

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 2021 This Form is Open to Public Inspection
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Part I	Annual Report Identification Information
For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</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)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here.	☐

Part II	Basic Plan Information—enter all requested information										
1a Name of plan <u>LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;">1b Three-digit plan number (PN) ▶</td> <td style="width: 20%; text-align: center;"><u>338</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>07/01/1997</u></td> </tr> <tr> <td colspan="2">2b Employer Identification Number (EIN) <u>59-2345956</u></td> </tr> <tr> <td colspan="2">2c Plan Sponsor's telephone number <u>800-888-0472</u></td> </tr> <tr> <td colspan="2">2d Business code (see instructions) <u>561300</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>338</u>	1c Effective date of plan <u>07/01/1997</u>		2b Employer Identification Number (EIN) <u>59-2345956</u>		2c Plan Sponsor's telephone number <u>800-888-0472</u>		2d Business code (see instructions) <u>561300</u>	
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2c Plan Sponsor's telephone number <u>800-888-0472</u>											
2d Business code (see instructions) <u>561300</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) <u>LANDRUM PROFESSIONAL EMPLOYER SERVICES, INC.</u> <u>219 E. GARDEN STREET, SUITE 500</u> <u>PENSACOLA, FL 32502</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.	10/17/2022	CHRISTY ARNOLD
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE	Filed with authorized/valid electronic signature.	10/17/2022	CHRISTY ARNOLD
	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.

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 4978
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). a(1) Total number of active participants at the beginning of the plan year..... a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	6a(1) 3959 6a(2) 3147 6b 0 6c 901 6d 4048 6e 0 6f 4048 6g 2318 6h 882
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: 2E 2F 2G 2J 2K 2T 2R 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 2021 Form M-1 annual report. If the plan was not required to file the 2021 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
		2021
		This Form is Open to Public Inspection.

For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021		
A Name of plan LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶	338
C Plan sponsor's name as shown on line 2a of Form 5500 LANDRUM PROFESSIONAL EMPLOYER SERVICES, INC.	D Employer Identification Number (EIN) 59-2345956	

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	331931	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	INVESTMENT MGMT	140840	Yes ☐ No ☒	Yes ☐ No ☐		Yes ☐ No ☐

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

BKS

84-1921272

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26 51	ADVISORY CONSULTING	55193	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)

CARR RIGGS & INGRAM

72-1396621

(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	17250	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
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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

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 2021 This Form is Open to Public Inspection
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For calendar plan year 2021 or fiscal plan year beginning <u>01/01/2021</u> and ending <u>12/31/2021</u>		
A Name of plan <u>LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN</u>	B Three-digit plan number (PN) ►	<u>338</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>LANDRUM PROFESSIONAL EMPLOYER SERVICES, INC.</u>	D Employer Identification Number (EIN) <u>59-2345956</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)	332604	324683
(2) Participant contributions.....	1b(2)	179575	245448
(3) Other	1b(3)	11772	13156
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)	1541286	1311573
(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)	119580339	110793408
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)		
(15) Other.....	1c(15)	663011	519014

		(a) Beginning of Year	(b) End of Year
1d	Employer-related investments:		
(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	122308587 113207282
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	122308587 113207282

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.

		(a) Amount	(b) Total
Income			
a	Contributions:		
(1)	Received or receivable in cash from: (A) Employers	2a(1)(A)	4253843
	(B) Participants	2a(1)(B)	8785025
	(C) Others (including rollovers).....	2a(1)(C)	877395
(2)	Noncash contributions.....	2a(2)	
(3)	Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)	13916263
b	Earnings on investments:		
(1)	Interest:		
	(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	
	(B) U.S. Government securities	2b(1)(B)	
	(C) Corporate debt instruments	2b(1)(C)	
	(D) Loans (other than to participants)	2b(1)(D)	
	(E) Participant loans.....	2b(1)(E)	62272
	(F) Other	2b(1)(F)	0
	(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)	62272
(2)	Dividends: (A) Preferred stock.....	2b(2)(A)	
	(B) Common stock	2b(2)(B)	
	(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	3020334
	(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)	3020334
(3)	Rents	2b(3)	
(4)	Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	
	(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	
	(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)	0
(5)	Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	
	(B) Other	2b(5)(B)	
	(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)	0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		
(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)		12721387
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		29720256
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	9517644	
(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)		9517644
f Corrective distributions (see instructions).....	2f		43525
g Certain deemed distributions of participant loans (see instructions).....	2g		
h Interest expense.....	2h		
i Administrative expenses: (1) Professional fees.....	2i(1)	17250	
(2) Contract administrator fees.....	2i(2)	331373	
(3) Investment advisory and management fees.....	2i(3)	196032	
(4) Other.....	2i(4)		
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		544655
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		10105824
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		19614432
l Transfers of assets:			
(1) To this plan.....	2l(1)		4073530
(2) From this plan.....	2l(2)		32789267

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: CARR RIGGS & INGRAM

(2) EIN: 72-1396621

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l.

During the plan year:

a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.).....

	Yes	No	Amount
4a		X	

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

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

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

5b(1) Name of plan(s)	5b(2) EIN(s)	5b(3) PN(s)
ADP TOTALSOURCE RETIREMENT SAVINGS PLAN	59-2452823	001
AFAXYS 401(K) PLAN	26-2550461	001
AMERICAN AIR SPECIALISTS OF MISSISSIPPI 401(K) PLAN	20-8109530	002
COADVANTAGE CORPORATION RETIREMENT SAVINGS PLAN	27-3007025	333

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

	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)
LT TRUST COMPANY	56-2061506	001
PUCKETT OIL COMPANY, INC. 401(K) PLAN	59-2103360	001
SIGNUM 401(K) PLAN	57-1077604	001
STEVENSON KLOTZ, LLP 401(K) PROFIT SHARING PLAN AND TRUST	47-2751331	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)
STRATEGIC DELIVERY SOLUTIONS	46-2847300	001
UNITED WAY OF WEST FLORIDA INC 401K PROFIT SHARING PLAN & TRUST	59-0651076	001
ULLMAN EYE CONSULTANTS RETIREMENT SAVINGS PLAN	58-3681863	002
TRINITY PRESBYTERIAN CHURCH RETIREMENT SAVINGS PLAN	59-6032404	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)
BONAVENTURE PROPERTY MANAGEMENT SERVICES, LLC RSP	54-1971779	001
PROPEL HR 401(K) PLAN	20-5888849	333

