

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: EVANGELICAL CHRISTIAN SCHOOL 403(B) PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 01/01/2005
2a Plan sponsor's name (employer, if for a single-employer plan): EVANGELICAL CHRISTIAN SCHOOL, INC.
2b Employer Identification Number (EIN): 59-1484745
2c Plan Sponsor's telephone number: 239-936-3319
2d Business code (see instructions): 611000

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	194
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)	173
	6a(2)	183
	6b	0
	6c	19
	6d	202
	6e	0
	6f	202
	6g(1)	112
6g(2)	117	
6h	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:
2F 2G 2L 2M 3D

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	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached _____
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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 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 EVANGELICAL CHRISTIAN SCHOOL 403(B) PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 EVANGELICAL CHRISTIAN SCHOOL, INC.	D Employer Identification Number (EIN) 59-1484745	

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

NEWPORT GROUP

27-2037969

(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)

NEWPORT GROUP

27-2037969

(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?
15 21 50 59 64	NONE	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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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 EVANGELICAL CHRISTIAN SCHOOL 403(B) PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 EVANGELICAL CHRISTIAN SCHOOL, INC.	D Employer Identification Number (EIN) 59-1484745

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.

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	109252	122287
(2) Participant contributions	1b(2)	0	
(3) Other	1b(3)	0	
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	132205	1082
(2) U.S. Government securities	1c(2)		
(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)	2070680	2382940
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

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	2312137	2506309
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	2312137	2506309

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)	122287	
(B) Participants.....	2a(1)(B)	239085	
(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)		361372
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)		
(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)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	91978	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		91978
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)		
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(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)		
(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)		182722
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total	2d		636072

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	441275	
(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)		441275
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)		
(6) Bank or trust company trustee/custodial fees	2i(6)		
(7) Actuarial fees	2i(7)		
(8) Legal fees	2i(8)		
(9) Valuation/appraisal fees	2i(9)		
(10) Other trustee fees and expenses	2i(10)		
(11) Other expenses	2i(11)	625	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		625
j Total expenses. Add all expense amounts in column (b) and enter total	2j		441900

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		194172
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: HSC/TUSCAN & COMPANY,PA

(2) EIN: 59-2309183

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		200000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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

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

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

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small>	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	<small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection.
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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>EVANGELICAL CHRISTIAN SCHOOL 403(B) PLAN</u>	B Three-digit plan number (PN) ▶	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>EVANGELICAL CHRISTIAN SCHOOL, INC.</u>	D Employer Identification Number (EIN) <u>59-1484745</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	
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): <u>27-3169253</u>		
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	

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)?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?.....	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> 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.....	<input type="checkbox"/> Increase	<input type="checkbox"/> Decrease	<input type="checkbox"/> Both	<input type="checkbox"/> No
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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?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
11 a Does the ESOP hold any preferred stock?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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.)	<input type="checkbox"/> Yes	<input type="checkbox"/> No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	<input type="checkbox"/> Yes	<input type="checkbox"/> 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 / 31 / 2017 (MM/DD/YYYY) and the Opinion Letter serial number J500865A.

EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN

**FINANCIAL STATEMENTS, TOGETHER WITH
REPORT OF INDEPENDENT AUDITOR**

**YEARS ENDED
DECEMBER 31, 2024 AND 2023**

TABLE OF CONTENTS

	<u>Page</u>
Independent Auditor's Report	1-5
 <u>Financial Statements</u>	
Statements of Net Assets Available for Plan Benefits (Modified Cash Basis).....	6
Statements of Changes in Net Assets Available for Plan Benefits (Modified Cash Basis).....	7
Notes to the Financial Statements.....	8-18
 <u>Supplementary Schedules</u>	
Schedule 1 - Assets Held for Investment Purposes at the End of Plan Year (Modified Cash Basis) December 31, 2024.....	19
Schedule 2 - Assets Held for Investment Purposes at the End of Plan Year (Modified Cash Basis) December 31, 2023.....	20
Schedule 3 - Reportable Transactions For the Year Ended December 31, 2024.....	21
Schedule 4 - Reportable Transactions For the Year Ended December 31, 2023.....	22
 All other schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA) have been omitted, because there is no information to report.	

HSC/Tuscan & Company, PA

CERTIFIED PUBLIC ACCOUNTANTS & CONSULTANTS

INDEPENDENT AUDITOR'S REPORT

Plan Administrator
Evangelical Christian School 403(b) Plan
8237 Beacon Blvd.
Fort Myers, Florida 33907

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

We have performed audits of the accompanying financial statements (modified cash basis) and the supplementary schedules of Evangelical Christian School 403(b) Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the Statements of Net Assets Available for Plan Benefits (modified cash basis) as of December 31, 2024 and 2023, and the related Statements of Changes in Net Assets Available for Plan Benefits (modified cash basis) 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 audits of Evangelical Christian School 403(b) Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the Plan by American Century Investments and Ascensus Trust Company that are regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets held are prepared and certified by American Century Investments and Ascensus Trust Company in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from American Century Investments and Ascensus Trust Company as of and for the years ended December 31, 2024 and 2023, stating that the certified investment information, as described in Note D to the financial statements, is complete and accurate.

