

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 2025 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025	
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) _____
B	This return/report is: ☐ the first return/report ☐ the final return/report ☐ an amended return/report ☐ a short plan year return/report (less than 12 months)
C	If the plan is a collectively-bargained plan, check here. ▶ ☐
D	Check box if filing under: ☒ Form 5558 ☐ automatic extension ☐ the DFVC program ☐ special extension (enter description)
E	If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. ▶ ☐

Part II	Basic Plan Information—enter all requested information
1a	Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.
1b	Three-digit plan number (PN) ▶ 003
1c	Effective date of plan 09/01/1995
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) MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC. 5342 TILLY MILL RD DUNWOODY, GA 30338-4426
2b	Employer Identification Number (EIN) 58-0566126
2c	Plan Sponsor's telephone number 678-812-4000
2d	Business code (see instructions) 813000

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.	07/27/2026	JANICE WOLF
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	07/27/2026	JANICE WOLF
	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	5 202
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) 99 6a(2) 116 6b 6c 96 6d 212 6e 2 6f 214 6g(1) 195 6g(2) 196 6h 1
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 Characteristic Codes in the instructions:

2L 2G 2F 2T

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristic 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 2
- (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 2025 Form M-1 annual report. If the plan was not required to file the 2025 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 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	D Employer Identification Number (EIN) 58-0566126	

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 LIFE INSURANCE COMPANY

(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	052033-K	19	01/01/2025	12/31/2025

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	0

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

(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	

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	(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	44017
5 Current value of plan's interest under this contract in separate accounts at year end	5	117760

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**

56176

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

(2) Dividends and credits

7c(2)

1360

(3) Interest credited during the year

7c(3)

(4) Transferred from separate account

7c(4)

(5) Other (specify below)

7c(5)

▶

(6) Total additions

7c(6)

1360

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

57536

e Deductions:

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

7e(1)

(2) Administration charge made by carrier

7e(2)

35

(3) Transferred to separate account

7e(3)

(4) Other (specify below)

7e(4)

13483

▶ **FORFEITURE**

(5) Total deductions

7e(5)

13518

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

44018

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.	10b	

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE 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 2025 This Form is Open to Public Inspection
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For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	D Employer Identification Number (EIN) 58-0566126	

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 TIAA-CREF
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(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
13-1624203	69345	405987	26	01/01/2025	12/31/2025

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.
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(a) Total amount of commissions paid	(b) Total amount of fees paid

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
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(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	

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(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	648711
5 Current value of plan's interest under this contract in separate accounts at year end	5	0

6 Contracts With Allocated Funds:**a** State the basis of premium rates ▶

b Premiums paid to carrier	6b	
c Premiums due but unpaid at the end of the year	6c	
d If the carrier, service, or other organization incurred any specific costs in connection with the acquisition or retention of the contract or policy, enter amount. Specify nature of costs ▶	6d	

e Type of contract: (1) ☐ 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	653200
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c Additions: (1) Contributions deposited during the year	7c(1)	6687
	7c(2)	
	7c(3)	18335
	7c(4)	50618
	7c(5)	203

(6) Total additions	7c(6)	75843
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d Total of balance and additions (add lines 7b and 7c(6))	7d	729043
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e Deductions:

(1) Disbursed from fund to pay benefits or purchase annuities during year	7e(1)	40382
(2) Administration charge made by carrier	7e(2)	
(3) Transferred to separate account	7e(3)	36755
(4) Other (specify below)	7e(4)	3195

(5) Total deductions	7e(5)	80332
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f Balance at the end of the current year (subtract line 7e(5) from line 7d)	7f	648711
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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.	10b	

Specify nature of costs.

Part IV Provision of Information

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

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

SCHEDULE C (Form 5500) 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
		2025
		This Form is Open to Public Inspection.

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	D Employer Identification Number (EIN) 58-0566126	

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	
TIAA TEACHERS INSURANCE AND ANNUITY	730 THIRD AVENUE NEW YORK, NY 10017
13-1624203	

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

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(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)

UBS FINANCIAL SERVICES

1000 HARBOR BLVD. #6
WEEHAWKEN, NJ 07086-6761

13-2638166

(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?
27		25463	Yes ☐ No ☒	Yes ☐ No ☒		Yes ☐ No ☐

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

TIAA TEACHERS INSURANCE AND ANNUITY

730 THIRD AVENUE
NEW YORK, NY 10017-3206

13-1624203

(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?
		38421	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☐ No ☒

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

MUTUAL OF AMERICA LIFE INSURANCE

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?
12 15 65		180	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 2025 This Form is Open to Public Inspection.
---	---	---

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	B Three-digit plan number (PN) ▶	003
C Plan or DFE sponsor's name as shown on line 2a of Form 5500 MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	D Employer Identification Number (EIN) 58-0566126	

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 2
---	---------------------------

b Name of sponsor of entity listed in (a):	MUTUAL OF AMERICA LIFE INSURANCE COMPANY
--	--

c EIN-PN 13-1614399-000	d Entity code P	e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) 44017
-------------------------	-----------------	--

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)

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 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
		2025
		This Form is Open to Public Inspection

For calendar plan year 2025 or fiscal plan year beginning 01/01/2025 and ending 12/31/2025		
A Name of plan 403B THRIFT PLAN OF MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	B Three-digit plan number (PN) ▶	003
C Plan sponsor's name as shown on line 2a of Form 5500 MARCUS JEWISH COMMUNITY CENTER OF ATLANTA, INC.	D Employer Identification Number (EIN) 58-0566126	