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

SCHEDULE R (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500.	OMB No. 1210-0110 2021 This Form is Open to Public Inspection.
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For calendar plan year 2021 or fiscal plan year beginning 01/01/2021 and ending 12/31/2021

A Name of plan LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN	B Three-digit plan number (PN) ▶ 338
C Plan sponsor's name as shown on line 2a of Form 5500 LANDRUM PROFESSIONAL EMPLOYER SERVICES, INC.	D Employer Identification Number (EIN) 59-2345956

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

Part III	Amendments
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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
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Part IV	ESOPs (see instructions). If this is not a plan described under section 409(a) or 4975(e)(7) of the Internal Revenue Code, skip this Part.
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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) 2021
v. 201209

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

a Name of contributing employer

b EIN

c Dollar amount contributed by employer

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

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

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

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

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

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

14a

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

14b

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

14c

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

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

15a

b The corresponding number for the second preceding plan year

15b

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

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

16a

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

16b

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

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

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

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

a Enter the percentage of plan assets held as:

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

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

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

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

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

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

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

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

☐ Yes.

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

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

☐ No. Other. Provide explanation _____



Landrum Professional Employer Services Retirement Savings Plan

FINANCIAL STATEMENTS

December 31, 2021 and 2020

**REPORT**

Independent Auditors' Reports	1
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FINANCIAL STATEMENTS

Statements of Net Assets Available for Benefits	7
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Statement of Changes in Net Assets Available for Benefits	8
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Notes to Financial Statements	9
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SUPPLEMENTAL SCHEDULE

Schedule H, line 4i – Schedule of Assets (Held at End of Year)	18
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Note: Other schedules required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA) have been omitted because the conditions under which they are required are not present.

INDEPENDENT AUDITORS' REPORT

To the Participants and Administrator of
Landrum Professional Employer Services Retirement Savings Plan

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

We have performed an audit of the accompanying financial statements of Landrum Professional Employer Services Retirement Savings Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) [ERISA Section 103(a)(3)(C) audit]. The financial statements comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

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

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2021, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

Opinion

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

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

Basis for Opinion

We conducted our audit in accordance with auditing standards generally accepted in the United States of America. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Landrum Professional Employer Services Retirement Savings Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with accounting principles generally accepted in the United States of America, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an Auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with generally accepted auditing standards will always detect a material misstatement when it exists. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control. Misstatements are considered material if there is a substantial likelihood that, individually or in the aggregate, they would influence the judgment made by a reasonable user based on the financial statements.

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

- Exercise professional judgment and maintain professional skepticism throughout the audit.

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Landrum Professional Employer Services Retirement Savings Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about Landrum Professional Employer Services Retirement Savings Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Supplemental Schedule Required by ERISA

The supplemental schedule of Schedule H, line 4i – Schedule of Assets (Held at End of Year) for the year ended December 31, 2021 is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion—

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

Carr, Riggs & Ingram, L.L.C.

CARR, RIGGS & INGRAM, LLC

Miramar Beach, Florida
October 14, 2022

INDEPENDENT AUDITORS' REPORT

To the Participants and Administrator of
Landrum Professional Employer Services Retirement Savings Plan

We were engaged to audit the accompanying statement of net assets available for benefits of Landrum Professional Employer Services Retirement Savings Plan as of December 31, 2020, and the related notes to the financial statement.

Management's Responsibility for the 2020 Financial Statement

Management is responsible for the preparation and fair presentation of this 2020 financial statement 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 the 2020 financial statement that is free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express an opinion on the 2020 financial statement based on conducting the audit in accordance with auditing standards generally accepted in the United States of America. Because of the matter described in the Basis for Disclaimer of Opinion paragraph, however, we were not able to obtain sufficient appropriate audit evidence to provide a basis for an audit opinion.

Basis for Disclaimer of Opinion

As permitted by 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974, the plan administrator instructed us not to perform, and we did not perform, any auditing procedures with respect to the information summarized in Note 3, which was certified by Mid Atlantic Trust Company, the trustee of the Plan, except for comparing such information with the related information included in the 2020 financial statement. We have been informed by the plan administrator that the trustee holds the Plan's investment assets and executes investment transactions. The plan administrator has obtained a certification from the trustee as of December 31, 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 on the 2020 financial statement. Accordingly, we do not express an opinion on the 2020 financial statement.

Report on Form and Content in Compliance With DOL Rules and Regulations for 2020 Financial Statement

The form and content of the information included in the 2020 financial statement, other than that derived from the information certified by the trustee, have been audited by us in accordance with auditing standards generally accepted in the United States of America and, in our opinion, are presented in compliance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974.

Carr, Riggs & Ingram, L.L.C.

CARR, RIGGS & INGRAM, LLC

Miramar Beach, Florida

October 14, 2022

Landrum Professional Employer Services Retirement Savings Plan
Statements of Net Assets Available for Benefits

<i>December 31,</i>	2021	2020
Assets		
Investments:		
Investments at fair value	\$ 110,793,408	\$ 119,580,338
Investments, self-directed brokerage accounts, at fair value	519,014	663,011
Total Investments	111,312,422	120,243,349
Receivables:		
Participant contribution	258,604	191,347
Employer contribution	324,683	332,605
Notes receivable from participants	1,311,573	1,541,286
Total receivables	1,894,860	2,065,238
Net assets available for benefits	\$ 113,207,282	\$ 122,308,587

The accompanying notes are an integral part of these financial statements.

Landrum Professional Employer Services Retirement Savings Plan

Statement of Changes in Net Assets Available for Benefits

For the year ended December 31,

2021

Additions

Investment income	
Interest and dividends	\$ 3,020,334
Net appreciation in value of investments	12,721,380
Total investment income	15,741,714

Interest income on notes receivable from participants	62,272
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Contributions	
Employer	4,253,842
Employee	8,785,024
Rollover	877,395
Total contributions	13,916,261

Total additions	29,720,247
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Deductions

Benefits paid to participants	9,561,160
Administrative expenses	544,655

Total deductions	10,105,815
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Net increase	19,614,432
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Transfers from Other Plans	4,073,530
Transfers to Other Plans	(32,789,267)

Net Assets Available for Benefits

Beginning of year	122,308,587
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End of year	\$ 113,207,282
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The accompanying notes are an integral part of these financial statements.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 1: DESCRIPTION OF THE PLAN

The following description of the Landrum Professional Employer Services Retirement Savings Plan (the “Plan”) provides only general information. Refer to Plan documents for a more complete description of Plan provisions.

