

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
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Part I	Annual Report Identification Information
For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025	
A	This return/report is for: ☐ a multiemployer plan ☐ a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.) ☒ a single-employer plan ☐ a DFE (specify) _____ ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information	
1a	Name of plan 403(B) THRIFT PLAN OF BERKSHIRE FARM CENTER & SERVICES FOR YOUTH	1b Three-digit plan number (PN) ▶ 002
		1c Effective date of plan 07/01/2012
2a	Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) BERKSHIRE FARM CENTER 403(B) PLAN 13640 STATE ROUTE 22 CANAAN, NY 12029-3504	2b Employer Identification Number (EIN) 14-1368125 2c Plan Sponsor's telephone number 518-781-4567 2d Business code (see instructions) 624100

Caution: A penalty for the late or incomplete filing of this return/report will be assessed unless reasonable cause is established.			
Under penalties of perjury and other penalties set forth in the instructions, I declare that I have examined this return/report, including accompanying schedules, statements and attachments, as well as the electronic version of this return/report, and to the best of my knowledge and belief, it is true, correct, and complete.			
SIGN HERE	Filed with authorized/valid electronic signature.	04/14/2026	NICOLE MCARTHUR
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	04/14/2026	NICOLE MCARTHUR
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

3a Plan administrator's name and address ☒ 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	5 681
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) 306 6a(2) 413 6b 13 6c 119 6d 545 6e 6f 545 6g(1) 678 6g(2) 545 6h 46
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 2T

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

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

a Pension Schedules

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

b General Schedules

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

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

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

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

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

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

Receipt Confirmation Code _____

SCHEDULE A (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Insurance 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. ▶ Insurance companies are required to provide the information pursuant to ERISA section 103(a)(2).	OMB No. 1210-0110 2024 This Form is Open to Public Inspection
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For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025		
A Name of plan	B Three-digit plan number (PN)	002
403(B) THRIFT PLAN OF BERKSHIRE FARM CENTER & SERVICES FOR YOUTH		
C Plan sponsor's name as shown on line 2a of Form 5500	D Employer Identification Number (EIN)	
BERKSHIRE FARM CENTER 403(B) PLAN	14-1368125	

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

(a) Name of insurance carrier					
MUTUAL OF AMERICA					
(b) EIN	(c) NAIC code	(d) Contract or identification number	(e) Approximate number of persons covered at end of policy or contract year	Policy or contract year	
				(f) From	(g) To
13-1614399	88668	011997	545	07/01/2024	06/30/2025

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

(a) Total amount of commissions paid	(b) Total amount of fees paid
0	1603

3 Persons receiving commissions and fees. (Complete as many entries as needed to report all persons).

(a) Name and address of the agent, broker, or other person to whom commissions or fees were paid
TARRYTOWN REGIONAL OFFICE
120 WHITE PLAINS RD
TARRYTOWN, NY 10591

(b) Amount of sales and base commissions paid	Fees and other commissions paid		(e) Organization code
	(c) Amount	(d) Purpose	
	1603	PORTION OF INCENTIVE COMPENSATION	3

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

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

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

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

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

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

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

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

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

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

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

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

Part II Investment and Annuity Contract Information

Where individual contracts are provided, the entire group of such individual contracts with each carrier may be treated as a unit for purposes of this report.

4 Current value of plan's interest under this contract in the general account at year end	4	1507050
5 Current value of plan's interest under this contract in separate accounts at year end.....	5	6086983

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶**b** Premiums paid to carrier**6b****c** Premiums due but unpaid at the end of the year**6c****d** If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount.**6d**

Specify nature of costs ▶

e Type of contract: (1) ☐ individual policies (2) ☐ group deferred annuity(3) ☐ other (specify) ▶**f** If contract purchased, in whole or in part, to distribute benefits from a terminating plan, check here ☐**7** Contracts With Unallocated Funds (Do not include portions of these contracts maintained in separate accounts)**a** Type of contract: (1) ☒ deposit administration (2) ☐ immediate participation guarantee(3) ☐ guaranteed investment (4) ☐ other ▶**b** Balance at the end of the previous year**7b**

1471605

c Additions: (1) Contributions deposited during the year**7c(1)**

186816

(2) Dividends and credits.....

7c(2)

(3) Interest credited during the year.....

7c(3)

41037

(4) Transferred from separate account

7c(4)

54772

(5) Other (specify below).....

7c(5)

18364

▶ ACCOUNT TRANSFERS

(6) Total additions

7c(6)

300989

d Total of balance and additions (add lines **7b** and **7c(6)**)**7d**

1772594

e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year

7e(1)

240925

(2) Administration charge made by carrier.....

7e(2)

1603

(3) Transferred to separate account

7e(3)

23016

(4) Other (specify below).....

7e(4)

0

▶ ACCOUNT TRANSFERS

(5) Total deductions

7e(5)

265544

f Balance at the end of the current year (subtract line **7e(5)** from line **7d**).....**7f**

1507050

Part III Welfare Benefit Contract Information

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

8 Benefit and contract type (check all applicable boxes)

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

9 Experience-rated contracts:

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

10 Nonexperience-rated contracts:

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

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.	OMB No. 1210-0110
		2024
		This Form is Open to Public Inspection.