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)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(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)	88306	76297
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)	88862	117760
(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)	11661377	13799525
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)	709376	692728
(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)		
1e Buildings and other property used in plan operation	1e		
1f Total assets (add all amounts in lines 1a through 1e)	1f	12547921	14686310

Liabilities

1g Benefit claims payable	1g		
1h Operating payables	1h		
1i Acquisition indebtedness	1i		
1j Other liabilities	1j		
1k Total liabilities (add all amounts in lines 1g through 1j)	1k	0	0

Net Assets

1l Net assets (subtract line 1k from line 1f)	1l	12547921	14686310
--	-----------	----------	----------

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)	121195	
(B) Participants	2a(1)(B)	590048	
(C) Others (including rollovers)	2a(1)(C)	41045	
(2) Noncash contributions	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		752288
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)	7430	
(F) Other	2b(1)(F)	18334	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		25764
(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)	856742	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		856742
(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)		0
(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)		0

		(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)		1360
(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)		1047858
c Other income	2c		4697
d Total income. Add all income amounts in column (b) and enter total	2d		2688709

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	465781	
(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)		465781
f Corrective distributions (see instructions)	2f		
g Certain deemed distributions of participant loans (see instructions)	2g		19826
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)	64713	
(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)		
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		64713
j Total expenses. Add all expense amounts in column (b) and enter total	2j		550320

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		2138389
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: **BDO USA P.C.**

(2) EIN: **15-5381590**

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.)	☒	☐	22541
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?	☒	☐	4000000
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 of Marcus Jewish Community Center of Atlanta, Inc.

**Financial Statements
and ERISA-Required Supplemental Schedules
As of December 31, 2025 and 2024
and for the Year Ended December 31, 2025**

The report accompanying these financial statements was issued by BDO USA, P.C., a Virginia professional corporation, and the U.S. member of BDO International Limited, a UK company limited by guarantee.



**403(b) Thrift Plan
of Marcus Jewish Community Center of Atlanta, Inc.**

Financial Statements and ERISA-Required Supplemental Schedules
As of December 31, 2025 and 2024 and for the Year Ended December 31, 2025

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Contents

Independent Auditor's Report	3-6
------------------------------	-----

Financial Statements

Statements of Net Assets Available for Benefits as of December 31, 2025 and 2024	8
---	---

Statement of Changes in Net Assets Available for Benefits for the Year Ended December 31, 2025	9
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Notes to Financial Statements	10-18
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ERISA-Required Supplemental Schedules

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2025	20-21
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Schedule H, Line 4a - Schedule of Delinquent Participant Contributions for the Year Ended December 31, 2025	22
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Note: Other schedules required by Section 2520.103.10 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA have been omitted because they are not applicable.



Independent Auditor's Report

The Plan Administrator
403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.
Dunwoody, Georgia

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 of Marcus Jewish Community Center of Atlanta, Inc. (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C). The financial statements comprise the statements of net assets available for benefits as of December 31, 2025 and 2024, and the related statement of changes in net assets available for benefits for the year ended December 31, 2025, 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 (DOL) Rules and Regulations for Reporting and Disclosure under ERISA (ERISA Section 103(a)(3)(C) audit). 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 (qualified institution), provided that the investment information is prepared and certified to by the qualified institution in accordance with 29 CFR 2520.103-5 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Management has obtained a certification from qualified institutions as of December 31, 2025 and 2024, and for the year ended December 31, 2025, stating that the certified investment information, as described in Note 5 to the financial statements, is complete and accurate.

Opinion

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

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



Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of the 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 GAAP, 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 within one year after the date that the financial statements are available to be issued.

Management is responsible for maintaining a current plan instrument, including all plan amendments. Management is also responsible for 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 GAAS will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if, there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.



In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the 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 certification, comparing the certified investment information with the related information presented and disclosed in the financial statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of GAAP.

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 GAAP.

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 Schedules Required by ERISA

The ERISA-required supplemental Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2025 and the ERISA-required Supplemental Schedule H, line 4a- Schedule of Delinquent Participant Contributions for the year ended December 31, 2025 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the DOL's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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 GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion

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

BDO USA, P.C.

July 24, 2026

Financial Statements

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Statements of Net Assets Available for Benefits

<i>December 31,</i>	2025	2024
Assets		
Investments:		
Investments, at fair value	\$ 13,917,285	\$ 11,750,239
Investments, at contract value	692,728	709,376
Total Investments	14,610,013	12,459,615
Receivables:		
Notes receivable from participants	76,297	88,306
Net Assets Available for Benefits	\$ 14,686,310	\$ 12,547,921

See accompanying notes to financial statements.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Statement of Changes in Net Assets Available for Benefits

Year ended December 31, 2025

Additions

Investment income:

Dividend income \$ 856,844

Interest income 19,694

Net appreciation in fair value of investments 1,052,463

Total Investment Income 1,929,001

Interest income on notes receivable from participants 7,430

Contributions:

Employer 121,195

Participant 590,048

Rollover 41,045

Total Contributions 752,288

Total Additions 2,688,719

Deductions

Benefits paid to participants 485,617

Administrative expenses 64,713

Total Deductions 550,330

Net Increase 2,138,389

Net Assets Available for Benefits, beginning of year 12,547,921

Net Assets Available for Benefits, end of year \$ 14,686,310

See accompanying notes to financial statements.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

1. Description of the Plan

The following description of the 403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc. (the Plan) provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General

The Plan is a defined contribution plan under Section 403(b) of the Internal Revenue Code (IRC) and covers substantially all employees of Marcus Jewish Community Center of Atlanta, Inc. (the Organization or Employer). The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA).