General

The Plan is a defined contribution plan established for the benefit of the employees of Landrum Professional Employer Services, Inc. (the “Company”) and Landrum Companies, Inc., a related party, who may be eligible to participate upon commencement of employment. The Plan qualifies as a “multiple employer” plan as described in Section 413(c) of the Internal Revenue Code. The Plan is subject to the provisions of the Department of Labor’s (DOL’s) Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974 (ERISA). The Board of Directors is responsible for oversight of the Plan.

Some administrative functions are performed by employees of the Company. No compensation is remitted to the Company for these services.

Plan assets are held and managed by Mid Atlantic Trust Company (MATC), which invests contributions and Plan earnings, makes investment transactions as directed by the Investment Committee and provides certain recordkeeping services. Slavic Integrated Administration acts as the third-party administrator for the Plan, which performs certain administration and annual ERISA compliance testing.

Eligibility

All employees who are 21 years of age, work for a participating client, and fulfill the participating client's service requirement are eligible to participate in the Plan. Participating clients may select from the following service requirements: (1) one year of service (1,000 hours of service in a consecutive twelve month period), (2) one to eleven months of service or (3) immediate eligibility. Additionally, a participating client may elect to waive the age and service eligibility requirements for individuals who are performing services for a participating client as of a specified date or may elect an age requirement less than 21 years of age. Entry into the Plan occurs based on the provisions of the participating client's agreement.

Employees are eligible for an allocation of the participating client's contribution, if any, as specified in the participating client's agreement.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 1: DESCRIPTION OF THE PLAN (Continued)

Contributions

Each year, participants may contribute a percentage of their pay into an elective deferral account on a pre-tax or post-tax basis, subject to the limitations specified in the Internal Revenue Code (IRC). Participants may also roll over amounts representing distributions from other qualified defined benefit or contribution plans. Participants are permitted to contribute catch-up contributions in accordance with IRC requirements. Participating clients adopt one of several available options ranging from no participation to mandatory match based on the participant's compensation for the plan year. Participants direct the investment of their contributions into various investment options offered by the Plan.

During the year ended December 31, 2021, certain participating clients made profit sharing contributions totaling \$324,683.

Participant Accounts

Each participant's account is credited with the participant's contributions and an allocation of (a) the participating client's contribution and (b) Plan earnings. Participant accounts are charged with an allocation of administrative expenses that are paid by the Plan. Allocations are based on participant earnings, account balances, or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the vested portion of the participant's account.

Vesting

Participants are fully vested with respect to their employee contributions plus actual earnings thereon. Vesting of participating client contributions is based on years of service beginning with the participants' day of hire. The standard vesting schedule is as follows:

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

Based upon the agreements of mergers with other plans, the vesting schedule may vary among participating clients. Participants associated with clients with safe harbor provisions have immediate vesting.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 1: DESCRIPTION OF THE PLAN (Continued)

A year of service is defined as a Plan year in which a participant is credited with 1,000 hours of service. A participant is fully vested in all of his or her account under the Plan upon reaching the Plan's normal retirement age, disability, or death.

Notes Receivable from Participants

Participants may borrow a minimum of \$1,000 up to a maximum of 50% of their vested account balance, not to exceed \$50,000. Participants are charged with out-of-pocket costs associated with the loan. The loans are secured by the balance in the participant's account and bear interest at rates ranging from 4.25% to 6.00%, which are commensurate with local prevailing rates as determined by the Plan administrator. Loans are payable through payroll deductions and must be paid within five years except for primary home loans which must be paid within fifteen years.

Benefit Payments

Distributions to participants or their beneficiaries take place upon the employee's separation of service, retirement, permanent and total disability, or death. Distributions equal to the value of the participant's vested interest in his or her account are made in a lump sum amount. A participant may also request a distribution from their elective deferral account in the case of a hardship as outlined in the Plan provisions.

Hardship Withdrawals

As permitted by the Internal Revenue Code (IRC), a participant may request a financial hardship withdrawal if they experience a severe financial hardship. The participant must meet the condition that they cannot relieve the amount of the need by stopping the elective contributions to the Plan. The financial hardship withdrawal may not exceed the amount of the financial hardship or the value of the vested portion of the participant's balance, whichever is less.

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The accompanying financial statements have been prepared on the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP). The Financial Accounting Standards Board (FASB) provides authoritative guidance regarding U.S. GAAP through the Accounting Standards Codification (ASC) and related Accounting Standards Updates (ASUs).

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Use of Estimates

The preparation U.S GAAP financial statements requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosure of contingent assets and liabilities. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

Investments generally are reported at fair value, but may also be reported at contract value or net asset value (NAV). 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 4 for further discussion of fair value measurements.

The Plan determines its valuation policies utilizing information provided by the investment advisers, custodians and insurance company.

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

Notes Receivable from Participants

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of Benefits

Distributions to participants are recorded when paid.

Expenses

Expenses attributable to the general Plan administration were paid by the Plan and allocated among the accounts of all participants, in proportion to their account balances, unless paid by the Employer. During the year ended December 31, 2021, expenses of \$544,655 were paid by the Plan and allocated to participant accounts.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 2: SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Risks and Uncertainties

The Plan invests in various investment securities. Investment securities, in general, are exposed to various risks, such as interest rate, credit and overall market volatility. Due to the level of risk associated with certain investment securities, it is reasonably possible that changes in value of investment securities will occur in the near term and that these changes could materially affect participants' account balances and the amounts reported in the Plan's financial statements.

Subsequent Events

Management has evaluated subsequent events through the date that the financial statements were available to be issued, October 14, 2022 and determined there were no events that occurred that require disclosure. No subsequent events occurring after this date have been evaluated for inclusion in these financial statements.