For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025		
A Name of plan 403(B) THRIFT PLAN OF BERKSHIRE FARM CENTER & SERVICES FOR YOUTH	B Three-digit plan number (PN) 002	
C Plan sponsor's name as shown on line 2a of Form 5500 BERKSHIRE FARM CENTER 403(B) PLAN	D Employer Identification Number (EIN) 14-1368125	

Part I	Service Provider Information (see instructions)
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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	
FIDELTY INVESTMENTS	82 DEVONSHIRE STREET BOSTON, MA 02109

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
THE VANGUARD GROUP, INC	100 VANGUARD BLVD MALVERN, PA 19355

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
AMERICAN FUNDS	333 SOUTH HOPE STREET LOS ANGELES, CA 90071-1406

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation	
CALVERT RESEARCH AND MANAGEMENT	1825 CONNECTICUT AVE NW STE 400 WASHINGTON, DC 20009

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

PIMCO

840 NEWPORT CENTER DRIVE
NEWPORT BEACH, CA 92660

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

T. ROWE PRICE ASSOCIATES, INC

100 EAST PRATT STREET
BALTIMORE, MD 21202

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

MFS VARIABLE INSURANCE TRUST III

111 HUNTINGTON AVENUE
BOSTON, MA 02199

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

DWS

210 WEST 10TH STREET
KANSAS CITY, MO 64105

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

GOLDMAN SACHS

200 WEST STREET
NEW YORK, NY 10282

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

MUTUAL OF AMERICA

320 PARK AVENUE
NEW YORK, NY 10022

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

NEUBERGER BERMAN

1290 AVENUE OF AMERICAS
NEW YORK, NY 10104

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

INVESCO

11 GREENWAY PLAZA STE. 2500
HOUSTON, TX 77046

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

DELAWARE FUNDS BY MACQUARIE

PO BOX 9876
PROVIDENCE, RI 02940

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

VICTORY CAPITAL MANAGEMENT INC.

15935 LA CANTERA PARKWAY BLDG 2
SAN ANTONIO, TX 78256

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

AMERICAN CENTURY INVESTMENT

PO BOX 419200
KANSAS CITY, MO 64141

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

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

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

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

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

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

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

MUTUTAL OF AMERICA INVESTMENT CORP

320 PARK AVENUE
NEW YORK, NY 10022

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 15 37 65	INSURANCE CARRIER	9777	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

MUTUTAL OF AMERICA INVESTMENT CORP

320 PARK AVENUE
NEW YORK, NY 10022

13-1614399

(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 12 65	RECORDKEEPER	7435	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

(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 ☐ No ☐	Yes ☐ No ☐		Yes ☐ No ☐

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

SCHEDULE D (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration		DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500.		OMB No. 1210-0110 2024 This Form is Open to Public Inspection.	
For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025					
A Name of plan 403(B) THRIFT PLAN OF BERKSHIRE FARM CENTER & SERVICES FOR YOUTH				B Three-digit plan number (PN) ▶ 002	
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 BERKSHIRE FARM CENTER 403(B) PLAN				D Employer Identification Number (EIN) 14-1368125	
Part I Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs)					
a Name of MTIA, CCT, PSA, or 103-12 IE: SEPARATE ACCOUNT NUMBER SA2					
b Name of sponsor of entity listed in (a): MUTUAL OF AMERICA					
c EIN-PN 13-1614399-022		d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 6086983		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)		
a Name of MTIA, CCT, PSA, or 103-12 IE:					
b Name of sponsor of entity listed in (a):					
c EIN-PN		d Entity code	e Dollar value of interest in MTIA, CCT, PSA, or		

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

Part II Information on Participating Plans (to be completed by DFEs, other than DCGs)

(Complete as many entries as needed to report all participating plans. DCGs must report each participating plan using Schedule DCG.)

a Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN**a** Plan name**b** Name of
plan sponsor**c** EIN-PN

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

For calendar plan year 2024 or fiscal plan year beginning 07/01/2024 and ending 06/30/2025		
A Name of plan 403(B) THRIFT PLAN OF BERKSHIRE FARM CENTER & SERVICES FOR YOUTH	B Three-digit plan number (PN) ▶	002
C Plan sponsor's name as shown on line 2a of Form 5500 BERKSHIRE FARM CENTER 403(B) PLAN	D Employer Identification Number (EIN) 14-1368125	

Part I	Asset and Liability Statement		
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
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)	477919	577389
(2) Participant contributions.....	1b(2)	16975	14413
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(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)	5217163	6086983
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	1471605	1507050
(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	7183662	8185835
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		
Net Assets			
l Net assets (subtract line 1k from line 1f)	1l	7183662	8185835

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)	602090	
(B) Participants	2a(1)(B)	694746	
(C) Others (including rollovers)	2a(1)(C)	87713	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		1384549
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)	41037	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		41037
(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)		
(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)		
(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)		709933
(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		2135519

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	1125911	
(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)		1125911
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)	7435	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		7435
j Total expenses. Add all expense amounts in column (b) and enter total	2j		1133346

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		1002173
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: **BONADIO & CO., LLP**

(2) EIN: **16-1131146**

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

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

Part IV Compliance Questions

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

During the plan year:

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

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

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

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

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

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

**403(b) THRIFT PLAN FOR EMPLOYEES OF
TOGETHER FOR YOUTH**

**Financial Statements as of
June 30, 2025 and 2024
Together with
Independent Auditor's Report**

DRAFT - SUBJECT TO CHANGE

INDEPENDENT AUDITOR'S REPORT

, 2026

To the Trustees of
403(b) Thrift Plan for Employees of Together for Youth:

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

We have performed audits of the financial statements of 403(b) Thrift Plan for Employees of Together for Youth (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of June 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years ended June 30, 2025 and 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of and for the years ended June 30, 2025 and 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

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 the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

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, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

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

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of June 30, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

Other Matter - Supplemental Schedule Required by ERISA (Continued)

In our opinion:

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

DRAFT - SUBJECT TO CHANGE

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS JUNE 30, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
ASSETS		
INVESTMENTS, at fair value:		
Separate account funds	\$ 6,086,983	\$ 5,217,163
FULLY BENEFIT RESPONSIVE GUARANTEED		
INTEREST ACCOUNTS, at contract value	<u>1,507,050</u>	<u>1,471,605</u>
Total investments	<u>7,594,033</u>	<u>6,688,768</u>
RECEIVABLES:		
Participant contribution	14,413	16,975
Employer contribution	<u>577,389</u>	<u>477,919</u>
	<u>591,802</u>	<u>494,894</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 8,185,835</u>	<u>\$ 7,183,662</u>

The accompanying notes are an integral part of these statements.

