

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>PRIME RESPONSE, INC. 401(K) PROFIT SHARING</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>001</u></td> </tr> <tr> <td colspan="2">1c Effective date of plan <u>01/01/1992</u></td> </tr> </table>	1b Three-digit plan number (PN) ▶	<u>001</u>	1c Effective date of plan <u>01/01/1992</u>	
1b Three-digit plan number (PN) ▶	<u>001</u>				
1c Effective date of plan <u>01/01/1992</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>PRIME RESPONSE, INC.</u> <u>500 MONTGOMERY STREET</u> <u>SUITE 400</u> <u>ALEXANDRIA, VA 22314</u>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>2b Employer Identification Number (EIN) <u>47-5528960</u></td> </tr> <tr> <td>2c Plan Sponsor's telephone number <u>571-483-2100</u></td> </tr> <tr> <td>2d Business code (see instructions) <u>541990</u></td> </tr> </table>	2b Employer Identification Number (EIN) <u>47-5528960</u>	2c Plan Sponsor's telephone number <u>571-483-2100</u>	2d Business code (see instructions) <u>541990</u>	
2b Employer Identification Number (EIN) <u>47-5528960</u>					
2c Plan Sponsor's telephone number <u>571-483-2100</u>					
2d Business code (see instructions) <u>541990</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.	04/27/2023	JULIE NEAL
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2021)
v. 210624

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 SYSTEMS SUPPORT ALTERNATIVES, INC. c Plan Name SYSTEMS SUPPORT ALTERNATIVES, INC. 401(K) PROFIT SHARING PLAN		4b EIN 52-1647302 4d PN 001
5 Total number of participants at the beginning of the plan year		5 169
6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d).		
a(1) Total number of active participants at the beginning of the plan year.....		6a(1) 127
a(2) Total number of active participants at the end of the plan year		6a(2) 135
b Retired or separated participants receiving benefits.....		6b 0
c Other retired or separated participants entitled to future benefits		6c 41
d Subtotal. Add lines 6a(2) , 6b , and 6c		6d 176
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.		6e 1
f Total. Add lines 6d and 6e		6f 177
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)		6g 156
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested		6h 0
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item).....		7
8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions: 2F 2G 2J 2K 2S 3D 2E		
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) ☐ 0 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 PRIME RESPONSE, INC. 401(K) PROFIT SHARING	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 PRIME RESPONSE, INC.	D Employer Identification Number (EIN) 47-5528960	

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
FIDELITY INVESTMENTS INSTITUTIONAL
04-2647786

(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)

FIDELITY INVESTMENTS INSTITUTIONAL

04-2647786

(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?
37 60 64 65	RECORDKEEPER	3144	Yes ☒ No ☐	Yes ☒ No ☐	0	Yes ☒ No ☐

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

KESTRA INVESTMENT SERVICES LLC

35-2552359

(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?
55	ADVISOR	0	Yes ☒ No ☐	Yes ☐ No ☒	11130	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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
AM CENT MD CP VAL A - AMERICAN CEN 44-0619208	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
BNYM BOND MK IDX INV - BNY MELLON DREYFUS TRANSFER INC 200 PARK AVENUE NEW YORK, NY 10166	0.15%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
CBA LG CAP GR A - BNY MELLON INVES 301 BELLEVUE PARKWAY WILMINGTON, DE 19809	0.25%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COL LARGE CAP IDX A - COLUMBIA MGT 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COL MID CAP IDX A - COLUMBIA MGT I 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254	0.10%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
COL SM CAP IDX A - COLUMBIA MGT IN 14785 PRESTON ROAD, SUITE 1000 DALLAS, TX 75254	0.10%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
INVS DEVELOP MKT A - INVESCO INVE 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
INVS DIVRS DIVIDND A - INVESCO INV 11 GREENWAY PLAZA, SUITE 100 HOUSTON, TX 77046	0.35%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
IS US AGG BD IDX A - BNY MELLON IN 301 BELLEVUE PARKWAY WILMINGTON, DE 19809	0.05%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
J H ENTERPRISE S - JANUS SERVICES 43-1804048	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PGIM TOTAL RTN BD A - PRUDENTIAL M 22-3703799	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PIMCO INCOME A - DST ASSET MANAGER 430 W 7TH STREET STE 219432 KANSAS CITY, MO 64105	0.20%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
PIMCO STABLE INC 3 650 NEWPORT CENTER DRIVE NEWPORT BEACH, CA 92660	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TEMPLETON FOREIGN A - FRANKLIN TEM 94-3167260	0.25%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2005 R - T. ROWE PRICE 52-2269240	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2010 R - T. ROWE PRICE 52-2269240	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2015 R - T. ROWE PRICE 52-2269240	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2020 R - T. ROWE PRICE 52-2269240	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2025 R - T. ROWE PRICE 52-2269240	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2030 R - T. ROWE PRICE 52-2269240	0.40%

(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0

(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.
TRP RETIRE 2035 R - T. ROWE PRICE 52-2269240	0.40%

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2040 R - T. ROWE PRICE 52-2269240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2045 R - T. ROWE PRICE 52-2269240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2050 R - T. ROWE PRICE 52-2269240	0.40%	

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
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2055 R - T. ROWE PRICE 52-2269240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
FIDELITY INVESTMENTS INSTITUTIONAL	60	0
(d) Enter name and EIN (address) of source of indirect compensation	(e) Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
TRP RETIRE 2060 R - T. ROWE PRICE 52-2269240	0.40%	
(a) Enter service provider name as it appears on line 2	(b) Service Codes (see instructions)	(c) Enter amount of indirect compensation
KESTRA INVESTMENT SERVICES LLC	55	11130
(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.	
NATIONAL FINANCIAL SERVICES LLC 870 E HIGGINS RD SCHAUMBURG, IL 60173		

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

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

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

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

SCHEDULE H (Form 5500) Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ► File as an attachment to Form 5500.	OMB No. 1210-0110 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>PRIME RESPONSE, INC. 401(K) PROFIT SHARING</u>	B Three-digit plan number (PN) ►	<u>001</u>
C Plan sponsor's name as shown on line 2a of Form 5500 <u>PRIME RESPONSE, INC.</u>	D Employer Identification Number (EIN) <u>47-5528960</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	0	0
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	0	0
(2) Participant contributions.....	1b(2)	0	0
(3) Other	1b(3)	0	0
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	0	0
(2) U.S. Government securities	1c(2)	0	0
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)	0	0
(B) All other	1c(3)(B)	0	0
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)	0	0
(B) Common	1c(4)(B)	0	0
(5) Partnership/joint venture interests	1c(5)	0	0
(6) Real estate (other than employer real property)	1c(6)	0	0
(7) Loans (other than to participants)	1c(7)	0	0
(8) Participant loans	1c(8)	92861	121338
(9) Value of interest in common/collective trusts.....	1c(9)	600	1894
(10) Value of interest in pooled separate accounts	1c(10)	0	0
(11) Value of interest in master trust investment accounts.....	1c(11)	0	0
(12) Value of interest in 103-12 investment entities	1c(12)	0	0
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	3597617	4236115
(14) Value of funds held in insurance company general account (unallocated contracts).....	1c(14)	0	0
(15) Other.....	1c(15)	0	0

1d Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	1d(1)	0	0
(2) Employer real property.....	1d(2)	0	0
e Buildings and other property used in plan operation	1e	0	0
f Total assets (add all amounts in lines 1a through 1e)	1f	3691078	4359347

Liabilities

g Benefit claims payable	1g	0	0
h Operating payables	1h	0	0
i Acquisition indebtedness.....	1i	0	0
j Other liabilities.....	1j	0	0
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	3691078	4359347
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Part II Income and Expense Statement

2 Plan income, expenses, and changes in net assets for the year. Include all income and expenses of the plan, including any trust(s) or separately maintained fund(s) and any payments/receipts to/from insurance carriers. Round off amounts to the nearest dollar. MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 2a, 2b(1)(E), 2e, 2f, and 2g.

Income

		(a) Amount	(b) Total
a Contributions:			
(1) Received or receivable in cash from: (A) Employers	2a(1)(A)	127970	
(B) Participants	2a(1)(B)	274600	
(C) Others (including rollovers).....	2a(1)(C)	0	
(2) Noncash contributions.....	2a(2)	0	402570
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		
b Earnings on investments:			
(1) Interest:			
(A) Interest-bearing cash (including money market accounts and certificates of deposit).....	2b(1)(A)	0	
(B) U.S. Government securities	2b(1)(B)	0	
(C) Corporate debt instruments	2b(1)(C)	0	
(D) Loans (other than to participants)	2b(1)(D)	0	
(E) Participant loans.....	2b(1)(E)	6626	
(F) Other	2b(1)(F)	0	
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		6626
(2) Dividends: (A) Preferred stock.....	2b(2)(A)	0	369836
(B) Common stock	2b(2)(B)	0	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	369836	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		369836
(3) Rents	2b(3)		0
(4) Net gain (loss) on sale of assets: (A) Aggregate proceeds	2b(4)(A)	0	0
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	0	
(C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result	2b(4)(C)		
(5) Unrealized appreciation (depreciation) of assets: (A) Real estate	2b(5)(A)	0	0
(B) Other	2b(5)(B)	0	
(C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B)	2b(5)(C)		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts.....	2b(6)		15
(7) Net investment gain (loss) from pooled separate accounts.....	2b(7)		0
(8) Net investment gain (loss) from master trust investment accounts.....	2b(8)		0
(9) Net investment gain (loss) from 103-12 investment entities.....	2b(9)		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds).....	2b(10)		91216
c Other income.....	2c		0
d Total income. Add all income amounts in column (b) and enter total.....	2d		870263
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	2e(1)	201121	
(2) To insurance carriers for the provision of benefits.....	2e(2)	0	
(3) Other.....	2e(3)	0	
(4) Total benefit payments. Add lines 2e(1) through (3).....	2e(4)		201121
f Corrective distributions (see instructions).....	2f		0
g Certain deemed distributions of participant loans (see instructions).....	2g		-2271
h Interest expense.....	2h		0
i Administrative expenses: (1) Professional fees.....	2i(1)	0	
(2) Contract administrator fees.....	2i(2)	0	
(3) Investment advisory and management fees.....	2i(3)	0	
(4) Other.....	2i(4)	3144	
(5) Total administrative expenses. Add lines 2i(1) through (4).....	2i(5)		3144
j Total expenses. Add all expense amounts in column (b) and enter total.....	2j		201994
Net Income and Reconciliation			
k Net income (loss). Subtract line 2j from line 2d.....	2k		668269
l Transfers of assets:			
(1) To this plan.....	2l(1)		0
(2) From this plan.....	2l(2)		0