NOTE 3: INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED)

Except for certain amounts described below, Mid Atlantic Trust Company ("Mid Atlantic") maintains all records of investment transactions and determines the valuation of the investment portfolio. The Plan Administrator has elected the method of compliance, as permitted by 29 CFR 2520.103-8 of the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

The following financial information included in the Plan's financial statements has been derived from information certified to be complete and accurate by the Custodian under such regulation:

- a) Substantially all investments, at fair value, included in the statements of net assets available for benefits at December 31, 2021 and 2020.
- b) Notes receivable from participants included in the statements of net assets available for benefits at December 31, 2021 and 2020.
- c) Investment income information credited to substantially all participants and interest income on notes receivable from participants included in the statement of changes in net assets available for benefits for the year ended December 31, 2021.
- d) Substantially all amounts included in Note 4, *Fair Value Measurements (Unaudited)*.
- e) Substantially all information included in the supplemental schedule of assets (held at end of year) as of December 31, 2021.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 3: INFORMATION CERTIFIED BY TRUSTEE (UNAUDITED) (Continued)

The Plan allows participants to direct their investments using a separate brokerage account. These participant accounts are outside of the custodian arrangement with Mid Atlantic; therefore, the balances and activities are not included in the certification described above. The following amounts were not certified:

- a) Balances in the participant self-directed brokerage accounts at December 31, 2021 and 2020.
- b) Investment income credited to the participant self-directed brokerage account investments for the year ended December 31, 2021.
- c) Certain amounts included in Note 4, *Fair Value Measurements (Unaudited)*.
- d) Certain information included in the supplemental schedule of assets (held at end of year) as of December 31, 2021.

NOTE 4: FAIR VALUE MEASUREMENTS (UNAUDITED)

Fair value is the exchange price that would be received for an asset or paid to transfer a liability (exit price) in the principal or most advantageous market for the asset or liability in an orderly transaction between market participants on the measurement date. There are three levels of inputs that may be used to measure fair values:

Level 1: Quoted prices (unadjusted) for identical assets or liabilities in active markets that the entity has the ability to access as of the measurement date.

Level 2: Significant other observable inputs other than Level 1 prices, such as:

- 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; or
 - can be corroborated by observable market data.

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

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

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

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 4: FAIR VALUE MEASUREMENTS (UNAUDITED) (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021 and 2020.

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 SEC. These funds are required to publish their daily NAV and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

Self-directed brokerage accounts: These accounts include mutual funds, common stocks and exchange-traded products. They are valued at the daily closing price reported on the active market on which each individual security is traded.

Money market mutual funds: Valued based on NAV per share or unit as a practical expedient as reported by the fund manager. Accordingly, these NAV-based investments have been excluded from the fair value hierarchy leveling.

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

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value as of December 31, 2021 and 2020:

Description	Quoted Prices in Active Markets for Identical Assets Level 1	Significant Other Observable Inputs Level 2	Significant Unobservable Inputs Level 3	Total
December 31, 2021				
Mutual funds	\$ 110,793,408	\$ -	\$ -	\$ 110,793,408
Self-directed brokerage accounts	434,455	-	-	434,455
	\$ 111,227,863	\$ -	\$ -	111,227,863
Money market mutual funds**				84,559
Total investments at fair value				\$ 111,312,422

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 4: FAIR VALUE MEASUREMENTS (UNAUDITED) (Continued)

Description	Quoted Prices in Active Markets for Identical Assets Level 1	Significant Other Observable Inputs Level 2	Significant Unobservable Inputs Level 3	Total
December 31, 2020				
Mutual funds	\$ 119,580,338	\$ -	\$ -	\$ 119,580,338
Self-directed brokerage accounts	378,123	-	-	378,123
	\$ 119,958,461	\$ -	\$ -	119,958,461
Money market mutual funds**				284,888
Total investments at fair value				\$ 120,243,349

**Held in self-directed brokerage accounts

Fair Value of Investments that Calculate Net Asset Value

The following table summarizes information related to the money market mutual funds measured at fair value based on NAV per share as of December 31, 2021 and 2020, respectively. The money market mutual funds are maintained by investment companies and hold investments in accordance with a stated set of fund objectives.

Year-End	Fair Value	Unfunded Commitments	Redemption Frequency (if currently eligible)	Redemption Notice Period
December 31, 2021	\$ 84,559	\$ -	Daily	N/A
December 31, 2020	\$ 284,888	\$ -	Daily	N/A

NOTE 5: TAX STATUS

The IRS has determined and informed the Company in a letter dated August 28, 2013 that its plan and related trust are designed in accordance with applicable sections of the IRC. Management believes that the Plan has been designed and is being operated in such a way as to be qualified under Section 401 of the IRC.

Tax positions are recognized only if it is "more likely than not" that the tax position be sustained in a tax examination, with a tax examination being presumed to occur. The amount recognized is the largest amount that is greater than 50% likely of being realized on examination. For tax positions not meeting the "more likely than not" test, no tax position is recorded. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

Landrum Professional Employer Services Retirement Savings Plan

Notes to Financial Statements

NOTE 6: RELATED PARTY AND PARTY IN INTEREST TRANSACTIONS

Slavic Integrated Administration (“Slavic”) is the third-party administrator for the Plan and, therefore, certain administrative services qualify as party in interest transactions. During the year ended December 31, 2021, Slavic received approximately \$473,000 from the Plan for administrative services.

NOTE 7: PLAN TERMINATION

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

NOTE 8: TRANSFERS TO AND FROM THE PLAN

In 2021, the assets of the participants that are employed by Niceville Refrigeration and Air Inc.; Kudulis, Reisinger, and Price LLC; Butler Auto Recycling, Inc.; and others were transferred to the Plan as the result of mergers into the Plan. The transfer in amounts totaled \$4,073,530.

In addition, in 2021, the assets of the former Plan participants that were employed by Ullman Eye Consultants; Bonaventure Property Management; Afaxys Inc.; and others (former participating employers) were transferred from the Plan. The transfer out amounts totaled \$32,789,267.

