

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 2020 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2020 or fiscal plan year beginning <u>01/01/2020</u> and ending <u>12/31/2020</u>	
A This return/report is for:	☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must attach a list of 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)

Part II	Basic Plan Information —enter all requested information
1a Name of plan	1b Three-digit plan number (PN) ▶ <u>333</u>
<u>PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN</u>	1c Effective date of plan <u>01/01/2001</u>
2a Plan sponsor's name (employer, if for a single-employer plan)	2b Employer Identification Number (EIN) <u>11-3448580</u>
Mailing address (include room, apt., suite no. and street, or P.O. Box)	2c Plan Sponsor's telephone number <u>516-692-8505</u>
City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions)	2d Business code (see instructions) <u>561300</u>
<u>PRESTIGE EMPLOYEE ADMINISTRATORS, INC.</u>	
<u>538 BROADHOLLOW ROAD</u>	
<u>SUITE 311</u>	
<u>MELVILLE, NY 11747</u>	

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/14/2021	ANDREW LUBASH
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	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

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

Form 5500 (2020)
v. 200204

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	4583
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.....		6a(1)	3953
a(2) Total number of active participants at the end of the plan year		6a(2)	4544
b Retired or separated participants receiving benefits.....		6b	7
c Other retired or separated participants entitled to future benefits		6c	688
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	5239
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	4
f Total. Add lines 6d and 6e		6f	5243
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	3016
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	86
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2K 2R 2S 2T 3B 3H			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (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	
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		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ <u>0</u> A (Insurance Information) (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 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code _____

SCHEDULE C (Form 5500) 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
		2020
		This Form is Open to Public Inspection.

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020		
A Name of plan PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	333
C Plan sponsor's name as shown on line 2a of Form 5500 PRESTIGE EMPLOYEE ADMINISTRATORS, INC.	D Employer Identification Number (EIN) 11-3448580	

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

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

BLUESTAR RETIREMENT SERVICES

59-3092339

(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 13 15 17 37 38 49 50 64 65 99	NONE	500287	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BKS RETIREMENT SERVICES

84-1921272

(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?
17 26 27 49 51 99	NONE	82968	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

PRESTIGE EMPLOYEE ADMINISTRATORS

11-3448580

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
12 15 37 49 50	NONE	67442	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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)

PRIVATE ADVISOR GROUP

27-3463733

(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?
33 50 71	NONE	41312	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SIGNATURE SECURITIES GROUP

13-4120476

(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?
26 27 51	NONE	19695	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

CHARLES SCHWAB TRUST BANK

82-3967259

(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?
19 37 50 58 59 62 71 72	NONE	27	Yes ☒ No ☐	Yes ☒ No ☐	0	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
CHARLES SCHWAB TRUST BANK	19 59	0
(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.	
DODGE & COX 430 W. 7TH STREET SUITE 219502 KANSAS CITY, MO 64105	RANGE OF 0.00 - 0.02% OF AVERAGE DAILY BALANCE OF ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
CHARLES SCHWAB TRUST BANK	19 59	0
(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.	
FIDELITY INVESTMENTS 06-1194217	RANGE OF 0.00 - 0.02% OF AVERAGE DAILY BALANCE OF ASSETS	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
CHARLES SCHWAB TRUST BANK	19 59	0
(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.	
WELLS FARGO FUNDS 41-0449260	RANGE OF 0.00 - 0.02% OF AVERAGE DAILY BALANCE OF ASSETS	

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Part II Information on Participating Plans (to be completed by DFEs)

(Complete as many entries as needed to report all participating plans)

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 2020 This Form is Open to Public Inspection
For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020		
A Name of plan PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ►	333
C Plan sponsor's name as shown on line 2a of Form 5500 PRESTIGE EMPLOYEE ADMINISTRATORS, INC.	D Employer Identification Number (EIN) 11-3448580	

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 232801	146195
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions		1b(1) 0	0
(2) Participant contributions.....		1b(2) 0	0
(3) Other		1b(3) 0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)		1c(1) 0	0
(2) U.S. Government securities		1c(2) 0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred		1c(3)(A) 0	0
(B) All other.....		1c(3)(B) 0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred		1c(4)(A) 0	0
(B) Common		1c(4)(B) 0	0
(5) Partnership/joint venture interests		1c(5) 0	0
(6) Real estate (other than employer real property)		1c(6) 0	0
(7) Loans (other than to participants).....		1c(7) 0	0
(8) Participant loans		1c(8) 1679790	1953042
(9) Value of interest in common/collective trusts		1c(9) 6057007	8891653
(10) Value of interest in pooled separate accounts		1c(10) 0	0
(11) Value of interest in master trust investment accounts		1c(11) 0	0
(12) Value of interest in 103-12 investment entities		1c(12) 0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)		1c(13) 112570678	146533168
(14) Value of funds held in insurance company general account (unallocated contracts).....		1c(14) 0	0
(15) Other.....		1c(15) 0	6317727

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	120540276	163841785

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	19351	33832
k Total liabilities (add all amounts in lines 1g through 1j)	1k	19351	33832

Net Assets

l Net assets (subtract line 1k from line 1f).....	1l	120520925	163807953
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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)	3839694	
(B) Participants	2a(1)(B)	15580685	
(C) Others (including rollovers).....	2a(1)(C)	2523119	
(2) Noncash contributions.....	2a(2)	0	21943498
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities.....	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	100340	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		100340
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	4244033	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		4244033
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		104694
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		16407710
c Other income	2c		1454143
d Total income. Add all income amounts in column (b) and enter total.....	2d		44254418

Expenses**e** Benefit payment and payments to provide benefits:

(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	9826012	
(2) To insurance carriers for the provision of benefits	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		9826012
f Corrective distributions (see instructions)	2f		157904
g Certain deemed distributions of participant loans (see instructions).....	2g		0
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	664545	
(3) Investment advisory and management fees	2i(3)	66834	
(4) Other.....	2i(4)	0	
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		731379
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		10715295

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		33539123
l Transfers of assets:			
(1) To this plan.....	2l(1)		15950235
(2) From this plan	2l(2)		6202330

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: SKIBBIE CPA, INC.

(2) EIN: 27-0851321

d The opinion of an independent qualified public accountant is **not attached** because:

(1) ☐ This form is filed for a CCT, PSA, 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.

During the plan year:

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.)

	Yes	No	Amount
4a		X	

	Yes	No	Amount
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.)			
4b		X	
c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)			
4c		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)			
4d		X	
e Was this plan covered by a fidelity bond?	X		1000000
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
4f		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4g		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?			
4h		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
4i	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)			
4j		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k		X	
l Has the plan failed to provide any benefit when due under the plan?			
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m	X		
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			
4n	X		

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)
ARCHER, BYINGTON, GLENNON & LEVINE, LLP 401(K) PROFIT SHARING PLAN	26-0873462	001
ADP TOTALSOURCE RETIREMENT SAVINGS PLAN	59-2452823	001
HELD & HINES, LLP PROFIT SHARING PLAN	84-3961375	001
THE SCIENCE PROJECT AGENCY LLC 401K PROFIT SHARING PLAN	27-1663982	001

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 _____.