Eligibility

Employees of the Organization are considered eligible for participation, except for nonresident aliens with no U.S. source of income. There is no age or service requirement for employee contributions. An eligible participant can enter the Plan immediately upon meeting the eligibility requirements. Participants must be 21 years old and have one year of service to be eligible for Employer matching contributions.

Trustee and Administration of the Plan

The trustee of the Plan is Teachers Insurance and Annuity Association of America (TIAA) and College Retirement Equities Fund (CREF) (collectively, the Trustee). The administrator of the Plan is the Organization. The Trustee holds the assets of the Plan in accordance with the service provider contract with the Organization. The Investment Committee determines the appropriateness of the Plan's investment offerings and monitors investment performance.

Contributions

Each year, participants may contribute up to 100% of pre-tax annual compensation, as defined in the Plan. In addition, the Plan provides for Roth contributions. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. The Plan document provides for a matching contribution that is equal to 50% of participant contributions up to 5% of eligible compensation. During the 2025 Plan year, Employer matching contributions of \$121,195 were contributed to the Plan. The Plan accepts eligible rollover contributions from qualified plans on behalf of the participant.

Participants may direct the investment of their contributions into various investment options offered by the Plan as provided by TIAA. Certain participants still have balances with Mutual of America, the former recordkeeper of the Plan. Participants may no longer direct contributions into Mutual of America funds.

Participant Accounts

Each participant's account is credited with the participant's contributions; the Organization's contributions, if any; and an allocation of Plan earnings thereon, as well as charges by Mutual of America and TIAA for an allocation of administrative expenses. Allocations are based on participant

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting

Participants are immediately vested in their contributions plus actual earnings thereon. Vesting in the Organization's contribution portion of participants' accounts is based on years of continuous service. Participants are fully vested after two years of credited service for all Employer contributions as defined in the Plan.

Notes Receivable from Participants

Participants may borrow from their TIAA fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. The loans are secured by the balance in the participant's account. The loans are repaid over a period of five years or less, unless used to purchase a principal residence. The loan interest rate is set at 1% above the prime rate, as defined by the Plan. Principal and interest are paid ratably through payroll deductions. Each participant may not have more than three loans outstanding at any time.

Payment of Benefits

On termination of service due to death, disability, retirement, or separation from service, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account, or other specified payment options as provided in the Plan. Withdrawals from the Plan may also be made upon attaining age 59½ and upon circumstances of financial hardship in accordance with provisions specified in the Plan document. All vested balances less than \$1,000 may be automatically distributed after termination of employment. Effective for distributions subsequent to October 1, 2023, vested balances \$5,000 or less will be distributed automatically.

Forfeited Accounts

Forfeitures by non-vested participants are used to reduce future Employer contributions.

During the 2025 Plan year, forfeitures of \$15,420 were used to reduce Employer contributions to the Plan. Forfeiture balances available to offset Employer contributions were \$1,546 and \$60 at December 31, 2025 and 2024, respectively.

Administrative Expenses

Certain expenses of maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Administrative expenses include certain annual participant fees and investment consulting fees. Fees related to the administration of notes receivable from participants and for loan withdrawals are directly paid by the participants and are included in administrative expenses. Investment-related expenses are included in net appreciation in fair value of investments.

Revenue Credits

The Plan's trust agreement with TIAA provides for a participant revenue credit arrangement, whereby the Trustee allocates quarterly deposits into the accounts of eligible participants who are

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

invested in certain funds. There were no unallocated revenue credits at December 31, 2025 and 2024. During 2025, the Plan received no credits. Administrative expenses are presented net of revenue credits in the statement of changes in net assets available for benefits.

2. Summary of Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Investment Valuation and Income Recognition

The Plan's investments are reported at fair value, except for the fully benefit-responsive investment contract, which is reported at contract value (see Note 4). 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. See Note 3 for a discussion of the fair value measurements.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. If a participant ceases to make loan repayments and the Plan administrator deems the participant loan to be in default, the participant loan balance is reduced, and a benefit payment is recorded.

Contributions

Participant contributions and any related matching contributions are recognized in the period during which the Organization makes the respective payroll deduction from the participant's compensation.

Payment of Benefits

Benefits are recorded when paid.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

3. Fair Value Measurements

Accounting Standards Codification (ASC) 820, *Fair Value Measurement*, provides for a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under ASC 820 are described as follows:

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

Level 2 - Inputs to the valuation methodology include:

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

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

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

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

There have been no changes in the methodologies used at December 31, 2025 and 2024. Following is a description of the valuation methodologies used for assets measured at fair value:

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

Pooled Separate Account - The pooled separate account is divided into distinct subaccounts that are referred to as separate accounts. The pooled separate account operates similarly to a mutual fund at the investment level and is invested in assets that match the investment objectives of the separate accounts. The Plan's interest in the pooled separate account is evidenced by units of account. The unit value of the pooled separate account is based on the NAVs, which are calculated by using quoted market prices of the underlying investments and adjusted for certain separate account charges. The fair values of the pooled separate account have been calculated using the NAV per share of the underlying investments. The NAV, as provided by Mutual of America, is used as a practical expedient to estimate fair value. The NAV would not be used if it were probable that the investment would not be traded at NAV.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