Supplemental Schedule

Landrum Professional Employer Services Retirement Savings Plan
EIN #59-2345956 Plan #338
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of Investment	(d) Cost	(e) Current Value
	American Funds	American Funds Capital World Bond R6	**	\$ 204,063
	American Funds	American Funds Capital World G & I R6	**	1,677,453
	American Funds	American Funds EuroPacific R6	**	6,590,876
	American Funds	American Funds Washington Mutual R6	**	2,990,823
	Dimensional Fund Advisors	DFA US Targeted Port	**	358,491
	Fidelity Investments	Fidelity Advisor Technology I	**	7,772
	Fidelity Investments	Fidelity SDB	**	519,014
	Fidelity Investments	Fidelity Select Health Care	**	1,587,444
	Fidelity Investments	Fidelity Advisor Technology Z	**	3,030,779
	Franklin Templeton Investments	Franklin Utilities Advisor Class	**	474,010
	Gabelli Money Market Funds	Gabelli US Treasury Money Market	**	4,112,179
	MFS	MFS Growth Fund R6	**	4,163,740
	Principal Funds	Principal Investors High Yield II	**	442,750
	Principal Funds	Principal Mid Cap Blend	**	2,717,177
	Principal Funds	Principal Mid Cap R6	**	61,911
	Vanguard	Vanguard Energy Index Admiral	**	220,256
	Vanguard	Vanguard European Stock Index Admiral	**	72,643
	Vanguard	Vanguard Federal Money Market	**	6,848,595
	Vanguard	Vanguard Industrial Index Admiral	**	2,686,296
	Vanguard	Vanguard Inflation Protected Securities	**	993,497
	Vanguard	Vanguard Information Technology Index Ad	**	4,267,964
	Vanguard	Vanguard Intermediate-Term Bond Index Ad	**	1,576,384
	Vanguard	Vanguard Materials Index Adm	**	525,885
	Vanguard	Vanguard Mid Cap Index Admiral	**	2,288,113
	Vanguard	Vanguard REIT Index Admiral	**	726,102
	Vanguard	Vanguard Short-Term Federal Admiral	**	15,362,778
	Vanguard	Vanguard Small Cap Growth Index Adm	**	2,529,155
	Vanguard	Vanguard Small Cap Index Admiral	**	828,843
	Vanguard	Vanguard Target Retirement 2015	**	3,734
	Vanguard	Vanguard Target Retirement 2020	**	9,342
	Vanguard	Vanguard Target Retirement 2025	**	78,741
	Vanguard	Vanguard Target Retirement 2030	**	92,637
	Vanguard	Vanguard Target Retirement 2035	**	134,959
	Vanguard	Vanguard Target Retirement 2040	**	102,764
	Vanguard	Vanguard Target Retirement 2045	**	54,415
	Vanguard	Vanguard Target Retirement 2050	**	359,158
	Vanguard	Vanguard Target Retirement 2055	**	22,840
	Vanguard	Vanguard Target Retirement 2060	**	12,265
	Vanguard	Vanguard Target Retirement 2065 Inv	**	15,152
	Vanguard	Vanguard Target Retirement Income	**	3,613

Landrum Professional Employer Services Retirement Savings Plan
EIN #59-2345956 Plan #338
Schedule H, line 4i - Schedule of Assets (Held at End of Year)
December 31, 2021

(a)	(b) Identity of issue, borrower, lessor, or similar party	(c) Description of Investment	(d) Cost	(e) Current Value
	Vanguard	Vanguard Institutional Target Retirement 2015	**	17,162
	Vanguard	Vanguard Institutional Target Retirement 2020	**	134,913
	Vanguard	Vanguard Institutional Target Retirement 2025	**	553,006
	Vanguard	Vanguard Institutional Target Retirement 2030	**	1,065,094
	Vanguard	Vanguard Institutional Target Retirement 2035	**	1,163,568
	Vanguard	Vanguard Institutional Target Retirement 2040	**	1,135,189
	Vanguard	Vanguard Institutional Target Retirement 2045	**	180,002
	Vanguard	Vanguard Institutional Target Retirement 2050	**	623,529
	Vanguard	Vanguard Institutional Target Retirement 2055	**	47,202
	Vanguard	Vanguard Institutional Target Retirement 2060	**	53,257
	Vanguard	Vanguard Institutional Target Retirement 2065	**	103,594
	Vanguard	Vanguard Total Int'l Stock Index Admiral	**	1,158,659
	Vanguard	Vanguard Total Stock Market Index Admiral	**	35,738,897
	Vanguard	Vanguard Treasury Money Market	**	1,897
	Vanguard	Vanguard Windsor Fund Admiral	**	93
	Victory	Victory Sycamore Established Value I	**	581,747
		Total investments		111,312,422
	* Notes receivable from participants	Interest rates from 4.25% to 6.00%	**	1,311,573
		Total		\$ 112,623,995