	Yes	No	Amount
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.)			
4b			
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.)			
4c			
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.)			
4d			
e Was this plan covered by a fidelity bond?			
4e			
f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?			
4f			
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?			
4g			
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?			
4h			
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)			
4i			
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.)			
4j			
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?			
4k			
l Has the plan failed to provide any benefit when due under the plan?			
4l			
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)			
4m			
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.			
4n			

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)
JUSTWORKS RETIREMENT SAVINGS PLAN	46-2283648	333

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2020 This Form is Open to Public Inspection.
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For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

A Name of plan PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 333
C Plan sponsor's name as shown on line 2a of Form 5500 PRESTIGE EMPLOYEE ADMINISTRATORS, INC.	D Employer Identification Number (EIN) 11-3448580

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1	0
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 82-3967259		
Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.		
3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year	3	

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)?	☐ Yes	☐ No	☐ N/A
If the plan is a defined benefit plan, go to line 8.			
5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. Date: Month _____ Day _____ Year _____ If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.			
6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived)	6a		
b Enter the amount contributed by the employer to the plan for this plan year	6b		
c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....	6c		
If you completed line 6c, skip lines 8 and 9.			
7 Will the minimum funding amount reported on line 6c be met by the funding deadline?	☐ Yes	☐ No	☐ N/A
8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change?	☐ Yes	☐ No	☐ N/A

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

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan?	☐ Yes	☐ No
11 a Does the ESOP hold any preferred stock?	☐ Yes	☐ No
b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.)	☐ Yes	☐ No
12 Does the ESOP hold any stock that is not readily tradable on an established securities market?	☐ Yes	☐ No

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

Schedule R (Form 5500) 2020
v. 200204

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that contributed more than 5% of total contributions to the plan during the plan year (measured in dollars). See instructions. *Complete as many entries as needed to report all applicable employers.*

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

a The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: ☐ last contributing employer ☐ alternative ☐ reasonable approximation (see instructions for required attachment).....

14a

b The plan year immediately preceding the current plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14b

c The second preceding plan year. ☐ Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....

14c

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

a The corresponding number for the plan year immediately preceding the current plan year.....

15a

b The corresponding number for the second preceding plan year.....

15b

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

a Enter the number of employers who withdrew during the preceding plan year.....

16a

b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers.....

16b

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) through (c)

a Enter the percentage of plan assets held as:

Stock: _____% Investment-Grade Debt: _____% High-Yield Debt: _____% Real Estate: _____% Other: _____%

b Provide the average duration of the combined investment-grade and high-yield debt:

☐ 0-3 years ☐ 3-6 years ☐ 6-9 years ☐ 9-12 years ☐ 12-15 years ☐ 15-18 years ☐ 18-21 years ☐ 21 years or more

c What duration measure was used to calculate line 19(b)?

☐ Effective duration ☐ Macaulay duration ☐ Modified duration ☐ Other (specify): _____

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:

☐ Yes.

☐ No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.

☐ No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.

☐ No. Other. Provide explanation _____

Prestige

**Employee Administrators
RETIREMENT SAVINGS PLAN**



FINANCIAL STATEMENTS

DECEMBER 31, 2020

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

FINANCIAL STATEMENTS

DECEMBER 31, 2020

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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator and those charged with Governance
Prestige Employee Administrators Retirement Savings Plan

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

We have performed an audit of the financial statements of Prestige Employee Administrators Retirement Savings Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statement of net assets available for benefits as of December 31, 2020, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

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

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2020, stating that the certified investment information, as described in Note K to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Prestige Employee Administrators Retirement Savings Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. 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 these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Prestige Employee Administrators Retirement Savings Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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, including omissions, 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 Prestige Employee Administrators Retirement Savings 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 Prestige Employee Administrators Retirement Savings Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter—Supplemental Schedules Required by ERISA

The supplemental schedule: Schedule H, line 4i - Schedule of Assets (Held at End of Year), as of December 31, 2020 is presented for purposes of additional analysis and are not a required part of the financial statements, but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion—

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



Skibbie CPA Inc.
Tullahoma, Tennessee
October 14, 2021



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TULLAHOMA, TN 37388
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INDEPENDENT AUDITOR'S REPORT

To the Plan Administrator and those charged with Governance
Prestige Employee Administrators Retirement Savings Plan

We were engaged to audit the accompanying statement of net assets available for benefits of Prestige Employee Administrators Retirement Savings Plan, as of December 31, 2019, and the related notes to the financial statement.

Management's Responsibility for the Financial Statement

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America; this includes the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of a financial statement that is free from material misstatement, whether due to fraud or error.

Auditor's Responsibility

Our responsibility is to express an opinion on the 2019 financial statement based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note K, which was certified by Charles Schwab Trust Bank, the trustee of the Plan, except for comparing such information with the related information included in the financial statement. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 2019 that the information provided to the plan administrator by the trustee is complete and accurate.

Disclaimer of Opinion

Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we have not been able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion on the 2019 financial statement. Accordingly, we do not express an opinion on the 2019 financial statement.

Report on Form and Content in Compliance With DOL Rules and Regulations for 2019 Financial Statement

The form and content of the information included in the 2019 financial statement, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

A handwritten signature in blue ink, appearing to read "Skibbie CPA Inc.", is positioned above the company name.

Skibbie CPA Inc.
Tullahoma, Tennessee
October 14, 2021

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

**STATEMENT OF NET ASSETS AVAILABLE FOR BENEFITS
DECEMBER 31, 2020 AND 2019**

	<u>2020</u>	<u>2019</u>
ASSETS:		
Cash	\$ 146,195	\$ 232,801
Investments at fair value (see Note C)	152,850,895	112,570,678
Investments at contract value (see Note D)	8,891,653	6,057,007
RECEIVABLES:		
Employer contributions	1,213,225	713,776
Employee contributions	828,788	555,127
Other		-
Participant notes receivable	1,953,042	1,679,790
TOTAL RECEIVABLES	3,995,055	2,948,693
TOTAL ASSETS	165,883,798	121,809,179
LIABILITIES:		
Accrued expenses	33,832	19,351
Excess contributions payable	-	-
TOTAL LIABILITIES	33,832	19,351
NET ASSETS AVAILABLE FOR BENEFITS	\$ 165,849,966	\$ 121,789,828

See accompanying notes to the financial statements

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

**STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
FOR THE YEAR ENDED DECEMBER 31, 2020**

ADDITIONS:

INVESTMENT INCOME:

Net appreciation in fair value of investments	\$ 16,512,404
Interest	-
Dividends	4,244,033
Other Income	1,454,143
NET INVESTMENT INCOME	<u>22,210,580</u>

Interest income on notes receivable from participants	100,340
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CONTRIBUTIONS

Employer (see Note A)	4,339,143
Participants	15,854,346
Rollovers (see Note E)	2,523,119

NET CONTRIBUTIONS	<u>22,716,608</u>
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TOTAL ADDITIONS	<u>45,027,528</u>
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DEDUCTIONS

Benefits paid to participants	9,826,012
Administrative expenses	731,379
Corrective distributions	157,904
Other expenses	-

TOTAL DEDUCTIONS	<u>10,715,295</u>
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NET INCREASE (DECREASE)	34,312,233
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TRANSFERS To (From) the PLAN	9,747,905
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NET ASSETS AVAILABLE FOR BENEFITS:

Beginning of year	<u>121,789,828</u>
End of year	<u><u>\$ 165,849,966</u></u>

See accompanying notes to the financial statements

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

A. Description of Plan

The following description of the Prestige Employee Administrators Retirement Savings Plan (the “Plan”) provides only general information. Participants should refer to the plan agreement for a more complete description of the Plan’s provisions.

1. General. The Plan is a defined contribution plan covering the employees of Prestige Employee Administrators, Inc. (the “Company”) and the employer organizations who have adopted the Plan (see “Participating Employer” below), who have met the eligibility requirements established by their respective Participating Employer. The Plan was established on January 1, 2001 and is subject to the provisions of the Employment Retirement Income Security Act of 1974 (ERISA) as amended.

The Plan is a “multiple employer” plan as described in Section 413(c) of the Internal Revenue Code (the “Code”). The Company provides payroll processing and human resource services to its clients. Each client of the Company has the option of adopting this plan for the benefit of its employees. A client that adopts this plan is known as a “Participating Employer”. Each Participating Employer establishes its eligibility requirements relating to age and length of service for its employees in accordance with the provisions of the Plan and the Code.

A client that does not adopt this plan may adopt its own retirement plan. Any client adopting its own retirement plan is subject to its plan’s regulations and not those of this Plan. Therefore, their plan information is not included in these financial statements.

2. Contributions. Each year, participants may contribute pre-tax deferrals or Roth (after-tax) deferrals as a percent of annual compensation as defined in the Plan to the maximum allowed by the Code or as adopted by the Participating Employer. Participants who have attained age 50 before the end of the Plan year are eligible to make catch-up contributions. Participants also may contribute amounts representing distributions from other qualified defined benefit or defined contribution plans (rollovers).

The Plan allows the Company and each participating employer to determine if its employees will be automatically enrolled upon eligibility or if eligible employees must enroll if they wish to participate in the Plan.

The Company and each participating employer may elect to make matching, safe harbor, profit sharing, or other discretionary contributions to the Plan.

Participant and Company contributions are invested as directed by the participant from investment options offered by the Plan.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

A. Description of Plan (continued...)

3. Participant accounts. Each participant's account is credited with the participant's contributions and the Company's or the participating employer's safe harbor, matching and discretionary contributions, as well as allocations of Plan earnings. Participant accounts are charged with an allocation of Plan expenses. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.
4. Vesting. Participants are vested immediately in their contributions and the Company's or the participating employer's safe harbor contributions plus actual earnings on the contributions. Vesting in the Company's matching and discretionary contribution portion of their accounts is based on years of continuous service. A participant is 100 percent vested after meeting the service requirement established by the participating employer not to exceed the ERISA maximum of 6 years or attaining the retirement age of 65, or upon death or disability.
5. Notes receivable from participants. Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50 percent of their account balance. The loans are secured by the balance in the participant's account. The loan interest rate shall be the Prime Lending Rate plus 1% determined as of the date of the loan request or such other rate of interest as would be charged by persons in the business of lending money for loans which would be made under similar circumstances. Principal and interest are paid ratably through payroll deductions.
6. Payment of benefits. Participants may elect to receive a distribution up to an amount equal to the value of the participant's vested interest in his or her account due to termination of service, death, disability, or retirement. A participant may receive an in-service withdrawal after attaining age 59-1/2.

In the event of a participant's death, his or her designated beneficiary may request a distribution of his or her account.

Withdrawals may also be made in conjunction with IRS hardship distribution regulations.

7. Forfeited accounts. In the event that funds are forfeited. The Employer must direct the Administrator to use Forfeitures to reinstate previously forfeited Account balances of Participants, if any, or to satisfy any contribution that may be required pursuant, or to pay any Plan expenses. Forfeited account balances were \$89,490 and \$96,021 as of December 31, 2020, and 2019 respectively.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

B. Summary of Accounting Policies

Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting. Investments held by a defined contribution plan are required to be reported at fair value, except for fully benefit-responsive investment contracts. Contract value is the relevant measure for the portion of the net assets available for benefits of a defined contribution plan attributable to fully benefit-responsive investment contracts because contract value is the amount participants normally would receive if they were to initiate permitted transactions under the terms of the Plan.

Use of Estimates

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America 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

Investments are reported at fair value (except for fully benefit-responsive investment contracts, which are reported at contract value). Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. The Plan's Investment Committee determines the Plan's valuation policies utilizing information provided by the investment advisers, custodians, and insurance company. See Note C for discussion of 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 includes the Plan's gains and losses on investments purchased 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. No allowance for credit losses has been recorded as of December 31, 2020 or 2019. Delinquent participant loans are recorded as distributions on the basis of the terms of the Plan agreement.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

B. Summary of Accounting Policies (continued...)

Excess Contributions Payable

Amounts payable to participants for contributions in excess of amounts allowed by the Internal Revenue Service are recorded as a liability with a corresponding increase to corrective distributions.

Payment of Benefits

The Plan does not accrue non-distributed benefits related to participants who have withdrawn from the Plan, but recognizes such benefits as a deduction from net assets in the period in which such benefits are paid.

Expenses

Certain expenses incurred maintaining the Plan are paid directly by the Company and are excluded from these financial statements. Fees related to the administration of notes receivable from participants are charged directly to the participant's account and are included in administrative expenses. Investment-related expenses are included in net appreciation of fair value of investments.

Subsequent Events

The Plan has evaluated subsequent events through October 14, 2021, the date the financial statements were available to be issued.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

C. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). Valuation techniques maximize the use of relevant observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy under Topic 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 used need to maximize the use of observable inputs and minimize the use of unobservable inputs.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

C. Fair Value Measurements (continued...)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2020 and 2019.

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

Self-directed brokerage accounts. Accounts primarily consist of mutual funds and common stocks that are valued on the basis of readily determinable market prices.