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: BISHOP, FARMER & CO. LLP

(2) EIN: 54-1435778

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		200000
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?		X	
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?		X	
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.)		X	
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?		X	
4k		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
4l		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
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.		X	
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)

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 PRIME RESPONSE, INC. 401(K) PROFIT SHARING	B Three-digit plan number (PN) ► 001
C Plan sponsor's name as shown on line 2a of Form 5500 PRIME RESPONSE, INC.	D Employer Identification Number (EIN) 47-5528960

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): 04-6568107	
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 _____

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN**

FINANCIAL STATEMENTS

December 31, 2021

C O N T E N T S

	PAGE
INDEPENDENT AUDITOR'S REPORT	1
FINANCIAL STATEMENTS	
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS (MODIFIED CASH BASIS)	5
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS (MODIFIED CASH BASIS)	6
NOTES TO FINANCIAL STATEMENTS	7
SUPPLEMENTAL SCHEDULES REQUIRED TO BE FILED WITH FORM 5500	
SCHEDULE H – SCHEDULE OF ASSETS AT END OF YEAR	16
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES THAT WERE ACQUIRED AND DISPOSED OF DURING THE YEAR	17
SCHEDULE OF REPORTABLE TRANSACTIONS	18

INDEPENDENT AUDITOR'S REPORT

To the Administrative Committee of
Prime Response, Inc.
401(k) Profit Sharing Plan
Accokeek, Maryland

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

We have performed an audit of the accompanying financial statements of Prime Response, Inc. 401(k) Profit Sharing Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the statements of net assets available for benefits as of December 31, 2021 and 2020, and the related statements of changes in net assets available for benefits for the years 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 Prime Response, Inc. 401(k) Profit Sharing 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 Auditor's Responsibilities for the Audit of the Financial Statements section –

- The amounts and disclosures in the financial statements referred to above, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with the modified cash basis of accounting.
- 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).

- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

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 Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Prime Response, Inc. 401(k) Profit Sharing 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 the modified cash basis of accounting, 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 Prime Response, Inc. 401(k) Profit Sharing Plan's ability to continue as a going concern for one year after the date the financial statements are available to be issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

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

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

- Exercise professional judgement 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 Prime Response, Inc. 401(k) Profit Sharing Plan's internal control. Accordingly, no such opinion is expressed.
- The information in the supplemental schedules related to assets held by and certified to by a qualified institution agrees to or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).
- 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 judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about Prime Response, Inc. 401(k) Profit Sharing 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 the modified cash basis of accounting.

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 the modified cash basis of accounting.

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 Schedules Required by ERISA

The supplemental schedules of required information to be filed with Form 5500 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedules, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion –

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



Certified Public Accountants

Fredericksburg, Virginia
October 12, 2022

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN**

**STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)**

December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ASSETS		
INVESTMENTS		
Investments, at fair value	\$ 4,236,115	\$ 3,597,617
Value of interest in common/collective trust	<u>1,894</u>	<u>600</u>
Total Investments	\$ 4,238,009	\$ 3,598,217
RECEIVABLES		
Notes receivable from participants	<u>121,338</u>	<u>92,861</u>
NET ASSETS AVAILABLE FOR BENEFITS	\$ <u>4,359,347</u>	\$ <u>3,691,078</u>

See Notes to Financial Statements.

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN**

**STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS
(MODIFIED CASH BASIS)**

Years Ended December 31, 2021 and 2020

	<u>2021</u>	<u>2020</u>
ADDITIONS		
Additions To Net Assets Attributed To:		
Investment Income		
Net appreciation in fair value of investments	\$ 91,231	\$ 250,352
Interest and dividends	369,836	175,588
Loan interest	<u>6,626</u>	<u>5,997</u>
Total Investment Income	\$ <u>467,693</u>	\$ <u>431,937</u>
Contributions		
Participants' 401(k) contributions	\$ 274,600	\$ 185,748
Participants' rollover contributions		156,660
Employer QNEC contributions	127,970	116,658
Deemed with post default payment - employee	<u>2,271</u>	<u> </u>
Total Contributions	\$ <u>404,841</u>	\$ <u>459,066</u>
Total Additions	\$ <u>872,534</u>	\$ <u>891,003</u>
DEDUCTIONS		
Deductions From Net Assets Attributed To:		
Benefits paid to participants	\$ 201,121	\$ 259,849
Administrative expenses	3,144	2,481
Deemed distributions	<u> </u>	<u>2,271</u>
Total Deductions	\$ <u>204,265</u>	\$ <u>264,601</u>
Net Increase	\$ <u>668,269</u>	\$ <u>626,402</u>
NET ASSETS AVAILABLE FOR BENEFITS		
Beginning of Year	\$ 3,691,078	\$ 3,064,643
Forfeitures Released for Use by Employer	<u> </u>	<u>33</u>
End of Year	\$ <u>4,359,347</u>	\$ <u>3,691,078</u>

See Notes to Financial Statements.

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

1. DESCRIPTION OF PLAN

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

General

The Plan is a defined contribution plan covering all employees of Prime Response, Inc., except employees who are part-time or temporary, certain non-resident aliens and employees whose employment is governed by a collective bargaining agreement unless such agreement expressly provides for participation in this Plan. Employees who meet the eligibility requirements become plan participants on the first day of the month following the date of hire. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA). The Plan was initially effective January 1, 1992 and was restated January 5, 2016, for a conversion to the Fidelity Basic Plan Document No. 17 and its Adoption Agreement.

The Fidelity Basic Plan Document No. 17 was updated on June 30, 2020. The updated plan document did not contain any significant modifications to the Plan.

The Plan was restated effective October 1, 2021 to become a single employer Plan, Prime Response, Inc. 401(k) Profit Sharing Plan. A description of the Plan changes is described in Note 8.

The Plan was amended effective August 1, 2022. The amendments were administrative in nature and did not result in significant modifications to the Plan.

In January 2020, Congress passed the Setting Every Community Up for Retirement Enhancement Act of 2020 that contained the largest package of retirement system reform in over a decade. Many of the provisions of the SECURE Act became effective on January 1, 2020 and require significant changes to plan administration and recordkeeping.

The COVID-19 outbreak in the United States caused business disruption through mandated and voluntary closings of businesses in numerous industries. As of March 27, 2020, Congress passed the Coronavirus Aid, Relief and Economic Security Act (CARES Act) that included numerous employee benefit plan provisions to assist plan sponsors and participants.

The Consolidated Appropriations Act of 2021 was signed into law on December 27, 2020 which includes a temporary rule that prevents partial plan terminations for qualified retirement plans in certain circumstances.

IRS Notice 2022-33 extended by an additional three years to December 31, 2025 for qualified retirement plans to adopt amendments required by the SECURE Act and select amendments required by the CARES Act. Amendments required by the CARES Act to implement COVID distributions and loans were not extended and must be adopted by December 31, 2022.

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 2

1. DESCRIPTION OF PLAN (Continued)

General (Continued)

The Board of Directors is responsible for oversight of the Plan and determines the appropriateness of the Plan's investment offerings and monitors investment performance. All investment accounts held by the investment custodian of the Plan are self-directed by the Plan Participants.

Fidelity Management Trust Company is the Trustee and holds all of the Plan's investments and assets.

Contributions

Employees are automatically enrolled at a deferral rate of three percent commencing with the first pay period of the month following the date of hire unless they choose to opt-out. In addition, the Plan stipulates that the Company will make, as a Qualified Non-Elective Contribution (QNEC), a Prevailing Wage Contribution on behalf of each Participant who performs services subject to the Service Contract Act, Davis-Bacon Act or similar Federal, State or Municipal Prevailing Wage statutes. Each pay period, the employees' unused health and welfare allowance amounts, provided for in accordance with the Service Contract Act, are contributed to their participant accounts in the Plan as the QNEC.

The 401(k) provisions allow Plan participants to defer a percentage of their compensation each year. The deferrals in any taxable year may not exceed the dollar limit which is set by law. The limit for 2021 and 2020 was \$19,500, respectively. Plan participants who are age 50 or older may elect to defer additional amounts to the Plan. The maximum additional contribution for 2021 and 2020, was \$6,500, respectively.

The law imposes a maximum limit on the amount of contributions made to each participant's account. In 2021 and 2020 contributions cannot exceed the lesser of \$58,000 and \$57,000 respectively, plus catch-up or 100 percent of annual compensation. Annual compensation exceeding \$290,000 and \$285,000 for 2021 and 2020 is not recognized by the Plan.

