

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	<u>VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN</u>						
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">1b Three-digit plan number (PN) ▶</td> <td><u>001</u></td> </tr> <tr> <td>1c Effective date of plan</td> <td><u>04/01/1997</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan	<u>04/01/1997</u>		
1b Three-digit plan number (PN) ▶	<u>001</u>						
1c Effective date of plan	<u>04/01/1997</u>						
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)	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">2b Employer Identification Number (EIN)</td> <td><u>37-1508469</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number</td> <td><u>480-993-2650</u></td> </tr> <tr> <td>2d Business code (see instructions)</td> <td><u>561300</u></td> </tr> </table>	2b Employer Identification Number (EIN)	<u>37-1508469</u>	2c Plan Sponsor's telephone number	<u>480-993-2650</u>	2d Business code (see instructions)	<u>561300</u>
2b Employer Identification Number (EIN)	<u>37-1508469</u>						
2c Plan Sponsor's telephone number	<u>480-993-2650</u>						
2d Business code (see instructions)	<u>561300</u>						
<u>VENSURE EMPLOYER SERVICES, INC.</u>							
<u>2600 W GERONIMO PLACE, SUITE 100</u>							
<u>CHANDLER, AZ 85224</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.	10/15/2021	GUY ARCHAMBEAU
	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	13714
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)	11982
a(2) Total number of active participants at the end of the plan year		6a(2)	15333
b Retired or separated participants receiving benefits.....		6b	0
c Other retired or separated participants entitled to future benefits		6c	3494
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d	18827
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e	0
f Total. Add lines 6d and 6e		6f	18827
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g	8185
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h	35
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 2T 3D			
b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:			
9a Plan funding arrangement (check all that apply) (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 _____

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 VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 VENSURE EMPLOYER SERVICES, INC.	D Employer Identification Number (EIN) 37-1508469	

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)

SLAVIC INTEGRATED ADMINISTRATION

65-0608221

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15 37 38 50	TPA	692405	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

METZ & ASSOCIATES, PLLC

46-4558541

(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?
10	AUDITOR	124500	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

SLAVIC MUTUAL FUND MANAGEMENT CORP.

59-2749576

(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?
28	PORTOFOLIO MGMT FEE	107254	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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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 <u>01/01/2020</u> and ending <u>12/31/2020</u>		
A Name of plan <u>VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>VENSURE EMPLOYER SERVICES, INC.</u>	D Employer Identification Number (EIN) <u>37-1508469</u>	

Part I Asset and Liability Statement			
1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.			
Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash.....	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	473653	876152
(2) Participant contributions.....	1b(2)	634753	1175124
(3) Other	1b(3)	34800	28790
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)		
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	1948236	2817334
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	116765028	299267264
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)		
(2) Employer real property.....	1d(2)		
e Buildings and other property used in plan operation	1e		
f Total assets (add all amounts in lines 1a through 1e)	1f	119856470	304164664

Liabilities

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

Net Assets

l Net assets (subtract line 1k from line 1f)	1l	119856470	304164664
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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)	5384162	
(B) Participants	2a(1)(B)	14299346	
(C) Others (including rollovers).....	2a(1)(C)	2355840	
(2) Noncash contributions	2a(2)		22039348
(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)		105102
(B) U.S. Government securities	2b(1)(B)		
(C) Corporate debt instruments	2b(1)(C)		
(D) Loans (other than to participants)	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	105102	
(F) Other	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		105102
(2) Dividends: (A) Preferred stock.....	2b(2)(A)		2876041
(B) Common stock	2b(2)(B)		
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	2876041	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		2876041
(3) Rents	2b(3)		
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)		0
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)		
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)		0
(B) Other	2b(5)(B)		
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(8) Net investment gain (loss) from master trust investment accounts	2b(8)		
(9) Net investment gain (loss) from 103-12 investment entities	2b(9)		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds)	2b(10)		18761814
c Other income	2c		
d Total income. Add all income amounts in column (b) and enter total.....	2d		43782305

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

(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	13783715	
(2) To insurance carriers for the provision of benefits	2e(2)		
(3) Other.....	2e(3)		
(4) Total benefit payments. Add lines 2e(1) through (3)	2e(4)		13783715
f Corrective distributions (see instructions)	2f		238807
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees	2i(1)	124500	
(2) Contract administrator fees	2i(2)	692405	
(3) Investment advisory and management fees	2i(3)	107254	
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4)	2i(5)		924159
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		14946681

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		28835624
l Transfers of assets:			
(1) To this plan.....	2l(1)		159352237
(2) From this plan	2l(2)		3879667

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: **METZ & ASSOCIATES, PLLC**

(2) EIN: **46-4558541**

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:

	Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)			
4a	X		50368

	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)	
MARTINREA INDUSTRIES INC EMPLOYEE SAVINGS AND INVESTMENT PLAN	02-0534783	001	
COMMUNITY ACTION OF ALLEGAN COUNTY 401K PLAN	38-1790220	001	
COMPUTERS AT WORK INC.	31-1758837	001	
ACCESS HEALTH, INC. 401(K) PLAN	38-3481152	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)
MOTUS LLC 401K PROFIT SHARING PLAN AND TRUST	83-4309433	001
TRION SOLUTIONS, INC. 401(K) PROFIT SHARING PLAN	46-1334892	001
360 ENTERPRISES INC. DBA DIGITAL CURRENT RETIREMENT SAVINGS	20-1068931	002
ADVANCE EMPLOYMENT SERVICES, LLC RETIREMENT SAVINGS PLAN	83-4502499	002

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)
VERNS WRECKER & RECOVERY LLC RETIREMENT SAVINGS PLAN	13-4226069	002
KGIES 401(K) PLAN	26-3831537	002

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 VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 VENSURE EMPLOYER SERVICES, INC.	D Employer Identification Number (EIN) 37-1508469

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

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	1
2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits): EIN(s): 65-0708495 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)? If the plan is a defined benefit plan, go to line 8.	☐ Yes ☐ No ☐ N/A
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).....

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).....

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).....

14a	
14b	
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.....

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

15a	
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.....

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.....

16a	
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 _____

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

Financial Statements
December 31, 2020 and 2019



VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
TABLE OF CONTENTS
December 31, 2020 and 2019

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Notes to Financial Statements	5
Supplemental Schedules	
Schedule H, Line 4i Schedule of Assets (Held at End of Year)	11
Schedule H, Line 4a Schedule of Delinquent Participant Contributions	13
Note: All other schedules required by Section 2520.103-10 of the Department of Labor's Rules and Regulations for reporting and Disclosure under the Employee Retirement Income Securities Act of 1974 have been omitted because they are not applicable.	



INDEPENDENT AUDITORS' REPORT

To the Participants in and Administrator of
Vensure Employer Services, Inc. 401(k) Profit Sharing Plan

Report on the Financial Statements

We were engaged to audit the accompanying financial statements Vensure Employer Services, Inc. 401(k) Profit Sharing Plan, which comprise the statements of net assets available for benefits as of December 31, 2020 and 2019, and the related statement of changes in net assets available for benefits for the year ended December 31, 2020, and the related notes to the financial statements.

Management's Responsibility 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; this includes 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.

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements 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 F, which was certified by Fidelity Personal Trust Company, FSB, the trustee of the Plan, except for comparing such information with the related information included in the financial statements. 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, 2020 and 2019, and for the year ended December 31, 2020, 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. Accordingly, we do not express an opinion on these financial statements.

Other Matter

The supplemental schedules, Schedule H, Line 4i-Schedule of Assets (Held at End of Year) as of December 31, 2020 and Schedule H, Line 4a-Schedule of Delinquent Participant Contributions for the year ended December 31, 2020 are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 and are presented for the purpose of additional analysis and are not a required part of the financial statements. Because of the significance of the matter described in the Basis for Disclaimer of Opinion paragraph, we do not express an opinion on the supplemental schedules.



Report on Form and Content in Compliance With DOL Rules and Regulations

The form and content of the information included in the financial statements and supplemental schedules, other than that derived from the information certified by the custodian, 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.

Metz & Associates PLLC

Phoenix, Arizona
October 12, 2021

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Statements of Net Assets Available for Benefits
December 31, 2020 and 2019

	<u>2020</u>	<u>2019</u>
ASSETS		
Investments, at fair value:		
Mutual funds	\$ 299,267,264	\$ 116,765,028
Receivables:		
Loan Payment Receivable	28,790	34,800
Employee Contributions	1,175,124	634,753
Employer Contributions	876,152	473,653
Notes receivable from participants	2,817,334	1,948,236
	<u>4,897,400</u>	<u>3,091,442</u>
 TOTAL ASSETS	 304,164,664	 119,856,470
LIABILITIES		
Excess contributions payable	<u>265,416</u>	<u>214,043</u>
 NET ASSETS AVAILABLE FOR BENEFITS	 \$ <u><u>303,899,248</u></u>	 \$ <u><u>119,642,427</u></u>

See accompanying notes to financial statements.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Statement of Changes in Net Assets Available for Benefits
Year Ended December 31, 2020

ADDITIONS

Investment gain:

Net appreciation in fair value of investments	\$ 18,761,814
Interest and dividend income	<u>2,981,143</u>
	21,742,957

Contributions:

Employer	5,365,849
Participant	14,052,243
Rollover	<u>2,355,840</u>
	21,773,932

TOTAL ADDITIONS	<u>43,516,889</u>
-----------------	-------------------

DEDUCTIONS

Deductions from net assets attributed to:

Benefits paid to participants	13,808,479
Administrative expenses	<u>924,159</u>

TOTAL DEDUCTIONS	<u>14,732,638</u>
------------------	-------------------

NET INCREASE	28,784,251
--------------	------------

TRANSFERS OF ASSETS TO THIS PLAN	159,352,237
TRANSFERS OF ASSETS FROM THIS PLAN	(3,879,667)

NET ASSETS AVAILABLE FOR BENEFITS

BEGINNING OF YEAR	<u>119,642,427</u>
-------------------	--------------------

END OF YEAR	<u>\$ 303,899,248</u>
-------------	-----------------------

See accompanying notes to financial statements.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE A – DESCRIPTION OF PLAN

The following description of the Vensure Employer Services, Inc. 401(k) Profit Sharing Plan ("Plan") provides only general information. Participants should refer to the Plan agreement for a more complete description of the Plan's provisions.