MetLife Stable GAC 25554. Units of the Fund are valued each day on which the New York Stock Exchange ("NYSE") is open for trading in accordance with the valuation procedures established by the Trustee. The NAV per unit is calculated as of the close of trading on the NYSE. The NAV per unit is computed by dividing the total contract value of the assets of the Fund, less its liabilities, by the total number of units outstanding at the time of such computation. Investment income earned is reinvested in the Fund and included in the determination of unit values.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

C. Fair Value Measurements (continued...)

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2020 and 2019. Classification within the fair value hierarchy table is based on the lowest level of any input that is significant to the fair value measurement.

<u>12/31/2020</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	146,533,168			146,533,168
Self-directed brokerage account	-	6,317,727		6,317,727
Other	-			-
Total assets in the fair value hierarchy	146,533,168	6,317,727	-	152,850,895
Investments measured at net asset value*				-
Investments at fair value	146,533,168	6,317,727	-	152,850,895

<u>12/31/2019</u>	<u>Level 1</u>	<u>Level 2</u>	<u>Level 3</u>	<u>Total</u>
Mutual funds	107,550,029			107,550,029
Self-directed brokerage account	-	5,020,649		5,020,649
Other	-			-
Total assets in the fair value hierarchy	107,550,029	5,020,649	-	112,570,678
Investments measured at net asset value*				-
Investments at fair value	107,550,029	5,020,649	-	112,570,678

Certain investments that are measured at fair value using the NAV per share (or its equivalent) practical expedient have not been classified in the fair value hierarchy. The fair value amounts presented in this table are intended to permit reconciliation of the fair value hierarchy to the amounts presented in the statements of net assets available for benefits.

The following table summarizes investments for which fair value is measured using the net asset value per share practical expedient as of December 31, 2020, and 2019, respectively. There are no participant redemption restrictions for these investments; the redemption notice period is applicable only to the Plan.

<u>Fund</u>	<u>12/31/20 Fair Value</u>	<u>12/31/19 Fair Value</u>	<u>Unfunded Commitments</u>	<u>Redemption Frequency</u>	<u>Redemption Notice Period</u>
NONE	0	0	N/A	Daily	None

Transfers between Levels

For years ended December 31, 2020, and 2019, there were no significant transfers between Levels 1 and 2 and no transfers in or out of Level 3 and no changes in Fair Value of Level 3 Assets and Related Gains and Losses.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

D. Fully Benefit-Responsive Investment Contracts

MetLife Stable Value Fund. The Fund is valued at contract or book value (principal plus accumulated earnings) which was \$8,891,633 and \$6,057,007 as of December 31, 2020, and 2019 respectively.

The Fund's objective is the safety and preservation of principal and accumulated interest for participant-initiated transactions. The interest credited to balances in the Fund will reflect both current market conditions and performance of the underlying investments in the Fund. The Fund invests entirely in the MetLife Group Annuity Contract which consists of separately managed investment portfolios directed by Reliance Trust Company. The Fund is a bank collective trust fund for which Reliance Trust Company serves as trustee and investment manager. The Fund is not FDIC-insured or registered with the Securities and Exchange Commission.

This Fund is a bank collective trust fund for which Reliance Trust Company, an FIS Company, ("RTC") serves as trustee and investment manager. The Fund is not FDIC insured and is not guaranteed by Reliance Trust nor guaranteed by any governmental agency. Units of beneficial interest in the Fund are not registered under the Securities Act of 1933 in reliance on an exemption under that Act for interests in a collective trust fund maintained by a bank for certain types of employee benefit trusts.

Stable value investments are specifically designed to be "benefit responsive" as required by the Financial Accounting Standards Board, providing participants with the ability to transact at book value (principal plus accumulated earnings) when transferring or reallocating their investments.

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.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

E. Rollover Contributions

The Plan may accept a "rollover," provided the "rollover" will not jeopardize the tax-exempt status of the Plan or create adverse tax consequences for the Employer. The amounts rolled over shall be separately accounted for in a "Participant's Rollover Account." Furthermore, any Roth Elective Deferrals that are accepted as "rollovers" in this Plan on or after January 1, 2006 shall be separately accounted for. A Participant's Rollover Account shall be fully Vested at all times and shall not be subject to Forfeiture for any reason. For purposes of this Section, the term Participant shall include any Eligible Employee who is not yet a Participant, if, pursuant to the Adoption Agreement, "rollovers" are permitted to be accepted from Eligible Employees.

F. Related-Party Transactions and Party-in-Interest Transactions

Certain Plan investments are shares of mutual funds managed by various mutual fund companies. Fees incurred within these mutual funds are included in net appreciation in fair value of investments.

During 2020, fees were paid to Charles Schwab Trust Bank, the custodian as defined by the Plan, and to BlueStar Retirement Services, BKS Retirement Services, Private Advisor Group, Dodge & Cox, Fidelity Investments, and Wells Fargo Funds for their advisory and administrative services to the Plan. These fees included investment fees, third party administrative fees, and other professional service fees, and are based on customary charges as agreed upon by the Plan. These transactions qualify as party-in-interest transactions for which there is a statutory exemption.

Certain administrative functions are performed by officers or employees of the Plan's sponsor, Prestige Employee Administrators, Inc., which received \$67,442 and \$56,938 in 2020 and 2019, respectively for its administrative services. No officer or employee received direct compensation from the Plan.

G. Plan Termination

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants would become 100 percent vested in their accounts. Any unallocated assets of the plan may be allocated to participant accounts or distributed in such a manner as the Company or participating employer may determine.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

H. Tax Status

The IRS has determined and informed the Company by a letter dated March 16, 2015, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code. The Plan will continue to be amended as necessary and the Plan administrator believes that the Plan is designed, and is currently being operated, in compliance with the applicable provisions of the Internal Revenue Code and, therefore, believes that the Plan is qualified and that the related trust is tax-exempt.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the plan and recognize a tax liability if the plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS/DOL. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress. The plan administrator has analyzed the tax positions taken by the Plan, and has concluded that as of December 31, 2020, there are no uncertain positions taken or expected to be taken. The Plan has recognized no interest or penalties related to uncertain tax positions.

I. 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 statement of net assets available for benefits.

The COVID-19 pandemic could have a continued material adverse impact on economic and market conditions and trigger a period of global economic slowdown. The rapid development and fluidity of this situation precludes any prediction as to the ultimate material adverse impact of the coronavirus outbreak. Nevertheless, the outbreak presents uncertainty and risk with respect to the Company, its performance, and its financial results. The COVID 19 pandemic has led to volatility in financial markets and has affected, and may continue to affect, the market price of the Plan's investments. The potential economic impact and the duration of COVID 19 is difficult to assess or predict.