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEARS ENDED JUNE 30, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
ADDITIONS:		
Investment income	<u>\$ 750,970</u>	<u>\$ 733,503</u>
Contributions:		
Participant	694,746	643,066
Employer	602,090	600,153
Rollovers	<u>87,713</u>	<u>75,942</u>
Total contributions	<u>1,384,549</u>	<u>1,319,161</u>
Total additions	<u>2,135,519</u>	<u>2,052,664</u>
DEDUCTIONS:		
Benefits paid to participants	1,125,911	327,844
Administrative expenses	<u>7,435</u>	<u>7,826</u>
Total deductions	<u>1,133,346</u>	<u>335,670</u>
CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	1,002,173	1,716,994
NET ASSETS AVAILABLE FOR BENEFITS - beginning of year	<u>7,183,662</u>	<u>5,466,668</u>
NET ASSETS AVAILABLE FOR BENEFITS - end of year	<u>\$ 8,185,835</u>	<u>\$ 7,183,662</u>

The accompanying notes are an integral part of these statements.

403(b) THRIFT PLAN FOR EMPLOYEES OF TOGETHER FOR YOUTH

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2025 AND 2024

1. DESCRIPTION OF PLAN

The following description of the 403(b) Thrift Plan for Employees of Together for Youth (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution 403(b) plan covering substantially all employees of Together For Youth (the Plan Sponsor), formerly Berkshire Farm Center and Services for Youth. The Plan was established as of July 1, 2012 and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective December 1, 2024, the Plan was amended to reflect a change in the Plan name. The Plan previously referred to as 403(b) Thrift Plan of Berkshire Farm Center and Services for Youth now operates as 403(b) Thrift Plan for Employees of Together for Youth.

Eligibility Requirements

All employees are eligible to begin salary reduction contributions on the first day of the month coinciding or following each employee's date of hire. Employees become eligible to receive employer matching contributions, as well as the employer base contributions upon attaining the age of 21 and the completion of one year of service in which a minimum of 1,000 hours were worked during that year. Employer contributions begin on the first day of the month coinciding or following each employee's one year anniversary. Employees who are covered under collective bargaining agreements, per-diem employees, and employees participating in Berkshire Farm Center and Services for Youth Pension Plan are not eligible for the matching or discretionary contributions.

Contributions

Participants may contribute a percentage of their annual compensation subject to certain Internal Revenue Service (IRS) limitations. At its discretion, the Plan Sponsor may contribute employer base contributions to the Plan for each employee that meets the eligibility requirements. This employer base contribution is made whether or not the eligible employee contributes to the Plan. During the Plan years ending 2025 and 2024, the Plan Sponsor's employer base contribution was 2% of annual compensation for each eligible employee.

In addition, the Plan Sponsor matches 100% of an employee's contribution up to a certain percentage of the employee's annual compensation, as defined below:

<u>Employee Years of Service</u>	<u>Percentage of Compensation</u>
Less than 1 Year	0%
1 year but less than 5 years	1%
5 years but less than 10 years	2%
10 years or more	3%

1. DESCRIPTION OF PLAN (Continued)

Participant Accounts

Each participant's account is credited with the participant's contributions along with an allocation of (a) Plan Sponsor's contribution, and (b) Plan earnings and losses. Allocations are based on participant earnings and losses or account balances, as defined. The entitled benefit is the participant's account balance subject to vesting.

Vesting

Participants are immediately fully vested in their voluntary contributions. A participant does not become vested in employer contributions until he or she provides the required years of service. Participants are credited with vesting service for all years and months of employment. The required years of service to attain different percentage levels of vesting are shown in the table below:

<u>Years of Service</u>	<u>Percentage Vested</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years or more	100%

In addition, participants become fully vested upon death, total and permanent disability, or normal retirement age.

Investment Options

The Plan currently offers several separate account funds and a guaranteed interest account through Mutual of America Life Insurance Company. Each participant directs their investments among the funding choices available in the Plan. Any participant who fails to provide directed investment choices has their contributions placed in the Plan's default investment alternative. Participants may change their investment options daily.

Payment of Benefits

Upon termination, a participant is entitled to receive an amount equal to the value of the participant's vested interest in their account. If the account is less than \$1,000, the benefit must be distributed in a single lump sum payment. If the vested account balance is in excess of \$1,000, participants may elect to withdraw an amount up to the full balance in a single-sum or defer receipt of their vested benefit. The vested benefit remaining in the participant's account will continue to accumulate earnings, however the terminated participant will no longer be entitled to participate in the Plan.

If an active Plan participant dies before beginning to receive annuity payments, a death benefit equal to the full value of the participant's account will be entitled to the participant's beneficiary. If the participant's death occurs after annuity payments have begun, a death benefit will be paid in accordance with the annuity the participant chose at retirement.

Plan Loans

Plan loans are issued directly from the funds owned by Mutual of America and not directly from a participant's account. Adequate security is required, and a portion of the participant's account is held as collateral in case of default. Accordingly, only defaulted plan loans are included as part of plan assets in the accompanying statement of net assets available for benefits. Total plan loans were approximately \$65,905 and \$77,900 at June 30, 2025 and 2024, respectively.