General – The Plan is a multi-employer plan retirement plan in accordance with IRS Rev. Proc 2002-21, as reflected in the Form 5500 completed by the Plan Administrator. Vensure Employer Services, Inc., the plan sponsor, is a professional employer organization and the worksite employees participating in the Plan are offered participation as benefit of their co-employment with Vensure Employer Services, Inc.'s client organizations. The Plan utilizes multiple schedules of benefits, matching percentages and profit sharing components as chosen by the management of the client organization co-employing the participating worksite employees.

Pursuant to the election set forth in each worksite employers' Election Agreement, certain worksite employees are eligible to participate in the Plan. The eligibility period applicable to a worksite employee is based on the eligibility option elected in the applicable Election Agreement, made by the worksite employers. Age requirements for participation range from no requirement to the 21 years of age maximum defined by the code. Service requirements range from no prior service required to one year of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

Contributions – Each year, participants may contribute from 1% to 100% of pretax annual compensation (as defined in the Plan). Participants may also contribute amounts representing distributions from other qualified plans. Participants direct the investment of their contributions into the investment options offered by the Plan. The Plan currently offers selected mutual funds as investment options for participants. Pursuant to the elections set forth in each of the applicable Election Agreements, certain worksite employees may receive one or more of the following types of Company contributions: matching contributions, qualified non-elective contributions, and discretionary profit-sharing contributions.

Participant Accounts – Each participant's account is credited with the participant's contribution and allocations of (a) the Company's contribution and (b) Plan earnings (losses), and charged with an allocation of administrative expenses, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

Vesting – Participants are immediately vested in their contributions plus actual earnings thereon. Employer contributions are based on years of continuous service in the specific worksite employers; vesting schedules vary.

Payment of Benefits – On termination of service due to reasons other than death, vested interest will be received by the participant as a lump sum distribution as soon as administratively feasible after employment is terminated. If vested interest is \$5,000 or more the participant may elect installment payments over a specific period of time. Distributions upon death can be elected, by the beneficiary, as lump sum or equal installment payments.

Notes Receivable from Participant – Subject to certain limitations in the plan document, 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% of their vested account balance. The loans are secured by the balance in the participant's account and bear interest at rates which are commensurate with local prevailing rates as determined by the Plan administrator. Principal and interest is paid ratably through payroll deductions. As of December 31, 2020, participant loans have maturities through 2035 at interest rates ranging from 4.25% to 9.25%.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE A – DESCRIPTION OF PLAN (continued)

Forfeited Accounts – Any accumulated benefits forfeited during a Plan year due to participant withdrawal prior to full vesting may be applied to reduce Employer contributions or to pay administrative expenses which would otherwise be paid by the Plan. Forfeited non-vested accounts totaled \$665,005 and \$421,957 at December 31, 2020 and 2019, respectively. Forfeitures of terminated non-vested account balances used to reduce employer contributions for the year ended December 31, 2020 totaled \$147,236.

CARES Act – During March 2020, Congress passed the Coronavirus Aid, Relief, and Economic Security Act (the "CARES Act"), which included several relief provisions available to tax qualified retirement plans and their participants. The provisions of the CARES Act may be effective and operationalized immediately, prior to amending the Plan document. During 2020, the Plan elected to implement the provisions allowing eligible plan participants to request penalty-free distributions of up to \$100,000 before December 31, 2020 for qualifying reasons associated with the COVID- 19 pandemic.

NOTE B – SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Date of Management's Review – Subsequent events were evaluated through October 12, 2021, which is the date the financial statements were available to be issued.

Basis of Accounting – The accompanying financial statements have been prepared in accordance with accounting principles generally accepted in the United States of America ("GAAP").

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 charged directly to the borrowing participant's account and are included in administrative expenses when incurred. As of December 31, 2020 and 2019, no allowance for credit losses has been recorded. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a benefit payment based on the terms of the plan document.

Estimates – The preparation of financial statements in conformity with generally accepted accounting principles requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates.

Investment Valuation and Income Recognition – The Plan's investments are reported at fair 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. See "Note G Fair Value Measurements" for discussion of Fair Value Measurements. In accordance with the policy of stating investments at fair value, the Plan presents, in the statement of changes in net assets available for benefits, the net appreciation (depreciation in the fair value of its investments, which consists of the realized gains or losses and the unrealized appreciation (depreciation) on those investments. Dividends are recorded on the ex-dividend date. Interest income is recorded on an accrual basis. Purchase and sales of securities are recorded on a trade-date basis.

Excess Contributions Payable – For the years ended December 31, 2020 and 2019, amounts payable to participants for contributions in excess of amounts allowed by the IRS totaled \$265,416 and \$214,043, respectively, and are recorded as a liability and deducted from participant contributions.

Payment of Benefits – Benefits are recorded when paid.

Administrative Expenses – General administrative expenses of maintaining the Plan are paid by the Company. Investment management, distribution and loan transaction fees are paid by the Plan participants.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE C – PLAN TERMINATION

Although it has not expressed any intent to do so, the Plan's sponsor has the right to terminate the Plan subject to the provisions of ERISA. In the event of whole or partial plan termination; participants would become fully vested as to the amount credited to their accounts after deductions for estimated liquidation and distribution expenses.

NOTE D – 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.

NOTE E – TAX STATUS

The Plan uses a volume submitter profit sharing plan document sponsored by Slavic Integrated Administration Inc. and has received an opinion letter dated March 31, 2014 from the Internal Revenue Service which states that the volume submitter profit sharing plan's form satisfies the applicable provisions of the Internal Revenue Code. The prototype plan's opinion letter has been relied upon by the Plan. The Plan administrator believes the Plan is being operated in compliance with the applicable requirement of the Internal Revenue Code. Therefore, no provision for income taxes has been included in the Plan's financial statements.

Accounting principles generally accepted in the United States of America require plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the Department of Labor or Internal Revenue Service. 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 that would require recognition of a liability (or asset) or disclosure in the financial statements. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any open tax periods in progress.

NOTE F – INFORMATION PREPARED AND CERTIFIED BY TRUSTEE

The Plan administrator has elected the method of annual reporting compliance permitted by 29-CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Accordingly, Fidelity Personal Trust Company, FSB, the trustee of the Plan, who held the assets and executed investment transactions of the Plan has certified that the following data included in the accompanying financial statements and supplemental schedules is complete and accurate.

	<u>2020</u>	<u>2019</u>
Investments, at fair value:		
Mutual funds	\$ 299,267,264	\$ 116,765,028
Notes receivable from participants	2,817,334	1,948,236
Investment income	21,742,957	

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE G – FAIR VALUE MEASUREMENTS

Accounting Standards Codification (ASC) 820 *Fair Value Measurements and Disclosures* (ASC 820), provides the framework for measuring fair value. Fair value of a financial instrument 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. That framework 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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under ASC 820 are described as follows:

Level 1 Fair Value Measurements

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 Fair Value Measurements

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 Fair Value Measurements

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

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 Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

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.

Assets at Fair Value as of December 31, 2020					
		Level 1		Level 2	Total
Mutual funds	\$	299,267,264	\$	0	\$ 299,267,264
Total fair value hierarchy	\$	299,267,264	\$	0	\$ 299,267,264
Assets at Fair Value as of December 31, 2019					
		Level 1		Level 2	Total
Mutual funds	\$	116,765,028	\$	0	\$ 116,765,028
Total fair value hierarchy	\$	116,765,028	\$	0	\$ 116,765,028

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE G – FAIR VALUE MEASUREMENTS (continued)

Transfers between Levels – The availability of observable market data is monitored to assess the appropriate classification of financial instruments within the fair value hierarchy. Changes in economic conditions or model-based valuation techniques may require the transfer of financial instruments from one fair value level to another. In such instances the transfer is reported at the beginning of the reporting period.

NOTE H – EXEMPT PARTY-IN-INTEREST TRANSACTIONS

Certain Plan investments are managed by Fidelity Personal Trust Company, FSB. Fidelity Personal Trust Company, FSB is the custodian as defined by the Plan. These transactions are considered exempt party-in-interest transactions. Fees paid for investment management services were included as a reduction of the return earned on each respective fund. The Plan issues loans to participants, which are secured by the vested balances in the participants' accounts.