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Notes to Financial Statements

J. Reconciliation of Financial Statements to Form 5500

Certain differences may exist between the recording of accruals for financial reporting purposes and IRS/Department of Labor's (DOL) Form 5500 purposes. The following is a reconciliation of Net Assets Available for benefits and Changes in Net Assets Available per the financial statements as of and for the year ended December 31, 2020 and 2019, to Form 5500:

Net assets available for benefits as of December 31:	<u>2020</u>	<u>2019</u>
Net Assets available for benefits per the financial statements	\$ 165,849,966	\$ 121,789,828
Contributions due from Employer	(1,213,225)	(713,776)
Contributions due from participants	<u>(828,788)</u>	<u>(555,127)</u>
Net assets available for benefits per Form 5500	<u>\$ 163,807,953</u>	<u>\$ 120,520,925</u>
Changes in net assets available for benefits:	<u>2020</u>	<u>2019</u>
Net change in net assets available for benefits per the financial statements	\$ 34,312,233	\$ 28,217,034
Difference in contributions due from employer	(499,449)	(68,761)
Difference in contributions due from participants	<u>(273,661)</u>	<u>(242,135)</u>
Net change in net assets available for benefits per Form 5500	<u>\$ 33,539,123</u>	<u>\$ 27,906,138</u>

K. Certified Investments

Certain information related to investments and notes receivable from participants disclosed in the accompanying financial statements and ERISA-required supplemental schedule, including investments and notes receivable from participants held at December 31, 2020 and 2019, and net appreciation in fair value of investments, interest and dividends, and interest income on notes receivable from participants for the year ended December 31, 2020, was obtained by management and agreed to or derived from information certified as complete and accurate by Charles Schwab Trust Bank (the trustee of the Plan).

SUPPLEMENTAL INFORMATION

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Schedule H, line 4i - Schedule of Assets (Held at End of the Period)

December 31, 2020

11-3448580

PN 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment	(d) Cost	(e) Current value
*	Charles Schwab Trust Bank	American Capital Income Builder Fund	**	750,118
*	Charles Schwab Trust Bank	Artisan Small Cap Fund (I)	**	1,877,399
*	Charles Schwab Trust Bank	Blackrock Health Sciences Op Funds	**	5,203,578
*	Charles Schwab Trust Bank	Blackrock Mid Cap Growth Equity Fund Cla	**	3,468,772
*	Charles Schwab Trust Bank	Brandywine Global Gbl Oppty Bond Fund	**	294,124
*	Charles Schwab Trust Bank	Columbia Global Equity Value Fund (I3)	**	384,323
*	Charles Schwab Trust Bank	DFA U.S. Targeted Value	**	1,356,783
*	Charles Schwab Trust Bank	Dodge & Cox Stock Fund	**	4,018,269
*	Charles Schwab Trust Bank	Federated Instl High Yield Bond \$6	**	1,475,412
*	Charles Schwab Trust Bank	Fidelity Small Cap Discovery Fund	**	1,491,421
*	Charles Schwab Trust Bank	Franklin Utilities Fund R6	**	789,912
*	Charles Schwab Trust Bank	Invesco Oppenheimer Developing Mkts I	**	1,407,534
*	Charles Schwab Trust Bank	Metropolitan West Total Return Bond Plan	**	3,178,597
*	Charles Schwab Trust Bank	MFS Diversified Income Fund R6	**	483,547
*	Charles Schwab Trust Bank	MFS Global Equity R6	**	1,268,306
*	Charles Schwab Trust Bank	MFS Mid Cap Value Fund (R6)	**	903,674
*	Charles Schwab Trust Bank	Parametric International Eqty Fund	**	2,309,397
*	Charles Schwab Trust Bank	Schwab Fundamental US Large Comp	**	1,469,978
*	Charles Schwab Trust Bank	T Rowe Price Capital Appreciation	**	1,848,355
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2005	**	107,094
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2010	**	31,455
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2015	**	1,150,263
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2020	**	4,037,361
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2025	**	6,327,502
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2030	**	11,320,119
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2035	**	8,457,233
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2040	**	10,988,451
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2045	**	8,623,189
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2050	**	8,179,060
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2055	**	7,122,908
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2060	**	2,726,582
*	Charles Schwab Trust Bank	T. Rowe Price Financial Services Class I	**	318,068
*	Charles Schwab Trust Bank	Vanguard Energy Admiral Shares	**	412,916
*	Charles Schwab Trust Bank	Vanguard Growth Index - Admiral Shares	**	11,906,311
*	Charles Schwab Trust Bank	Vanguard Inflation-Protected Secs Adm	**	1,320,733
*	Charles Schwab Trust Bank	Vanguard Information Technology Index AD	**	4,341,006
*	Charles Schwab Trust Bank	Vanguard Institutional Index Fund Inst'l	**	11,435,738
*	Charles Schwab Trust Bank	Vanguard Inter-Term Treasury Adm	**	2,483,776
*	Charles Schwab Trust Bank	Vanguard Mid-Cap Index - Admiral Shares	**	4,129,860
*	Charles Schwab Trust Bank	Vanguard Reit Index Fund Admiral Shares	**	1,053,177
*	Charles Schwab Trust Bank	Vanguard Small Cap Index - Admiral Shares	**	2,615,079
*	Charles Schwab Trust Bank	Vanguard Total International Stock Index	**	2,489,389
*	Charles Schwab Trust Bank	Wells Fargo Precious Metals Instl	**	976,399
*	Charles Schwab Trust Bank	Schwab Self-Directed Investment	**	6,317,727
*	Charles Schwab Trust Bank	MetLife GAC 25554-Fee Class J	**	8,891,653
*	Charles Schwab Trust Bank	CASH	**	146,195
	Participant Loans	Various Interest Rates 3.25 - 7.5%		1,953,042
	Total Assets Held			<u>163,841,785</u>

*Party-in-interest

**Historical cost is not required for participant directed investments

Multiple Employer Plan Participating Employer Information**Prestige Employee Administrators Retirement Savings Plan**

Employer Identification Number: 11-3448580	Plan Number: 333
For plan year (beginning/ending:	01/01/2020 - 12/31/2020