Each year, the Companies' Boards of Directors decide if a discretionary profit-sharing contribution and a discretionary 401(k) matching contribution will be made to the Plan. For the years ending December 31, 2021 and 2020, there were no discretionary profit sharing or 401(k) matching contributions made to the Plan.

Participant Accounts

Each participant's account is credited with the participant's contribution and allocation of Plan earnings and employer contribution, if any. Each participant's account is charged with an allocation of administrative expenses, if not paid directly by the employer. Allocations are based on participant earnings or account balances, as defined by the Plan. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS**

Page 3

1. DESCRIPTION OF PLAN (Continued)

Vesting

Participants are immediately vested in their salary reduction and QNEC amounts contributed to the Plan. Vesting in the Company's discretionary matching and discretionary profit-sharing contribution portions of their accounts is based on years of continuous service, and a participant is 100 percent vested after six years of credited service.

Investment Options

The Administrator may establish rules for investment of participants' accounts. Upon the Administrator's approval, participants may direct their investment of their account balances in respect to employee pre-tax and Roth deferral, QNEC, employer matching and the profit-sharing contribution.

Investment options include percentages or fixed amounts of employee earnings into the following investments:

- American Century Mid Cap Value Fund A Class
- BNY Mellon Bond MKT IDX INV
- ClearBridge Large Cap Growth Fund Class A
- Columbia Large Cap Index Fund Class A
- Columbia Mid Cap Index Fund Class A
- Columbia Small Cap Index Fund Class A
- Fidelity Advisor Worldwide Fund – Class A
- Fidelity Advisor Real Estate Fund – Class A
- Fidelity Advisor Small Cap Growth Fund – Class A
- Fidelity Advisor Small Cap Value Fund – Class A
- Invesco Develop MKT A
- Invesco Diversified Dividend Fund Class A
- IS US AGG Bd IDX A
- Janus Henderson Enterprise Fund Class S
- PGIM Total Return Bond Fund Class A
- PIMCO Income Fund Class A
- PIMCO Stable, Inc. 3
- T. Rowe Price Retirement 2005 Fund Class R
- T. Rowe Price Retirement 2010 Fund Class R
- T. Rowe Price Retirement 2015 Fund Class R
- T. Rowe Price Retirement 2020 Fund Class R
- T. Rowe Price Retirement 2025 Fund Class R
- T. Rowe Price Retirement 2030 Fund Class R
- T. Rowe Price Retirement 2035 Fund Class R
- T. Rowe Price Retirement 2040 Fund Class R
- T. Rowe Price Retirement 2045 Fund Class R
- T. Rowe Price Retirement 2050 Fund Class R
- T. Rowe Price Retirement 2055 Fund Class R
- T. Rowe Price Retirement 2060 Fund Class R
- Templeton Foreign Fund Class A

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 4

1. DESCRIPTION OF PLAN (Continued)

Notes Receivable From Participants

The Plan allows participants to borrow from their fund accounts. The loan process is executed directly by the participants through their online participant account access and approval is given electronically by the Plan Administrator, Fidelity Management Trust Company. Participants may borrow from their fund accounts a minimum of \$1,000 up to a maximum of \$50,000 or 50 percent of their account balance, whichever is less. The loans are secured by the balance in the participant's account and bear interest at a rate of prime plus two percent. For the year ending December 31, 2021, the interest rates ranged from 5.25 to 9.75 percent. Principal and interest are paid through semi-monthly payroll deductions. The term of repayment may not be greater than five years. Management evaluated receivables and determined an allowance for uncollectible accounts was not necessary because notes receivable uncollected from employees who terminate employment are treated as deemed distributions. At December 31, 2021 and 2020, the notes receivable balance was \$121,338 and \$92,861, respectively.

Payment of Benefits

On termination of service due to death, disability, retirement or other reasons, a participant may elect to receive a lump-sum amount equal to the value of the participant's vested interest in his or her account, including rollover to an IRA. The participant may also elect to delay the distribution of their vested balance; however, the required minimum distribution rules will be enforced when the participant reaches the age requirement.

Cash out plan provisions allow the Plan to provide involuntary distributions to terminated participants with vested accounts with balances up to \$5,000.

Forfeited Accounts

Forfeitures of terminated participants' non-vested accounts may be applied to employer contributions, Plan administrative expenses or allocated to the remaining Plan participants.

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

The financial statements of the Plan are prepared using the modified cash basis of accounting, which recognizes additions when received and deductions when paid and adjusts securities investments to fair value.

Estimates

The preparation of financial statements in conformity with the modified cash basis of accounting requires the Plan administrator to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results may differ from those estimates. Any adjustments applied to estimated amounts are recognized in the year in which such adjustments are determined.

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 5

2. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (Continued)

Investment Valuation and Income Recognition

Investments are reported at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. Plan management determines the Plan's valuation policies utilizing information provided by the investment advisers and trustee. See Note 5 for discussion of fair value measurements.

Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded when received. Dividends are recorded on the ex-dividend date. Net appreciation includes the Plan's gains and losses on investments bought and sold as well as held during the year. All investments are held and administered by the Plan Trustee, Fidelity Management Trust Company.

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balance. Interest income is recorded when received. No allowance for credit losses has been recorded as of December 31, 2021 and 2020.

Payment of Benefits

Benefit payments to participants are recorded when paid.

Administrative Expenses

Expenses are recognized when paid and as determined by contractual terms. Administrative expenses of the Plan are paid by the Plan, as provided in the Plan document. Fees related to the administration of the notes receivable from participants and participant distributions are charged directly to the participant's account. Investment related expenses are included in net appreciation (depreciation) of fair value of investments.

3. INFORMATION CERTIFIED BY THE TRUSTEES

The financial information included in the Plan financial statements for investments, notes receivable, and investment income, has been derived from information certified as complete and accurate by the Trustee, in accordance with the Department of Labor's Rules and Regulations for Reporting and Disclosure under the Employee Retirement Income Security Act of 1974. The certification is pursuant to ERISA 29 CFR 2520.103-5(c).

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 6

4. INVESTMENTS

During 2021, the Plan's investments (including investments bought and sold, as well as held during the year) appreciated in value by \$91,231 of which unrealized appreciation totaled \$78,536 and net realized gains on investments sales totaled \$12,695. The investments held at December 31, 2021 at cost, totaled \$3,676,489 with a fair value of \$4,238,009. During 2020, the Plan's investments (including investments bought and sold, as well as held during the year) appreciated in value by \$250,352 of which unrealized appreciation totaled \$306,968 and net realized losses on investment sales totaled \$56,616. The cost of investments held at December 31, 2020 totaled \$3,087,338 with a fair value of \$3,598,217. Gains and losses included in changes in net assets available for benefits are reported in net appreciation in fair value of investments.

5. FAIR VALUE MEASUREMENTS

The Plan's investments are reported at fair value in the accompanying statement of net assets available for benefits. The methods used to measure fair value may produce an amount that may not be indicative of net realizable value or reflective of future fair values. Furthermore, although the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date.

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy are described as follows:

- Level 1. Inputs to the valuation methodology are unadjusted quoted prices for identical assets or liabilities in active markets that the Plan has the ability to access.
- Level 2. Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means. If the asset or liability has a specified (contractual) term, the Level 2 input must be observable for substantially the full term of the asset or liability.
- Level 3. Inputs to the valuation methodology are unobservable and significant to the fair value measurement.

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

Following is a description of the valuation methodologies used for assets measured at fair value 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 net asset value (NAV) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS**

Page 7

5. FAIR VALUE MEASUREMENTS (Continued)

Collective Trust: The Plan invests in a stable value collective trust valued at the NAV of the units of the collective trust. The NAV, as provided by the trustee, is used as a readily determinable fair value to estimate fair value.

There were no Plan assets requiring Level 3 inputs for the periods presented and there were no changes in the methods used to measure fair value at December 31, 2021 and 2020.

The following table sets forth by level, within the fair value hierarchy, the Plan's assets at fair value.

	Assets at Fair Value (Level 1)	Investments Measured at Net Asset Value	Total
December 31, 2021			
Mutual Funds	\$ 4,236,115	\$	\$ 4,236,115
Common/Collective Trust	<u> </u>	<u>1,894</u>	<u>1,894</u>
Total Assets at Fair Value	\$ <u>4,236,115</u>	\$ <u>1,894</u>	\$ <u>4,238,009</u>
December 31, 2020			
Mutual Funds	\$ 3,597,617	\$	\$ 3,597,617
Common/Collective Trust	<u> </u>	<u>600</u>	<u>600</u>
Total Assets at Fair Value	\$ <u>3,597,617</u>	\$ <u>600</u>	\$ <u>3,598,217</u>

Assets measured at net asset value, consisting of collective trust funds, have a daily redemption period with a redemption notice period of 0-5 days.

6. RECONCILIATION OF FINANCIAL STATEMENTS TO SCHEDULE H OF FORM 5500

The following is a reconciliation of net assets available for benefits per the financial statements to Schedule H of the Form 5500 for years ending December 31, 2021 and 2020:

	December 31,	
	2021	2020
Net assets available for benefits per the financial statements	\$ 4,359,347	\$ 3,691,078
Net assets available for benefits per Schedule H to the Form 5500	\$ 4,359,347	\$ 3,691,078

The following is a reconciliation of benefits paid to participants per the financial statements for the year ended December 31, 2021 to Schedule H of Form 5500:

Benefits paid to participants per the financial statements	\$ <u>201,121</u>
Benefits paid to participants per Schedule H of Form 5500	\$ <u>201,121</u>

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 8

7. ADMINISTRATIVE COSTS

The Company has absorbed administrative costs except those specifically charged to individual Plan participants for distribution and loan fees totaling \$3,144 and \$2,481 during 2021 and 2020, respectively.