NOTE I – ASSETS TRANSFERRED INTO THE PLAN

During 2020, assets totaling \$159,352,237 were transferred into the Plan from other defined contribution plans of companies acquired by the plan sponsor in 2020. Also, during 2020, the Plan transferred to other plans assets totaling \$3,879,667.

NOTE J – RECONCILIATION OF FORM 5500 TO FINANCIAL STATEMENTS

Following is a reconciliation of net assets available for benefits and changes in net assets available for benefits per Form 5500 to the financial statements as of and for the year ended December 31, 2020:

Net assets available for benefits per Form 5500	\$ 304,164,664
Corrective distributions for 2020, distributed in 2021	<u>(265,416)</u>
Net assets available for benefits per the financial statements	<u>\$ 303,899,248</u>
Change in net assets available for benefits per Form 5500	\$ 184,308,194
Corrective distributions for 2019, distributed in 2020	214,043
Corrective distributions for 2020, distributed in 2021	<u>(265,416)</u>
Change in net assets available for benefits per the financial statements	<u>184,256,821</u>

Following is a reconciliation of net assets available for benefits per Form 5500 to the financial statements as of December 31, 2019:

Net assets available for benefits per Form 5500	\$ 119,856,470
Corrective distributions for 2019, distributed in 2020	<u>(214,043)</u>
Net assets available for benefits per the financial statements	<u>\$ 119,642,427</u>

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
Notes to Financial Statements
December 31, 2020 and 2019

NOTE K – PARTICIPANT CONTRIBUTIONS TRANSFERRED LATE TO THE PLAN

The Company remitted certain participant contributions and repayments of notes receivable totaling \$50,368 and \$190,444 for the years ended December 31, 2020 and 2019, respectively, to the Plan later than required by DOL Regulation 2510.3-102. Subsequent to year end, the Company has commenced procedures to remit the investment earnings to the Plan on the late deferrals and repayments of notes receivable from participant. The amount of investment earnings, had the participant contributions and repayments of notes receivable from participants been remitted on a timely basis, is not material to these financial statements and has not been recorded as a receivable as of December 31, 2020.

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
EIN: 37-1508469 PLAN NUMBER: 001
SCHEDULE H, LINE 4I SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2020

(a)	(b) Identity of issue, borrower, lessor or similarly party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current Value
	iShares Total U.S. Stock Market Index Fund	Mutual Fund		\$ 704,309
	iShares MSCI EAFE International Index Fund	Mutual Fund		24,389,988
	Fidelity 500 Index Fund	Mutual Fund		11,726,354
	Fidelity US Bond Index Fund	Mutual Fund		58,277,555
	Invesco Oppenheimer Gold & Special Minerals Fund	Mutual Fund		1,132,543
	American Funds EuroPacific Growth Fund	Mutual Fund		6,791,676
	Vanguard Inflation Protected Securities Fund	Mutual Fund		495,695
	Vanguard Intermediate-Term Bond Index Fund	Mutual Fund		1,388,862
	Vanguard Short-Term Bond Index Fund	Mutual Fund		771,823
	Vanguard Target Retirement 2055 Fund	Mutual Fund		940,006
	Vanguard Target Retirement 2050 Fund	Mutual Fund		865,938
	Vanguard Target Retirement 2040 Fund	Mutual Fund		2,469,303
	Vanguard Real Estate Index Fund	Mutual Fund		648,133
	Vanguard Mid Cap Index Fund	Mutual Fund		4,005,773
	Vanguard Industrial Index Fund	Mutual Fund		2,402,900
	Vanguard Information Technology Index Fund	Mutual Fund		7,960,446
	Vanguard Federal Money Market Fund	Mutual Fund		14,161,988
	Vanguard Prime Money Market Fund	Mutual Fund		7
	Vanguard Small Cap Growth Index Fund	Mutual Fund		2,457,601
	Vanguard Short-Term Federal Fund	Mutual Fund		13,385,645
	Vanguard Small Cap Index Fund	Mutual Fund		2,114,115
	Vanguard Short-Term Inflation Protected Securities Index Fund	Mutual Fund		3,266,056
	Vanguard Target Retirement 2030 Fund	Mutual Fund		3,642,780
	Vanguard Target Retirement Income Fund	Mutual Fund		294,444
	Vanguard Target Retirement 2045 Fund	Mutual Fund		2,398,002
	Vanguard Total Stock Market Index Fund	Mutual Fund		87,797,958
	Vanguard Target Retirement 2035 Fund	Mutual Fund		3,233,669
	Vanguard Target Retirement 2060 Fund	Mutual Fund		310,196
	Vanguard Target Retirement 2025 Fund	Mutual Fund		2,727,272
	Vanguard Target Retirement 2020 Fund	Mutual Fund		830,972
	Vanguard Target Retirement 2015 Fund	Mutual Fund		64,051
	Vanguard High Yield Corporate Admiral	Mutual Fund		405,210
	Vanguard Target Retirement 2065 Fund	Mutual Fund		156,738
	Vanguard Value Index Admiral	Mutual Fund		1,225,113
	Bespoke	Mutual Fund		9,615
	Fidelity Emerging Markets Index	Mutual Fund		761,874
	Ivy Mid Cap Growth Fund Class I	Mutual Fund		1,307,765
	(continued on next page)			

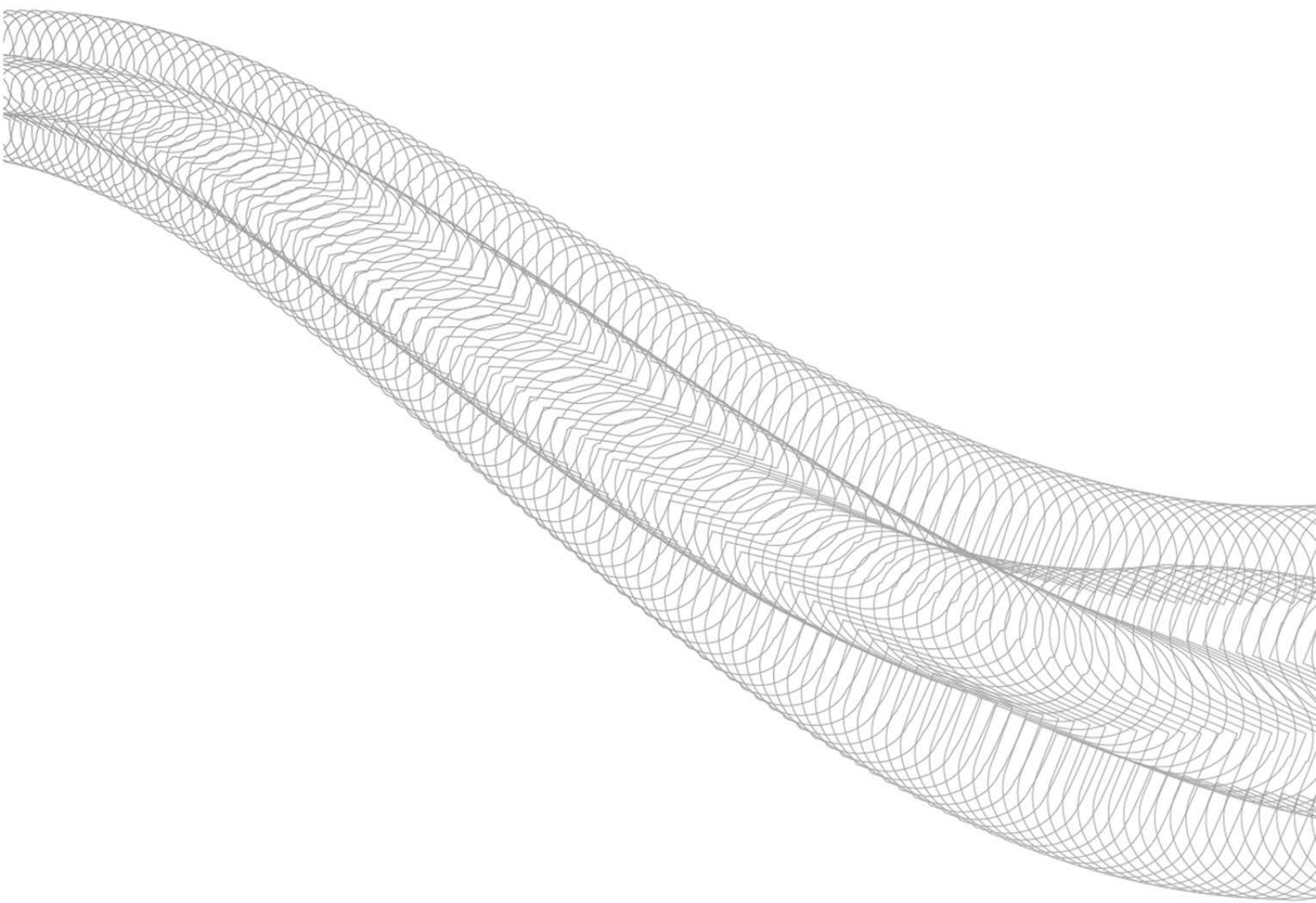
VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
EIN: 37-1508469 PLAN NUMBER: 001
SCHEDULE H, LINE 4I SCHEDULE OF ASSETS (HELD AT END OF YEAR)
December 31, 2020