1. DESCRIPTION OF PLAN (Continued)

Hardship Withdrawals

Prior to age 59½, a participant may withdraw only their participant contributions and vested employer contributions for reasons of hardship. All hardship withdrawals must comply with the rules relating to hardships, which are uniformly applicable to all participants.

Forfeitures

Participants who terminate employment before they vest will forfeit their interest in employer contribution accounts. These accounts will be held in the Plan to meet any obligations to pay plan expenses (if the employer elects not to pay such expenses directly) or reduce future employer contributions. During the year ending June 30, 2025 and 2024, approximately \$138,000 and \$50,000 of forfeitures were used to reduce employer contributions, respectively. Approximately \$40,000 and \$7,000 of forfeitures were available for use at June 30, 2025 and 2024, respectively.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

The preparation of financial statements in accordance with U.S. GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Risks and Uncertainties

Investment securities are exposed to various risks, such as interest rate, market, and credit risk. Due to the level of risk associated with investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such change could materially affect the amounts of assets available for Plan benefits.

Investment Valuation and Income Recognition

Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

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. Investment income includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Fully Benefit Responsive Guaranteed Interest Accounts

All amounts allocated to the Interest Accumulation Account become part of Mutual of America's general account. The amount in the Interest Accumulation Account at any time will be equal to the sum of all amounts that have been allocated to such account, including interest credited to the account, less the sum of all amounts that have been withdrawn from such account. Participants' principal and previously credited interest are guaranteed. Mutual of America assumes the investment risk of the underlying investments of the Interest Accumulation Account. This guarantee is subject to Mutual of America's financial strength and claims-paying ability. Mutual of America's general account investment strategy is to maintain high-quality assets with excellent liquidity, strong capital adequacy, and a proper matching of assets and liabilities.

The general account is credited with interest at a rate determined by Mutual of America from time to time, and Mutual of America reserves the right to change the interest rates applicable to amounts held in this account at their discretion, but not below the minimum guaranteed interest rate. The crediting rate determined by Mutual of America was 3.00% as of June 30, 2025 and 2024.

Requests for withdrawal (subject to Plan provisions) can be made at any time and are processed on the day that they are received; they are not dependent on Mutual of America having to liquidate securities in order to generate a payment. The contract value is the redeemable value of the fund; there are no deferred sales charges, load assessments, interest rate adjustments, or surrender charges that would affect the value as a result of a withdrawal request. The amounts held in the general account are considered fully benefit responsive.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Plan permits the payment of Plan expenses to be made from Plan assets. Substantially all administrative expenses associated with the Plan are paid by Plan participants as a reduction of investment income. Any expenses paid by the Plan Sponsor are not reflected in the Plan's statement of changes in net assets available for benefits.

3. INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mutual of America Life Insurance Company, the custodian, has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate as of and for the year ended June 30:

	<u>2025</u>	<u>2024</u>
Investments	<u>\$ 7,594,033</u>	<u>\$ 6,688,768</u>
Investment income	<u>\$ 750,970</u>	<u>\$ 733,503</u>
Schedule of Assets (Held at end of year)	Schedule I	

4. SEPARATE ACCOUNT FUNDS

The separate account funds' assets are invested in domestic stocks, international stocks, and fixed securities, such as asset or mortgage-backed securities and corporate bonds, and in mutual funds that hold such investments. The net asset value of the separate account fund is not publicly quoted. Therefore, the funds are valued as a practical expedient utilizing the net asset valuation of the underlying investments. Underlying equity securities have observable quoted pricing inputs. Underlying fixed securities have observable pricing inputs, including quoted prices for similar assets in the active or non-active markets. Underlying mutual funds are valued at publicly quoted pricing inputs.

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 Sponsor believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

There are no restrictions in connection with the transfer among or withdrawal from any of the investment alternatives in the separate account, other than that excessively frequent transfers or redemptions might be rejected. Each underlying fund has reserved the right to reject any aggregate purchase of fund shares that it determines to be inconsistent with their fund's policies and procedures relating to market timing.

The separate account funds invest in underlying funds, which have different investment objectives, investments policies, and risks. The investment strategies of these funds will vary based on the participant's chosen risk preferences. The separate account fund does not have any unfunded commitments.

5. FULLY BENEFIT-RESPONSIVE INTEREST ACCOUNTS

The Plan's ability to receive amounts due in accordance with fully benefit responsive investment contracts disclosed in Note 2 is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events might limit the ability of the Plan to transact at contract value with the contract issuer. These events may be different under each contract. Examples of such events include the following:

1. The Plan's failure to qualify under Section 401(a) of the Internal Revenue Code ("IRC") or the failure of the trust to be tax-exempt under Section 501(a) of the IRC.
2. Premature termination of the contracts.
3. Plan termination or merger.
4. Changes to the Plan's prohibition on competing investment options.
5. Bankruptcy of the Plan sponsor or other plan sponsor events (for example, divestitures or spinoffs of a subsidiary) that significantly affect the Plan's normal operations.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contracts with the Plan and settle at an amount different from contract value. Those events may be different under each contract.

5. FULLY BENEFIT-RESPONSIVE INTEREST ACCOUNTS (Continued)

Examples of such events include the following:

1. An uncured violation of the Plan's investment guidelines.
2. A breach of material obligation under the contract.
3. A material misrepresentation.
4. A material amendment to the agreements without the consent of the issuer.

There are no reserves against contract values for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a contractually guaranteed interest rate that may not be less than zero percent. Such interest rates are reviewed on a quarterly basis for resetting.

Generally, there are no events that could limit the ability of the Plan to transact at contract value. The contracts do not permit the insurance companies to terminate the agreements prior to the scheduled maturity dates. At June 30, 2025 and 2024, there are no unfunded commitments and investments are redeemed on a daily basis.