The Plan is charged indirect compensation by the Plan Administrator/Trustee at the investment level. These costs are part of the transaction fees associated with the Plan investments and are not separately reported in the financial statements.

8. PLAN SPONSOR CHANGES

Effective October 1, 2021, the Plan was changed to reflect the statutory merger between Systems Support Alternatives, Inc. (SSAI) and Prime Response, Inc. (PRI). Prior to the merger, both companies were parties to the SSAI 401(k) Profit Sharing Plan, a Multiple Employer Plan. The merger resulted in termination of SSAI. After the merger, Plan participants of SSAI 401(k) Profit Sharing Plan were participants in the Plan adopted by the single employer PRI 401(k) Profit Sharing Plan. Participant account balances held in trust by Fidelity Management Trust Company for SSAI 401(k) Profit Sharing Plan became participant accounts of PRI 401(k) Profit Sharing Plan.

9. PLAN TERMINATION

Although it has not expressed any intent to do so, the Company has the right under the Plan to discontinue 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 percent vested in their accounts.

10. TAX STATUS

The Plan obtained its latest determination letter on June 30, 2020, in which the Internal Revenue Service stated that the Plan and related trust as then designed, was in accordance with the applicable requirements of the Internal Revenue Code. The Plan has been restated since receiving the determination letter. However, the Plan administrator believes that the Plan is currently designed and being operated in compliance with the applicable requirements of the Internal Revenue Code.

U. S. Accounting Standards require management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the Plan has taken uncertain positions that more likely than not would not be sustained upon examination by the Internal Revenue Service. Management, in its evaluation of the Plan's position, has not recorded a liability or asset due to the Plan's tax position.

11. RISKS AND UNCERTAINTIES

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

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
NOTES TO FINANCIAL STATEMENTS

Page 9

12. PARTY-IN-INTEREST

Plan assets were invested in funds managed by Fidelity Management Trust Company (Fidelity). Fidelity served as trustee as defined by the Plan for the years ended December 31, 2021 and 2020; therefore, these transactions qualify Fidelity as a party-in-interest.

The Plan is charged indirect compensation by the Trustee at the investment level. These costs are part of the transaction fees associated with the Plan investments and are not separately reported in the financial statements.

These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA.

13. SUBSEQUENT EVENTS

The Plan was amended effective August 1, 2022. The amendments were administrative in nature and did not result in significant modifications to the Plan.

Management has evaluated subsequent events through October 12, 2022, the date which the financial statements were available for issue.

PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
EIN: 47-5528960
PLAN NUMBER: 38056-001

SCHEDULE H, LINE 4I - SCHEDULE OF ASSETS AT END OF YEAR

(a)	(b)	(c)	(e)
	Identity of Issue, Borrower, Lesser, or Similar Party	Description of Investment, including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value	Current Value
	Mutual Funds:		
	AM CENT MD CP VAL A		\$ 36,294
	BNY MELLON BOND MKT IDX INV		9,654
	CBA LG CAP GR A		322,209
	COL LARGE CAP IDX A		74,672
	COL MID CAP IDX A		13,101
	COL SM CAP IDX A		2,017
	FA REAL ESTATE A		9,871
	FA SMALL CAP GROWTH A		197,564
	FA SMALL CAP VAL A		54,138
	FA WORLDWIDE A		50,687
	INVESCO DEVELOP MKT A		34,734
	INVS DIVRS DIVIDND A		12,496
	IS US AGG BD IDX A		5,785
	J H ENTERPRISES S		264,537
	PGIM TOTAL RTN BD A		219,190
	PIMCO INCOME A		187,803
	TEMPLETON FOREIGN A		3,762
	TRP RETIRE 2005 R		2,235
	TRP RETIRE 2010 R		15,374
	TRP RETIRE 2015 R		146,725
	TRP RETIRE 2020 R		145,673
	TRP RETIRE 2025 R		647,321
	TRP RETIRE 2030 R		694,410
	TRP RETIRE 2035 R		310,026
	TRP RETIRE 2040 R		282,232
	TRP RETIRE 2045 R		213,316
	TRP RETIRE 2050 R		101,010
	TRP RETIRE 2055 R		145,591
	TRP RETIRE 2060 R		33,688
	Total Mutual Funds		\$ 4,236,115
	Common Collective Trust:		
	PIMCO STABLE INC. 3		\$ 1,894
	Total Investments		\$ 4,238,009
	* Participants Loans	5.25% to 9.75% Maturing through 2026	\$ 121,338

Column (d) for cost has been omitted as all investments are participant-directed.

*indicates party-in-interest to the Plan

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
EIN: 47-5528960
PLAN NUMBER: 38056-001**

**SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES
THAT WERE ACQUIRED AND DISPOSED OF DURING THE YEAR**

Year Ended December 31, 2021

All investment assets purchased during the plan year and sold before the end of the plan year were securities purchased from a broker-dealer registered under the Securities Exchange Act of 1934 and were listed on a national securities exchange. All transactions were in participant-directed brokerage accounts. These transactions do not require disclosure.

**PRIME RESPONSE, INC.
401(K) PROFIT SHARING PLAN
EIN: 47-5528960
PLAN NUMBER: 38056-001**

SCHEDULE H. LINE 4J - SCHEDULE OF REPORTABLE TRANSACTIONS

Year Ended December 31, 2021

The Plan had no reportable transactions.

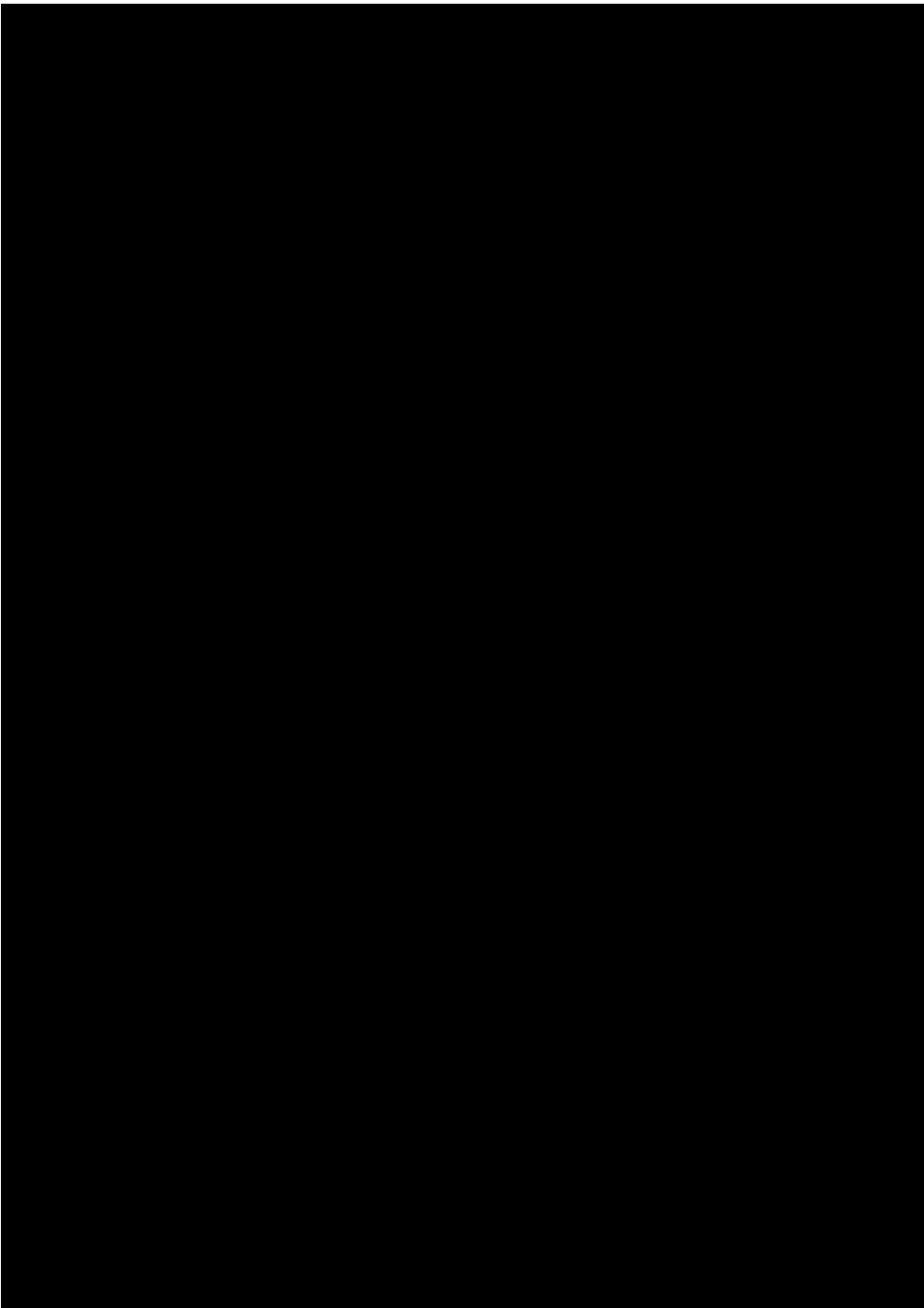
MEP Attachment Report

This report will display the contributions by MEP gr

Source Type	Non-Rollover Sources		
DC Plan	Division Name	Contribution Amount	% Total
38056-PRIME RESPONSE (Qual)	PRI	\$287,911.62	71.5%
38056-PRIME RESPONSE (Qual)		\$114,659.21	28.5%
Grand Total		\$402,570.83	100.0%