	<i>(continued from previous page)</i>			
	JPMorgan US Research Enhanced Equity R6	Mutual Fund		1,311,126
	MFS Mid Cap Value Fund CL R5	Mutual Fund		85,654
	Principal Large Cap Growth I R6	Mutual Fund		6,361,054
	T. Rowe Price New Era	Mutual Fund		2,692
	BlackRock Health Sciences Ops I	Mutual Fund		1,964,943
	Vanguard Total Stock Market Index Inst.	Mutual Fund		23,585,968
	Vanguard Small Cap Value Index Admiral	Mutual Fund		271,877
	Vanguard Total International Bond Index Admiral	Mutual Fund		161,575
*	Participant notes receivable	Interest rates range from 4.25% to 9.25 %		2,817,334
				<u>\$ 302,084,598</u>

- (a) * A party-in-interest as defined by ERISA
(d) Cost is not required for participant directed funds

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN
EIN: 37-1508469 PLAN NUMBER: 001
Schedule H, Line 4a Schedule of Delinquent Participant Contributions
Year Ended December 31, 2020

2020 Form 5500 Line 4 a - Schedule of Delinquent Participant Contributions				
Participant Contributions Transferred Late to the Plan	Total that Constitute Prohibited Transactions			Total Fully Corrected Under VFCP and PTE 2002-51
\$240,812	Contributions Not Corrected	Contributions corrected Outside VFCP	Contributions Pending Correction in VFCP	
Check here if late Participant Loan Repayments are included: ☒	\$50,368	\$190,444		



Phoenix

950 W. Indian School Rd
Phoenix, AZ 85013

Milwaukee

720 N. Milwaukee St.
Suite 300
Milwaukee, WI 53202

New York

175 Varick St.
New York, NY 10014

Multiple-Employer Plan Participating Employer Information

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN		PLAN #: 001	37-1508469
(a) Name of participating employer	(b) EIN	(c) Percent of total contributions	
138 Timber Creek, LLC	26-3559743	0.53%	
1ST CHOICE RESTORATION INC	46-1555546	0.00%	
360 Enterprises Inc. dba Digital Current	20-1068931	0.00%	
365 Health Care Group PLC	83-2564930	0.69%	
4Flow, Inc.	46-5079708	0.31%	
Aabiha Express Courier & Trucking Co., dba Mr. Freight	46-0562166	0.00%	
Abbott & Associates, PC	72-1526254	0.11%	
Absolute Data Destruction, Inc.	02-0492472	0.01%	
Absolute Duct and Chimney Cleaning, Inc.	82-0627313	0.00%	
AC Disaster Consulting	83-2157077	0.00%	
Access ED HR - American International Academy	12-3456781	0.02%	
Access ED HR - Branch Line School	46-3079956	0.14%	
Access ED HR - Calhoun Community High School	46-3079980	0.81%	
Access ED HR - Casman Academy	46-3079951	0.06%	
Access ED HR - Charlevoix Montessori	12-3488888	0.02%	
Access ED HR - Francis Street Primary	46-3179950	0.00%	
Access ED HR - Genesee STEM Academy	46-3079981	0.01%	
Access ED HR - Grand Traverse Academy	12-3456822	1.77%	
Access ED HR - Greenspire	46-3079952	0.09%	
Access ED HR - Island City Academy	46-3079949	0.40%	
Access ED HR - Muskegon Heights Charter School	46-3079958	0.05%	
Access ED HR - New School High	46-3079960	0.01%	
Access ED HR - Walden Green Montessori	46-3079959	0.24%	
Access ED HR - Woodland Schools	46-3079954	0.65%	
Access ED HR, LLC - Michigan Online School	46-3079961	0.07%	
Access Health, Inc.	38-3481152	0.00%	
Ackley SheetMetal, Inc.	75-3023063	0.00%	
Acorn Veterinary Corp. P.C. dba Whole Pet Veterinary Center	45-2214137	0.01%	
Advance Employment Services, LLC	83-4502499	0.00%	
Advance International, Inc.	20-3784336	0.00%	
Advanced Construction Systems, LLC	83-4028262	0.03%	
Advanced Enterprise Systems Corporation	27-4907219	0.04%	
AG Fertilizers, Inc.	26-4815283	0.00%	
Agency Matrix, LLC	26-4766846	0.02%	
Agnes & Dora LLC	46-3546446	0.00%	
Air Quality Heating & Air Conditioning, Inc.	77-0553820	0.00%	
Airport Country Store & Deli, Inc.	02-0483073	0.02%	
Ajulia, LLC & All Control Group Companies	27-3739329	0.06%	
Alaska Roteq Corporation	92-0174490	0.00%	
Aligos Therapeutics, Inc	82-4724808	1.29%	
Allegan County Resource Development Committee	38-1790220	0.02%	
Allied Machine Work	20-3677496	0.15%	
Alyssa's LLC	20-0629988	0.01%	
Amaro's Rigging & Moving	46-3171023	0.01%	
American Drilling Services, Inc.	65-0965301	0.01%	
American Steel, Inc	81-0519973	0.00%	
Americor Capital	22-3862783	0.00%	
Ameriprise Financial Services	29-8387564	0.02%	
Amoskeag Maintenance Services, LLC	20-5489311	0.06%	
Anchorage Daily News	37-1869203	0.00%	
Anchorage Sportplex dba The Dome	30-0274501	0.00%	
Ancient and Accepted Scottish Rite Bodies of San Diego dba	95-6035851	0.00%	
Angela S. Evanson, DDS, PC	30-0509846	0.00%	
Angelo Capital Realty, LLC	71-0926283	0.00%	
Ann Arbor Board of REALTORS	38-0303899	0.03%	
Ann Arbor Fabrication	38-2933165	0.18%	
Anvil Craft Corp	22-2942924	0.52%	
Applegate Insulation	38-3507880	1.46%	
Aqua Pure	76-0388209	0.11%	
Archer Trucking, Inc.	68-0228701	0.00%	
Archer's Auto Care, Inc.	62-1407533	0.14%	
Arete Industries	38-3615878	0.16%	
Aristea Therapeutics, Inc.	83-1074231	0.00%	
Arizona Animal Welfare League	23-7149453	0.09%	
Arizona Hispanic Chamber of Commerce	86-0445372	0.25%	
Arizona Natural Pain Solutions	46-1963255	0.14%	
Arrowhead Incubator, Inc.	84-3631006	0.01%	
Artel, LLC	25-3513966	0.12%	
Arteva Homes, Inc & Arterra Realty, LLC	20-5071106	0.02%	
Ash Group of Florida Inc.	82-4963589	0.00%	
Associated Systems Professionals, LLC	20-1774564	0.17%	
Atlanta Divorce Law Group & The Khaki Law Firm	81-2583916	0.11%	
Atlantic Recycling Equipment LLC	20-8387879	0.02%	
Atlantic State Development Corp	20-1822749	0.00%	
ATS Group, LLC	32-0496994	0.00%	