The following table summarizes the separate accounts that are measured using NAV as a practical expedient:

December 31,

	Fair Value		Unfunded Commitment	Redemption Frequency	Redemption Notice Period
	2025	2024			
Pooled separate account:					
Equity Funds ^(a)	\$ 80,282	\$ 56,125	\$ -	None	None
Fixed-Income Funds ^(b)	7,978	6,493	-	None	None
Balanced Funds ^(c)	22,818	20,260	-	None	None
Asset Allocation Fund ^(d)	2,099	1,854	-	None	None
Retirement Target Funds ^(e)	4,584	4,130	-	None	None
Total Investments , measured at the NAV as practical expedient	\$ 117,761	\$ 88,862	\$ -		

- (a) *Equity Funds* - These funds invest in a diversified portfolio of primarily common stocks with a broad exposure to the market. The portfolios may invest in companies with smaller or larger market capitalizations, investing in domestic and foreign issuers. The investment objective is to provide long-term capital appreciation. The Mid Cap Equity Index Fund and the Equity Index Fund seek investment results that correspond to the investment performance of the S&P Mid Cap 400 Index and the S&P 500 Composite Stock Price Index, respectively.
- (b) *Fixed-Income Funds* - The Money Market Fund seeks current income to the extent consistent with the maintenance of liquidity, investment quality, and stability of capital. The fund invests in U.S. Treasury bills and commercial paper. The Intermediate Bond Fund seeks current income with a secondary objective of preservation of capital. The fund invests primarily in investment-grade, publicly traded debt securities, such as U.S. Treasury bonds and investment-grade corporate bonds.
- (c) *Balanced Funds* - The funds in this category seek to achieve capital appreciation and current income, competitive total return, or high total return with reduced risk over the long-term by investing in a diversified portfolio of common stocks, debt securities, and short-term instruments.
- (d) *Asset Allocation Fund* - The Moderate Allocation Fund seeks capital appreciation and current income. It invests in both fixed-income funds and equity funds of the investment company. The Aggressive Allocation Fund seeks capital appreciation and, to a lesser extent, current income. It invests primarily in equity funds of the investment company and also invests in fixed-income funds of the investment company.
- (e) *Retirement Target Funds* - These funds invest primarily in equity funds and fixed-income funds. Each fund seeks current income and capital appreciation appropriate for asset allocation associated with the fund's approximate year of retirement, which is included in the fund's name. The funds invest in proportions that are balanced to meet the current target of the funds, which will move toward preservation of capital and production of income as the target retirement date approaches. The target of the funds changes over time, so the mix of fixed-income funds and equity funds changes to reflect the periodic modifications in the fund's target.

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

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

The following tables set forth by level, within the fair value hierarchy, the Plan's investments at fair value:

December 31, 2025

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 13,799,524	\$	\$	\$ 13,799,524
Total	\$ 13,799,524	\$	\$	13,799,524
Total Investments, measured at the NAV as practical expedient				117,761
Total Investments, at fair value				\$ 13,917,285

December 31, 2024

	Level 1	Level 2	Level 3	Total
Mutual funds	\$ 11,661,377	\$ -	\$ -	\$ 11,661,377
Total	\$ 11,661,377	\$ -	\$ -	11,661,377
Total Investments, measured at the NAV as practical expedient				88,862
Total Investments, at fair value				\$ 11,750,239

4. Investment Contracts

TIAA Stable Value Contract

The TIAA Stable Value Contract is a fixed rate group annuity contract issued by TIAA. Contributions are deposited into a non-unitized separate account of TIAA and buy a contractual or guaranteed amount of future benefits for the participants. Allocations to the TIAA Stable Value annuity are backed by the value of the assets in the separate account and, if insufficient, by TIAA's claims-paying ability. The contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan. The contract provides a guaranteed minimum rate of interest of between 1% and 3%. Although the liability to provide contract guarantees and accumulations is backed by the assets in the separate account, any amount to be credited above the minimum guaranteed rate is determined by TIAA. There are no reserves against the contract value for credit risk of the contract issue as of December 31, 2025 and 2024.

This contract meets the fully benefit-responsive investment contract criteria and, therefore, is reported at contract value. Contract value, as reported to the Plan by TIAA, represents accumulated cash contributions, interest credited, and transfers, if any, less any withdrawals and transfers, if any. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value. There are, however, "equity wash" provisions that prevent the immediate transfer of amounts to any competing funds available in the Plan for a 90-day period. If the Plan sponsor chooses to terminate the Plan's investment in the contract, the Plan will receive contract value in a period not to exceed two years. If the two-year payout applies, a discontinuance fee will be assessed, which has the effect of reducing the interest credited during the two-year period by a maximum of 75 basis points.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

The Plan's ability to receive amounts due is dependent on the 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 issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (3) bankruptcy of the Plan sponsor or other Plan sponsor events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA; or (5) premature termination of the contract. 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.

Deposit Administration Contract

The Plan has a fully benefit-responsive guaranteed interest account with Mutual of America. Mutual of America maintains the contributions in a general account. The account is credited with contributions and earnings on the underlying investments and charged for participant withdrawals and administrative expenses. The investments contract issuer is contractually obligated to repay the principal and a specified interest rate that is guaranteed to the Plan.