DC Plan	Division Name	MV 12/31/2021
38056-PRIME RESPONSE (Qual)	PRI	\$2,084,079.61
38056-PRIME RESPONSE (Qual)		\$2,153,929.31
Grand Total		\$4,238,008.92

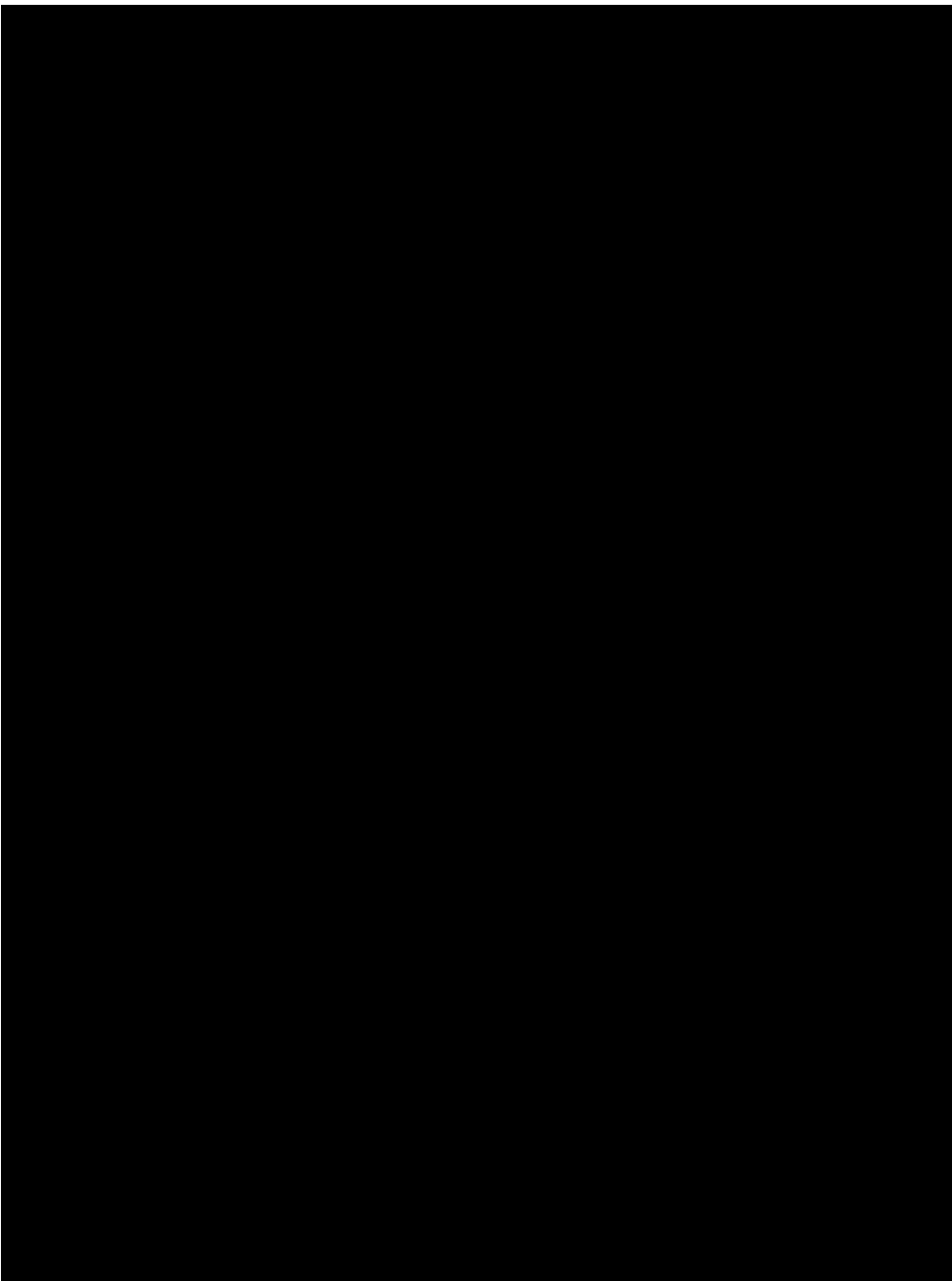
DC Plan	SSN - RESTRICTED	Full Name - DC	Employee Number	Hire Date (Historical)	Adjusted Hire Date (Historical)	Termination Date (Historical)	Division Name	Division Code - DC (Historical)	Rank (Historical)	Region Code (Historical)
				3/16/2020						
				3/16/2020						
				3/16/2020						
				6/1/2019			PRI	PRI		
				6/1/2019			PRI	PRI		
				5/1/2021			PRI	PRI		
				5/1/2021			PRI	PRI		
				8/4/2016		9/26/2017				
				6/1/2019			PRI	PRI		
				6/1/2019			PRI	PRI		
				8/1/2020			PRI	PRI		
				8/1/2020			PRI	PRI		
				3/1/2021			PRI	PRI		
				3/1/2021			PRI	PRI		
				5/7/2001		5/27/2005				
				9/24/2012		11/10/2014				



	3/1/2020			PRI	PRI		
	8/16/2021		10/4/2021	PRI	PRI		
	8/16/2021			PRI	PRI		
	9/4/2018		12/4/2020				
	1/4/2010		4/15/2011				
	5/5/2014		11/2/2018				
	5/8/2019			PRI	PRI		
	7/15/2013						
	7/15/2013						
	6/15/2004						
	6/15/2004						
	6/30/2020			PRI	PRI		
	6/30/2020			PRI	PRI		
	10/13/2020			PRI	PRI		
	10/13/2020			PRI	PRI		
	4/2/2021			PRI	PRI		
	4/2/2021			PRI	PRI		
	6/30/2020			PRI	PRI		
	6/30/2020			PRI	PRI		
	7/28/2020				PRI		
	7/28/2020				PRI		
	5/5/2010						
	5/5/2010						
	7/8/2013		5/21/2015				
	7/8/2013		5/21/2015				
	12/1/2008		11/19/2009				
	1/19/2001		9/30/2002				
	7/23/2018						
	7/23/2018						
	12/11/2019						
	12/11/2019						
	3/7/2012	9/6/2017	11/22/2017				
	3/1/2020		11/5/2021	PRI	PRI		
	3/1/2020			PRI	PRI		

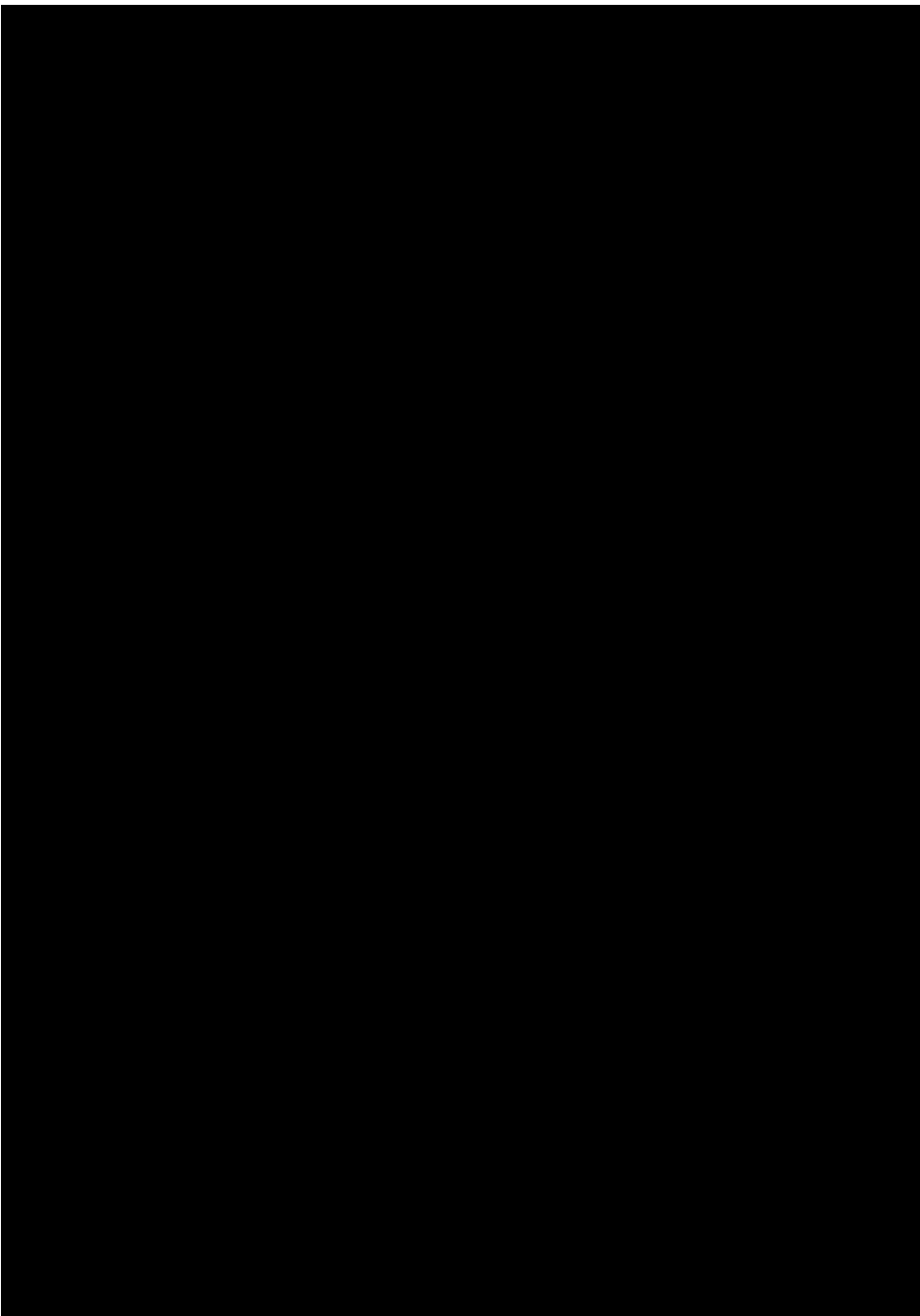
6/15/2004		10/31/2017				
8/10/2020			PRI	PRI		
8/10/2020			PRI	PRI		
6/1/2019			PRI	PRI		
3/1/2020			PRI	PRI		
3/1/2020			PRI	PRI		
2/27/2017		8/13/2021				
2/27/2017						
11/21/2018						
9/26/2019			PRI	PRI		
9/26/2019			PRI	PRI		
8/1/2020			PRI	PRI		
8/1/2020			PRI	PRI		
11/10/2010		7/31/2018				
3/6/2020			PRI	PRI		
3/6/2020			PRI	PRI		
2/16/1993		12/31/1994				
9/26/2019			PRI	PRI		
9/26/2019			PRI	PRI		
11/24/2003		1/1/2016				
4/2/2007						
4/2/2007						
1/10/2011		7/31/2018				
10/8/2021			PRI	PRI		
10/8/2021			PRI	PRI		
3/1/2020						
3/1/2020						
10/1/2007				PRI		
10/1/2007				PRI		
8/1/2020			PRI	PRI		
8/1/2020			PRI	PRI		
3/9/2020						
3/9/2020						
5/25/2021			PRI	PRI		