* Represents a party-in-interest

** Cost not required for participant directed.

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

LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN

PLAN # 338

EIN # 59-2345956

(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
	American Funds	RCWGX - American Funds Capital World Bond R6		204,063
	American Funds	RWIGX - American Funds Capital World G & I R6		1,677,453
	American Funds	RWMGX - American Funds Washington Mutual R6		2,990,823
	American Funds	RERGX - American Funds EuroPacific Growth Fund Class R6		6,590,862
	Dimensional Fund Advisors	DDFVX - DFA US Targeted Port		358,491
	Fidelity	FATIX - Fidelity Advisor Technology		7,771
	Fidelity	FISDB - Fidelity Self-Directed Brokerage Account		519,014
	Fidelity	FSPHX - Fidelity Select Health Care		1,587,444
	Fidelity	FIKHX - Fidelity Advisor Technology Fund Class Z		3,030,777
	Franklin/Templeton	FRUAX - Franklin Utilities Advisor Class		474,010
	Gabelli Funds/Ssga	GABXX - Gabelli Us Treasury Money Market		4,112,179
	MFS	MFEHX - MFS Growth R3		4,163,738
	Principal	PMAQX - Principal MidCap R6		61,910
	Principal	PHYFX - Principal High Yield R6		442,750
	Principal	PCBIX - Principal Mid Cap Blend		2,717,177
	Vanguard	VWNEX - Vanguard Windsor Fund Admiral Shares		106
	Vanguard	VITRX - Vanguard Target Retirement Income Instl		795
	Vanguard	VUSXX - Vanguard Treasury Money Market		1,897
	Vanguard	VTINX - Vanguard Target Retirement Income Fund Investor Class		2,818
	Vanguard	VTXVX - Vanguard Target Retirement 2015		3,734
	Vanguard	VTWNX - Vanguard Target Retirement 2020		9,343
	Vanguard	VTTSX - Vanguard Target Retirement 2060 Fund Investor Shares		12,265
	Vanguard	VLXVX - Vanguard Target Retirement 2065 Inv		15,152
	Vanguard	VITVX - Vanguard Target Retirement 2015 Instl		17,162
	Vanguard	VFFVX - Vanguard Target Retirement 2055 Fund Investor Shares		22,840
	Vanguard	VIVLX - Vanguard Target Retirement 2055 Instl		47,202
	Vanguard	VILVX - Vanguard Target Retirement 2060 Inst		53,257
	Vanguard	VTIVX - Vanguard Target Retirement 2045		54,415
	Vanguard	VEUSX - Vanguard European Stock Index Admiral		72,642
	Vanguard	VTTVX - Vanguard Target Retirement 2025		78,741
	Vanguard	VTHRX - Vanguard Target Retirement 2030		92,637
	Vanguard	VFORX - Vanguard Target Retirement 2040 Fund Investor Shares		102,765
	Vanguard	VSXFX - Vanguard Target Retirement 2065 Instl		103,594
	Vanguard	VITWX - Vanguard Target Retirement 2020 Instl		134,913
	Vanguard	VTTX - Vanguard Target Retirement 2035 Fund Investor Shares		134,959
	Vanguard	VITLX - Vanguard Target Retirement 2045 Instl		180,180
	Vanguard	VENAX - Vanguard Energy Index Admiral		220,255
	Vanguard	VFIFX - Vanguard Target Retirement 2050 Fund Investor Shares		359,158
	Vanguard	VMIAX - Vanguard Materials Index Adm		525,884
	Vanguard	VRIVX - Vanguard Target Retirement 2025 Instl		553,006
	Vanguard	VTRLX - Vanguard Target Retirement 2050 Instl		623,529
	Vanguard	VGSLX - Vanguard Real Estate Index Fund Admiral Shares		726,102
	Vanguard	VSMAX - Vanguard Small-Cap Index Fund Admiral Shares		828,842
	Vanguard	VAIPX - Vanguard Inflation-Protected Securities Fund Admiral Shares		993,497
	Vanguard	VTTWX - Vanguard Target Retirement 2030 Instl		1,065,094
	Vanguard	VIRSX - Vanguard Target Retirement 2040-Instl		1,135,189
	Vanguard	VTIAX - Vanguard Total International Stock Index Fund Admiral Shares		1,158,659
	Vanguard	VITFX - Vanguard Target Retirement 2035 Instl		1,163,568
	Vanguard	VBILX - Vanguard Intermediate-Term Bond Index Fund Admiral Shares		1,576,384
	Vanguard	VIMAX - Vanguard Mid-Cap Index Fund Admiral Shares		2,288,112
	Vanguard	VSGAX - Vanguard Small-Cap Growth Index Fund Admiral Shares		2,529,155
	Vanguard	VINAX - Vanguard Industrials Index Fund Admiral Shares		2,686,289
	Vanguard	VITAX - Vanguard Information Technology Index Fund Admiral Shares		4,267,930
	Vanguard	VMFXX - Vanguard Federal Money Market Fund Investor Shares		6,848,621
	Vanguard	VSGDX - Vanguard Short-Term Federal Fund Admiral Shares		15,362,760
	Vanguard	VITSX - Vanguard Total Stock Market Index Inst.		35,738,761
	Victory	VEVYX - Victory Sycamore Established Value Y		581,747
	Participant Loans	4.25% to 6.50%		1,311,573

Multiple-Employer Plan Participating Employer Information

LANDRUM PROFESSIONAL EMPLOYER SERVICES RETIREMENT SAVINGS PLAN		EIN #	59-2345956
(a) Name of participating employer	(b) EIN	(c) Balance at the end of the year	(d) Percent of total contributions
22nd State Bank	63-0071230	1,780,676	2%
30A Escapes, LLC	82-5368208	-	0%
A.D. Martin Commercial Insurance Services	22-3074814	73,412	0%
Aaron B. Stein, MD, PLLC dba The Pain Management Group	26-4219590	306,708	1%
ABHT Inc.	20-0114506	21,848	0%
Adcomm, Inc & Co-Adopting Companies	20-4046911	428,547	0%
Adsync Technologies, Inc.	20-1431567	165,886	0%
Advanced Computer Technologies, LLC	63-1142085	523,186	1%
Advanced Integration Systems, Inc.	81-2821190	17,518	0%
Advanced Mailing Systems	35-2516783	195,404	0%
Advanced Mailing Systems, Inc.	56-1772348	47,129	0%
Afaxys, Inc.	26-2550461	-	0%
Ambulatory Strategies, Inc.	59-3053634	231,792	1%
American Air Specialists of Mississippi, Inc.	20-8109530	-	0%
American Metal Solutions, Inc.	26-2866323	1,072,357	0%
Andrews Research & Education Foundation	46-5182138	168,951	0%
Anita S. Westafer, M.D., P.A.	59-2749645	15,431	0%
Appalachian Development Corporation	57-0735286	184,116	0%
ARC of Santa Rosa, Inc.	59-1862936	2,222	0%
ARCO	59-2110489	98,132	0%
ARCO Marine, Inc.	83-4659254	-	0%
Arte Ditta Inc dba Contract Resources	59-3030197	134,552	0%
AssureCo, LLC	71-0896394	1,079,600	1%
Atlantic-AE, LLC	85-0850109	102,288	0%
Autumn Beck Blackledge PLLC	47-1737243	150,747	0%
Aviation Systems of Northwest FL, Inc.	20-1431561	194,382	0%
Behavior Quest LLC	81-3732403	60,163	0%
Bell & Terrezza, OD, PA	82-4280638	2,132	0%
Benninks Refrigeration	59-1461046	57,074	0%
Better Business Bureau of Northwest Florida, Inc	59-2534888	39,309	0%
Big Brothers Big Sisters of NW FL	59-2996893	285,981	0%
Birdsall Marine Design, Inc.	65-0996449	453,490	0%
Bonaventure Property Management Services, LLC	54-1971779	0	3%
Brooks and Shorey Resorts, Inc. & Brooks, Shorey & Associates	59-3703529	1,296,752	1%
Bryan Builders, LLC	27-3722600	758,128	3%
Bullock Tice Associates Architects, Inc.	59-1467913	2,924,958	2%
Butler Auto Recycling, Inc.	59-1766765	594,016	1%
Cable Tie Express LLC	47-5582684	221,352	1%
Cantonment Family Medicine, PA	26-0548646	808,870	0%
CBHS IPA, LLC	47-1254788	-	0%
Center for Independent Living	59-2288751	0	0%
Central Panhandle Association of Realtors	59-1440029	232,144	0%
CFP Physicians Group, PL	59-3578884	1,644,282	2%
Chelsea Title Agency of Northwest Florida, Inc.	59-3335945	53,432	0%
Cherokee Kenworth, Inc.	57-0898947	257,917	0%
Cherokee Trail Veterinary Hospital/Lake Murray Animal Hospt.	56-2179162	-	0%
Childs Financial Services	65-1005980	256,596	0%
Chipola Regional Workforce Development Board, Inc.	59-3384516	70,560	0%
City Center Partnership, Inc.	57-1116130	1,608,474	1%
CMM Realty Inc.	57-0823240	126,845	0%
Coast 2 Coast Financial C.U., Inc.	59-0594973	188,530	0%
Coastal Association Law Group P.L.	27-1338291	76,611	0%
Coastal Care Nursing Associates, Inc.	42-1609443	109,398	0%
Cobb & Terrezza, O.D., PC	82-4246647	2,281	0%
Community Economic Development Assoc of Pensacola & Escambia	47-1954665	387,783	0%
Component Estimator	46-2650125	53,430	0%
Cypress Lakes Golf Club, Inc.	59-2150685	677,056	0%
DEFENSEWERX, Inc.	46-0684933	-	0%
DeStefano Engineering Group, PL	20-5783702	2,264	0%
Destin Gulf Gate Owner Assoc, Inc.	59-3187839	0	0%
District One Medical Examiner Support, Inc.	84-2673335	878,947	2%
Dr. Margarette Recalde, OD, Inc	82-0760284	43,575	0%
Easlan Management Co, Inc.	51-0846158	790,577	1%
EBI Management Group, Inc.	59-3732444	80,507	0%
Economic Development Corporation Sarasota County	20-1133191	176,911	0%
Edgewater Beach Resort Management, Inc.	59-2369578	-	0%
ELC of Northwest Florida, Inc.	02-0751749	838,887	1%
Emerald Coast Title Services	47-1356652	9,021	0%
Emerald Coast Title, Inc.	59-3739345	1,735,869	1%
Employer Services Assurance Corporation (ESAC)	52-1935343	1,856,368	1%
Escambia County Healthy Start Coalition	59-3151838	41,747	0%
Escambia County School Readiness Coalition, Inc.	59-3683227	350,858	0%
Excelsior Ambulance Service	45-0600978	80,432	0%
Executive Landscaping, Inc.	59-2659799	561,546	0%
Executive Properties of NW Florida, Inc.	59-2892028	2	0%
Family Heating & Air	90-0614609	246,739	0%