(a) Name of participating employer	(b) EIN	(c) Percent of Total Contributions
25 West 86th Street Operating Corp	84-3972482	0.09%
614 Group	36-4749686	0.20%
Abacus Group LLC	13-3972572	0.67%
Accion, The US Network	45-4127501	0.39%
AcqSIS	20-5027425	0.30%
Actin Biomed LLC	20-8572596	0.00%
ADTC Health Corp	85-2440360	0.05%
Agency Within LLC	47-3266050	3.88%
AGL Credit Management	83-1656668	1.51%
Akeida Capital	26-1867833	0.00%
Algorhythm IO Inc	47-1372861	0.01%
A-List Education	03-0568421	0.18%
ASL Marketing	47-1463706	1.03%
American Dental Offices, PLLC	26-2710441	0.00%
Androvia LifeSciences LLC	47-2964940	0.15%
Apollo Theater	13-3630066	0.78%
Apparatus, LLC	45-5034854	0.96%
Ararat Capital Management, LP	81-0732601	0.19%
Archer Byington Glennon & Levine, LLP	26-0873462	0.06%
Embark Lifestyle, LLC	83-0818366	0.08%
Auriga Capital Management LLC	27-0416761	0.55%
Axiom Asset Advisors	46-5510534	0.20%
Babylon Senior Housing Associates	13-4154575	0.08%
Bakery Innovative Technology Corp.	11-3179828	0.00%
Barclay Heights Housing Associates	13-3187569	0.03%
Battle Hill Houses Associates	13-3193922	0.00%
BCS Valuations, Inc.	13-3578139	0.23%
Antenna Group, Inc.	22-2091414	1.25%
Bluefly Acquisition LLC	81-5385432	0.00%
Blue Slate	80-0414946	0.24%
Bond Street Group, LLC	20-3413603	0.00%
Bornite Capital Management, LP	84-3120030	0.09%
Fresh Step Media	13-4813980	0.00%
Brand,Glick & Brand, PC	11-3187151	0.67%
Brayola Fitting Technologies, Inc.	47-5504117	0.01%
Briarwood Chase Management LLC	46-3923905	0.04%
Broadband Capital Mgmt	13-4072139	0.00%
Brookline Housing Associates, LLC	13-3894112	0.07%
Burns & Harris	06-1669997	0.48%
Capital Stack LLC	80-0651227	0.50%
Caravel Management, LLC	20-4677504	0.08%
Centerline Capital Management, LLC	84-1776383	0.02%

Multiple Employer Plan Participating Employer Information**Prestige Employee Administrators Retirement Savings Plan****Employer Identification Number: 11-3448580** **Plan Number: 333****For plan year (beginning/ending: 01/01/2020 - 12/31/2020**

<i>(a) Name of participating employer</i>	<i>(b) EIN</i>	<i>(c) Percent of Total Contributions</i>
Center for Active Design, Inc.	46-1016582	0.75%
Alpha Credit Resources, LLC	02-0751053	0.00%
Cosmetic Executive Women, FDN	13-3563114	0.38%
Cosmetic Executive Women, Inc.	13-2735995	1.19%
Devpost Inc.	06-1833986	0.26%
Chase Dental Care PLLC	45-4236176	0.17%
OMLI, LLC	06-9585515	0.07%
Cinema Arts Centre	11-2368182	0.11%
The Coconut Collaborative Inc	82-2901163	0.15%
Court Support Inc.	11-3629812	0.50%
CP International Corporation	22-3251292	0.86%
CreditRiskMonitor.com, Inc.	36-2972588	0.87%
Cupcake Digital, Inc.	45-5462108	0.00%
Cyber Assessment Inc	84-2246479	0.13%
Data Driven Properties, LLC	47-6578155	0.00%
Downtown Capital Partners, Inc	84-3741864	0.38%
Dean Street Group	26-3151375	0.36%
DEBRA of America	11-2519726	0.01%
De-De, LLC	45-3565352	0.00%
Deerfield 95 Investor Associates	13-3832250	0.01%
Dental Solutions Group, LLC	47-4113917	0.12%
David Feldman Worldwide, Inc.	13-4091601	0.00%
Diagnostic Imaging Group	20-2636875	0.00%
Digital Gadgets LLC	26-1133852	0.84%
Donovan Studios	20-5501498	0.05%
Doshi Diagnostic Imaging Services PC	11-3023313	0.00%
Dreamscape Companies LLC	84-3802974	0.16%
Dristi Capital Partners LLC	82-2101754	0.00%
Downtown Capital Partners, LLC	26-4809324	0.17%
Downtown Family Advisors, LLC	11-3590796	0.11%
DuJour Magazine	45-4507546	0.00%
EAEF	46-2236659	0.12%
Eagle Health Investments LP	84-4363226	0.16%
Edible Schoolyard NYC	27-1237249	0.18%
EJM Ventures, Inc. dba J. Pocker	82-1020777	0.22%
Elara Foodservice Disposables LLC	27-2981248	0.00%
Eldorado Coffee Roasters LTD	11-2540546	1.62%
Elsy, Inc.	82-3926230	0.00%
Emerald Hill Associates	16-1165512	0.01%
ERCA	25-1841636	0.22%
Evergreen Trading	90-0450518	5.19%
Exact Capital Group, LLC	46-3712924	0.13%

Multiple Employer Plan Participating Employer Information**Prestige Employee Administrators Retirement Savings Plan**

Employer Identification Number: 11-3448580	Plan Number: 333
For plan year (beginning/ending:	01/01/2020 - 12/31/2020

(a) Name of participating employer	(b) EIN	(c) Percent of Total Contributions
Hedley May L.P.	20-1344894	0.31%
FD Gallery, LLC	27-1981240	0.72%
Financial Management Associates, Ltd	11-2916150	0.00%
First National Adminstrators, Inc.	22-2949443	0.00%
Flat Rock Global	81-5315474	0.24%
Flexi Footwear	27-0872125	0.00%
Food Matters Again	61-1564540	0.03%
Freshford Capital Management, LLC	26-2850841	1.44%
Galileo Global Advisors, LLC	56-2400443	0.14%
Galileo Global Securities, LLC	20-3885981	0.09%
GarageTek	11-3575195	0.12%
Ghost Tree Capital	46-2174699	0.48%
Goodkind Group, LLC	46-2223175	0.50%
Goshen Senior Housing Associates, LP	13-3932559	0.02%
Greenwood Marketing, LLC	20-1847340	0.27%
Hawkes Financial LLC	27-0730644	0.00%
HELD & HINES, LLP	46-1702557	0.00%
Hempstead Village Housing Associates, LP	13-3058489	0.00%
HGK Asset Management Inc.	52-1296988	1.73%
Hiccup Media, Inc.	20-5465946	0.00%
HJLM Medical Associates PC	47-3031372	0.00%
H & S LLC	20-0363810	0.31%
Hydronic Supply Copiague, Inc.	20-5580039	0.39%
Imperial Companies, LLC	47-1848156	0.38%
Ingrao, Inc.	13-3747807	1.45%
Innerspace Electronics, Inc.	13-3491632	0.35%
Integrated Federal Solutions	26-1391347	1.41%
Integrated Medical Foundation	26-2404924	0.15%
Island Instrument Corp.	20-2543429	0.01%
Island Elevator Inspection Inc.	22-3964122	0.79%
JAJ NYC LLC	82-2805234	0.09%
JBS & Associates, Inc.	13-4173041	0.00%
Jean Rousseau, Inc.	46-5588993	0.03%
JML Medical, Inc.	22-3098047	0.07%
John Panaro (division of CFWP)	11-3451451	0.00%
Koeppel Auto Group	11-2633496	2.72%
dba Karen Rand Associates	27-5300121	0.04%
KRN Spectrum Sales	13-3304685	0.16%
KWA Analytics	82-1234710	1.31%
Long Island Children's Museum	11-3035221	0.38%
Long Island Spine Rehabilitation Medicine, PC	03-0596066	0.92%
Little Neck Dental PC	11-3213513	0.00%