INTEGRITY SERVICE EXPERIENCE

Opinion

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

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

Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Evangelical Christian School 403(b) 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.

Basis of Accounting

As described in NOTE B, these financial statements and the supplementary schedules were prepared on the modified cash basis of accounting, which is a comprehensive basis of accounting other than accounting principles generally accepted in the United States of America.

Management's Responsibilities for the Financial Statements

Plan management is responsible for the preparation and fair presentation of these financial statements in accordance with the modified cash basis of accounting described in Note B; this includes determining that the modified cash basis of accounting is an acceptable basis for the preparation of the financial statements in these circumstances. Management is also responsible 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, Plan management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Evangelical Christian School 403(b) Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit 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 generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentation, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

In performing an audit in accordance with generally accepted auditing standards, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risk 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 made by management, as well as evaluate the overall presentation of 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 Evangelical Christian School 403(b) Plan's internal controls. 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 Evangelical Christian School 403(b) Plan's ability to continue as a going concern for a reasonable period of time.

Our audits did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of the modified cash basis of accounting which is a comprehensive basis of accounting other than 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.

Supplementary Schedules Required by ERISA

The supplementary schedules of Reportable Transactions and Assets Held for Investment Purposes (modified cash basis) are presented for the purpose of additional analysis and are not a required part of the financial statements but are required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. 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 supplementary schedules, other than that agreed to or derived from certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplementary 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 supplementary schedules, we evaluated whether the supplementary 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 supplementary schedules, other than the information in the supplementary 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 supplementary 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).

HSC/Tuscan & Company, P.A.

HSC/TUSCAN & COMPANY, P.A.
Fort Myers, Florida
October 9, 2025

EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
STATEMENTS OF NET ASSETS AVAILABLE FOR PLAN BENEFITS
(MODIFIED CASH BASIS)
December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at fair value		
American Century Investments		
Contract Number 144407001		
Mutual Funds	\$ 49,409	\$ 46,349
Ascensus Trust Company		
Contract Number 437294		
Mutual Funds	<u>2,334,614</u>	<u>2,156,537</u>
TOTAL INVESTMENTS	<u>2,384,023</u>	<u>2,202,886</u>
Receivables		
Participant contributions	-	-
Employer contributions	<u>122,287</u>	<u>109,252</u>
TOTAL RECEIVABLES	<u>122,287</u>	<u>109,252</u>
TOTAL ASSETS AT FAIR VALUE	<u>2,506,310</u>	<u>2,312,138</u>
LIABILITIES		
Excess contributions payable	<u>-</u>	<u>-</u>
NET ASSETS AVAILABLE FOR PLAN BENEFITS	<u>\$ 2,506,310</u>	<u>\$ 2,312,138</u>

The accompanying notes are an integral part of this statement.

EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR
PLAN BENEFITS (MODIFIED CASH BASIS)
Years ended December 31, 2024 and 2023

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

	<u>2024</u>	<u>2023</u>
Investment income (loss)		
Interest and dividend income	\$ 91,978	\$ 65,868
Net investment earnings including		
realized and unrealized gains (losses)	<u>182,722</u>	<u>249,571</u>
TOTAL INVESTMENT INCOME	<u>274,700</u>	<u>315,439</u>
 Contributions		
Employee (cash), including Roth contributions	239,085	219,159
Employee rollover contributions	-	-
Employer matching contributions	<u>122,287</u>	<u>109,252</u>
TOTAL CONTRIBUTIONS	<u>361,372</u>	<u>328,411</u>
 TOTAL ADDITIONS (REDUCTIONS) TO NET ASSETS	 <u>636,072</u>	 <u>643,850</u>
 Deductions From Net Assets Attributed to:		
Administrative expenses	625	-
Benefits paid to participants	<u>441,275</u>	<u>198,527</u>
TOTAL DEDUCTIONS FROM NET ASSETS	<u>441,900</u>	<u>198,527</u>
 Net increase (decrease) in net assets	 194,172	 445,323
 Net assets available for plan benefits:		
 BEGINNING OF YEAR	 <u>2,312,138</u>	 <u>1,866,815</u>
 END OF YEAR	 <u>\$ 2,506,310</u>	 <u>\$ 2,312,138</u>

The accompanying notes are an integral part of this statement.

NOTE A - DESCRIPTION OF PLAN

The following description of Evangelical Christian School's (the "Company") Evangelical Christian School 403(b) Plan (the "Plan") - Plan 001 provides only general information. Participants should refer to the Summary Plan Description or Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a single employer self-directed defined contribution 403(b) plan originally effective January 1, 2005. The Plan was amended effective January 1, 2009. The Plan was then restated on January 1, 2020, in accordance with ERISA 403(b). The Plan is subject to the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended. The Plan administrator is responsible for the oversight of the Plan. The Investment Committee determines the appropriateness of the Plan's investment offerings, monitors investment performance, and reports to the Plan's Board of Trustees. Pension Planners, Inc. serves as the designated Plan's administrator and servicing agent.