	5/25/2021			PRI	PRI		
	8/12/2013						
	8/12/2013						
	8/12/2013						
	8/12/2013						
	3/1/2020			PRI	PRI		
	7/17/2012						
	7/17/2012						
	11/1/2000		10/31/2018				
	2/17/1997		9/24/1998				
	8/12/2013						
	8/12/2013						
	3/1/2002		8/24/2005				
	12/1/1997		4/15/2005				
	6/1/2015		11/2/2018				
	5/7/2012		10/7/2016				
	10/29/2021						
	10/29/2021						
	5/30/2000		2/15/2006				
	3/1/2021			PRI	PRI		
	3/1/2021			PRI	PRI		
	9/30/2002		8/10/2007				
	2/1/1990			PRI			
	2/1/1990			PRI			
	8/29/2013			PRI	PRI		
	8/29/2013			PRI	PRI		
	12/3/2012		4/30/2018				
	6/17/2019			PRI	PRI		
	6/17/2019			PRI	PRI		
	11/1/2021						
	11/1/2021						
	3/1/2020			PRI	PRI		
	3/1/2020			PRI	PRI		
	4/1/2015		11/26/2016				



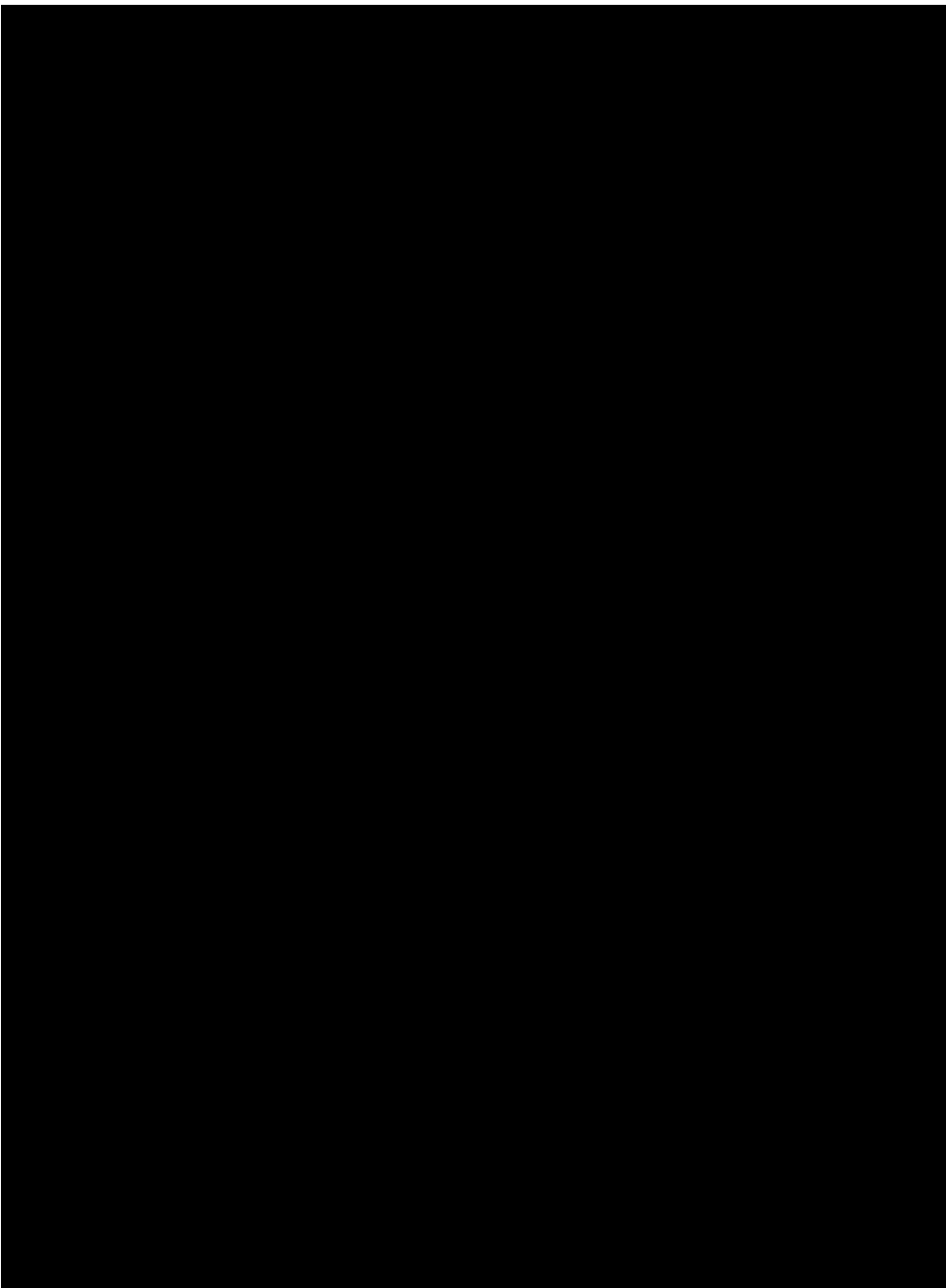
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	3/1/2020			PRI	PRI		
	4/9/2020						
	4/9/2020						
	6/1/2019			PRI	PRI		
	6/1/2019			PRI	PRI		
	5/1/2018			PRI	PRI		
	5/1/2018			PRI	PRI		
	3/9/2015		12/6/2016				
	1/19/2000		5/15/2002				
	8/1/2017			PRI	PRI		
	8/1/2017			PRI	PRI		
	3/9/2015		3/7/2018				
	10/25/2021			PRI	PRI		
	10/25/2021			PRI	PRI		
	6/30/2018			PRI			
	6/30/2018			PRI			
	6/30/2018			PRI			
	7/1/2013			PRI			
	7/1/2013			PRI			
	7/1/2013			PRI			
	7/1/2013			PRI	PRI		
	7/1/2013			PRI	PRI		
	2/1/2010		11/4/2016				
	3/1/2021			PRI	PRI		
	3/1/2021			PRI	PRI		
	6/1/2019			PRI	PRI		
	6/1/2019			PRI	PRI		
	11/19/2012			PRI	PRI		
	11/19/2012			PRI	PRI		
	11/2/2020			PRI	PRI		
	2/1/2010			PRI	PRI		
	2/1/2010			PRI	PRI		

	3/1/2020			PRI	PRI		
	3/1/2020		9/9/2021	PRI	PRI		
	3/1/2020			PRI	PRI		
	9/1/2020			PRI	PRI		
	9/1/2020			PRI	PRI		
	9/16/2013		7/31/2014				
	6/1/2019			PRI	PRI		
	6/1/2019			PRI	PRI		
	6/1/2019			PRI	PRI		
	11/1/2021						
	11/1/2021						
	9/12/2019			PRI	PRI		
	9/12/2019			PRI	PRI		
	5/1/2014						
	5/1/2014						
	2/12/2015		11/17/2017				
	8/29/2014						
	8/29/2014						
	5/1/2014						
	5/1/2014						
	5/1/2014						
	2/11/2019			PRI	PRI		
	2/11/2019			PRI	PRI		
	4/16/2021			PRI	PRI		
	4/16/2021			PRI	PRI		
	7/23/2020			PRI	PRI		
	7/23/2020			PRI	PRI		
	7/1/2019			PRI	PRI		
	7/1/2019			PRI	PRI		
	6/1/2020			PRI	PRI		
	6/1/2020			PRI	PRI		
	3/21/2005			PRI	PRI		
	3/21/2005			PRI	PRI		
	3/1/2020			PRI	PRI		