6. PLAN TERMINATION

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

7. TAX STATUS

The Plan is exempt from federal and state income tax under Section 403(b) of the Internal Revenue Code. Beginning in June of 2013, the IRS began accepting applications for opinion and advisory letters regarding the acceptability under 403(b) of the Code of the form of prototype plans and volume submitted plans. The Plan Administrator intends to apply for a determination letter on the Plan when they are able to do so.

The Plan is required to operate in conformity with the Internal Revenue Code to maintain its tax exemption. The Plan Administrator believes 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 tax has been included in the Plan's financial statements.

8. PARTY-IN-INTEREST TRANSACTIONS

The Plan holds certain investments managed by Mutual of America Life Insurance Company, the custodian. Therefore, these transactions qualify as party-in-interest transactions.

9. SUBSEQUENT EVENTS

Subsequent events have been evaluated through [REDACTED], 2026, which is the date the financial statements were available to be issued.

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

Schedule I

PLAN #002 EIN #14-1368125
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
JUNE 30, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS:				
*	Mutual of America	Interest Accumulation Account	Omitted - Participant Directed	\$ 1,507,050
SEPARATE ACCOUNT FUNDS:				
*	Mutual of America	2055 Retirement Fund		943,381
*	Mutual of America	2045 Retirement Fund		890,708
*	Mutual of America	2050 Retirement Fund		636,299
*	Mutual of America	2060 Retirement Fund		408,327
*	Mutual of America	2040 Retirement Fund		375,870
	Fidelity Investment	VIP Contrafund Portfolio		373,222
*	Mutual of America	Equity Index Fund		222,986
*	Mutual of America	2035 Retirement Fund		212,101
*	Mutual of America	Aggressive Allocation Fund		203,397
	Fidelity Investment	VIP Equity-Income Portfolio		157,832
	T. Rowe Price	Blue Chip Growth Fund		154,411
	Vanguard VIF	Diversified Value Portfolio		138,102
*	Mutual of America	Moderate Allocation Fund		118,948
*	Mutual of America	Mid-Cap Equity Index Fund		118,388
*	Mutual of America	2030 Retirement Fund		116,539
*	Mutual of America	Retirement Income Fund		110,546
	Vanguard VIF	International Portfolio		108,519
*	Mutual of America	2065 Retirement Fund		88,070
*	Mutual of America	2025 Retirement Fund		86,387
*	Mutual of America	Bond Fund		75,291
	American Century	VP Capital Appreciation		61,883
*	Mutual of America	Small Cap Growth Fund		57,166
	Fidelity Investment	VIP Mid Cap Portfolio		55,065
	DWS	Capital Growth VIP		42,522
*	Mutual of America	Conservative Allocation Fund		35,716
	Calvert VP SRI	Balanced Portfolio		34,071
*	Mutual of America	Money Market Fund		28,649
	Vanguard VIF	Real Estate Index Portfolio		27,643
	Fidelity Investment	VIP Asset Manager Portfolio		27,403
*	Mutual of America	International Fund		23,496
	MFS	VIT III Mid Cap Value Portfolio		22,200
	Delaware	VIP Small Cap Value Series		21,124
*	Mutual of America	All America Fund		20,932
*	Mutual of America	Small Cap Value Fund		17,713
*	Mutual of America	Mid Cap Value Fund		16,421
	Vanguard	Total Bond Market I Prt		11,058
	Invesco	V. I. Main Street		10,421
*	Mutual of America	2020 Retirement Fund		9,324
*	Mutual of America	Mid-Term Bond Fund		7,109
	American Funds	IS New World Fund		5,932
*	Mutual of America	Composite Fund		4,457
	Goldman Sachs	VIT US Equity Insights		4,246
	PIMCO	VIT Real Return Portfolio		1,080
*	Mutual of America	Small Cap Equity Index Fund		941
	Goldman Sachs	VIT Small Cap Equity Insights		694
	Neuberger Berman	AMT Sustainable Equity		393
				<u>6,086,983</u>
				<u>\$ 7,594,033</u>

* Indicates Party-In-Interest to the Plan

The accompanying notes are an integral part of this schedule.

**403(b) THRIFT PLAN FOR EMPLOYEES OF
TOGETHER FOR YOUTH**

**Financial Statements as of
June 30, 2025 and 2024
Together with
Independent Auditor's Report**

DRAFT - SUBJECT TO CHANGE

INDEPENDENT AUDITOR'S REPORT

, 2026

To the Trustees of
403(b) Thrift Plan for Employees of Together for Youth:

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

We have performed audits of the financial statements of 403(b) Thrift Plan for Employees of Together for Youth (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statements of net assets available for benefits as of June 30, 2025 and 2024, and the related statements of changes in net assets available for benefits for the years ended June 30, 2025 and 2024, and the related notes to the financial statements.

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

Management has obtained certifications from a qualified institution as of and for the years ended June 30, 2025 and 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

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 the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of the financial statements in accordance with 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 the Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

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, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

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

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter - Supplemental Schedule Required by ERISA

The supplemental schedule of assets (held at end of year) as of June 30, 2025 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

(Continued)

INDEPENDENT AUDITOR'S REPORT

(Continued)

Other Matter - Supplemental Schedule Required by ERISA (Continued)

In our opinion:

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

DRAFT - SUBJECT TO CHANGE

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS JUNE 30, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
ASSETS		
INVESTMENTS, at fair value:		
Separate account funds	\$ 6,086,983	\$ 5,217,163
FULLY BENEFIT RESPONSIVE GUARANTEED		
INTEREST ACCOUNTS, at contract value	<u>1,507,050</u>	<u>1,471,605</u>
Total investments	<u>7,594,033</u>	<u>6,688,768</u>
RECEIVABLES:		
Participant contribution	14,413	16,975
Employer contribution	<u>577,389</u>	<u>477,919</u>
	<u>591,802</u>	<u>494,894</u>
NET ASSETS AVAILABLE FOR BENEFITS	<u>\$ 8,185,835</u>	<u>\$ 7,183,662</u>

The accompanying notes are an integral part of these statements.