The Company has designated American Century Investments and Ascensus Trust Company as the Plan's trustees/custodians.

Eligibility

Salary Deferrals - Employee Contributions

All active employees of the Company are eligible to participate in the salary reduction arrangement upon attainment of age 18 and after the completion of one hour of service. The following groups are not eligible to participate in the Plan: non-resident aliens, employees who are expected to work fewer than 20 hours per week and student employees and members of a union.

Employer Contributions

All active employees of the Company are eligible to participate in the employer discretionary matching contributions upon attaining the age of 18 and completing 1,000 hours of service in a twelve-month period. The participant enters the employer match portion of the Plan on the first day of the month coincident with or next following the completion of the eligibility requirement.

NOTE A - DESCRIPTION OF PLAN, CONTINUED

Contributions

The Plan permits employee salary reduction deferral contributions. The contributions are limited to the amount specified in the salary deferral agreement and by the maximum contribution permitted by the Internal Revenue Code. The maximum deferral amount permitted by the Internal Revenue Code for 2024 and 2023 was \$23,000 and \$22,500, respectively. An additional catch up provision of \$7,500 for 2024 and 2023, if age 50 or over is also available.

Roth 403(b) deferrals are permitted. Voluntary employee contributions (non-deferrals) are not permitted.

The Company may, at its discretion, elect to make a qualified matching contribution to the Plan. For the years ended December 31, 2024 and 2023, the Company's elective discretionary matching contribution was 3.0% of eligible compensation.

Participants may also contribute (rollover) amounts representing distributions from other qualified plans. Participants direct the investment of contributions into various investments options offered by the Plan. Contributions are subject to certain Internal Revenue Service (IRS) limitations.

Participant Accounts

Each participant's account is credited with their respective elected deferral contribution (actual contribution amount or percentage) plus any rollover amount and the participant's specific account investment activity and the Company's matching contribution. Amounts allocated to accounts of participants who, at Plan year end, have elected to withdraw from the Plan but have not been paid are identified by the trustees/custodians and will be disbursed as prescribed by the Plan documents and as elected by the participant. At December 31, 2024 and 2023, such allocated amounts were \$186,993 and \$513,877, respectively. Plan earnings, gains, losses, and expenses are allocated based on individual participant's account balances.

Participants may select any of the investment options listed in Note D to invest their respective participant account.

NOTE A - DESCRIPTION OF PLAN, CONTINUED

Vesting

Participants are immediately 100% vested and shall have a non-forfeitable right to 100% of their elective deferral and rollover contribution amounts. Vesting in the Company's discretionary matching contribution portion of their accounts, plus actual earnings thereon, is immediate upon employer contribution. Notwithstanding the above, a participant is fully vested upon reaching normal retirement age, death, or permanent disability. Therefore, there are no Plan forfeitures.

Participant Loans (Notes Receivables from Participants)

Loans are not permitted under this Plan.

Distributions (Benefits) to Participants

Upon termination of service, retirement, hardship, death or disability a participant may, with spousal consent, receive a distribution as permitted under the annuity contract. Normal retirement is considered to be attainment of age 65 and completion of five years of service. The Plan does not provide for early retirement. In-service distributions are permitted upon attainment of age 59 1/2 and are subject to Plan provisions. Hardship distributions are permitted subject to Plan provisions. If a participant terminates employment and the participant's account balance does not exceed \$5,000, the Plan administrator will authorize the lump sum benefit payment without the participant's consent. If the balance of the terminated participant's account is between \$1,000 and \$5,000, the Plan sponsor may authorize that the benefit payment be rolled into an individual retirement account in the participant's name. All benefit payments are via lump sum distribution.

In-service distributions are not permitted as defined by the Plan documents.

Forfeited Accounts

There are no forfeited non-vested accounts as participants are immediately 100% vested in company matching contributions. Forfeited non-vested accounts held as of December 31, 2024 and 2023, totaled \$0 and \$0, respectively. There were \$0 and \$0 of forfeitures used to pay administrative expenses for the years ended December 31, 2024 and 2023, respectively.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The following is a summary of the significant accounting policies used in the preparation of these financial statements:

Accounting Basis

The Evangelical Christian School 403(b) Plan prepares its financial statements and notes thereto using the modified cash basis of accounting. Under this comprehensive basis of accounting, generally, no provision will be made to record items which have been incurred but not paid or earned but not received. Accordingly, the accompanying financial statements are not intended to present financial position or results of operations in conformity with accounting principles generally accepted in the United States of America.

Fair Value of Financial Instruments

FASB ASC 825-10-50-21 (formerly Financial Accounting Standards Board Statement No. 107), "Disclosures About Fair Value of Financial Instruments," requires disclosure of fair value information about financial instruments for which it is practicable to estimate that value. The carrying amounts of cash and money market accounts approximate fair value due to the short maturity of those instruments.

