Form 5500

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

This form is required to be filed for employee benefit plans under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and sections 6057(b) and 6058(a) of the Internal Revenue Code (the Code).

▶ **Complete all entries in accordance with the instructions to the Form 5500.**

OMB Nos. 1210-0110
1210-0089

2020

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

A This return/report is for:
- [ ] a multiemployer plan
- [ ] a multiple-employer plan (Filers checking this box must attach a list of participating employer information in accordance with the form instructions.)
- [X] 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:
- [X] Form 5558
- [ ] automatic extension
- [X] the DFVC program
- [ ] special extension (enter description)

Part II Basic Plan Information—enter all requested information

1a Name of plan
APPLE TEXAS GROUP 401(K) PLAN

1b Three-digit plan number (PN) ▶ 001

1c Effective date of plan 01/01/2014

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)
SSCP MANAGEMENT, INC.

13355 NOEL ROAD
SUITE 1645
DALLAS, TX 75240

2b Employer Identification Number (EIN)
27-4937438

2c Plan Sponsor's telephone number
972-644-9494

2d Business code (see instructions)
722511

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

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

SIGN HERE	Filed with authorized/valid electronic signature.	10/11/2023	CHERYL GREEN
	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

3a Plan administrator's name and address [X] Same as Plan Sponsor	**3b** Administrator's EIN	
	3c Administrator's telephone number	

4 If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: **a** Sponsor's name **c** Plan Name	**4b** EIN **4d** PN	

5 Total number of participants at the beginning of the plan year	**5**	1682
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)**	900
a(2) Total number of active participants at the end of the plan year	**6a(2)**	917
b Retired or separated participants receiving benefits	**6b**	26
c Other retired or separated participants entitled to future benefits	**6c**	699
d Subtotal. Add lines **6a(2)**, **6b**, and **6c**	**6d**	1642
e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits.	**6e**	1
f Total. Add lines **6d** and **6e**	**6f**	1643
g Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item)	**6g**	1550
h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested	**6h**	6
7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item)	**7**	

8a If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:

2A 2E 2F 2G 2J 2K 2S 2T 3D

b If the plan provides welfare benefits, enter the applicable welfare feature codes from the List of Plan Characteristics Codes in the instructions:

9a Plan funding arrangement (check all that apply)		**9b** Plan benefit arrangement (check all that apply)	
(1)	[ ] Insurance	**(1)**	[ ] Insurance
(2)	[ ] Code section 412(e)(3) insurance contracts	**(2)**	[ ] Code section 412(e)(3) insurance contracts
(3)	[X] Trust	**(3)**	[X] Trust
(4)	[ ] General assets of the sponsor	**(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)** [X] **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)** [X] **H** (Financial Information)
- **(2)** [ ] **I** (Financial Information – Small Plan)
- **(3)** [ ] 0 **A** (Insurance Information)
- **(4)** [X] **C** (Service Provider Information)
- **(5)** [ ] **D** (DFE/Participating Plan Information)
- **(6)** [ ] **G** (Financial Transaction Schedules)

Part III Form M-1 Compliance Information (to be completed by welfare benefit plans)

11a If the plan provides welfare benefits, was the plan subject to the Form M-1 filing requirements during the plan year? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

If "Yes" is checked, complete lines 11b and 11c.

11b Is the plan currently in compliance with the Form M-1 filing requirements? (See instructions and 29 CFR 2520.101-2.) ..... ☐ Yes ☐ No

11c Enter the Receipt Confirmation Code for the 2020 Form M-1 annual report. If the plan was not required to file the 2020 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code_____

SCHEDULE C (Form 5500)	Service Provider Information	OMB No. 1210-0110
Department of the Treasury Internal Revenue Service Department of Labor Employee Benefits Security Administration Pension Benefit Guaranty Corporation	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.**	**2020** **This Form is Open to Public Inspection.**

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

A Name of plan
APPLE TEXAS GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SSCP MANAGEMENT, INC.

D Employer Identification Number (EIN)
27-4937438

Part I Service Provider Information (see instructions)

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).. . . . . [X] 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

AMERICAN FUNDS

95-6817943

(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)

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

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

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

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

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

Part I Service Provider Information (continued)

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

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

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

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

a Name:

b EIN:

c Position:

d Address:

e Telephone:

Explanation:

SCHEDULE H (Form 5500)

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

Financial Information

This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code).

▶ **File as an attachment to Form 5500.**

OMB No. 1210-0110

2020

This Form is Open to Public Inspection

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

A Name of plan
APPLE TEXAS GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SSCP MANAGEMENT, INC.