The investment contract is fully benefit-responsive and is reported at contract value in the statements of the net assets available for benefits. Contract value is the relevant measure for fully benefit-responsive investment contracts because this is the amount received by participants if they were to initiate permitted transactions under the contract. Participants may ordinarily direct the withdrawal or transfer of all or a portion of their investment at contract value.

The crediting interest rate is based on a formula agreed upon with the issuer but can never be less than 1%. The crediting rate is reset quarterly.

Certain events limit the ability of the Plan to transact at contract value with the issuer. Such events include (1) amendments to the Plan documents (including complete or partial Plan termination or merger with another plan); (2) changes to the Plan's prohibition on competing investment options or deletion of equity wash provisions; (3) bankruptcy of the Organization or other Organization events (for example, divestitures or spin-offs of a subsidiary) that cause a significant withdrawal from the Plan; or (4) the failure of the trust to qualify for exemption from federal income taxes or any required prohibited transaction exemption under ERISA. The Plan administrator does not believe that any events that would limit the Plan's ability to transact at contract value with participants are probable of occurring. The investment contract does not permit the insurance company to terminate the agreement prior to the scheduled maturity date.

5. Certified Investment Information

Certain information disclosed in the accompanying financial statements and ERISA-required supplemental schedule, related to investments and notes receivable from participants held as of December 31, 2025 and 2024, and net appreciation in fair value of investments, interest income, dividend income, and interest income on notes receivable from participants for the year ended

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

December 31, 2025, was obtained by management and agreed to or derived from information certified as complete and accurate by TIAA and CREF, qualified institutions.

Investments totaling \$161,776 and \$145,037 as of December 31, 2025 and 2024, respectively and related interest income of \$1,360 and net appreciation in fair value of investments of \$15,852 for the year ended December 31, 2025 were held by Mutual of America and are not certified.

6. Related Party and Party-in-Interest Transactions

Certain Plan investments are managed by Mutual of America and TIAA. Mutual of America and TIAA are the recordkeepers of the Plan and, therefore, these transactions qualify as party-in-interest. Notes receivable from participants also qualify as exempt party-in-interest transactions. As described in Note 1, the Plan paid certain expenses related to Plan operations and investment activity to service providers. These transactions are party-in-interest transactions, which are exempt from prohibited transaction rules.

7. Plan Termination

Although it has not expressed any intent to do so, the Organization has the right under the Plan to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100% vested in their Employer contributions.

8. Tax Status

The Plan uses a 403(b) volume-submitter plan document sponsored by TIAA. TIAA received an opinion letter from the Internal Revenue Service (IRS), dated August 7, 2017, stating that the 403(b) volume-submitter plan document satisfies the applicable requirements of the IRC. The Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC and continues to be tax-exempt.

GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

9. Risks and Uncertainties

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

10. Delinquent Participant Contributions

During the Plan year ended December 31, 2025, participant contributions and loan repayments totaling \$22,541 were not remitted to the Plan within the period prescribed by DOL regulations. These transactions constitute non-exempt party-in-interest transactions or prohibited transactions as defined by ERISA. The related lost earnings were remitted to the Plan during 2025.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Notes to Financial Statements

11. Subsequent Events

The Plan has evaluated subsequent events through July 24, 2026, the date the financial statements were available to be issued.

ERISA-Required Supplemental Schedules

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 58-0566126 Plan Number: 003

December 31, 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
Deposit Administration Contract				
*	Mutual of America Life Insurance Company	Interest Accumulation Account		\$ 44,017
Group Annuity Contract				
*	TIAA	TIAA Stable Value Contract		648,711
Pooled Separate Account - Separate Account Number				
*	Mutual of America Life Insurance Company	Mutual of America Mid-Cap Equity Index Fund		34,465
*	Mutual of America Life Insurance Company	Vanguard VIF International Portfolio		18,035
*	Mutual of America Life Insurance Company	DWS Capital Growth VIP		15,183
*	Mutual of America Life Insurance Company	Fidelity VIP Asset Manager Portfolio		14,029
*	Mutual of America Life Insurance Company	Fidelity VIP Contrafund Portfolio		10,441
*	Mutual of America Life Insurance Company	Mutual of America Intermediate Bond Fund		7,428
*	Mutual of America Life Insurance Company	Mutual of America Clear Passage 2030 Fund		4,501
*	Mutual of America Life Insurance Company	Calvert VP SRI Balanced Portfolio		4,500
*	Mutual of America Life Insurance Company	Mutual of America Balanced Fund		4,289
*	Mutual of America Life Insurance Company	Mutual of America Aggressive Allocation Fund		1,992
*	Mutual of America Life Insurance Company	Mutual of America Equity Index Fund		1,303
*	Mutual of America Life Insurance Company	Mutual of America Money Market Fund		550
*	Mutual of America Life Insurance Company	Mutual of America Small Cap Growth Fund		327
*	Mutual of America Life Insurance Company	Mutual of America Small Cap Value Fund		260
*	Mutual of America Life Insurance Company	American Century VP Capital Appreciation Fund		240
*	Mutual of America Life Insurance Company	Mutual of America Moderate Allocation Fund		107
*	Mutual of America Life Insurance Company	Mutual of America Retirement Income Fund		83
*	Mutual of America Life Insurance Company	Invesco V.I. Main Street Fund		28
Total Pooled Separate Account - Separate Account Number				117,761

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 58-0566126 Plan Number: 003