Investments

The Plan's investments are stated at market (fair) value. The value of each mutual fund account is determined at the close of each business day based on quoted or appraised market value. The value of each such account is expressed in units. The unit value is the dollar value of one unit and is determined at the close of each business day by dividing the value of the entire account by the total number of units in the account. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisors, custodians, and insurance company. See Note E for discussion of fair value measurements.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Income Recognition

Transactions are accounted for using the transaction date. Realized gains or losses are determined on the basis of actual cost. In accordance with the policy of stating investments at fair value, any change in unrealized appreciation or depreciation for the year is reflected in the Statements of Changes in Net Assets Available for Plan Benefits. Both realized and unrealized gain/appreciation and loss/depreciation, as well as interest/dividend income, are recorded and reflected as investment income.

Purchases and sales of securities are recorded on a trade-date basis. Interest income and dividends are recorded on the modified cash basis. Net appreciation (depreciation) includes the Plan's gains and losses on investments bought and sold as well as held during the year.

Income Tax Status

The Plan most recently adopted a Prototype Non-Standardized Profit Sharing Plan with a cash or deferral arrangement which received a favorable opinion letter from the Internal Revenue Service (IRS) on March 31, 2017, which stated that the Plan and the related trust are designed in accordance with applicable sections of the Internal Revenue Code. The Plan has been amended since receiving its original determination letter. However, the Plan's counsel and Plan administrator believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

The modified cash basis of accounting requires 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 by examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Therefore, the Plan's annual return Form 5500 will remain open for examination for three (3) years.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Parties-in-Interest Transactions

Certain Plan investments are managed by American Century Investments and Ascensus Trust Company which are the trustees/custodians as defined by the Plan, hold all Plan investments and are considered a party-in-interest. Pension Planners, Inc. performs substantially all Plan Administrator functions and acts as servicing agent. Certain administrative functions are performed by employees of the employer (Plan sponsor). No such employee receives compensation from the Plan. Such employees and the Company are considered parties-in-interest.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of benefit payments are charged directly to the participant's account and are not included in administrative expense. Investment related expenses are included in net appreciation (depreciation) of fair value of investments.

Plan Termination

Although the Company has not expressed any intent to do so, the Company has the right to terminate the Plan at any time subject to the provisions of ERISA. In the event of Plan termination, the rights of all participants to benefits accrued are nonforfeitable and will be distributed in accordance with the provisions of the Plan.

Use of Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires the Plan administrator to make estimates and assumptions that affect the reported amounts of assets, liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Accordingly, actual results may differ from those estimates.

Benefit Payments

Benefits are recorded as deductions from net assets available for Plan benefits when paid.

NOTE B - SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES, CONTINUED

Subsequent Events

Subsequent events have been evaluated through October 9, 2025, which is the date the financial statements were available to be issued.

NOTE C - MARKET RISK

The Plan invests in various money market and mutual fund-type investments. All of the Plan's investments are recorded at fair market value, in accordance with the reporting requirements governing the Plan, with net changes in value reflected as net appreciation (depreciation) in fair value of investments. The market value of these investments is primarily dependent upon the national and global economy and are subject to market factors and fluctuation, which may result in a loss of capital (principal).

The Plan investments included mutual funds, which invest in various investment securities within various markets. All of the Plan's investments are recorded at fair value in accordance with the reporting requirements governing the Plan. Net changes in asset value is reflected as net appreciation (depreciation) in fair value of investments. All such investments are subject to various market and economic risk factors as well as the national and global economies and it is at least reasonably possible that changes in the values (loss of principal) of investment securities will occur in the near term and that such changes could materially affect the participant's account balances and amounts reported in the Plan's financial statements and supplementary schedules.

**EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2024 and 2023**

NOTE D - INVESTMENTS

The following table represents the fair value of the Plan's investments maintained by the trustees/custodians at December 31:

	2024	2023
<u>American Century (Custodian and Trustee)**</u>		
<u>Mutual Funds:</u>		
(1) American Century Growth Fund	\$ 10,300	\$ 8,161
(1) American Century International Growth Fund	2,976	2,909
(1) American Century Strategic Allocation Moderate	10,548	9,547
(1) American Century Diversified Bond Fund	20,206	20,860
(1) American Century One Choice 2045 Fund	5,379	4,872
	<u>49,409</u>	<u>46,349</u>
<u>Ascensus Trust Company (Custodian and Trustee)</u>		
<u>Mutual Funds:</u>		
(2) Vanguard 500 Index Fund Admiral Shares	57,364	39,490
(2) Vanguard Balanced Index Fund Admiral	46,355	35,640
(2) Vanguard Cash Reserves Federal Money	1,082	132,205 *
(2) Vanguard Core Bond Fund Admiral Shares	10,648	8,737
(2) Vanguard Developed Markets Index Admiral	249	54
(2) Vanguard Explorer Value	387	109
(2) Vanguard Global Equity Fund	-	877
(2) Vanguard Growth and Income Fund Admiral	18,504	15,168
(2) Vanguard Growth Index Fund Admiral Shares	60,425	41,692
(2) Vanguard Health Care Fund Admiral Shares	2,126	1,780
(2) Vanguard International Growth Fund Admiral	6,234	4,780
(2) Vanguard International Value Fund	1,037	761
(2) Vanguard Mid-Cap Growth Fund	3,376	4,147
(2) Vanguard Mid-Cap Index Fund Admiral	9,455	7,636
(2) Vanguard Mid-Cap Growth Index Admiral	389	109
(2) Vanguard Real Estate Index Admiral	7,658	6,264
(2) Vanguard Small Cap Growth Index Fund	3,452	3,583
(2) Vanguard Small-Cap Index Fund Admiral	-	127
(2) Vanguard Target Retirement 2020 Fund	12,715	223,819 *
(2) Vanguard Target Retirement 2025 Fund	533,680 *	475,860 *
(2) Vanguard Target Retirement 2030 Fund	353,532 *	261,182 *
(2) Vanguard Target Retirement 2035 Fund	441,585 *	357,458 *
(2) Vanguard Target Retirement 2040 Fund	129,281 *	90,207
(2) Vanguard Target Retirement 2045 Fund	159,611 *	108,899
(2) Vanguard Target Retirement 2050 Fund	199,293 *	140,713 *
(2) Vanguard Target Retirement 2055 Fund	141,652 *	99,619
(2) Vanguard Target Retirement 2060 Fund	59,490	37,431
(2) Vanguard Target Retirement 2065 Fund	3,955	588
(2) Vanguard Total International Bond Index	3,011	2,120
(2) Vanguard Total International Stock Index	3,777	3,288
(2) Vanguard Total Stock Market Index Fund A	55,353	41,873
(2) Vanguard Total World Stock Index Fund Admiral	-	909
(2) Vanguard US Growth Fund Admiral Shares	2,673	3,989
(2) Vanguard Federal Money Market Fund	6,265	5,423
	<u>2,334,614</u>	<u>2,156,537</u>
Total Investments	<u>\$ 2,384,023</u>	<u>\$ 2,202,886</u>

* Investments equal to or greater than 5% of assets available for Plan benefits at the end of the Plan year.

** American Century Investments and Ascensus Trust Company are considered a Party-in-Interest.

(1) Investment held by American Century Investments.

(2) Investment held by Ascensus Trust Company.

NOTE D - INVESTMENTS, CONTINUED

Information Certified by Trustee

The Plan administrator has received certification from the trustee/custodian as to all data appearing in the financial statements (including data regarding investments appearing in NOTE D, which has been reconciled to such certification) except the following:

- Determination of amounts contributed
- Tax status
- Plan description

NOTE E - FAIR VALUE MEASUREMENTS

The Plan's assets are reported at fair value in the accompanying Statements of Net Assets Available for Plan Benefits and consists of the following at December 31:

	Fair Value	Fair Value Measurements Using:			
		Level not Assigned*	Quoted Prices in Active Markets for Identical Assets Level (1)	Observable Inputs Other Than Quoted Prices Level (2)	Significant Unobservable Inputs Level (3)
<u>2024</u>					
Mutual Funds	\$ 2,384,023	\$ -	\$ 2,384,023	\$ -	\$ -
Contributions Receivable	122,287	122,287	-	-	-
TOTAL ASSETS	\$ 2,506,310	\$ 122,287	\$ 2,384,023	\$ -	\$ -
<u>2023</u>					
Mutual Funds	\$ 2,202,886	\$ -	\$ 2,202,886	\$ -	\$ -
Contributions Receivable	109,252	109,252	-	-	-
TOTAL ASSETS	\$ 2,312,138	\$ 109,252	\$ 2,202,886	\$ -	\$ -

* Considered a cash equivalent by custodian

NOTE E - FAIR VALUE MEASUREMENTS, CONTINUED

Fair Value Measurements

Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 820-10-50-1 through 820-10-50-8 (formerly Statement of Financial Accounting Standards (SFAS) No. 157, "Fair Value Measurements") established a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level (1) inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority. Level (2) inputs consist of observable inputs other than quoted prices in active markets for identical assets. Level (3) inputs consist of unobservable inputs and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level (1) inputs because they generally provide the most reliable evidence of fair value.

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

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

Level (1) Fair Value Measurements

The fair value of mutual funds is based on quoted fair values of the shares held by the Plan at the close of the business day at year end and are considered Level 1 inputs. Gains and losses (realized and unrealized) as well as interest and dividend income included in changes in net assets available for Plan benefits for the years ended December 31, 2024 and 2023, are reported in net investment income.

Level (2) Fair Value Measurements

The Plan held no Level 2 inputs at December 31, 2024 and 2023.

Level (3) Fair Value Measurements

The Plan held no Level 3 inputs at December 31, 2024 and 2023.

EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
NOTES TO THE FINANCIAL STATEMENTS
December 31, 2024 and 2023

NOTE F - RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

The following is a reconciliation of the financial statements to the Form 5500 at December 31:

	<u>2024</u>	<u>2023</u>
Net assets, beginning of year, January 1, per the financial statements	\$ 2,312,138	\$ 1,866,815
Employer contributions receivable	-	-
Employee contributions receivable	-	-
Excess contributions payable	-	-
Miscellaneous reconciling adjustment	<u>(1)</u>	<u>-</u>
Net assets, beginning of year, January 1, per Form 5500	<u>\$ 2,312,137</u>	<u>\$ 1,866,815</u>
Net assets, end of year, December 31, per the financial statements	\$ 2,506,310	\$ 2,312,138
Miscellaneous reconciling adjustment	(1)	(1)
Employer contributions receivable	-	-
Employee contributions receivable	-	-
Excess contributions payable	<u>-</u>	<u>-</u>
Net assets, end of year, December 31, per Form 5500	<u>\$ 2,506,309</u>	<u>\$ 2,312,137</u>

The following is a reconciliation of the financial statements to the Form 5500 for the year ended December 31:

	<u>2024</u>	<u>2023</u>
Net increase (decrease) in Net Assets per financial statements	\$ 194,172	\$ 445,323
Miscellaneous reconciling adjustment	-	(1)
Employer contributions receivable	-	-
Employee contributions receivable	-	-
Transfers of assets to plan (conversion)	-	-
Excess contributions payable	<u>-</u>	<u>-</u>
Net increase (decrease) in Net Assets per Form 5500	<u>\$ 194,172</u>	<u>\$ 445,322</u>

SUPPLEMENTARY SCHEDULES

**EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
EIN 59-1484745**

PLAN NUMBER: 001

SCHEDULE 1

**FORM 5500, SCHEDULE H, PART IV, LINE 4i - ASSETS HELD FOR INVESTMENT
PURPOSES AT THE END OF PLAN YEAR (MODIFIED CASH BASIS)**

December 31, 2024

<u>IDENTITY OF ISSUER</u>	<u>DESCRIPTION OF INVESTMENT</u>	<u>CURRENT YEAR COST (2)</u>	<u>CURRENT VALUE</u>
Mutual Funds:			
American Century Invest	(1) American Century Growth Fund		\$ 10,300
American Century Invest	(1) American Century International Growth Fund		2,976
American Century Invest	(1) American Century Strategic Allocation Moderate		10,548
American Century Invest	(1) American Century Diversified Bond Fund		20,206
American Century Invest	(1) American Century One Choice 2045 Fund		5,379
			<hr/> 49,409
Vanguard	(3) Vanguard 500 Index Fund Admiral Shares		57,364
Vanguard	(3) Vanguard Balanced Index Fund Admiral		46,355
Vanguard	(3) Vanguard Cash Reserves Federal Money		1,082
Vanguard	(3) Vanguard Core Bond Fund Admiral Shares		10,648
Vanguard	(3) Vanguard Developed Markets Index Admiral		249
Vanguard	(3) Vanguard Explorer Value		387
Vanguard	(3) Vanguard Global Equity Fund		-
Vanguard	(3) Vanguard Growth and Income Fund Admiral		18,504
Vanguard	(3) Vanguard Growth Index Fund Admiral Shares		60,425
Vanguard	(3) Vanguard Health Care Fund Admiral Shares		2,126
Vanguard	(3) Vanguard International Growth Fund Admiral		6,234
Vanguard	(3) Vanguard International Value Fund		1,037
Vanguard	(3) Vanguard Mid-Cap Growth Fund		3,376
Vanguard	(3) Vanguard Mid-Cap Index Fund Admiral		9,455
Vanguard	(3) Vanguard Mid-Cap Growth Index Admiral		389
Vanguard	(3) Vanguard Real Estate Index Admiral		7,658
Vanguard	(3) Vanguard Small Cap Growth Index Fund		3,452
Vanguard	(3) Vanguard Small-Cap Index Fund Admiral		-
Vanguard	(3) Vanguard Target Retirement 2020 Fund		12,715
Vanguard	(3) Vanguard Target Retirement 2025 Fund		533,680 *
Vanguard	(3) Vanguard Target Retirement 2030 Fund		353,532 *
Vanguard	(3) Vanguard Target Retirement 2035 Fund		441,585 *
Vanguard	(3) Vanguard Target Retirement 2040 Fund		129,281 *
Vanguard	(3) Vanguard Target Retirement 2045 Fund		159,611 *
Vanguard	(3) Vanguard Target Retirement 2050 Fund		199,293 *
Vanguard	(3) Vanguard Target Retirement 2055 Fund		141,652 *
Vanguard	(3) Vanguard Target Retirement 2060 Fund		59,490
Vanguard	(3) Vanguard Target Retirement 2065 Fund		3,955
Vanguard	(3) Vanguard Total International Bond Index		3,011
Vanguard	(3) Vanguard Total International Stock Index		3,777
Vanguard	(3) Vanguard Total Stock Market Index Fund A		55,353
Vanguard	(3) Vanguard Total World Stock Index Fund Admiral		-
Vanguard	(3) Vanguard US Growth Fund Admiral Shares		2,673
Vanguard	(3) Vanguard Federal Money Market Fund		6,265
			<hr/> 2,334,614
			<u>\$ 2,384,023</u>

(1) Held by American Century Investments in contract number 144407001 and considered to be a party-in-interest.