D Employer Identification Number (EIN)
27-4937438

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 reported on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

Assets		(a) Beginning of Year	(b) End of Year
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)		
(2) Participant contributions	1b(2)		
(3) Other	1b(3)		
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	163101	103652
(2) U.S. Government securities	1c(2)		
(3) Corporate debt instruments (other than employer securities):			
(A) Preferred	1c(3)(A)		
(B) All other	1c(3)(B)		
(4) Corporate stocks (other than employer securities):			
(A) Preferred	1c(4)(A)		
(B) Common	1c(4)(B)		
(5) Partnership/joint venture interests	1c(5)		
(6) Real estate (other than employer real property)	1c(6)		
(7) Loans (other than to participants)	1c(7)		
(8) Participant loans	1c(8)	54470	66203
(9) Value of interest in common/collective trusts	1c(9)		
(10) Value of interest in pooled separate accounts	1c(10)		
(11) Value of interest in master trust investment accounts	1c(11)		
(12) Value of interest in 103-12 investment entities	1c(12)		
(13) Value of interest in registered investment companies (e.g., mutual funds)	1c(13)	3826350	4431675
(14) Value of funds held in insurance company general account (unallocated contracts)	1c(14)		
(15) Other	1c(15)		

			(a) Beginning of Year	**(b)** End of Year
1d	Employer-related investments:			
	(1) Employer securities	1d(1)		
	(2) Employer real property	1d(2)		
e	Buildings and other property used in plan operation	1e		
f	Total assets (add all amounts in lines 1a through 1e)	1f	4043921	4601530
	Liabilities			
g	Benefit claims payable	1g		
h	Operating payables	1h		
i	Acquisition indebtedness	1i		
j	Other liabilities	1j		
k	Total liabilities (add all amounts in lines 1g through1j)	1k	0	0
	Net Assets			
l	Net assets (subtract line 1k from line 1f)	1l	4043921	4601530

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)	15906	
	(B) Participants	2a(1)(B)	308461	
	(C) Others (including rollovers)	2a(1)(C)	0	
	(2) Noncash contributions	2a(2)		
	(3) Total contributions. Add lines **2a(1)(A), (B), (C),** and line **2a(2)**	2a(3)		324367
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)	2553	
	(F) Other	2b(1)(F)	0	
	(G) Total interest. Add lines **2b(1)(A)** through **(F)**	2b(1)(G)		2553
	(2) Dividends: **(A)** Preferred stock	2b(2)(A)	0	
	(B) Common stock	2b(2)(B)	0	
	(C) Registered investment company shares (e.g. mutual funds)	2b(2)(C)	130450	
	(D) Total dividends. Add lines **2b(2)(A)**, **(B)**, and **(C)**	2b(2)(D)		130450
	(3) Rents	2b(3)		0
	(4) Net gain (loss) on sale of assets: **(A)** Aggregate proceeds	2b(4)(A)	0	
	(B) Aggregate carrying amount (see instructions)	2b(4)(B)	0	
	(C) Subtract line **2b(4)(B)** from line **2b(4)(A)** and enter result	2b(4)(C)		0
	(5) Unrealized appreciation (depreciation) of assets: **(A)** Real estate	2b(5)(A)	0	
	(B) Other	2b(5)(B)	0	
	(C) Total unrealized appreciation of assets. Add lines **2b(5)(A)** and **(B)**	2b(5)(C)		0

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts	2b(6)		0
(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)		560811
c Other income	2c		-38097
d Total income. Add all **income** amounts in column (b) and enter total	2d		980084
Expenses			
e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	402419	
(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)		402419
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		4348
h Interest expense	2h		0
i Administrative expenses: **(1)** Professional fees	2i(1)	0	
(2) Contract administrator fees	2i(2)	15708	
(3) Investment advisory and management fees	2i(3)	0	
(4) Other	2i(4)	0	
(5) Total administrative expenses. Add lines **2i(1)** through **(4)**	2i(5)		15708
j Total expenses. Add all **expense** amounts in column (b) and enter total	2j		422475
Net Income and Reconciliation			
k Net income (loss). Subtract line **2j** from line **2d**	2k		557609
l Transfers of assets:			
(1) To this plan	2l(1)		0
(2) From this plan	2l(2)		

Part III Accountant's Opinion

3 Complete lines 3a through 3c if the opinion of an independent qualified public accountant is attached to this Form 5500. Complete line 3d if an opinion is not attached.