December 31, 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
Mutual Funds				
*	Nuveen	Nuveen S&P 500 Index Fund Inst		\$ 2,384,206
	American Funds	American Funds Balanced Fund R6		1,162,292
	MFS	MFS International Intrinsic Value Fund R6		1,039,038
*	Nuveen	Nuveen Large Cap Growth Index Fund Inst		863,542
	JPMorgan	JPMorgan SmartRetirement 2050 Fund R6		820,716
	JPMorgan	JPMorgan SmartRetirement 2040 Fund R6		793,626
	JPMorgan	JPMorgan Large Cap Growth Fund R6		770,761
	JPMorgan	JPMorgan SmartRetirement 2035 Fund R6		675,370
	BNY Mellon	BNY Mellon Small Cap Stock Index I		668,312
	JPMorgan	JPMorgan SmartRetirement Income Fund R6		529,352
*	Nuveen	Nuveen Large Cap Value Index Fund Inst		501,784
	JPMorgan	JPMorgan SmartRetirement 2045 Fund R6		419,937
	American Century	American Century Mid Cap Value Fund R6		413,443
	JPMorgan	JPMorgan SmartRetirement 2030 Fund R6		337,728
*	Nuveen	Nuveen Money Market Fund Inst		388,664
	Columbia	Columbia Dividend Income Inst3		369,285
	BNY Mellon	BNY Mellon Mid Cap Index I		294,593
	Lord Abbett	Lord Abbett Short Duration Income Fund R6		270,327
	JPMorgan	JPMorgan SmartRetirement 2060 Fund R6		267,262
	JPMorgan	JPMorgan Mid Cap Growth Fund R6		262,488
	Dodge & Cox	Dodge & Cox Income Fund I		232,850
	JPMorgan	JPMorgan SmartRetirement 2025 Fund R6		182,731
	American Funds	American Funds New World R6		127,441
	JPMorgan	JPMorgan SmartRetirement 2055 Fund R6		23,776
Total Mutual Funds				13,799,524
Total Investments				14,610,013
*	Participant Loans	Loans with interest rates ranging from 7.75% to 9.50%		76,297
Total				\$ 14,686,310

* Party-in-interest, as defined by ERISA.

** The cost of participant-directed investments is not required to be disclosed.

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Schedule H , Line 4a - Schedule of Delinquent Participant Contributions
EIN: 58-0566126 Plan Number: 003

Year ended December 31, 2025

	Total that Constitutes Nonexempt Prohibited Transactions			Total Fully Corrected Under VFCP* and PTE** 2002-51
	Contributions Not Corrected	Contributions Corrected Outside VFCP*	Contributions Pending Correction in VFCP*	
Check here if late participant loan repayments are included: ☒				
2025	\$ -	\$ -	\$ -	\$ 22,541

* Voluntary Fiduciary Correction Program (DOL)

** Prohibited Transaction Exemption (DOL)



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

MARCUS JEWISH COMMUNITY CENTER

For the Period Ending 12/31/2025

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
SA	TSVX#	Insurance Company General Contract TIAA Stable Value			\$648,711.30	\$560,795.10
Subtotal Insurance Company General Contract					\$648,711.30	\$560,795.10
Registered Investment Company						
JJ	TILIX	Nuveen Large Cap Gr Idx R6	\$75.990000	11,363.8880	\$863,541.86	\$591,776.09
JM	TILVX	Nuveen Large Cap Val Idx R6	\$27.980000	17,933.6651	\$501,783.95	\$423,013.33
JW	TCIXX	Nuveen Money Market R6	\$1.000000	388,663.8200	\$388,663.82	\$388,663.82
JK	TISPX	Nuveen S&P 500 Index R6	\$73.770000	32,319.4827	\$2,384,208.24	\$1,653,899.84
UL	RLBGX	American Funds Balanced Fd R6	\$37.510000	30,986.1830	\$1,162,291.73	\$998,320.26
UP	DODIX	Dodge & Cox Income Fund I	\$12.850000	18,120.5881	\$232,849.54	\$228,504.44
AN	AMDVX	American Cent MdCpVa Fd Cla R6	\$14.800000	27,935.3566	\$413,443.28	\$427,336.57
AO	DMIDX	BNY Mellon Mid Cap Index I	\$26.710000	11,029.3324	\$294,593.47	\$313,137.96
AP	DISIX	BNY Mellon Sml Cap Stk Idx I	\$22.020000	30,350.2395	\$668,312.27	\$756,973.88
AS	JLGMX	JPMorgan Large Cap Growth R6	\$86.440000	8,916.7116	\$770,760.55	\$569,100.91
AT	JMGMX	JPMorgan Mid Cap Gro Fd Cl R6	\$51.740000	5,073.2027	\$262,487.52	\$237,682.03
AV	JNSYX	JPMorgan SmtRtm 2025 Fd Cla R6	\$17.460000	10,465.6855	\$182,730.87	\$168,254.02
AW	JSMYX	JPMorgan SmtRtm 2030 Fd Cla R6	\$19.860000	17,005.4442	\$337,728.12	\$304,338.79
AX	SRJYX	JPMorgan SmtRtm 2035 Fd Cla R6	\$21.540000	31,354.2241	\$675,369.99	\$583,906.77
AY	SMTYX	JPMorgan SmtRtm 2040 Fd Cla R6	\$23.800000	33,345.6334	\$793,626.08	\$673,340.37
AZ	JSAYX	JPMorgan SmtRtm 2045 Fd Cla R6	\$24.320000	17,267.1590	\$419,937.31	\$341,825.42
BA	JTSYX	JPMorgan SmtRtm 2050 Fd Cla R6	\$25.400000	32,311.6458	\$820,715.79	\$658,192.98
BB	JFFYX	JPMorgan Smt Ret 2055 Fd R6	\$30.740000	773.4409	\$23,775.57	\$21,545.31
BC	JAKYX	JPMorgan SmartRetmt 2060 R6	\$25.950000	10,299.1261	\$267,262.33	\$229,302.39
BD	JSIYX	JPMorgan SmtRtm Inc Fd Cla R6	\$16.450000	32,179.4236	\$529,351.51	\$480,093.93
BE	LDLVX	Lord Abbett Short Duratn Ic R6	\$3.890000	69,492.8466	\$270,327.17	\$265,413.64