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
Attentive Industries, Inc.	38-3183149	0.27%
Auburn Animal Hospital	38-3613092	0.03%
Aurora Consulting, LLC	81-3588375	0.01%
Austin Adventures, Inc	27-3968245	0.00%
Averill Hospitality PEO, LLC	82-2598703	0.00%
Avery Lopez & Associates DBA University Park Family Dental	27-1673845	0.00%
Axlehire, Inc	47-3916624	0.14%
Ayaan Cell, Inc.	47-1288768	0.00%
B & H Machine Sales	38-2025138	0.08%
B & L Landscaping	38-3285871	0.00%
B & M Staffing Inc	47-4766780	0.18%
Bailey's Furniture Outlet, Inc.	92-0146665	0.00%
Battaglia Foundations, Inc.	45-2875362	0.02%
Battle Creek Area Habitat for Humanity	38-2846821	0.00%
Bay Area Bioscience Center, dba California	94-3118621	0.08%
BCH Consulting Group dba Cork N' Keg Grill	46-2797739	0.02%
Beacon Construction Group	74-3257251	0.00%
Belden Blaine Raytis, LLP	30-0748102	0.19%
Best Property Management, Inc.	36-4534050	0.00%
Beth Scalone Physical Therapy, Inc.	33-0988741	0.20%
Big Sky Woodcrafters, Inc	81-0533686	0.00%
Billings Federal Office Building Ltd Partnership	81-0489061	0.00%
Bill's Truck & Trailer Repair	68-0516577	0.06%
Bilt Technologies, Inc.	84-4372402	0.03%
BKS US	27-1817087	0.09%
Blanchford Landscape Contractors, Inc.	81-1400042	0.00%
BMT Transport/Red Line Logistics/Trilogy Management	68-0120837	0.00%
Bobevan Communications, LLC	47-2634997	0.10%
Bomac International Corp.	91-1137661	0.00%
Booth Environmental	73-1882040	0.18%
Buck's T4 Hospitality, Inc.	27-4169533	0.00%
Bud's Trailer Repair, Inc.	37-1260130	0.00%
Burdick's Integration Group	82-3747965	0.00%
Burning Glass Consulting	46-3090857	0.00%
Business Transition 360, LLC	45-4683438	0.15%
C & S Machine Co. Inc.	58-1598324	0.00%
C.H. Patrick & Company, Inc.	56-2228993	0.05%
California Indoor Comfort, Inc.	20-8974189	0.00%
California Life Sciences Association	47-3226523	0.22%
California Veterans Assistance Foundation, Inc.	30-0186044	0.10%
CalNet, Inc.	68-0005554	0.10%
Camallergy Inc.	00-0919847	0.00%
Canyon Construction Company	76-0539064	0.00%
Capital City Paving, Inc.	02-0429758	0.00%
Catalyst Forward	81-4566878	0.00%
Catamount Carpet of the Berkshires, Inc.	20-5680997	0.00%
Cave Creek Montessori	86-0929374	0.29%
Cell Site Corporation dba Wireless Zone	02-0470979	0.06%
Center for Specialized Surgery, LLC	46-4609402	0.00%
Center for Wealth Planning, Inc.	20-3494420	0.85%
Central Kentucky Surgery Center, LLC	37-1509373	0.00%
Century Health Staffing Services, Inc.	20-5776836	0.14%
Certified Medical Group, Inc.	77-0390396	0.06%
CES, Inc.	57-0966817	0.00%
Charles Walter, Inc	81-0271817	0.00%
Children's Hospital of Michigan Foundation	32-0087353	1.33%
Circle Rock, LLC	82-4028923	0.00%
Cirravox	82-0865862	0.01%
Citizens for Traditional Values	38-2701546	0.00%
Classic Installation LLC/Window Classics Corporation	20-4812756	0.56%
Coastal Waterproofing + Restoration LLC	46-5694116	0.01%
CoherentRx, Inc.	46-2847556	0.13%
COLLECTIONS USA INC	86-0651889	0.37%
Commerce Village Veterinary Hospital PC	45-5091091	0.04%
Commercial Financial Management, Inc.	38-2034895	0.33%
CommLoan.com Inc.	45-5678756	0.00%
Complete Painting, Inc.	81-0462940	0.00%
Computers at Work, Inc. dba VTECH	31-1758837	0.02%
Concierge Nursing Direct, Inc.	27-0224836	0.00%
Concorde Holdings, Inc.	27-3306599	1.05%
Connexus Technologies LLC	84-3859291	0.02%
Consolidated Solutions Group, LLC	47-1474773	0.01%
ContinUse Biometrics	84-3844758	0.26%
Cool Ace Air, LLC dba ACE HOME SERVICES/Ace Air,LLC/Ace Mech	90-0922159	0.02%
Copper Creek, LLC	82-3441311	0.00%
Cornerstone Concrete, Inc.	81-0530320	0.00%
Cosentus LLC	83-3393137	0.00%
Country Glass + Mirror, Inc.	75-2345812	0.35%
Covington Pediatrics, LLC	58-2563224	0.24%
Creative Cabinetry Corp.	71-1030270	0.00%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
Cruise and Tour, LLC	83-2256168	0.00%
CS Company, LLC dba Custom Stems	27-2843949	0.17%
Curb Box Specialists, Inc	81-0517596	0.00%
Cutaneous Lymphoma	38-3443135	0.34%
D.C. Power Specialist, LLC	52-2196251	0.74%
Dansin, Inc.	26-0553408	0.00%
Dave Gross Enterprises Inc. & Adams Pool Specialties, Inc.	68-0427720	0.00%
Dave Shapiro dba RK Electric	26-4035786	0.00%
Dave's Automotive Enterprise	02-0307048	0.01%
David S. Gilmore, DDS, MSD, Inc. dba Gilmore Orthodontics	45-2485902	0.00%
Dawn Donut Systems, Inc / Management Diversified Inc.	38-1508309	0.18%
Daybreak	91-0109284	0.00%
DEC Services, Inc. dba Direct Electric Co.	35-2367821	0.00%
DenaliTEK, Incorporated	92-0146463	0.00%
Dental Service Advisors, LLC	47-5218386	1.27%
Departure Travel, Inc.	38-3490635	0.04%
Detroit Youth Golf Program L3C	85-2066485	0.10%
Diablo Mountain Surgery Center	82-5233115	0.12%
Diamond B Trucking, Inc./Diamond B Oilfield Trucking, Inc.	45-0451630	0.00%
Diamond Glass Bozeman LLC	80-0782734	0.00%
Diamond Glass, LLC/Diamond Glass Great Falls, LLC	61-1582278	0.00%
Dimensional Measurement, Inc.	20-4410708	0.22%
Dining For Women	20-0031928	0.27%
Diversified Association Management, Inc.	38-3790831	0.00%
DJM International Enterprises dba Astro Auto Salvage	59-2667046	0.00%
DKRH Enterprises, LLC	16-1663608	0.00%
DL Engineering & Technology/dba Rytam Technology, Inc.	38-3143834	0.05%
Doan & Tran, DDS, Inc dba A+ Family Dentistry	59-3805018	0.00%
Dominion Realty Services, LLC	83-0684666	2.30%
Douglas Smith dba Prestige Electric Service	20-1643519	0.01%
Dr. Satinder Aggarwal MD, PC	38-2407026	0.64%
Duscany LLC	20-2712649	0.24%
E7 Site	85-0514441	0.07%
Earth Tech Drilling, Inc.	04-3643895	0.44%
Eco Energy Solutions, Inc.	61-1665689	0.00%
EduCare Preschool and Child Care, Inc.	81-1305919	0.00%
Educational Enhancements Inc.	38-3101398	0.05%
efundamental, Inc.	30-1219906	0.04%
EG Staffing LLC	83-2911906	0.07%
Elegus EPS, LLC	61-1799342	0.05%
Element Two Enterprises Inc. dba Wales Garage	59-2339983	0.04%
EMatrix Energy Systems, Inc.	81-2907058	0.14%
EmpowrU, Inc.	83-2524325	0.00%
Energy Control Systems 401K	58-1253037	0.17%
Engage Now Africa, Inc.	45-4100494	0.06%
Engaged Education, Inc.	46-3358836	0.02%
Enhanced Communications Networks, Inc. dba Asian American	22-3558165	0.00%
Entrepreneurs Organization of DC	54-2057512	0.01%
Eric R. Nielson DMD PLC	20-1535944	0.20%
Esparza Pest Control of Corpus Christi	74-2946894	0.00%
ESTRA Automotive Systems, Co., LTD	98-0610301	0.62%
ESTRA Automotive Systems, Co., LTD	98-0610301	0.52%
Euphoria, LLC dba The Cazbah	57-1106633	0.00%
Eventopedia, Inc.	30-1233026	0.01%
Expedited Logistics and Freight Services, LLC	76-0690820	1.48%
Fabrications Plus, LLC	38-3345140	0.02%
Fairbanks Area Surface Transportation Planning	83-1279836	0.00%
Family Pharmacy	92-0165500	0.00%
Farias, Inc.	74-2798803	0.03%
Farmington Vision	38-2293087	0.02%
Fast Electric LLC	46-2591478	0.32%
Ferrocete Builders, Inc	27-2696413	0.00%
Fineline Paving & Grading LLC	45-4528924	0.10%
FJ Trucking, Inc.	27-2077422	0.00%
Flatirons Family Pharmacy, Inc.	46-3918553	0.00%
Focal Point Communication, LLC	02-0493475	0.00%
Foster CM Group, Inc	74-2784213	0.78%
Founders Factory New York LLC	84-3667930	0.44%
Frabil Industries, Inc.	58-1876972	0.01%
Fusion Sign & Design, Inc.	20-5897387	0.00%
GAPPS	81-4625437	0.00%
Gatchell Earth, LLC	81-5431234	0.00%
Gemini Forms & Systems, Inc	38-2816498	0.13%
General Heating & Air	58-2277191	0.06%
Genesee County Bar Association	38-6094459	0.09%
Gleason-Ineson Stone Suppliers, Inc.	81-0584170	0.06%
Global Asset Positioning	26-3946871	0.55%
Global Century Insurance Brokers Inc	41-2135118	0.00%
Global Productivity Solutions, LLC	38-3540968	0.15%
Glomex, Inc.	22-2608902	0.46%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
GMT Service Corp.	76-0561254	0.04%
Go2Guys, LLC	26-1102648	0.00%
Golden Mailer, Inc.	68-0037175	0.00%
Golden Transfer LLC	20-8138952	0.03%
Golf Association of Michigan	38-6105801	0.37%
Good Neighbor Specialty Foods LLC	16-1707374	0.00%
GPE Company Limited	61-1723609	0.00%
Grace Institute of New York	81-0844164	0.10%
Grace Outreach, Inc.	86-1110482	0.02%
Grace University Medical Group, P.C.	38-2951325	0.65%
Grand Boule of the Sigma Pi Phi Fraternity	59-1314521	0.07%
Grand Circus Detroit, LLC	46-2170503	0.30%
Grand Traverse Band, LLC and Affiliated Companies	46-2429770	0.12%
Grass Whackers, LLC	26-4580295	0.00%
Greatscapes by R&R Landscaping, Inc.	02-0498440	0.04%
Guardian Storm Protection	20-0471625	0.04%
H & H Equipment, Inc.dba Lewis & Lewis Computer Store	92-0121525	0.00%
H&H Water, Inc.	20-8941635	0.28%
Hales Location Golf Course	02-0496312	0.00%
Harber A/C Refrigeration	73-1355249	0.02%
Harbor America Specialty Brokerage, LLC	20-3829069	0.18%
Harbor America Suspense Plan	75-2727272	0.00%
Harbor Farmz North, LLC	82-3691196	0.05%
Hard Core Drilling Professionals LLC	83-2030288	0.06%
Harmony Homes, LLC	45-0713165	0.00%
HCSG - Belvedere, Harston Hall, Wayne Center	22-2111554	0.00%
HCSG - Caton Manor, Catonsville Commons, Homewood Center	22-2111555	0.04%
HCSG - Concorde Healthcare and Rehab Center	22-5545622	0.00%
HCSG - Coral Harbor Rehabilitation and Healthcare Center	52-5424244	0.06%
HCSG - EXTENDED CARE AT AMHERST	23-2018555	0.00%
HCSG - Meadowbrook Manor	22-2222553	0.00%
HCSG - Willow Center	22-5545623	0.04%
HCSG - Windsor Country Drive Care Center	22-5562221	0.00%
HCSG CENTRAL, LLC / ISLAND CITY REHAB / APERION CARE	47-3306490	0.00%
HCSG East LLC Crestview Chapel Manor Powerback	47-3306480	0.12%
HCSG East LLC Hamilton Arms	47-3306481	0.01%
HCSG EAST, LLC	47-3306474	0.02%
HCSG EAST, LLC / GALLOWAY	47-3306477	0.01%
HCSG EAST, LLC / GOLDEN LIVING FACILITES	47-3306478	0.00%
HCSG EAST, LLC at GREEN KNOLLS CARE AND REHABILITATION CENTER	47-3306476	0.00%
HCSG EAST, LLC AT VOORHEES PEDIATRIC FACILITY	47-3306479	0.17%
HCSG EAST, LLC WANAQUE CENTER / BARNEGAT NURSING	47-3306475	0.02%
HCSG LABOR SUPPLY, LLC / OHNH EMP. LLC	47-2751466	0.09%
Healthcare Services Group, Inc.	23-2018365	6.08%
Helly Hansen U.S. Inc	91-1096586	0.00%
Highstele Landscaping and Home Improvement LLC	47-3267844	0.01%
Hinnendael & Associates	39-1706529	0.09%
HLJ Foods, Inc.	82-0713094	0.00%
Home Advantage Dialysis	82-2732515	0.04%
Homes in Progress, Inc.	68-0595883	0.00%
HOPE FAMILY CARE CENTER LLC	45-5285530	0.19%
Hopin US Inc.	85-1753034	0.27%
Houston General Insurance Management Company, Inc.	20-0890144	0.00%
Hulett Bancorp	61-1595829	0.00%
Human Capital Suspense	42-5645145	0.00%
Humane Society of Bay County, Inc.	59-2097704	0.00%
Hybrid Machining, Inc.	84-3116424	0.05%
I-90 Motors, Inc.	81-0540810	0.00%
Identiq Inc	84-4758725	0.15%
IHG HEALTHCARE, INC.	20-0268173	0.03%
Industrial Systems Consulting, LLC	51-0667158	0.00%
Innovative Conveyor Systems, LLC	27-2196111	0.00%
Innovative Solutions, LLC	27-1931534	0.00%
Inspectabilities Inspection Services, Inc. dba House Masters	02-0494296	0.03%
International Automotive Oversight Bureau	38-3518710	1.64%
IP Security Reps	20-8419840	0.58%
J & H Office Equipment, Inc.	81-0341266	0.00%
J&L of MS, Inc.	27-1973385	0.36%
JC Enterprises	20-8385733	0.00%
JC Franchising Group	27-2444280	0.02%
JEWISH TUITION ORGANIZATION	86-0970081	0.14%
John D. Jones AC, Heating	59-3527500	0.00%
Johnson Hardware and Furniture Company, Inc.	81-0387583	0.00%
Joint Enterprise Technologies, LLC	26-2489696	0.09%
Jones Heavy Haul, Inc.	04-3813688	0.00%
Jones Water Trucks, Inc.	04-3813699	0.00%