Multiple Employer Plan Participating Employer Information**Prestige Employee Administrators Retirement Savings Plan****Employer Identification Number: 11-3448580** **Plan Number: 333****For plan year (beginning/ending: 01/01/2020 - 12/31/2020)**

(a) Name of participating employer	(b) EIN	(c) Percent of Total Contributions
LiveIntent, Inc.	26-4813536	6.03%
Lizard Investors LLC	26-1211976	0.24%
Lubash Fabrics	11-3070878	0.00%
Lumos Foundation USA	47-2301085	0.62%
LW Family Office, LLC	84-3526716	0.36%
Park Madison Property Management Co., LLC	84-3355390	0.14%
Magma Global LLC	45-5326081	0.07%
Maquette	35-2437643	0.15%
The Marty Lyons Foundation, Inc.	13-3146695	0.04%
Maru Diagnostic Imaging Services PA	45-5194914	0.00%
M. Barry and Co.	13-4096767	0.31%
Meadowbrook II Associates	13-3205353	0.00%
Merkury Innovations, LLC	20-0164318	1.16%
Mind The Gap Inc.	46-0760515	0.05%
Professional Fighters League	81-4680978	0.04%
MNS International, LLC	46-1001458	0.06%
Mobile Training and Education, Inc.	20-3797077	0.00%
The Molecule, Inc.	20-2629022	0.36%
M.Y.R.A. Entertainment LLC	20-8728142	0.04%
NA Collective LLC	46-4409198	0.33%
Accredited Property Management LLC	84-3071396	0.12%
National Dental LLC	47-4875676	1.44%
Natural Areas Conservancy	46-1791849	1.24%
Navia Vision	11-3575111	0.03%
New Dimension Industries	20-5488536	0.00%
New Paltz Housing Associates	13-3075485	0.00%
New Primecare LLC	20-2576930	0.00%
Nieuw Amsterdam Property Management LLC	46-2854140	0.24%
Old Hill Partners, Inc.	06-1446044	0.43%
Out of the Blue Enterprises LLC	20-2380480	4.79%
Pathy Medical LLC	81-1514203	0.02%
Pediatric and Adolescent Medicine, LLP	13-2980054	1.66%
Peer Exchange Association	47-3427580	0.00%
Pendrick Capital Partners Holdings, LLC	27-2485584	0.44%
Perfecting Faith Church, Inc.	11-3067138	0.03%
Portshift Software Technologies Inc	36-4948285	0.04%
Progressive America Fund, Inc.	13-3885314	0.00%
Prestige Employee Administrators, Inc.	11-3448580	2.95%
PRF Services, Inc.	20-0941140	0.00%
Prime Office Centers	13-4023664	0.00%
Progressive Management of NY V LLC	45-4772208	0.98%
Progressive Surgery Center, LLC	06-0685569	0.00%

Multiple Employer Plan Participating Employer Information**Prestige Employee Administrators Retirement Savings Plan**

Employer Identification Number: 11-3448580	Plan Number: 333
For plan year (beginning/ending:	01/01/2020 - 12/31/2020

(a) Name of participating employer	(b) EIN	(c) Percent of Total Contributions
Science Project	47-2239303	0.00%
Quadrum US Capital Corp	46-0701732	0.85%
Ramapo Valley Surgical Center	20-0580403	0.00%
Redburn Capital Management, LLC	82-4484474	0.26%
Reitdesign, Inc.	13-3983021	0.08%
Reliance Credit Partners LLC	81-2123920	0.03%
Rethink First	26-1746074	3.36%
Rex Architecture P.C.	75-3136554	0.00%
RMH Associates, LP	13-3764368	0.00%
Roman & Associates, Inc.	11-3445203	1.08%
Rothschild Capital Partners, LLC	13-4006978	0.28%
Royal Learning Institute, Inc	46-4964310	0.07%
Royalty Solutions LLC	83-2423459	0.12%
Sarina Accessories	20-5685302	0.02%
Scape Landscape Architecture D.P.C.	81-4252394	1.41%
Sensational Development	26-4255113	0.04%
Shannon River	02-0657358	0.00%
Shoplet.com	13-3685351	0.29%
Shvo Concepts LLC	20-2281129	0.03%
Sierra Realty	13-2782294	0.78%
Simon Baron Development LLC	46-4896066	0.68%
SLIM Management, Inc.	81-3569306	0.01%
Smooth Sportswear, LLC	26-0265128	0.55%
Sollis Health	81-1829689	2.18%
Southern Equities, LLC	20-4370216	0.01%
STAPLE STREET CAPITAL MANAGEMENT, L.P.	47-2036264	1.29%
Star Mountain Fund Management LLC	90-0584004	0.56%
STIGroup, Ltd.	22-3758188	0.71%
Striata, Inc.	76-0746532	0.28%
Sword US, Inc.	13-3805704	0.00%
Tala	82-3934031	0.26%
Tall Pines Capital, LLC	47-3714291	0.37%
TBG Consultants	90-0642029	0.00%
Team8 Labs Inc	61-1813570	0.31%
Tellus Core, Inc	83-2742027	0.20%
Tidosh Dental Laboratory LLC	32-0587660	0.38%
Transportation Technology, Inc.	22-3339894	0.00%
TRGP Capital	84-2396598	0.79%
TrueFort, Inc.	47-4866222	0.95%
Tueoris, LLC.	82-2327636	0.61%
Tully Law, P.C.	81-3388201	0.60%
Two Creeks Capital Management LP	38-3922845	2.10%

Multiple Employer Plan Participating Employer Information

Prestige Employee Administrators Retirement Savings Plan

Employer Identification Number: 11-3448580	Plan Number: 333
For plan year (beginning/ending:	01/01/2020 - 12/31/2020

(a) Name of participating employer	(b) EIN	(c) Percent of Total Contributions
Twenty Acre Capital	84-2050086	0.28%
Underscore Marketing, LLC	37-1429259	0.98%
Unger Medical P.C.	81-1839138	0.33%
UpClear, Inc.	26-1106689	0.73%
USA Corporate Services, Inc.	51-0343693	0.20%
VR Investments	27-3061318	0.25%
WahlRich Group, LLC	82-0546605	0.00%
Water & Wall	45-4170969	0.35%
WB Heritage Pointe Associates, LLC	13-4083971	0.00%
WBRES – VI, Inc. dba Patriot Manor	66-0642380	0.00%
WB Stonehill Associates, LLC	13-4083973	0.00%
Werkstatt Development, Inc.	26-3443148	0.00%
Wilder Balter Partners, Inc.	13-4149409	2.79%
Windsor Resources, LLC	27-1495084	0.00%
WB Woodcrest Associates, LLC	13-4025917	0.03%
Xperteks Computer Consultancy Inc.	30-0005306	0.30%
YieldStreet, Inc.	47-2003394	0.16%