5500 Reportable - Schedule of Assets Held for Investment

Total Plan Assets Under Management

For the Period Ending 12/31/2025

FUND ID	TICKER	INVESTMENT NAME	ENDING INVESTMENT PRICE	ENDING UNIT BALANCE	ENDING MARKET VALUE	ENDING COST VALUE
BG	MINJX	MFS Intl Intrinsic Value R6	\$43.910000	23,662.9023	\$1,039,038.04	\$938,793.46
BH	RNWGX	American Funds New World R6	\$93.170000	1,367.8345	\$127,441.15	\$112,602.82
BI	CDDYX	Columbia Dividend Income Inst3	\$37.090000	9,956.4616	\$369,285.16	\$362,681.76
Subtotal Registered Investment Company					\$13,799,525.32	\$11,728,700.79
90	LOAN#	Participant Loan Fund Participant Loan Fund			\$76,296.96	\$76,296.96
Subtotal Participant Loan Fund					\$76,296.96	\$76,296.96
TOTAL ASSETS UNDER MANAGEMENT					\$14,524,533.58	\$12,365,792.85

Summary of Saving and Investment Options for the Plan Year Ending December 31, 2025

Date: **Mar 06, 2026** EIN Number: **58-0566126**
Plan Name: **Marcus Jewish Community Center of Atlanta, Inc.** Plan Number(s): **908588**
SPD: **003**

Saving Option	Opening Balance	Employee Contr.	Employer Contr.	Rollover Contr.	Other	Benefit Payments	Fees	Investment Earnings	Closing Balance
Mutual of America Interest Accumulation Account	\$56,175.69	\$0.00	\$0.00	\$0.00	-\$13,483.26	\$0.00	-\$35.31	\$1,359.61	\$44,016.73

Separate Account Investment Option	Opening Balance	Employee Contr.	Employer Contr.	Rollover Contr.	Other	Benefit Payments	Fees	Investment Earnings	Closing Balance
DWS Capital Growth VIP	\$6,115.75	\$0.00	\$0.00	\$0.00	\$7,665.89	\$0.00	\$0.00	\$1,401.52	\$15,183.16
Fidelity VIP Contrafund Portfolio	\$9,050.33	\$0.00	\$0.00	\$0.00	\$0.00	-\$293.02	-\$42.77	\$1,726.34	\$10,440.88
MoA Equity Index Fund	\$1,152.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$24.00	\$175.15	\$1,303.45
Invesco V.I. Main Street Fund	\$24.22	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$3.32	\$27.54
American Century Investments VP Capital Appreciation Fund	\$228.84	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$11.17	\$240.01
MoA Mid Cap Equity Index Fund	\$27,072.89	\$0.00	\$0.00	\$0.00	\$5,538.37	\$0.00	\$0.00	\$1,853.47	\$34,464.73

Separate Account Investment Option	Opening Balance	Employee Contr.	Employer Contr.	Rollover Contr.	Other	Benefit Payments	Fees	Investment Earnings	Closing Balance
MoA Small Cap Growth Fund	\$307.80	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$19.55	\$327.35
MoA Small Cap Value Fund	\$259.86	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.08	\$259.94
MoA Intermediate Bond Fund	\$5,946.45	\$0.00	\$0.00	\$0.00	\$1,184.42	\$0.00	-\$10.16	\$306.86	\$7,427.57
MoA US Government Money Market Fund	\$546.55	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$8.36	\$11.62	\$549.81
Vanguard VIF International Portfolio	\$11,912.33	\$0.00	\$0.00	\$0.00	\$3,791.48	\$0.00	\$0.00	\$2,330.80	\$18,034.61
Calvert VP SRI Balanced Portfolio	\$4,115.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$383.77	\$4,499.50
Fidelity VIP Asset Manager 50% Portfolio	\$12,441.31	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$1,587.92	\$14,029.23
MoA Aggressive Allocation Fund	\$1,759.37	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$10.98	\$243.93	\$1,992.32
MoA Balanced Fund	\$3,702.99	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$24.00	\$609.72	\$4,288.71
MoA Moderate Allocation Fund	\$94.97	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$12.51	\$107.48
MoA Retirement Income Fund	\$63.02	\$0.00	\$0.00	\$0.00	\$13.29	\$0.00	\$0.00	\$6.39	\$82.70
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
MoA Clear Passage 2015 Fund	\$13.30	\$0.00	\$0.00	\$0.00	-\$13.29	\$0.00	\$0.00	-\$0.01	\$0.00
MoA Clear Passage 2030 Fund	\$4,053.73	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-\$24.00	\$470.87	\$4,500.60
MoA Clear Passage 2035 Fund	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Separate Account Investment Options Total	\$88,861.74	\$0.00	\$0.00	\$0.00	\$18,180.16	-\$293.02	-\$144.27	\$11,154.98	\$117,759.59