Jordan C. Beck & Associates	37-2905639	0.29%
JRW Services, Inc.- dba Right at Home Tri-County Metro	20-8599282	0.03%
K&M Highline, LLC	45-3748852	0.00%
Kairos Managers, LLC	81-2946694	0.09%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
Kalispell Golf Association, Inc.	81-0267713	0.00%
KBI Industries Inc	81-0679625	0.00%
Kenai Peninsula Athletic Club, Inc.	74-3166405	0.00%
Key Benefit Concepts, LLC	39-1901688	0.30%
Kids and Family Kare LLC	84-4039680	0.04%
KIDS KARE PEDIATRICS PC	86-1041571	0.00%
KOA CARE CAMPS, INC	86-0691641	0.00%
KR Office Interiors, Inc.	81-0381860	0.00%
L&T Staffing Inc. DBA Staffing Solutions	34-2017582	0.07%
LA Manchester Pizza, Inc.	47-2145696	0.00%
Ladd Road Collision	38-2880991	0.12%
L-AD-V MANAGEMENT, LLC	26-1403488	1.97%
Lake Tahoe MCFD/Dream Home Frisco dba Mountain Comfort	22-3971582	0.00%
Laramie Energy, LLC	90-0841728	0.52%
Larson & Associates	38-2631507	0.54%
Law Office of Manning & Zimmerman PLLC	75-3228839	0.03%
Leavitt Capital Companies, LLC	30-1011143	0.00%
Lemore Transportation, Inc. dba Royal Trucking	94-1653691	0.00%
Liberty Staffing LLC	46-0645314	0.16%
Lion Communications, Inc.	90-0255786	0.00%
Logo Loc, Inc.	35-2553440	0.00%
Lone Mountain Land Company, LLC	47-1347989	0.00%
Lone Mountain Land Realty, LLC	81-1152037	0.00%
LOUIS A. MOORE JR. P.C.	86-0316026	0.03%
Luna Gourmet Coffee & Tea Company, LLC	20-5812917	0.00%
Luxe Salon & Spa, LLC	81-4884991	0.02%
M. Bauer Catering, LLC	47-1665358	0.02%
M. Sohail Jilani, MD	20-0566194	0.55%
M.O.E. LLC dba NashCo Furniture	27-4552597	0.02%
Mabwell Therapeutics, Inc.	83-1568218	0.09%
Macomb County Bar Association, Inc.	23-7175015	0.09%
Mad Cap Events, LLC dba Savage Race	45-0959161	0.00%
Magic City Granite Company, Inc.	20-1251441	0.00%
Maple Hill Builders, LLC	20-2127671	0.07%
Maple Island Log Homes/Timeless Wood Care	38-2479927	0.02%
Marble Palace, Inc	55-0796298	0.00%
Mark E. Marandino Inc.	65-0887850	0.23%
Mark Olcott, M.D., Inc. dba Mission Medical Support	81-4376359	0.00%
Martinrea Honsel US, Inc.	27-0590313	0.00%
Mary E. Barna DPM & Associates, P.C.	38-2804759	0.14%
Matanuska Towing & Recovery Inc	92-0141621	0.00%
Matrix ITG, Inc. dba SecureSI	46-1416719	0.05%
Mclver & Smith Fabricators, Inc.	74-1265377	0.00%
MCJF Insurance Services, Inc. dba Maverick Professional Ins	33-0987596	0.00%
McLaren Masonry, Inc.	20-1030543	0.00%
MEC Electrical Contractors, Inc.	34-2025489	0.14%
MEC Technologies, Inc.	47-2527593	0.03%
Medica Billing Solutions	56-2336477	0.03%
MEDsearch Financial, Inc.	33-1036044	0.05%
Merlino Marble & Granite, Inc.	26-0235497	0.19%
Michael Edlen	55-8606240	0.22%
Michigan Orthopaedic Physical Therapy	45-4861135	0.15%
Michigan Orthopaedic Rehabilitation	46-1192600	0.12%
Midtown Personnel, Inc	52-1645512	0.27%
Mixhits Radio, LLC	04-3287009	0.02%
MKind, Inc.	39-2071132	0.03%
Monarch Home Health Services	20-1742452	0.00%
Montana Cancer Consortium	81-0503295	0.00%
Morley Mason, PLC	26-1279021	0.16%
Morningstar Learning Center	20-5113402	0.00%
Morris Thompson Cultural & Visitors Center	20-1113317	0.00%
Motus, LLC	83-4309433	0.13%
Mr. Mac's Holdings LLC dba Mr. Mac's	47-5487289	0.02%
Muller-BBM Vibroacoustic Systems, Inc.	38-3391328	0.24%
Municipal Acquisitions, LLC	26-3496742	0.14%
Munson Services, Inc.	38-3144382	0.16%
National Earth Science Teachers Association	38-2602114	0.00%
Nature & Life Forms, LLC	83-1121530	0.01%
Neighborhood Capital Funding, Inc.	11-3829932	0.27%
Neocase Software, Inc.	73-1725258	0.00%
Neurological Associates of West Los Angeles	95-4165590	0.00%
Neurology Management Associates	83-0875280	0.00%
New England Home Performance Kings	14-1864704	0.02%
New England's Tap House & Grille LLC	45-5260450	0.01%
NewCovid, LLC dba Nines	85-0820061	0.04%
Norcal Orthopedic Surgery Center, LLC	26-3588724	0.06%
Noreen Goldwire DDS PLLC	47-5385293	0.00%
Northeast Basement Systems, LLC	46-5180457	0.02%
Northeast Cartage Company, Inc.	04-2895374	0.08%
Northern Michigan Glass	38-3576327	0.60%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
NSC Financial, Inc.	86-0223783	0.18%
Oakland Macomb Orthopedic Surgeons	45-4154640	0.01%
Oberon Fuels, Inc.	27-3934627	0.00%
O'Donovan Phillips, Inc. dba Big Buzz	26-4028620	0.00%
OLIVE BRANCH CHAMBER OF COMMERCE	64-0562619	0.09%
Omni United (USA), LLC	20-0631946	0.34%
Omni Wellness Group, LLC	38-4056612	0.00%
Onsite Liquidators, Inc. dba Miramar Office Furniture	20-5080022	0.00%
OpenRoad Lending	27-1293701	0.08%
Orchard Veterinary Medical Center, Inc.	47-5667837	0.00%
Owl, Inc.	90-0932927	0.00%
Pacific States Aviation, Inc.	94-1198426	0.00%
Paints Well with Color LLC	55-0826405	0.00%
Paper Cranes Healthcare, LLC	81-3084282	0.24%
Paradyne Technical Services	27-1811177	0.04%
Paris Academies of Compelling Education, Inc.	81-2446287	0.00%
Park Place Ambulatory Surgery Center	82-2031466	0.04%
PC Processing, Inc.	58-2040836	0.14%
PDS Services, LLC	30-0334793	0.06%
Pencor LLC	81-2238636	0.13%
Peterson & Associates CPA, Inc	45-2431475	0.35%
PFG America, LLC	32-0530185	0.03%
PH Healthcare Services, Inc. dba Patriot Hospice	45-3815342	1.04%
Phillips Enviromental Products, Inc dba Clean Waste	81-0526705	0.00%
Phoenix Electric, Inc.	74-2409177	0.51%
Pichette Brothers Construction	02-0409834	0.16%
Pioneer Home Center, Inc.	77-0033963	0.00%
Pitworks LLC dba KC's RibShack	02-0515456	0.02%
Plant Devas, Inc. evanhealy Skin Care	80-0255999	0.00%
Pleasanton Surgery Center, LLC	56-2629045	0.13%
Poplar Resources LLC	20-8144049	0.00%
Post Frame Specialists, Inc.	26-4150842	0.00%
Premier Collision Center Inc.	58-2268255	0.01%
Premiere Powerline Construction, LLC	47-5660939	0.00%
PRESCOTT VALLEY CHARTER SCHOOL	20-4595288	0.03%
Pro Cut Lawn & Landscape, Inc.	84-1662527	0.00%
Pro Insulation, Inc.	20-4812813	0.00%
Proactive Risk Solutions, LLC	47-3428642	0.45%
Professional Building Services by PMC, LLC	45-3129617	0.06%
Proficient Technologies, Inc.	81-4052711	0.00%
Profitable Endeavors Inc	82-4274481	0.01%
Prothelia Inc.	32-0224090	0.14%
Providence Consulting Company	20-0674926	0.49%
PSH Group LLC	82-2816130	0.00%
Quality Truck Repair, Inc	81-0538859	0.00%
Quikly	45-4772512	0.63%
R.C. Taylor dba Southwest Partitions	86-0355088	0.09%
RAM Real Estate Capital, LLC	47-2104399	0.28%
Ramon.Space Inc.	85-0601360	0.11%
RE Logix, Inc	82-0947147	0.01%
Real Estate Systems	83-0270386	0.00%
Red Bone Services, LLC	20-5877074	0.00%
Red Oxx Manufacturing Inc.	81-0494595	0.00%
Rehabilitation Equipment Associates, Inc.	02-0372397	0.03%
REJIMUS, INC.	45-2845645	0.00%
Reliance Hospitalists, PLLC	81-5017313	0.63%
Reliance Premium Finance, Inc.	81-2844364	0.00%
Resinoplast USA, Inc.	47-4865791	0.01%
Resource Healthcare Solutions, Inc.	46-2982512	0.00%
Retirement Plans Department Of MMGP	23-2727566	0.01%
RG Delivery, LLC	45-5579026	0.01%
Richard and Rebecca Hernandez dba Hybrid Recovery Services	46-1665114	0.16%
Ride On Therapeutic Horsemanship	95-4465783	0.33%
Ridgeline Executive Group, Inc	84-4846673	0.02%
Ridgerock Tools, Inc.	71-0865677	0.16%
Ridler Care Source, LLC	45-4862499	0.00%
Rimrock Art & Frame, LLC	90-0141766	0.00%
Ringalink, LLC	27-1067350	0.18%
Riteway Insurance Repair Service	59-2161317	0.12%
River City Rush Delivery, Inc.	20-0671207	0.57%
RJ Finlay Management Company, LLC	20-4557297	0.31%
RJG Universal Builders Corp	47-1443053	0.02%
RMS Associates, LLC	30-0033644	0.07%
Robanda International, Inc. and World Amenities, Inc.	33-0814850	0.00%
Robert Harris Group, LLC	84-4433309	0.09%
Robertson & Robertson Consultants, Inc.	57-1038540	0.01%
Robison Dental Group PLLC	45-5156415	0.22%
Rodney Z. Wong, MD Inc.	20-0919084	0.00%
Roger T. Tran, DDS, INC dba A+ Dentistry Family Dentistry	27-0026260	0.00%
RTB House Inc	82-1821301	0.00%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
RTD Enterprises, Inc.	01-0433403	0.10%
S McCall Investments dba Dean's Collision Repair Center	20-8218897	0.00%
S.H. Passey, Inc.	87-0650220	0.13%
SAF Fire N Stone LLC	27-0313748	0.00%
Sajo Management Group, LLC	27-0110815	0.00%
Samco Sales and Services	38-3333424	0.06%
Sandbear Express, Inc.	38-2291386	0.00%
Santoro Transportation, Inc.	32-0287895	0.00%
Sapp Bros Contracting, LLC	01-0840304	0.01%
Save A Shield, Inc.	86-0943352	0.05%
Schroeder Contracting, Inc.	26-2917622	0.00%
Scottsdale Medical Center PLC	26-2912575	0.23%
SDBW, LLC dba Debenham Properties	87-0733445	0.00%
SelecSource, Inc. & Selso Holdings, LLC	58-2166767	0.02%
Semarchy, Inc.	46-1815219	0.24%
Sheridan Custom Stone, LLC	46-3086567	0.00%
Shock Squad/Steadfast lighting	74-3098548	0.05%
Short's Sports LLC & Related Company	77-0665890	0.04%
Sierra Management, Inc.	38-3051254	0.13%
Sikora & Associates, Inc.	57-0953467	0.00%
Simply Wireless	27-0553430	0.00%
Smile Dental Group, LLC	20-1935278	0.08%
Snapdragon Shipping Inc. dba The UPS Shipping Store #2601	27-4590500	0.01%
SOL Transportation, Inc.	20-8650032	0.00%
Solubit, Inc.	45-0536427	0.00%
Solution 1 Building Services Inc.	83-0475126	0.18%
Son's Chimney Services, Inc.	02-0480962	0.04%
South Florida Glazing dba United Glass Service	65-0538701	0.14%
South Willow Pizza, LLC	82-0967283	0.00%
Southern Michigan Rubber	38-2915610	0.02%
Southfield OB/GYN Associates	38-3531566	0.03%
Southwest Florida Copier Service Inc.	65-0630815	0.29%
Spectrum Monthly & Printing	02-0481512	0.27%
Spin Global, LLC	47-3458706	0.00%
Spine and Sports Surgery Center LLC	46-1141188	0.00%
Spivak Financial Group, The	23-2690188	0.10%
Staffing One, Inc.	58-2257986	0.13%
STAFFusion, Inc.	81-0615234	0.07%
Stainless Structural Works, LLC	45-2745576	0.92%
Steel Solutions, LLC	45-3123357	0.00%
Steele & Steele of Wyoming, Inc.	46-0396729	0.00%
Steelo Cleaning, LLC	80-0283533	0.06%
Steve Sarette & Son Excavation LLC	02-0530069	0.00%
Stickleme, LLC	27-0859226	0.06%
Storage Etc. Property Management, LLC	95-4779787	0.00%
Stratford-Cambridge Group	38-3201390	0.24%
Student Statesmanship Institute	38-3033262	0.00%
Summit Counseling Solutions, LLC	83-3284387	0.02%
Summit County Builders Association, Inc.	84-1266065	0.00%
Summit National Bank	83-0265089	0.00%
Summit Outdoor Solutions, LLC	45-1977920	0.02%
Summit Surgery Center, LLC	81-0536068	0.00%
Supreme Air Systems, Inc.	77-0517940	0.00%
Sur-Foods Emporium Corporation	71-0953769	0.00%
Surgery Center at River Road, LLC	76-0824670	0.34%
Swisher HVAC	86-1047824	0.10%
SybarIP	84-3199280	0.13%
Synergy Solutions	86-0965745	0.00%
Synergy Wellness Group, Inc.	27-0838354	0.00%
Tabulera, Inc.	45-5251240	0.04%
Tahoe Creations	94-3387430	0.13%
Target Point Consulting	68-0552158	0.58%
Team Core, LLC	83-0939982	0.21%
Tedesco Country Club	04-1895530	0.06%
Temecula Valley Winery Management, LLC + Other Entities	26-3667475	0.00%
Temkin Holdings, Inc.	20-3317807	0.37%
Terra Ferma Landscapes	94-3205179	0.07%
The Britt Law Group PC	82-3607993	0.19%
The Cherokee Group, LLC	62-1812445	0.13%
The Commons Club at The Brooks, Inc.	27-0396390	0.55%
The Howard Sloan Koller Group DBA Koller Search Partners	13-3530775	0.22%
The Medical Eye Center, PC	02-0444664	0.17%
The Parking REIT Inc.	47-3955882	0.11%
The Paws Clinic	27-3257737	0.12%
The Prism Group	26-3455614	0.00%
The Releaf Center	82-1557903	0.24%
The Whole Brain Group	20-8084198	0.09%
THOUSAND CRANES	82-0568832	0.22%
Timeless WCP, LLC	27-4546193	0.03%
Timothy Rose Contracting	65-0284242	0.03%