FDC Holdings, Inc., dba Pensacola Shipyard	59-0246255	91,917	0%
First Physicians Group, P.A.	59-3759388	491,687	0%
Florida Crown Workforce Board dba CareerSource Florida Crown	59-3531927	152,173	0%
Florida Optometric Association	59-0836623	181,490	0%
Florida Property & Casualty Insurance, LLC	27-2753047	290,459	0%
Florida's Great Northwest, Inc.	59-3685250	47,684	0%
Foundation Museum Support, LLC	59-6178237	1,904,626	1%
Four Winds Global, LLC	20-3077808	5,860	0%
G. Scott Williamson O.D., P.C.	58-2507896	732,462	0%
Garden Street Insurance, Inc.	46-4483070	119,038	0%
Gene JA Terrezza, OD & Associates, PA	59-2989621	9,872	0%
Gilmore Moving & Storage	59-0948405	-	0%
GNG Plumbing, Inc.	63-1022769	571,946	0%
Green Group Holdings, LLC	27-4874188	363,543	0%
GREG PIENKA, O.D., P.A.	65-0825869	614,572	0%
Growing Child Pediatrics, P.A.	59-3580965	12,019	0%
Gulf Blue Vacations, Inc.	45-2532367	1,803	0%
Gulf Breeze United Methodist Church, Inc.	59-0882915	577,291	0%
Gulf Coast Autopsy Physicians, P.A.	54-2143487	41,709	0%
Gulf Coast Community Bank	56-2308972	181,227	0%
Gulf Coast Specialty Products & Services Inc.	45-0956490	21,003	0%
Gulf Coast State College Foundation	59-1682455	12,209	0%
Gulf Region Radiation Centers, Inc.	26-0623827	85,083	0%
Habitat for Humanity of Jacksonville, Inc.	59-2880071	650,209	1%
Hawkins Insurance & Investments, LLC	26-1511849	145,976	0%
Health First Network, Inc.	59-2521606	668,195	0%
Herbafex Inc.	59-3193316	168,642	0%
Heriberto D. Ramos OD, PA dba Complete Family Eye Care	20-4020067	567	0%
HG Vision, LLC	85-2377604	80,202	1%
hrQ, Inc.	00-2345251	2,583,200	7%
Image Development Marketing Group	59-3648353	364,658	0%
Immunovaccine, Inc	98-0663226	-	0%
Integrity Property Management Services, Inc.	20-1860232	13,030	0%
Intelligent Retinal Imaging Systems, INC.	82-1875525	-	1%
Interventional Rehabilitation Center	59-3673361	24,723	0%
J. Rhodes Enterprises	81-0885524	23,956	0%
Jasper Eye care, Inc.	59-2419553	28,417	0%
Jeffrey Cooper O.D., P.C.	02-0613109	34,700	0%
Johnson & Lesley Construction Company, Inc.	58-2384056	116,840	0%
Joint Mission Essential Training Solutions, Inc.	45-2762479	109,079	0%
Junior League of Pensacola	59-6166684	270,257	0%
Kedrick Cerry, Inc.	46-2655180	2,820,774	1%
Kenny Strange Electric & Service Company, Inc.	82-4027307	260,390	0%
Kerrigan, Estess, Rankin & McLeod, LLP	59-1822583	4,588,938	0%
Knauer and Smithwick Ophthalmology Associates	02-0533580	121,061	0%
Kudulis, Reisinger, and Price LLC	46-1068820	700,457	0%
LaFayette State Bank	59-0549169	475,798	1%
Landrum Companies, Inc.	59-2345956	11,135,471	6%
LandrumHR SJR, Inc.	82-3523715	149,406	0%
LandrumHR Workforce Solutions, Inc.	59-1508876	272,479	0%
Laura B. McAuley, DDS	59-3737096	48,716	0%
Leda Printing, Inc.	59-2090404	1,440,666	1%
Liberty Electric Contractors	20-2562638	29,035	0%
Lighthouse Health Plan, LLC	82-3182832	734,024	1%
Low Country Home Oxygen	57-1057057	3,822	0%
Marina Management Corp.	59-3416408	280,437	0%
Market Research Insight, Inc.	52-2421607	399,340	0%
MCBC Medical Delivery Services LLC	85-1074019	-	0%
MCBC of Florida, Inc.	20-0207265	30,262	0%
McCall Capital, LLC	36-4510570	323,855	0%
McElhany Electric Co. Inc.	59-2462270	364,735	1%
Medi Weight Loss Clinic Pensacola	20-5660972	241,060	0%
Medical Professional Agency, Inc.	59-2555835	468	0%
Membership Services, Inc.	59-3599370	169,632	0%
Mid Carolina Steel & Recycling, Inc.	47-4785839	2,630,514	1%
Mitsui Bussan Logistics, Inc.	99-0300237	43,531	0%
Modality Systems, Inc.	45-3833630	302,191	1%
Montessori Early School	59-2098328	2,244,296	1%
National Standard Parts Associates, Inc.	59-1984545	8,486,780	3%
NHE, Inc.	57-0524509	1,699,390	5%
NICEVILLE REFRIGERATION AND AIR INC	59-3319996	2,618,177	3%
Nichefitness1 LLC	82-3489053	31,355	0%
North Florida Central Title	37-1574873	80,740	0%
Northstar Equipment Corp.	58-2275891	49,173	0%
Okaloosa Pain Consultants	20-0770577	229,995	0%
Paisley Park Operations, Inc.	84-2700901	70,743	0%
Palmetto Consulting of Columbia, LLC	32-0568310	3,195	0%
Palmetto Pain Management, LLC	57-1108629	-	0%
Panama City Rescue Mission, Inc.	59-1580961	75,880	0%
Paradigm Parachute & Defense	84-2756399	65,597	0%
Pathways For Change	90-0591724	17,257	0%
Pensacola Area Chamber Foundation	59-2297826	105,017	0%

