SOLD 23.55	0.00	948,431.67	633,134.93
			0.00	949,407.68	
SCHWAB S&P 500 INDEX FUND - SELECT S TICKER: SWPPX =====					
5/13/24	13,136.774	SOLD 80.40	0.00	1,056,196.63	470,459.75
			0.00	1,056,196.63	
SCHWAB US TRSY MONEY INV TICKER: SNSXX =====					
8/13/24	9,500,000.000	PURCHASED 1.00	0.00	-9,500,000.00	9,500,000.00
8/15/24	2,603.580	PURCHASED 0.00	0.00	-2,603.58	2,603.58
9/16/24	41,045.070	PURCHASED 0.00	0.00	-41,045.07	41,045.07
10/15/24	35,634.680	PURCHASED 0.00	0.00	-35,634.68	35,634.68
10/31/24	19,022.320	PURCHASED 0.00	0.00	-19,022.32	19,022.32
11/29/24	35,886.640	PURCHASED 0.00	0.00	-35,886.64	35,886.64
12/31/24	23.030	PURCHASED 0.00	0.00	-23.03	23.03
12/31/24	34,588.810	PURCHASED 0.00	0.00	-34,588.81	34,588.81
			0.00	9,668,804.13	

SCHEDULE OF REPORTABLE 5% TRANSACTIONS
 BY BROKER
 COMPUTED ON A 12/31/23 VALUE OF \$14,163,231.88

TRADE DATE	SHARES/PV	DESCRIPTION	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
CHARLES SCHWAB & CO.					
1/18/24	10,615.711	S FIDELITY ADV INTL GROWTH FD CL I TICKER: FIIIX	0.00	200,000.00	-134,997.90
4/23/24	12,239.902	S LORD ABBETT FLOATING RATE A TICKER: LFRAX	0.00	100,000.00	-107,742.43
5/ 9/24	27,578.082	S ALLSPRING DISCIPLINED US CORE FD A TICKER: EVSAX	0.00	587,137.37	-441,668.94
5/13/24	471.752	S AMERICAN BEACON INTL EQTY Y TICKER: ABEYX	0.00	9,755.83	-8,859.68
5/13/24	5,729.766	S FIDELITY ADV INTL GROWTH FD CL I TICKER: FIIIX	0.00	116,829.93	-72,864.31
5/13/24	10,010.384	S SCHWAB INTERNATIONAL CORE EQUITY FD TICKER: SICNX	0.00	119,924.40	-94,353.98
5/13/24	12,955.829	S DELAWARE CLIMATE SOLUTIONS FUND Y TICKER: IEYYX	0.00	127,355.80	-157,759.55
5/13/24	29,333.187	S JANUS HENDERSON GLBL EQTY INCM A TICKER: HFQAX	0.00	186,559.07	-202,291.82
5/13/24	3,075.660	S AMERICAN FD NEW WORLD FD R4 TICKER: RNWEX	0.00	244,668.75	-163,411.04
5/13/24	9,262.322	S SCHWAB SMALL CAP INDEX SELECT TICKER: SWSSX	0.00	307,786.96	-247,564.57
5/13/24	25,525.571	S GOLDMAN SACHS INTL SM CAP INSIGHTS A TICKER: GICAX	0.00	333,874.47	-268,342.88
5/13/24	15,958.630	S VAUGHAN NELSON VALUE OPPORTUNITY Y TICKER: VNVYX	0.00	398,167.82	-332,659.47
5/13/24	8,010.691	S AMERICAN FUNDS NEW PERSPECTIVE R4 TICKER: RNPEX	0.00	478,558.68	-321,254.13
5/13/24	16,072.044	S PIONEER FUNDAMENTAL GROWTH Y TICKER: FUNYX	0.00	563,485.86	-367,931.41
5/13/24	27,696.580	S GOLDMAN SACHS SMALL MID CAP GWTH A TICKER: GSMAX	0.00	570,826.51	-580,949.63
5/13/24	8,496.474	S MFS TECHNOLOGY FD CL I TICKER: MTCIX	0.00	573,851.85	-324,622.58
5/13/24	16,061.915	S JPMORGAN GRWTH ADVANTAGE I TICKER: JGASX	0.00	587,384.23	-317,695.62
5/13/24	22,182.357	S JANUS HENDERSON TRITON FD CL N TICKER: JGMNX	0.00	606,909.29	-588,495.89
5/13/24	34,511.978	S INVESCO DIVERSIFIED DIVIDEND FD CL A TICKER: LCEAX	0.00	648,480.07	-644,258.11
5/13/24	21,496.718	S BNY MELLON MIDCAP INDEX FD INV TICKER: PESPX	0.00	653,500.23	-716,750.62
5/13/24	10,689.182	S HARTFORD GROWTH OPPORTUNITIES Y TICKER: HGOYX	0.00	655,460.64	-494,404.70
5/13/24	40,273.107	S JPMORGAN US EQUITY I SHRS TICKER: JUESX	0.00	948,431.67	-633,134.93
5/13/24	13,136.774	S SCHWAB S&P 500 INDEX FUND - SELECT S TICKER: SWPPX	0.00	1,056,196.63	-470,459.75
5/16/24	3,178.923	S LORD ABBETT FLOATING RATE A TICKER: LFRAX	0.00	26,067.17	-27,931.04
5/16/24	12,645.665	S GOLDMAN SACHS US MORTGAGES A TICKER: GSUAX	0.00	110,902.48	-132,047.75
5/16/24	13,084.297	S PIMCO MORTGAGE OPPTY & BOND A TICKER: PMZAX	0.00	122,076.49	-141,182.84
5/16/24	4,919.102	S VANGUARD WELLESLEY INCOME FUND INV	0.00	124,896.00	-123,638.68