		3/1/2020			PRI	PRI		
		6/27/2011						
		6/27/2011						
		11/11/1996		6/13/1997				
		2/13/2017		4/30/2018				
		8/1/2017			PRI	PRI		
		8/1/2017			PRI	PRI		
		3/1/2021			PRI	PRI		
		3/1/2021			PRI	PRI		
		10/1/2021			PRI	PRI		
		10/1/2021			PRI	PRI		
		6/1/2019			PRI	PRI		
		4/2/2018						
		4/2/2018						
		3/1/2021		8/31/2021	PRI	PRI		
		3/1/2021			PRI	PRI		
		8/12/2013						
		8/12/2013						
		8/12/2013	1/16/2016		PRI			
		8/12/2013	1/16/2016		PRI			
		8/12/2013	1/16/2016		PRI			
		8/12/2013	1/16/2016		PRI			
		8/1/2020			PRI	PRI		
		8/1/2020			PRI	PRI		
		8/1/2020			PRI	PRI		
		8/24/2020			PRI	PRI		
		8/1/2020			PRI	PRI		
		8/1/2020			PRI	PRI		
		11/28/2016						
		8/12/2013						
		8/12/2013						
		3/1/2021			PRI	PRI		
		3/1/2021			PRI	PRI		
		9/26/2019			PRI	PRI		

	9/26/2019			PRI	PRI		
	9/28/2021			PRI	PRI		
	9/28/2021			PRI	PRI		
	8/12/2013						
	8/12/2013						
	8/1/2020		3/31/2021	PRI	PRI		
	8/1/2020			PRI	PRI		
	8/12/2013						
	8/12/2013						
	12/9/2019						
	12/9/2019						
	10/1/2020			PRI	PRI		
	10/1/2020			PRI	PRI		
	9/26/2019			PRI	PRI		
	9/26/2019			PRI	PRI		
	4/1/2015		7/31/2020				
	4/1/2015		7/31/2020				
	3/30/2020						
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	9/26/2019			PRI	PRI		
	8/12/2013	1/16/2016		PRI			
	8/12/2013	1/16/2016		PRI			
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	2/4/2019						
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	12/11/2017						
	12/11/2017						
	3/1/2020			PRI	PRI		
	3/1/2020			PRI	PRI		
	8/12/2013						
	8/12/2013						



		10/26/2021					
		10/26/2021					
		9/15/2021					
		9/15/2021					
		2/1/2018					
		2/1/2018					
		11/1/2016					
		11/1/2016					
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		8/12/2013	1/16/2016		PRI		
		8/12/2013	1/16/2016		PRI		
		12/3/2012		4/30/2018			
		12/9/2019		10/29/2021	PRI	PRI	
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		11/2/2020			PRI	PRI	
		11/2/2020			PRI	PRI	
		11/1/2020			PRI	PRI	
		11/1/2020			PRI	PRI	
		6/26/2020			PRI	PRI	
		6/26/2020			PRI	PRI	

Calendar Day is
between
01/01/2021 and
12/31/2021
and DC Plan is equal to
38056-PRIME
RESPONSE (Qual)
and Transaction Type -
DC is equal to / is in
1-Contributions

Company Code (Historical)	Location Store Code (Historical)	Union Code (Historical)	Miscellaneous Code (Historical)	Source Type	Transaction Type	Contribution Amount	MV 12/31/2021
				Non-Rollover Sources			\$5,615.29
				Non-Rollover Sources	1-Contributions	\$4,140.03	
				Rollover Sources			\$135,632.65
		UNION		Non-Rollover Sources			\$29,085.82
		UNION		Non-Rollover Sources	1-Contributions	\$11,852.95	
				Non-Rollover Sources			\$9,203.55
				Non-Rollover Sources	1-Contributions	\$9,087.50	
				Non-Rollover Sources			\$7,448.04
		UNION		Non-Rollover Sources			\$42,253.58
		UNION		Non-Rollover Sources	1-Contributions	\$13,667.56	
				Non-Rollover Sources			\$3,324.12
				Non-Rollover Sources	1-Contributions	\$1,279.77	
				Non-Rollover Sources			\$972.01
				Non-Rollover Sources	1-Contributions	\$959.21	
				Non-Rollover Sources			\$29,249.54
				Non-Rollover Sources			\$27,986.90

				Non-Rollover Sources			\$84.50
				Non-Rollover Sources			\$59.21
				Non-Rollover Sources	1-Contributions	\$59.06	
				Non-Rollover Sources			\$9,875.43
				Non-Rollover Sources			\$18,404.89
				Non-Rollover Sources			\$64,822.09
				Non-Rollover Sources			\$4,238.85
				Non-Rollover Sources			\$6,068.13
				Non-Rollover Sources	1-Contributions	\$922.58	
				Non-Rollover Sources			\$289,254.18
				Non-Rollover Sources	1-Contributions	\$12,298.70	
				Non-Rollover Sources			\$422.69
				Non-Rollover Sources	1-Contributions	\$278.27	
				Non-Rollover Sources			\$946.80
				Non-Rollover Sources	1-Contributions	\$825.64	
				Non-Rollover Sources			\$1,240.69
				Non-Rollover Sources	1-Contributions	\$1,218.75	
				Non-Rollover Sources			\$1,504.50
				Non-Rollover Sources	1-Contributions	\$995.68	
				Non-Rollover Sources			\$11,522.18
				Non-Rollover Sources	1-Contributions	\$9,204.27	
				Non-Rollover Sources			\$41,450.68
				Non-Rollover Sources	1-Contributions	\$2,766.10	
				Non-Rollover Sources			\$38,333.42
				Rollover Sources			\$53,814.54
				Non-Rollover Sources			\$19,625.49
				Rollover Sources			\$24.44
				Non-Rollover Sources			\$7,613.44
				Non-Rollover Sources	1-Contributions	\$3,995.81	
				Non-Rollover Sources			\$2,029.22
				Non-Rollover Sources	1-Contributions	\$796.15	
				Non-Rollover Sources			\$16,876.44
				Non-Rollover Sources			\$475.76
				Non-Rollover Sources	1-Contributions	\$254.39	

				Non-Rollover Sources			\$55,922.88
				Non-Rollover Sources			\$1,045.91
				Non-Rollover Sources	1-Contributions	\$775.67	
				Non-Rollover Sources	1-Contributions	\$2,457.37	
				Non-Rollover Sources			\$2,342.15
				Non-Rollover Sources	1-Contributions	\$1,133.00	
				Non-Rollover Sources			\$11,678.35
				Non-Rollover Sources	1-Contributions	\$1,372.53	
				Non-Rollover Sources	1-Contributions	\$3,469.77	
				Non-Rollover Sources			\$3,322.92
				Non-Rollover Sources	1-Contributions	\$1,282.44	
				Non-Rollover Sources			\$3,289.41
				Non-Rollover Sources	1-Contributions	\$2,043.71	
				Non-Rollover Sources			\$76,799.44
				Non-Rollover Sources			\$1,007.18
				Non-Rollover Sources	1-Contributions	\$962.33	
				Non-Rollover Sources			\$12,969.44
				Non-Rollover Sources			\$3,190.89
				Non-Rollover Sources	1-Contributions	\$1,200.37	
				Non-Rollover Sources			\$12,017.78
				Non-Rollover Sources			\$100,577.70
				Non-Rollover Sources	1-Contributions	\$14,987.50	
				Non-Rollover Sources			\$54,973.68
				Non-Rollover Sources			\$92.59
				Non-Rollover Sources	1-Contributions	\$92.45	
				Non-Rollover Sources			\$2,231.76
				Non-Rollover Sources	1-Contributions	\$1,224.05	
				Non-Rollover Sources			\$113,660.91
				Non-Rollover Sources	1-Contributions	\$7,983.19	
				Non-Rollover Sources			\$2,716.31
				Non-Rollover Sources	1-Contributions	\$2,151.55	
				Non-Rollover Sources			\$3,489.51
				Non-Rollover Sources	1-Contributions	\$1,830.00	
				Non-Rollover Sources			\$694.31

				Non-Rollover Sources	1-Contributions	\$688.66	
				Non-Rollover Sources			\$16,353.39
				Non-Rollover Sources	1-Contributions	\$1,296.23	
				Non-Rollover Sources			\$856.60
				Non-Rollover Sources	1-Contributions	\$1,190.04	
				Non-Rollover Sources	1-Contributions	\$70.16	
				Non-Rollover Sources			\$231.32
				Non-Rollover Sources	1-Contributions	\$1,001.01	
				Non-Rollover Sources			\$18,393.69
				Non-Rollover Sources			\$32,495.14
				Non-Rollover Sources			\$3,925.15
				Non-Rollover Sources	1-Contributions	\$550.26	
				Non-Rollover Sources			\$19,406.10
				Non-Rollover Sources			\$83,224.09
				Non-Rollover Sources			\$13,460.15
				Non-Rollover Sources			\$54,848.91
				Non-Rollover Sources			\$113.83
				Non-Rollover Sources	1-Contributions	\$114.00	
				Rollover Sources			\$0.22
				Non-Rollover Sources			\$197.56
				Non-Rollover Sources	1-Contributions	\$188.50	
				Non-Rollover Sources			\$57,321.44
				Non-Rollover Sources			\$815,235.86
				Non-Rollover Sources	1-Contributions	\$13,748.65	
				Non-Rollover Sources			\$110,397.46
				Non-Rollover Sources	1-Contributions	\$8,808.37	
				Non-Rollover Sources			\$9,563.83
		UNION		Non-Rollover Sources			\$19,675.70
		UNION		Non-Rollover Sources	1-Contributions	\$10,676.85	
				Non-Rollover Sources			\$58.21
				Non-Rollover Sources	1-Contributions	\$58.26	
				Non-Rollover Sources			\$1,095.68
				Non-Rollover Sources	1-Contributions	\$1,167.27	
				Non-Rollover Sources			\$4,047.28