Form 5500Department of the Treasury
Internal Revenue ServiceDepartment 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**2020****This Form is Open to Public Inspection****Part I Annual Report Identification Information**

For calendar plan year 2020 or fiscal plan year beginning 01/01/2020 and ending 12/31/2020

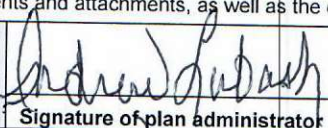
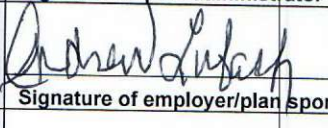
- A** This return/report is for: ☐ a multiemployer plan ☒ a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- ☐ a single-employer plan ☐ a DFE (specify) _____
- B** This return/report is: ☐ the first 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) _____

Part II Basic Plan Information—enter all requested information

1a Name of plan PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN	1b Three-digit plan number (PN) ▶ 333
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) PRESTIGE EMPLOYEE ADMINISTRATORS, INC. 538 BROADHOLLOW ROAD SUITE 311 MELVILLE NY 11747	1c Effective date of plan 01/01/2001
	2b Employer Identification Number (EIN) 11-3448580
	2c Plan Sponsor's telephone number 516-692-8505
	2d Business code (see instructions) 561300

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	 Signature of plan administrator	10/14/2021 Date	ANDREW LUBASH Enter name of individual signing as plan administrator
SIGN HERE	 Signature of employer/plan sponsor	10/14/2021 Date	ANDREW LUBASH Enter name of individual signing as employer or plan sponsor
SIGN HERE	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2020)
v. 200204

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	4 , 5 8 3
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		6a(1)	3 , 9 5 3
a(2) Total number of active participants at the end of the plan year		6a(2)	4 , 5 4 4
b Retired or separated participants receiving benefits		6b	7
c Other retired or separated participants entitled to future benefits		6c	6 8 8
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	5 , 2 3 9
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	4
f Total. Add lines 6d and 6e		6f	5 , 2 4 3
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	3 , 0 1 6
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....		6h	8 6
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7	
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2A 2E 2F 2G 2J 2K 2R 2S 2T 3B 3H			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (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	
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		b General Schedules (1) ☒ H (Financial Information) (2) ☐ I (Financial Information – Small Plan) (3) ☐ A (Insurance Information) (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 2020 Form M-1 annual report. If the plan was not required to file the 2020 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 _____

PRESTIGE EMPLOYEE ADMINISTRATORS RETIREMENT SAVINGS PLAN

Schedule H, line 4i - Schedule of Assets (Held at End of the Period)

December 31, 2020

11-3448580

PN 333

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of investment	(d) Cost	(e) Current value
*	Charles Schwab Trust Bank	American Capital Income Builder Fund	**	750,118
*	Charles Schwab Trust Bank	Artisan Small Cap Fund (I)	**	1,877,399
*	Charles Schwab Trust Bank	Blackrock Health Sciences Op Funds	**	5,203,578
*	Charles Schwab Trust Bank	Blackrock Mid Cap Growth Equity Fund Cla	**	3,468,772
*	Charles Schwab Trust Bank	Brandywine Global Gbl Oppty Bond Fund	**	294,124
*	Charles Schwab Trust Bank	Columbia Global Equity Value Fund (I3)	**	384,323
*	Charles Schwab Trust Bank	DFA U.S. Targeted Value	**	1,356,783
*	Charles Schwab Trust Bank	Dodge & Cox Stock Fund	**	4,018,269
*	Charles Schwab Trust Bank	Federated Instl High Yield Bond \$6	**	1,475,412
*	Charles Schwab Trust Bank	Fidelity Small Cap Discovery Fund	**	1,491,421
*	Charles Schwab Trust Bank	Franklin Utilities Fund R6	**	789,912
*	Charles Schwab Trust Bank	Invesco Oppenheimer Developing Mkts I	**	1,407,534
*	Charles Schwab Trust Bank	Metropolitan West Total Return Bond Plan	**	3,178,597
*	Charles Schwab Trust Bank	MFS Diversified Income Fund R6	**	483,547
*	Charles Schwab Trust Bank	MFS Global Equity R6	**	1,268,306
*	Charles Schwab Trust Bank	MFS Mid Cap Value Fund (R6)	**	903,674
*	Charles Schwab Trust Bank	Parametric International Eqty Fund	**	2,309,397
*	Charles Schwab Trust Bank	Schwab Fundamental US Large Comp	**	1,469,978
*	Charles Schwab Trust Bank	T Rowe Price Capital Appreciation	**	1,848,355
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2005	**	107,094
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2010	**	31,455
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2015	**	1,150,263
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2020	**	4,037,361
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2025	**	6,327,502
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2030	**	11,320,119
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2035	**	8,457,233
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2040	**	10,988,451
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2045	**	8,623,189
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2050	**	8,179,060
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2055	**	7,122,908
*	Charles Schwab Trust Bank	T Rowe Price Retirement 2060	**	2,726,582
*	Charles Schwab Trust Bank	T. Rowe Price Financial Services Class I	**	318,068
*	Charles Schwab Trust Bank	Vanguard Energy Admiral Shares	**	412,916
*	Charles Schwab Trust Bank	Vanguard Growth Index - Admiral Shares	**	11,906,311
*	Charles Schwab Trust Bank	Vanguard Inflation-Protected Secs Adm	**	1,320,733
*	Charles Schwab Trust Bank	Vanguard Information Technology Index AD	**	4,341,006
*	Charles Schwab Trust Bank	Vanguard Institutional Index Fund Inst'l	**	11,435,738
*	Charles Schwab Trust Bank	Vanguard Interim-Term Treasury Adm	**	2,483,776
*	Charles Schwab Trust Bank	Vanguard Mid-Cap Index - Admiral Shares	**	4,129,860
*	Charles Schwab Trust Bank	Vanguard Reit Index Fund Admiral Shares	**	1,053,177
*	Charles Schwab Trust Bank	Vanguard Small Cap Index - Admiral Shares	**	2,615,079
*	Charles Schwab Trust Bank	Vanguard Total International Stock Index	**	2,489,389
*	Charles Schwab Trust Bank	Wells Fargo Precious Metals Instl	**	976,399
*	Charles Schwab Trust Bank	Schwab Self-Directed Investment	**	6,317,727
*	Charles Schwab Trust Bank	MetLife GAC 25554-Fee Class J	**	8,891,653
*	Charles Schwab Trust Bank	CASH	**	146,195
	Participant Loans	Various Interest Rates 3.25 - 7.5%		1,953,042
	Total Assets Held			<u>163,841,785</u>

*Party-in-interest

**Historical cost is not required for participant directed investments