Pensacola Area Chamber of Commerce	59-0190330	400,393	0%
Pensacola Guarantee Mortgage, Inc.	59-3702977	16,306	0%
Pensacola Hyperbaric Care Center	59-3399210	2,318	0%
Personal Insurance Federation of Florida	27-3582307	172,144	0%
Physicians' Care Network	59-3199460	32,450	0%
Plant Parents of Sarasota, Inc.	65-0552396	496,790	1%
Precision Eye Care, LLC	45-3200749	151,868	0%
Puckett Oil Company, Inc.	59-2103360	-	0%
Quality Urgent Care & Wellness, PC & Quality Primary Care	46-3272154	309,323	0%
Quintessential Brands North America LLC	83-3665252	727,861	1%
Raxis LLC	20-2752999	317,283	1%
Realstar Development Group, LLC	45-5062441	400,432	0%
Realstar Homes	46-5403702	623,839	3%
Rebuild NW FL	20-1920020	359,002	0%
Ronald McDonald House Charities of NWFL	59-2172279	165,719	0%
RSM Communities, LLC	83-3930116	76,708	0%
S&H Car Wash, Inc.	81-0677822	20,589	0%
Sanbur Corp dba. Signs In One Day	65-0280326	808,446	0%
Schmidt Music, Inc.	59-3436975	668,489	0%
Separation Systems, Inc.	59-3035944	1,493,159	1%
Serenity Now of NW FL	26-3411856	15,322	0%
SGT Signs Inc. dba Fastsigns	59-3037200	34,217	0%
Shore to Shore Insurance Agency, Inc. dba Shores Insurance	81-2912669	17,880	0%
SmartHouse Integration	20-5524968	95,728	0%
Soft Intelligence, Inc.	58-1900980	719,138	1%
Solid Design Fabricators, Inc.	20-0755069	10,862	0%
Solutia	59-5959599	189,606	0%
Southern Ventures of Okaloosa County, LLC	59-3348361	426,385	0%
St. Joe Resort Operations, LLC	45-4640111	3,552,524	9%
Stevenson Klotz, LLP	47-2751331	-	0%
Sulphuric Acid Trading Company, Inc.	59-3424337	1,486,188	2%
Surf & Sport, Inc. dba Islander's	59-2029738	223,637	0%
Surgical Specialists ASC	20-8066586	116,804	0%
Symbol Health Solutions, LLC	27-4504760	562,377	1%
Terry R. Richmond, DDS P.A.	59-1792595	32,640	0%
The Dial Firm	84-4425504	35,159	0%
The Fitts Company	57-1071326	1,973,553	1%
The Jim Owen Group	63-0643605	49,028	0%
The Surgery Center at Sacred Heart Medical Park	56-2315052	153,454	0%
The Surgery Center at Woodlands	83-3500010	8,427	0%
The Watt Stopper, Inc.	94-2787834	93	0%
Tidwell, Higdon & Associates	86-1791567	260,974	0%
Torres Insurance Group, LLC	26-3781414	85,072	0%
Transportation Consulting & Accounting, Inc.	59-3155909	1,782,493	0%
Trinity Presbyterian Church	59-6032404	-	0%
Ullman Eye Consultants	58-3681863	-	0%
Unipharm, Inc.	47-2667546	434,915	1%
United Way of Florida, Inc.	59-2104175	224,720	0%
United Way of Northwest Florida, Inc.	59-0863698	143,454	0%
United Way of West Florida, Inc.	59-0651076	-	0%
Vaughn's Inc. of Pensacola	59-2166444	49,009	0%
VEP Enterprises, Inc.	63-0943271	-	0%
Virtue Technologies Inc.	83-0578280	97,655	0%
VirtueRN, LLC	36-4813555	320,746	0%
Visit Pensacola, Inc.	46-3684826	407,135	0%
Wallace Industrial Technology	56-2216323	73,951	0%
Walton County ARC, Inc.	59-1614147	84,317	0%
Warriner - Tapper, LLC	26-2428497	68,813	0%
Waterview & Aero Capital	47-1998128	337,758	0%
WEMO Industries, Inc.	47-1276591	768,366	1%
Whibbs Stone & Barnett, PA	59-3326473	4,913,551	1%
WKJS Land Company dba LPL Financial	20-1872061	324,774	0%
Workforce Escarosa, Inc.	59-3390564	1,848,395	1%
Zerion Group	20-2991933	378,082	0%