(a) Name of participating employer	(b) EIN	(c) Percent of total contributions
Titan Consultants & Engineers, LLC	46-3700237	0.02%
Total Media	94-3279731	0.04%
Townsend Search Group, LLC	34-2035710	0.04%
TRANSPORTATION COLLABORATIVE INC.	26-0491075	0.08%
Transportation Risk Management Inc with Macomb Benefits LLC	20-1272289	0.44%
Traveling Medical Services, P.C.	38-3292586	0.00%
Treehouse Island, Inc	37-1648659	0.42%
Trinity Management Group, Inc.	38-3452088	0.06%
Tropical Twisters Gymnastics Inc	76-0812378	0.07%
TTF, LLC	45-3696849	0.08%
Turnkey DOT, LLC	47-5432290	0.18%
Twins Smoke Shop, Inc.	02-0499466	0.18%
Two Guys Smoke Shop of NH, Inc.	02-0492362	0.14%
Twomarkines Kitchen, LLC dba White Mountain Cider Co.	20-2857633	0.00%
UnbeatableSale.com Inc	35-2239295	0.07%
Unified Office, Inc.	45-2043147	0.01%
United American Industries, Inc. DBA Wisdom Natural Brands	86-0505744	2.05%
United Way of Kern County	95-2274560	0.00%
Valleywise Health Foundation	86-0777567	0.14%
Van Conant, Inc. dba Hardwood Floor Company	41-2027718	0.49%
VanComm, LLC	45-2782564	0.00%
Vantage Wealth Advisors	41-1530632	0.14%
VanTiem Insurance & Financial Services	45-2498933	0.30%
Vensure - National PEO - Suspense Plan	37-0510197	0.00%
Vensure - Plan Expense Reimbursement Acct	37-5556655	0.00%
Vensure - Suspense Plan	37-5566552	0.00%
Vensure ? Human Capital Plan Expense Reimbursement Acct	22-6544565	0.00%
Vensure ? National PEO Plan Expense Reimbursement Acct	37-1555222	0.00%
Vensure ? Worklogic Plan Expense Reimbursement Acct	37-1500085	0.00%
Vensure Employer Services, Inc.	37-1508469	0.00%
Vensure Employer Services, Inc.	37-1508462	15.81%
Vensure Employer Services, Inc.-N	37-1508470	0.00%
Versatile Mortgage LLC	38-3675081	0.45%
VINO.COM, LLC dba Total Beverage Solution	43-1917285	0.48%
Vintory, LLC	61-1948820	0.11%
Vision Source Atascocita	20-2455364	0.31%
VLS dba Errand Express	65-2964318	0.23%
Walker Property Services, LLC	33-1166411	0.57%
Walton Global Holdings, Ltd.	98-0458822	1.29%
Wealth Insight Partners, LLC	84-2701512	0.48%
WELLEMENTS LLC	20-1748399	0.01%
Wendell's Furniture, Inc.	20-0467577	0.01%
West Kern Adult Education Network	82-2894362	0.12%
West Michigan Tourist Association	38-1160980	0.19%
Westford Collision LLC	45-1536660	0.02%
Wheelhouse Growers, LLC	83-2236244	0.01%
Whiteside Manor, Inc.	23-7126416	0.81%
Wilson Glass	20-3541803	0.20%
Winning Futures	20-2263860	0.37%
Wireless World LLC	02-0518894	0.00%
Wood Tech, Inc.	38-2469136	0.01%
Worklogic EPS	82-2383193	0.09%
Worldwide Trophy Adventures, LLC	38-3937883	0.35%
WWP Strategies	26-1492001	0.40%
Wyant, Inc.	32-0046555	0.20%
XED Beverages, Inc.	83-4057089	0.05%
York Employment Services, Inc.	33-0928278	0.00%
Youn Plastic Surgery, PLLC	54-2133486	0.65%
Zuendt Corporation	47-2762603	0.00%