				Rollover Sources			\$9,600.44
				Non-Rollover Sources			\$1,800.55
				Non-Rollover Sources	1-Contributions	\$1,219.16	
				Non-Rollover Sources			\$350.14
				Non-Rollover Sources	1-Contributions	\$350.29	
				Non-Rollover Sources			\$13,636.63
				Non-Rollover Sources	1-Contributions	\$7,995.43	
				Non-Rollover Sources			\$2,103.82
				Non-Rollover Sources	1-Contributions	\$1,651.71	
				Non-Rollover Sources			\$2,235.23
				Rollover Sources			\$7.55
				Non-Rollover Sources			\$20,739.85
				Non-Rollover Sources	1-Contributions	\$9,711.85	
				Non-Rollover Sources			\$4,502.74
				Non-Rollover Sources			\$810.46
				Non-Rollover Sources	1-Contributions	\$812.54	
				Non-Rollover Sources			\$11,646.65
				Non-Rollover Sources	1-Contributions	\$2,670.00	
				Rollover Sources			\$40,868.14
				Non-Rollover Sources			\$40,812.15
				Non-Rollover Sources	1-Contributions	\$2,075.52	
				Non-Rollover Sources			\$18,334.22
				Non-Rollover Sources			\$58,815.23
				Non-Rollover Sources	1-Contributions	\$3,915.25	
				Non-Rollover Sources			\$96,828.71
				Non-Rollover Sources			\$1,115.30
				Non-Rollover Sources	1-Contributions	\$1,095.60	
				Non-Rollover Sources			\$24,771.61
				Non-Rollover Sources	1-Contributions	\$10,728.29	
				Non-Rollover Sources			\$232,555.70
				Non-Rollover Sources	1-Contributions	\$19,500.00	
				Non-Rollover Sources	1-Contributions	\$1,082.43	
				Non-Rollover Sources			\$1,391.46
				Non-Rollover Sources	1-Contributions	\$8,347.61	

				Non-Rollover Sources			\$77.51
				Non-Rollover Sources			\$7,070.81
				Non-Rollover Sources	1-Contributions	\$2,968.78	
				Non-Rollover Sources			\$1,683.57
				Non-Rollover Sources	1-Contributions	\$1,334.91	
				Non-Rollover Sources			\$11,058.90
		UNION		Non-Rollover Sources			\$44,083.77
		UNION		Non-Rollover Sources	1-Contributions	\$13,587.73	
		UNION		Rollover Sources			\$63,259.03
				Non-Rollover Sources			\$163.93
				Non-Rollover Sources	1-Contributions	\$163.89	
				Non-Rollover Sources			\$5,158.63
				Non-Rollover Sources	1-Contributions	\$3,150.47	
				Non-Rollover Sources			\$14,857.02
				Non-Rollover Sources	1-Contributions	\$1,421.00	
				Non-Rollover Sources			\$8,974.44
				Non-Rollover Sources			\$71,694.82
				Non-Rollover Sources	1-Contributions	\$9,671.57	
				Non-Rollover Sources			\$35,806.93
				Non-Rollover Sources	1-Contributions	\$7,699.92	
				Rollover Sources			\$8,539.22
				Non-Rollover Sources			\$1,033.68
				Non-Rollover Sources	1-Contributions	\$623.06	
				Non-Rollover Sources			\$2,825.76
				Non-Rollover Sources	1-Contributions	\$2,773.29	
				Non-Rollover Sources			\$6,339.93
				Non-Rollover Sources	1-Contributions	\$8,066.69	
				Non-Rollover Sources			\$2,069.14
				Non-Rollover Sources	1-Contributions	\$4,456.79	
				Non-Rollover Sources			\$15,115.61
				Non-Rollover Sources	1-Contributions	\$9,225.60	
				Non-Rollover Sources			\$211,896.78
				Non-Rollover Sources	1-Contributions	\$17,515.74	
				Non-Rollover Sources			\$2,492.46

				Non-Rollover Sources	1-Contributions	\$1,240.47	
				Non-Rollover Sources			\$63,299.83
				Non-Rollover Sources	1-Contributions	\$2,187.42	
				Non-Rollover Sources			\$16,236.94
				Non-Rollover Sources			\$15,982.15
				Non-Rollover Sources			\$1,387.57
				Non-Rollover Sources	1-Contributions	\$902.09	
				Non-Rollover Sources			\$1,145.66
				Non-Rollover Sources	1-Contributions	\$1,125.95	
				Non-Rollover Sources			\$235.21
				Non-Rollover Sources	1-Contributions	\$235.14	
		UNION		Non-Rollover Sources			\$7,840.38
				Non-Rollover Sources			\$2,964.86
				Non-Rollover Sources	1-Contributions	\$1,321.73	
				Non-Rollover Sources			\$731.49
				Non-Rollover Sources	1-Contributions	\$707.52	
				Non-Rollover Sources			\$9,832.54
				Non-Rollover Sources	1-Contributions	\$1,082.61	
				Non-Rollover Sources			\$21,068.30
				Non-Rollover Sources	1-Contributions	\$1,590.00	
				Non-Rollover Sources			\$12,171.86
				Non-Rollover Sources	1-Contributions	\$1,260.74	
				Non-Rollover Sources			\$3,108.64
				Non-Rollover Sources	1-Contributions	\$2,351.89	
				Rollover Sources			\$14,953.88
				Non-Rollover Sources	1-Contributions	\$386.47	
				Non-Rollover Sources			\$2,691.10
				Non-Rollover Sources	1-Contributions	\$2,010.00	
				Non-Rollover Sources			\$9,249.85
				Non-Rollover Sources			\$10,256.84
				Non-Rollover Sources	1-Contributions	\$1,320.47	
				Non-Rollover Sources			\$1,148.28
				Non-Rollover Sources	1-Contributions	\$1,125.95	
				Non-Rollover Sources			\$3,184.52

				Non-Rollover Sources	1-Contributions	\$1,181.77	
				Non-Rollover Sources			\$2,025.90
				Non-Rollover Sources	1-Contributions	\$2,027.37	
				Non-Rollover Sources			\$10,804.23
				Non-Rollover Sources	1-Contributions	\$1,321.73	
				Non-Rollover Sources			\$3,963.92
				Non-Rollover Sources	1-Contributions	\$2,908.83	
				Non-Rollover Sources			\$16,338.77
				Non-Rollover Sources	1-Contributions	\$1,315.89	
				Non-Rollover Sources			\$2,496.49
				Non-Rollover Sources	1-Contributions	\$1,185.85	
				Non-Rollover Sources			\$1,513.78
				Non-Rollover Sources	1-Contributions	\$1,321.73	
				Non-Rollover Sources			\$2,997.94
				Non-Rollover Sources	1-Contributions	\$1,247.92	
				Non-Rollover Sources			\$11,839.45
				Rollover Sources			\$7,145.21
				Non-Rollover Sources	1-Contributions	\$652.01	
				Non-Rollover Sources			\$5,698.72
				Non-Rollover Sources	1-Contributions	\$2,400.00	
				Non-Rollover Sources			\$16,460.95
				Non-Rollover Sources	1-Contributions	\$1,881.12	
				Non-Rollover Sources			\$3,470.69
				Non-Rollover Sources	1-Contributions	\$1,061.03	
				Non-Rollover Sources			\$4,371.02
				Non-Rollover Sources	1-Contributions	\$2,226.79	
				Non-Rollover Sources			\$16,614.39
				Non-Rollover Sources	1-Contributions	\$1,321.73	
				Non-Rollover Sources			\$21,255.16
				Non-Rollover Sources	1-Contributions	\$4,834.97	
				Non-Rollover Sources			\$2,065.23
				Non-Rollover Sources	1-Contributions	\$1,068.33	
				Non-Rollover Sources			\$13,063.41
				Non-Rollover Sources	1-Contributions	\$1,316.49	

				Non-Rollover Sources			\$343.30
				Non-Rollover Sources	1-Contributions	\$342.86	
				Non-Rollover Sources			\$2,149.59
				Non-Rollover Sources	1-Contributions	\$2,142.79	
				Non-Rollover Sources			\$15,373.71
				Non-Rollover Sources	1-Contributions	\$3,701.71	
				Non-Rollover Sources			\$1,904.53
				Non-Rollover Sources	1-Contributions	\$1,042.77	
				Non-Rollover Sources			\$6,483.98
				Non-Rollover Sources	1-Contributions	\$3,941.55	
				Non-Rollover Sources			\$180.59
				Non-Rollover Sources	1-Contributions	\$1,321.39	
				Non-Rollover Sources			\$4,166.76
				Non-Rollover Sources	1-Contributions	\$2,199.34	
				Non-Rollover Sources			\$1,386.82
				Non-Rollover Sources	1-Contributions	\$1,326.70	
				Non-Rollover Sources			\$18,817.60
				Non-Rollover Sources	1-Contributions	\$1,316.48	
				Non-Rollover Sources			\$94,417.41
				Non-Rollover Sources			\$8,199.79
				Non-Rollover Sources	1-Contributions	\$1,366.05	
				Non-Rollover Sources			\$14,758.45
				Non-Rollover Sources			\$1,365.60
				Non-Rollover Sources	1-Contributions	\$506.49	
				Non-Rollover Sources			\$23,313.06
				Non-Rollover Sources	1-Contributions	\$19,500.00	
				Non-Rollover Sources			\$4,525.81
				Non-Rollover Sources	1-Contributions	\$3,371.06	
				Non-Rollover Sources			\$1,386.62
				Non-Rollover Sources	1-Contributions	\$1,322.00	
				Non-Rollover Sources			\$105.74
				Non-Rollover Sources	1-Contributions	\$105.90	
				Rollover Sources			\$2.11