TRUST BANK

SYMS PENSION PLAN
 ACCOUNT NUMBER: 212506
 REPORTING PERIOD: 12/31/23 TO 12/31/24
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SCHEDULE OF REPORTABLE 5% TRANSACTIONS
 BY BROKER
 COMPUTED ON A 12/31/23 VALUE OF \$14,163,231.88

TRADE DATE	SHARES/PV	DESCRIPTION	TRANSACTION EXPENSE	PURCHASE/SALE PROCEEDS	COST/ADJUSTED HISTORICAL COST
5/16/24	10,217.256 S	TICKER: VWINX SCHWAB BALANCED FUND I	0.00	168,380.38	-157,756.90
5/16/24	14,067.810 S	TICKER: SWOBX PGIM JENNISON UTILITY A	0.00	209,610.37	-200,586.31
5/16/24	24,419.274 S	TICKER: PRUAX TCW METWEST TOTAL RETURN BD M	0.00	218,308.31	-260,361.44
5/16/24	13,150.554 S	TICKER: MWTRX COLUMBIA QUALITY INCOME A	0.00	226,978.56	-284,759.48
5/16/24	43,449.393 S	TICKER: AUGAX FEDERATED HIGH YIELD TRUST SS	0.00	271,993.20	-283,258.35
5/16/24	33,291.572 S	TICKER: FHYTX PIMCO INVESTMENT GRADE CR BD I2	0.00	294,630.41	-341,422.08
5/16/24	31,571.043 S	TICKER: PBDPX WESTERN ASSET CORE BD FDA	0.00	330,864.53	-388,325.62
5/16/24	4,130.236 S	TICKER: WABAX UNDISCOVERED MANAGERS FDSBEHAVIOR	0.00	336,738.14	-251,385.75
5/16/24	35,042.603 S	TICKER: UBVAX CROMWELL CENTERSQUARE RE INV	0.00	369,349.04	-400,592.04
5/16/24	16,332.387 S	TICKER: MRESX LOOMIS SAYLES GLOBAL ALLOC CL A	0.00	403,899.93	-328,914.96
5/16/24	40,258.041 S	TICKER: LGMAX PGIM TOTAL RETURN BD Z	0.00	475,447.46	-563,618.83
5/16/24	74,067.716 S	TICKER: PDBZX LORD ABBETT BOND DEBENTURE CL A	0.00	525,880.78	-568,305.38
5/16/24	49,848.846 S	TICKER: LBNDX PIMCO INCM CL A	0.00	526,403.81	-591,151.52
5/16/24	2,371.000 S	TICKER: PONAX JPMORGAN INFLATION MANAGED BOND ETF	94.84	110,537.48	-113,377.10
6/20/24	19.848 S	TICKER: JCPI GOLDMAN SACHS US MORTGAGES A	0.00	175.46	-172.68
6/20/24	44.596 S	TICKER: GSUAX TCW METWEST TOTAL RETURN BD M	0.00	401.36	-395.12
6/20/24	58.325 S	TICKER: MWTRX PIMCO INVESTMENT GRADE CR BD I2	0.00	519.09	-513.26
6/20/24	52.076 S	TICKER: PBDPX WESTERN ASSET CORE BD FDA	0.00	549.40	-541.59
6/20/24	99.433 S	TICKER: WABAX FEDERATED HIGH YIELD TRUST SS	0.00	621.46	-619.47
6/20/24	87.294 S	TICKER: FHYTX PGIM TOTAL RETURN BD Z	0.00	1,038.80	-1,024.83
6/20/24	118.726 S	TICKER: PDBZX PIMCO INCM CL A	0.00	1,250.18	-1,245.44
6/20/24	191.661 S	TICKER: PONAX LORD ABBETT BOND DEBENTURE CL A	0.00	1,360.79	-1,353.13
8/13/24	9,500,000.000 B	TICKER: LBNDX SCHWAB US TRSY MONEY INV	0.00	-9,500,000.00	9,500,000.00
		TICKER: SNSXX	94.84	24,434,027.14	

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