Loan Fund	Opening Balance	Employee Contr.	Employer Contr.	Rollover Contr.	Other	Benefit Payments	Fees	Investment Earnings	Closing Balance
-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Loan Fund Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Summary of Saving and Investment Options	Opening Balance	Employee Contr.	Employer Contr.	Rollover Contr.	Other	Benefit Payments	Fees	Investment Earnings	Closing Balance
Plan Total	\$145,037.43	\$0.00	\$0.00	\$0.00	\$4,696.90	-\$293.02	-\$179.58	\$12,514.59	\$161,776.32

Mutual of America Life Insurance Company is a qualified institution described in 29 CFR 2520.103-8 that is eligible to prepare and certify financial information in connection with an ERISA Section 103(a)(3)(C) audit, to the extent elected by the plan sponsor. Mutual of America Life Insurance Company hereby certifies that the foregoing statement furnished pursuant to 29 CFR 2520.103-5(c) is complete and accurate.



Ben Moser
Senior Vice President
Administrative Operations

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 58-0566126 Plan Number: 003

December 31, 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
Deposit Administration Contract				
*	Mutual of America Life Insurance Company	Interest Accumulation Account		\$ 44,017
Group Annuity Contract				
*	TIAA	TIAA Stable Value Contract		648,711
Pooled Separate Account - Separate Account Number				
*	Mutual of America Life Insurance Company	Mutual of America Mid-Cap Equity Index Fund		34,465
*	Mutual of America Life Insurance Company	Vanguard VIF International Portfolio		18,035
*	Mutual of America Life Insurance Company	DWS Capital Growth VIP		15,183
*	Mutual of America Life Insurance Company	Fidelity VIP Asset Manager Portfolio		14,029
*	Mutual of America Life Insurance Company	Fidelity VIP Contrafund Portfolio		10,441
*	Mutual of America Life Insurance Company	Mutual of America Intermediate Bond Fund		7,428
*	Mutual of America Life Insurance Company	Mutual of America Clear Passage 2030 Fund		4,501
*	Mutual of America Life Insurance Company	Calvert VP SRI Balanced Portfolio		4,500
*	Mutual of America Life Insurance Company	Mutual of America Balanced Fund		4,289
*	Mutual of America Life Insurance Company	Mutual of America Aggressive Allocation Fund		1,992
*	Mutual of America Life Insurance Company	Mutual of America Equity Index Fund		1,303
*	Mutual of America Life Insurance Company	Mutual of America Money Market Fund		550
*	Mutual of America Life Insurance Company	Mutual of America Small Cap Growth Fund		327
*	Mutual of America Life Insurance Company	Mutual of America Small Cap Value Fund		260
*	Mutual of America Life Insurance Company	American Century VP Capital Appreciation Fund		240
*	Mutual of America Life Insurance Company	Mutual of America Moderate Allocation Fund		107
*	Mutual of America Life Insurance Company	Mutual of America Retirement Income Fund		83
*	Mutual of America Life Insurance Company	Invesco V.I. Main Street Fund		28
Total Pooled Separate Account - Separate Account Number				117,761

403(b) Thrift Plan of Marcus Jewish Community Center of Atlanta, Inc.

Schedule H (Form 5500), Line 4i - Schedule of Assets (Held at End of Year)
 EIN: 58-0566126 Plan Number: 003

December 31, 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
Mutual Funds				
*	Nuveen	Nuveen S&P 500 Index Fund Inst		\$ 2,384,206
	American Funds	American Funds Balanced Fund R6		1,162,292
	MFS	MFS International Intrinsic Value Fund R6		1,039,038
*	Nuveen	Nuveen Large Cap Growth Index Fund Inst		863,542
	JPMorgan	JPMorgan SmartRetirement 2050 Fund R6		820,716
	JPMorgan	JPMorgan SmartRetirement 2040 Fund R6		793,626
	JPMorgan	JPMorgan Large Cap Growth Fund R6		770,761
	JPMorgan	JPMorgan SmartRetirement 2035 Fund R6		675,370
	BNY Mellon	BNY Mellon Small Cap Stock Index I		668,312
	JPMorgan	JPMorgan SmartRetirement Income Fund R6		529,352
*	Nuveen	Nuveen Large Cap Value Index Fund Inst		501,784
	JPMorgan	JPMorgan SmartRetirement 2045 Fund R6		419,937
	American Century	American Century Mid Cap Value Fund R6		413,443
	JPMorgan	JPMorgan SmartRetirement 2030 Fund R6		337,728
*	Nuveen	Nuveen Money Market Fund Inst		388,664
	Columbia	Columbia Dividend Income Inst3		369,285
	BNY Mellon	BNY Mellon Mid Cap Index I		294,593
	Lord Abbett	Lord Abbett Short Duration Income Fund R6		270,327
	JPMorgan	JPMorgan SmartRetirement 2060 Fund R6		267,262
	JPMorgan	JPMorgan Mid Cap Growth Fund R6		262,488
	Dodge & Cox	Dodge & Cox Income Fund I		232,850
	JPMorgan	JPMorgan SmartRetirement 2025 Fund R6		182,731
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Total				\$ 14,686,310

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