(2) This column is blank as all investments are participant directed.

* Investment equal to or greater than 5% of net assets available for Plan benefits (fair value) at the end of the Plan year.

(3) Held by Ascensus Trust Company in contract number 437294 and considered to be a party-in-interest.

**EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
EIN 59-1484745**

PLAN NUMBER: 001

SCHEDULE 2

**FORM 5500, SCHEDULE H, PART IV, LINE 4i - ASSETS HELD FOR INVESTMENT
PURPOSES AT THE END OF PLAN YEAR (MODIFIED CASH BASIS)**

December 31, 2023

<u>IDENTITY OF ISSUER</u>	<u>DESCRIPTION OF INVESTMENT</u>	<u>CURRENT YEAR COST (2)</u>	<u>CURRENT VALUE</u>
Mutual Funds:			
American Century Invest	(1) American Century Growth Fund		\$ 8,161
American Century Invest	(1) American Century International Growth Fund		2,909
American Century Invest	(1) American Century Strategic Allocation Moderate		9,547
American Century Invest	(1) American Century Diversified Bond Fund		20,860
American Century Invest	(1) American Century One Choice 2045 Fund		<u>4,872</u>
			<u>46,349</u>
Vanguard	(3) Vanguard 500 Index Fund Admiral Shares		39,490
Vanguard	(3) Vanguard Balanced Index Fund Admiral		35,640
Vanguard	(3) Vanguard Cash Reserves Federal Money		132,205 *
Vanguard	(3) Vanguard Core Bond Fund Admiral Shares		8,737
Vanguard	(3) Vanguard Developed Markets Index Admiral		54
Vanguard	(3) Vanguard Explorer Value		109
Vanguard	(3) Vanguard Global Equity Fund		877
Vanguard	(3) Vanguard Growth and Income Fund Admiral		15,168
Vanguard	(3) Vanguard Growth Index Fund Admiral Shares		41,692
Vanguard	(3) Vanguard Health Care Fund Admiral Shares		1,780
Vanguard	(3) Vanguard International Growth Fund Admiral		4,780
Vanguard	(3) Vanguard International Value Fund		761
Vanguard	(3) Vanguard Mid-Cap Growth Fund		4,147
Vanguard	(3) Vanguard Mid-Cap Index Fund Admiral		7,636
Vanguard	(3) Vanguard Mid-Cap Growth Index Admiral		109
Vanguard	(3) Vanguard Real Estate Index Admiral		6,264
Vanguard	(3) Vanguard Small Cap Growth Index Fund		3,583
Vanguard	(3) Vanguard Small-Cap Index Fund Admiral		127
Vanguard	(3) Vanguard Target Retirement 2020 Fund		223,819 *
Vanguard	(3) Vanguard Target Retirement 2025 Fund		475,860 *
Vanguard	(3) Vanguard Target Retirement 2030 Fund		261,182 *
Vanguard	(3) Vanguard Target Retirement 2035 Fund		357,458 *
Vanguard	(3) Vanguard Target Retirement 2040 Fund		90,207
Vanguard	(3) Vanguard Target Retirement 2045 Fund		108,899
Vanguard	(3) Vanguard Target Retirement 2050 Fund		140,713 *
Vanguard	(3) Vanguard Target Retirement 2055 Fund		99,619
Vanguard	(3) Vanguard Target Retirement 2060 Fund		37,431
Vanguard	(3) Vanguard Target Retirement 2065 Fund		588
Vanguard	(3) Vanguard Total International Bond Index		2,120
Vanguard	(3) Vanguard Total International Stock Index		3,288
Vanguard	(3) Vanguard Total Stock Market Index Fund A		41,873
Vanguard	(3) Vanguard Total World Stock Index Fund Admiral		909
Vanguard	(3) Vanguard US Growth Fund Admiral Shares		3,989
Vanguard	(3) Vanguard Federal Money Market Fund		<u>5,423</u>
			<u>2,156,537</u>
			<u>\$ 2,202,886</u>

(1) Held by American Century Investments in contract number 144407001 and considered to be a party-in-interest.

(2) This column is blank as all investments are participant directed.

* Investment equal to or greater than 5% of net assets available for Plan benefits (fair value) at the end of the Plan year.

(3) Held by Ascensus Trust Company in contract number 437294 and considered to be a party-in-interest.

**EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
EIN 59-1484745**

Page 21 of 22

PLAN NUMBER: 001

SCHEDULE 3

FORM 5500, PART IV, SCHEDULE H, line (4)(j)-REPORTABLE TRANSACTIONS

For the year ended December 31, 2024

<u>IDENTITY OF PARTY INVOLVED</u>	<u>DESCRIPTION OF ASSETS</u>	<u>NUMBER OF PURCHASES</u>	<u>NUMBER OF SALES</u>	<u>TOTAL DOLLAR VALUE OF PURCHASES</u>	<u>TOTAL DOLLAR VALUE OF SALES</u>	<u>DATE</u>
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NONE NOTED

Reportable transaction is defined as an individual or series of transactions which exceed 5% or more of the Plan's assets at the beginning of the year.

**EVANGELICAL CHRISTIAN SCHOOL 403(b) PLAN
EIN 59-1484745**

Page 22 of 22

PLAN NUMBER: 001

SCHEDULE 4

FORM 5500, PART IV, SCHEDULE H, line (4)(j)-REPORTABLE TRANSACTIONS

For the year ended December 31, 2023

<u>IDENTITY</u>		<u>NUMBER</u>	<u>NUMBER</u>	<u>TOTAL</u>	<u>TOTAL</u>	
<u>OF PARTY</u>	<u>DESCRIPTION</u>	<u>OF</u>	<u>OF</u>	<u>DOLLAR</u>	<u>DOLLAR</u>	
<u>INVOLVED</u>	<u>OF ASSETS</u>	<u>PURCHASES</u>	<u>SALES</u>	<u>VALUE OF</u>	<u>VALUE OF</u>	<u>DATE</u>
				<u>PURCHASES</u>	<u>SALES</u>	

NONE NOTED

Reportable transaction is defined as an individual or series of transactions which exceed 5% or more of the Plan's assets at the beginning of the year.

Schedule H, line 4i
Schedule of Assets (Held At End of Year)

For the plan year beginning 01/01/2024 and ending 12/31/2024

Name of plan

Evangelical Christian School 403(b) Plan

Employer Identification Number

59-1484745

Three-digit
plan number

▶ 001

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par, or maturity value	(d) Cost	(e) Current value
	AMERICAN CENTURY	INTERNATIONAL GROWTH FUND		2,976
	AMERICAN CENTURY	STRATEGIC ALLOCATION MODERETE		10,548
	AMERICAN CENTURY	EQUITY GROWTH FUND		10,300
	AMERICAN CENTURY	DIVERSIFIED BOND FUND		20,206
	AMERICAN CENTURY	ONE CHOICE 2045 FUND		5,378
	VANGUARD	500 INDEX FUND ADMIRAL SHARES		57,365
	VANGUARD	BALANCED INDEX FUND ADMIRAL S		46,355
	VANGUARD	CASH RESERVES FEDERAL MONEY		1,082
	VANGUARD	CORE BOND FUND ADMIRAL SHARES		10,648
	VANGUARD	FEDERAL MONEY MARKET FUND		6,265
	VANGUARD	GLOBAL EQUITY FUND		0
	VANGUARD	GROWTH AND INCOME FUND ADMIRA		18,504
	VANGUARD	GROWTH INDEX FUND ADMIRAL SHA		60,425
	VANGUARD	HEALTH CARE FUND ADMIRAL SHAR		2,126
	VANGUARD	TARGET RETIREMENT 2020 FUND		12,715
	VANGUARD	TARGET RETIREMENT 2025 FUND		533,680
	VANGUARD	TARGET RETIREMENT 2030 FUND		353,532
	VANGUARD	TARGET RETIREMENT 2035 FUND		441,585
	VANGUARD	TARGET RETIREMENT 2040 FUND		129,281
	VANGUARD	TARGET RETIREMENT 2045 FUND		159,611
	VANGUARD	TARGET RETIREMENT 2050 FUND		199,293
	VANGUARD	TARGET RETIREMENT 2055 FUND		141,652
	VANGUARD	TARGET RETIREMENT 2060 FUND		59,490
	VANGUARD	TARGET RETIREMENT 2065 FUND		3,955
	VANGUARD	INTERNATIONAL GROWTH FUND ADM		6,234
	VANGUARD	INTERNATIONAL VALUE FUND		1,037
	VANGUARD	MID-CAP GROWTH FUND		3,376
	VANGUARD	MID-CAP GROWTH INDEX ADM		388
	VANGUARD	MID-CAP INDEX FUND ADMIRAL SH		9,455
	VANGUARD	REAL ESTATE INDEX - ADMIRAL		7,658
	VANGUARD	SMALL-CAP GROWTH INDEX FUND A		3,452
	VANGUARD	SMALL-CAP INDEX FUND ADMIRAL		0
	VANGUARD	TOTAL INTERNATIONAL BOND INDE		3,011
	VANGUARD	TOTAL INTERNATIONAL STOCK IND		3,777
	VANGUARD	TOTAL STOCK MARKET INDEX FUND		55,353
	VANGUARD	TOTAL WORLD STOCK INDEX FUND		0
	VANGUARD	U.S. GROWTH FUND ADMIRAL SHAR		2,672
	VANGUARD	DEVELOPED MARKETS INDEX FUND		249
	VANGUARD	EXPLORER VALUE INV		387