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS FOR THE YEARS ENDED JUNE 30, 2025 AND 2024

	<u>2025</u>	<u>2024</u>
ADDITIONS:		
Investment income	<u>\$ 750,970</u>	<u>\$ 733,503</u>
Contributions:		
Participant	694,746	643,066
Employer	602,090	600,153
Rollovers	<u>87,713</u>	<u>75,942</u>
Total contributions	<u>1,384,549</u>	<u>1,319,161</u>
Total additions	<u>2,135,519</u>	<u>2,052,664</u>
DEDUCTIONS:		
Benefits paid to participants	1,125,911	327,844
Administrative expenses	<u>7,435</u>	<u>7,826</u>
Total deductions	<u>1,133,346</u>	<u>335,670</u>
CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS	1,002,173	1,716,994
NET ASSETS AVAILABLE FOR BENEFITS - beginning of year	<u>7,183,662</u>	<u>5,466,668</u>
NET ASSETS AVAILABLE FOR BENEFITS - end of year	<u>\$ 8,185,835</u>	<u>\$ 7,183,662</u>

The accompanying notes are an integral part of these statements.

403(b) THRIFT PLAN FOR EMPLOYEES OF TOGETHER FOR YOUTH

NOTES TO FINANCIAL STATEMENTS JUNE 30, 2025 AND 2024

1. DESCRIPTION OF PLAN

The following description of the 403(b) Thrift Plan for Employees of Together for Youth (the Plan) provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution 403(b) plan covering substantially all employees of Together For Youth (the Plan Sponsor), formerly Berkshire Farm Center and Services for Youth. The Plan was established as of July 1, 2012 and is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Effective December 1, 2024, the Plan was amended to reflect a change in the Plan name. The Plan previously referred to as 403(b) Thrift Plan of Berkshire Farm Center and Services for Youth now operates as 403(b) Thrift Plan for Employees of Together for Youth.

Eligibility Requirements

All employees are eligible to begin salary reduction contributions on the first day of the month coinciding or following each employee's date of hire. Employees become eligible to receive employer matching contributions, as well as the employer base contributions upon attaining the age of 21 and the completion of one year of service in which a minimum of 1,000 hours were worked during that year. Employer contributions begin on the first day of the month coinciding or following each employee's one year anniversary. Employees who are covered under collective bargaining agreements, per-diem employees, and employees participating in Berkshire Farm Center and Services for Youth Pension Plan are not eligible for the matching or discretionary contributions.

Contributions

Participants may contribute a percentage of their annual compensation subject to certain Internal Revenue Service (IRS) limitations. At its discretion, the Plan Sponsor may contribute employer base contributions to the Plan for each employee that meets the eligibility requirements. This employer base contribution is made whether or not the eligible employee contributes to the Plan. During the Plan years ending 2025 and 2024, the Plan Sponsor's employer base contribution was 2% of annual compensation for each eligible employee.

In addition, the Plan Sponsor matches 100% of an employee's contribution up to a certain percentage of the employee's annual compensation, as defined below:

<u>Employee Years of Service</u>	<u>Percentage of Compensation</u>
Less than 1 Year	0%
1 year but less than 5 years	1%
5 years but less than 10 years	2%
10 years or more	3%

1. DESCRIPTION OF PLAN (Continued)

Participant Accounts

Each participant's account is credited with the participant's contributions along with an allocation of (a) Plan Sponsor's contribution, and (b) Plan earnings and losses. Allocations are based on participant earnings and losses or account balances, as defined. The entitled benefit is the participant's account balance subject to vesting.

Vesting

Participants are immediately fully vested in their voluntary contributions. A participant does not become vested in employer contributions until he or she provides the required years of service. Participants are credited with vesting service for all years and months of employment. The required years of service to attain different percentage levels of vesting are shown in the table below:

<u>Years of Service</u>	<u>Percentage Vested</u>
Less than 2 years	0%
2 years	20%
3 years	40%
4 years	60%
5 years	80%
6 years or more	100%

In addition, participants become fully vested upon death, total and permanent disability, or normal retirement age.

Investment Options

The Plan currently offers several separate account funds and a guaranteed interest account through Mutual of America Life Insurance Company. Each participant directs their investments among the funding choices available in the Plan. Any participant who fails to provide directed investment choices has their contributions placed in the Plan's default investment alternative. Participants may change their investment options daily.

Payment of Benefits

Upon termination, a participant is entitled to receive an amount equal to the value of the participant's vested interest in their account. If the account is less than \$1,000, the benefit must be distributed in a single lump sum payment. If the vested account balance is in excess of \$1,000, participants may elect to withdraw an amount up to the full balance in a single-sum or defer receipt of their vested benefit. The vested benefit remaining in the participant's account will continue to accumulate earnings, however the terminated participant will no longer be entitled to participate in the Plan.

If an active Plan participant dies before beginning to receive annuity payments, a death benefit equal to the full value of the participant's account will be entitled to the participant's beneficiary. If the participant's death occurs after annuity payments have begun, a death benefit will be paid in accordance with the annuity the participant chose at retirement.