SCHEDULE H, LINE 4i - SCHEDULE OF ASSETS (HELD AT THE END OF THE YEAR).

VENSURE EMPLOYER SERVICES, INC. 401(K) PROFIT SHARING PLAN

PLAN # 333

EIN # 75-2724979

(a)	(b) Identity of issuer, borrower, lessor or similar party	(c) Description of investment including maturity date, rate of interest, collateral, par or maturity value	(d) Cost	(e) Current value
	BlackRock	BKTSX - BlackRock Total Stock Market Index K		704,309
	Bespoke	BSPKX - Bespoke		9,615
	BlackRock	BTMKX - iShares MSCI EAFE International Index Fund Class K		24,389,988
	Fidelity	FPADX - Fidelity Emerging Markets Index		761,874
	Fidelity	FXAIX - Fidelity 500 Index Fund		11,726,354
	Fidelity	FXNAX - Fidelity US Bond Index Fund		58,277,555
	Ivy	IYMIX - Ivy Mid Cap Growth Fund Class I		1,307,765
	JPMorgan	JDEUX - JPMorgan Us Research Enhanced Equity R6		1,311,126
	MFS	MVCKX - MFS Mid Cap Value Fund CI R5		85,654
	Oppenheimer Funds	OGMIX - Oppenheimer Gold & Special Minerals I		1,132,543
	Principal	PLCGX - Principal Large Cap Growth I R6		6,361,054
	T. Rowe Price	PRNEX - T. Rowe Price New Era		2,692
	American Funds	RERGX - American Funds EuroPacific Growth Fund Class R6		6,791,677
	BlackRock	SHSSX - BlackRock Health Sciences Ops I		1,964,944
	Vanguard	VAIPX - Vanguard Inflation-Protected Securities Fund Admiral Shares		495,695
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Fund Admiral Shares		1,388,862
	Vanguard	VBIRX - Vanguard Short-Term Bond Index Fund Admiral Shares		771,824
	Vanguard	VFFVX - Vanguard Target Retirement 2055 Fund Investor Shares		940,006
	Vanguard	VFIFX - Vanguard Target Retirement 2050 Fund Investor Shares		865,939
	Vanguard	VFORX - Vanguard Target Retirement 2040 Fund Investor Shares		2,469,303
	Vanguard	VGSLX - Vanguard Real Estate Index Fund Admiral Shares		648,133
	Vanguard	VIMAX - Vanguard Mid-Cap Index Fund Admiral Shares		4,005,773
	Vanguard	VINAX - Vanguard Industrials Index Fund Admiral Shares		2,402,900
	Vanguard	VITAX - Vanguard Information Technology Index Fund Admiral Shares		7,960,445
	Vanguard	VITSX - Vanguard Total Stock Market Index Inst.		23,585,968
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		156,738
	Vanguard	VMFXX - Vanguard Federal Money Market Fund Investor Shares		14,161,994
	Vanguard	VMMXX - Vanguard Money Market Prime		7
	Vanguard	VSGAX - Vanguard Small-Cap Growth Index Fund Admiral Shares		2,457,600
	Vanguard	VSGDX - Vanguard Short-Term Federal Fund Admiral Shares		13,385,646
	Vanguard	VSIAX - Vanguard Small Cap Value Index Fund Admiral Shares		271,877
	Vanguard	VSMAX - Vanguard Small-Cap Index Fund Admiral Shares		2,114,115
	Vanguard	VTABX - Vanguard Total International Bond Index Fund Admiral Shares		161,575
	Vanguard	VTAPX - Vanguard Short-Term Inflation-Protected Securities Index Fund Admiral Shares		3,266,056
	Vanguard	VTHRXX - Vanguard Target Retirement 2030		3,642,781
	Vanguard	VTINX - Vanguard Target Retirement Income Fund Investor Class		294,444
	Vanguard	VTIVX - Vanguard Target Retirement 2045		2,398,002
	Vanguard	VTSAIX - Vanguard Total Stock Market Index Fund Admiral Shares		87,797,958
	Vanguard	VTTHX - Vanguard Target Retirement 2035 Fund Investor Shares		3,233,669
	Vanguard	VTTSX - Vanguard Target Retirement 2060 Fund Investor Shares		310,196
	Vanguard	VTTVX - Vanguard Target Retirement 2025		2,727,272
	Vanguard	VTWNX - Vanguard Target Retirement 2020		830,972
	Vanguard	VTXVX - Vanguard Target Retirement 2015		64,051
	Vanguard	VVIAX - Vanguard Value Index Fund Admiral Shares		1,225,114
	Vanguard	VWEAX - Vanguard High-Yield Corporate Fund Admiral Shares		405,210
	Loan	4.25% - 9.25%		2,817,334.10