Plan Loans

Plan loans are issued directly from the funds owned by Mutual of America and not directly from a participant's account. Adequate security is required, and a portion of the participant's account is held as collateral in case of default. Accordingly, only defaulted plan loans are included as part of plan assets in the accompanying statement of net assets available for benefits. Total plan loans were approximately \$65,905 and \$77,900 at June 30, 2025 and 2024, respectively.

1. DESCRIPTION OF PLAN (Continued)

Hardship Withdrawals

Prior to age 59½, a participant may withdraw only their participant contributions and vested employer contributions for reasons of hardship. All hardship withdrawals must comply with the rules relating to hardships, which are uniformly applicable to all participants.

Forfeitures

Participants who terminate employment before they vest will forfeit their interest in employer contribution accounts. These accounts will be held in the Plan to meet any obligations to pay plan expenses (if the employer elects not to pay such expenses directly) or reduce future employer contributions. During the year ending June 30, 2025 and 2024, approximately \$138,000 and \$50,000 of forfeitures were used to reduce employer contributions, respectively. Approximately \$40,000 and \$7,000 of forfeitures were available for use at June 30, 2025 and 2024, respectively.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP).

Use of Estimates

The preparation of financial statements in accordance with U.S. GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements. Estimates also affect the reported amounts of revenue and expenses during the reporting period. Accordingly, actual results could differ from those estimates.

Risks and Uncertainties

Investment securities are exposed to various risks, such as interest rate, market, and credit risk. Due to the level of risk associated with investment securities, it is at least reasonably possible that changes in the value of investment securities will occur in the near term and that such change could materially affect the amounts of assets available for Plan benefits.

Investment Valuation and Income Recognition

Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

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. Investment income includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Fully Benefit Responsive Guaranteed Interest Accounts

All amounts allocated to the Interest Accumulation Account become part of Mutual of America's general account. The amount in the Interest Accumulation Account at any time will be equal to the sum of all amounts that have been allocated to such account, including interest credited to the account, less the sum of all amounts that have been withdrawn from such account. Participants' principal and previously credited interest are guaranteed. Mutual of America assumes the investment risk of the underlying investments of the Interest Accumulation Account. This guarantee is subject to Mutual of America's financial strength and claims-paying ability. Mutual of America's general account investment strategy is to maintain high-quality assets with excellent liquidity, strong capital adequacy, and a proper matching of assets and liabilities.

The general account is credited with interest at a rate determined by Mutual of America from time to time, and Mutual of America reserves the right to change the interest rates applicable to amounts held in this account at their discretion, but not below the minimum guaranteed interest rate. The crediting rate determined by Mutual of America was 3.00% as of June 30, 2025 and 2024.

Requests for withdrawal (subject to Plan provisions) can be made at any time and are processed on the day that they are received; they are not dependent on Mutual of America having to liquidate securities in order to generate a payment. The contract value is the redeemable value of the fund; there are no deferred sales charges, load assessments, interest rate adjustments, or surrender charges that would affect the value as a result of a withdrawal request. The amounts held in the general account are considered fully benefit responsive.

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Administrative Expenses

The Plan permits the payment of Plan expenses to be made from Plan assets. Substantially all administrative expenses associated with the Plan are paid by Plan participants as a reduction of investment income. Any expenses paid by the Plan Sponsor are not reflected in the Plan's statement of changes in net assets available for benefits.

3. INFORMATION PREPARED AND CERTIFIED BY CUSTODIAN

The Plan Administrator has elected the method of annual reporting compliance permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Mutual of America Life Insurance Company, the custodian, has certified that the following data included in the accompanying financial statements and supplemental schedule is complete and accurate as of and for the year ended June 30:

	<u>2025</u>	<u>2024</u>
Investments	<u>\$ 7,594,033</u>	<u>\$ 6,688,768</u>
Investment income	<u>\$ 750,970</u>	<u>\$ 733,503</u>
Schedule of Assets (Held at end of year)	Schedule I	

4. SEPARATE ACCOUNT FUNDS

The separate account funds' assets are invested in domestic stocks, international stocks, and fixed securities, such as asset or mortgage-backed securities and corporate bonds, and in mutual funds that hold such investments. The net asset value of the separate account fund is not publicly quoted. Therefore, the funds are valued as a practical expedient utilizing the net asset valuation of the underlying investments. Underlying equity securities have observable quoted pricing inputs. Underlying fixed securities have observable pricing inputs, including quoted prices for similar assets in the active or non-active markets. Underlying mutual funds are valued at publicly quoted pricing inputs.

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 Sponsor believes its valuation method is appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

There are no restrictions in connection with the transfer among or withdrawal from any of the investment alternatives in the separate account, other than that excessively frequent transfers or redemptions might be rejected. Each underlying fund has reserved the right to reject any aggregate purchase of fund shares that it determines to be inconsistent with their fund's policies and procedures relating to market timing.

The separate account funds invest in underlying funds, which have different investment objectives, investments policies, and risks. The investment strategies of these funds will vary based on the participant's chosen risk preferences. The separate account fund does not have any unfunded commitments.

5. FULLY BENEFIT-RESPONSIVE INTEREST ACCOUNTS

The Plan's ability to receive amounts due in accordance with fully benefit responsive investment contracts disclosed in Note 2 is dependent on the third-party issuer's ability to meet its financial obligations. The issuer's ability to meet its contractual obligations may be affected by future economic and regulatory developments. Certain events might limit the ability of the Plan to transact at contract value with the contract issuer. These events may be different under each contract. Examples of such events include the following:

1. The Plan's failure to qualify under Section 401(a) of the Internal Revenue Code ("IRC") or the failure of the trust to be tax-exempt under Section 501(a) of the IRC.
2. Premature termination of the contracts.
3. Plan termination or merger.
4. Changes to the Plan's prohibition on competing investment options.
5. Bankruptcy of the Plan sponsor or other plan sponsor events (for example, divestitures or spinoffs of a subsidiary) that significantly affect the Plan's normal operations.

No events are probable of occurring that might limit the ability of the Plan to transact at contract value with the contract issuers and that also would limit the ability of the Plan to transact at contract value with the participants.

In addition, certain events allow the issuer to terminate the contracts with the Plan and settle at an amount different from contract value. Those events may be different under each contract.

5. FULLY BENEFIT-RESPONSIVE INTEREST ACCOUNTS (Continued)

Examples of such events include the following:

1. An uncured violation of the Plan's investment guidelines.
2. A breach of material obligation under the contract.
3. A material misrepresentation.
4. A material amendment to the agreements without the consent of the issuer.

There are no reserves against contract values for credit risk of the contract issuer or otherwise. The crediting interest rate is based on a contractually guaranteed interest rate that may not be less than zero percent. Such interest rates are reviewed on a quarterly basis for resetting.

Generally, there are no events that could limit the ability of the Plan to transact at contract value. The contracts do not permit the insurance companies to terminate the agreements prior to the scheduled maturity dates. At June 30, 2025 and 2024, there are no unfunded commitments and investments are redeemed on a daily basis.

6. PLAN TERMINATION

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

7. TAX STATUS

The Plan is exempt from federal and state income tax under Section 403(b) of the Internal Revenue Code. Beginning in June of 2013, the IRS began accepting applications for opinion and advisory letters regarding the acceptability under 403(b) of the Code of the form of prototype plans and volume submitted plans. The Plan Administrator intends to apply for a determination letter on the Plan when they are able to do so.

The Plan is required to operate in conformity with the Internal Revenue Code to maintain its tax exemption. The Plan Administrator believes 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 tax has been included in the Plan's financial statements.

8. PARTY-IN-INTEREST TRANSACTIONS

The Plan holds certain investments managed by Mutual of America Life Insurance Company, the custodian. Therefore, these transactions qualify as party-in-interest transactions.

9. SUBSEQUENT EVENTS

Subsequent events have been evaluated through [REDACTED], 2026, which is the date the financial statements were available to be issued.

403(b) THRIFT PLAN OF BERKSHIRE FARM CENTER AND SERVICES FOR YOUTH

Schedule I

PLAN #002 EIN #14-1368125
SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
JUNE 30, 2025

(a)	(b)	(c)	(d)	(e)
	Identity of issuer, borrower, lessor, or similar party	Description of investment, including maturity date, rate of interest, collateral, par or maturity value	Cost	Current Value
FULLY BENEFIT RESPONSIVE INVESTMENT CONTRACTS:				
*	Mutual of America	Interest Accumulation Account	Omitted - Participant Directed	\$ 1,507,050
SEPARATE ACCOUNT FUNDS:				
*	Mutual of America	2055 Retirement Fund		943,381
*	Mutual of America	2045 Retirement Fund		890,708
*	Mutual of America	2050 Retirement Fund		636,299
*	Mutual of America	2060 Retirement Fund		408,327
*	Mutual of America	2040 Retirement Fund		375,870
	Fidelity Investment	VIP Contrafund Portfolio		373,222
*	Mutual of America	Equity Index Fund		222,986
*	Mutual of America	2035 Retirement Fund		212,101
*	Mutual of America	Aggressive Allocation Fund		203,397
	Fidelity Investment	VIP Equity-Income Portfolio		157,832
	T. Rowe Price	Blue Chip Growth Fund		154,411
	Vanguard VIF	Diversified Value Portfolio		138,102
*	Mutual of America	Moderate Allocation Fund		118,948
*	Mutual of America	Mid-Cap Equity Index Fund		118,388
*	Mutual of America	2030 Retirement Fund		116,539
*	Mutual of America	Retirement Income Fund		110,546
	Vanguard VIF	International Portfolio		108,519
*	Mutual of America	2065 Retirement Fund		88,070
*	Mutual of America	2025 Retirement Fund		86,387
*	Mutual of America	Bond Fund		75,291
	American Century	VP Capital Appreciation		61,883
*	Mutual of America	Small Cap Growth Fund		57,166
	Fidelity Investment	VIP Mid Cap Portfolio		55,065
	DWS	Capital Growth VIP		42,522
*	Mutual of America	Conservative Allocation Fund		35,716
	Calvert VP SRI	Balanced Portfolio		34,071
*	Mutual of America	Money Market Fund		28,649
	Vanguard VIF	Real Estate Index Portfolio		27,643
	Fidelity Investment	VIP Asset Manager Portfolio		27,403
*	Mutual of America	International Fund		23,496
	MFS	VIT III Mid Cap Value Portfolio		22,200
	Delaware	VIP Small Cap Value Series		21,124
*	Mutual of America	All America Fund		20,932
*	Mutual of America	Small Cap Value Fund		17,713
*	Mutual of America	Mid Cap Value Fund		16,421
	Vanguard	Total Bond Market I Prt		11,058
	Invesco	V. I. Main Street		10,421
*	Mutual of America	2020 Retirement Fund		9,324
*	Mutual of America	Mid-Term Bond Fund		7,109
	American Funds	IS New World Fund		5,932
*	Mutual of America	Composite Fund		4,457
	Goldman Sachs	VIT US Equity Insights		4,246
	PIMCO	VIT Real Return Portfolio		1,080
*	Mutual of America	Small Cap Equity Index Fund		941
	Goldman Sachs	VIT Small Cap Equity Insights		694
	Neuberger Berman	AMT Sustainable Equity		393
				<u>6,086,983</u>
				<u>\$ 7,594,033</u>

* Indicates Party-In-Interest to the Plan

The accompanying notes are an integral part of this schedule.