a The attached opinion of an independent qualified public accountant for this plan is (see instructions):

(1) [X] 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)** [X] 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: BAKER TILLY US, LLP **(2)** EIN: 39-0859910

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

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

Part IV Compliance Questions

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

During the plan year:

		Yes	No	Amount
a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)	4a	X		439033

			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?	**4e**	X		180000
f	Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?	**4f**		X	
g	Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4g**		X	
h	Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?	**4h**		X	
i	Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	**4i**	X		
j	Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)	**4j**		X	
k	Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?	**4k**		X	
l	Has the plan failed to provide any benefit when due under the plan?	**4l**		X	
m	If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)	**4m**		X	
n	If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3	**4n**			

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

2020

This Form is Open to Public Inspection.

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

A Name of plan
APPLE TEXAS GROUP 401(K) PLAN

B Three-digit plan number (PN) ▶ 001

C Plan sponsor's name as shown on line 2a of Form 5500
SSCP MANAGEMENT, INC.

D Employer Identification Number (EIN)
27-4937438

Part I Distributions

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

1 Total value of distributions paid in property other than in cash or the forms of property specified in the instructions **1** 0

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):

EIN(s): 95-6817943

Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.

3 Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year **3**

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____

If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) **6a**

b Enter the amount contributed by the employer to the plan for this plan year **6b**

c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount) **6c**

If you completed line 6c, skip lines 8 and 9.

7 Will the minimum funding amount reported on line 6c be met by the funding deadline? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

8 If a change in actuarial cost method was made for this plan year pursuant to a revenue procedure or other authority providing automatic approval for the change or a class ruling letter, does the plan sponsor or plan administrator agree with the change? ..... ☐ **Yes** ☐ **No** ☐ **N/A**

Part III Amendments

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

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

10 Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? ..... ☐ **Yes** ☐ **No**

11 a Does the ESOP hold any preferred stock? ..... ☐ **Yes** ☐ **No**

b If the ESOP has an outstanding exempt loan with the employer as lender, is such loan part of a "back-to-back" loan? (See instructions for definition of "back-to-back" loan.) ..... ☐ **Yes** ☐ **No**

12 Does the ESOP hold any stock that is not readily tradable on an established securities market? ..... ☐ **Yes** ☐ **No**

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_____

SSCP Management Group 401(k) Plan (formerly known as Apple Texas Group 401(k) Plan)

Financial Statements and
Supplementary Information

December 31, 2021, 2020, 2019, and 2018 (Restated)

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

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Independent Auditors' Report

To the Plan Administrator and Participants of the
Apple Texas Group 401(k) Plan

Report on the Financial Statements

We have audited the accompanying financial statements of Apple Texas Group 401(k) Plan (the Plan), which comprise the statements of net assets available for benefits as of December 31, 2020, 2019, and 2018 (restated), 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's Responsibility for the Financial Statements

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

Auditors' Responsibility

Our responsibility is to express an opinion on these financial statements based on our audits in accordance with auditing standards generally accepted in the United States of America. Those standards require that we plan and performs the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal controls relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal controls. Accordingly, we express no such opinion. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2020, 2019, and 2018 (restated), and the changes in net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

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Emphasis of Matters

As disclosed in Note 1 to the financial statements, the financial statements have been restated to correct an error related to the recording of the correction related to qualified non-elective contributions noted in Note 8.

As disclosed in Note 1 to the financial statements, the Apple Gilroy, Inc. 401(k) Plan merged into the Plan, effective January 1, 2019. Our opinion is not modified with respect to this matter.

Other Matter - Supplementary Schedules

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Schedule H, line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2020 and 2019, and Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the years ended December 31, 2020 and 2019, are required by the Department of Labor's (DOL) Rules and Regulations for Reporting and Disclosures under the Employee retirement Income Security Act of 1974 (ERISA) and are presented for the purpose of additional analysis and are not a required part of the financial statements. Such information is the responsibility of the Plan's management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States of America. In our opinion, the information is fairly stated in all material respects in relation to the financial statements as a whole.

Baker Tilly US, LLP

Plano, Texas
October 10, 2023

Independent Auditors' Report

To the Participants and Plan Administrator of the
SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Opinion

We have audited the financial statements of the SSCP Management Group 401(k) Plan (formerly known as Apple Texas Group 401(k) Plan) (the Plan), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statement of net assets available for benefits as of December 31, 2021, and the related statement of changes in net assets available for benefits for the year then ended, and the related notes to the financial statements.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of the Plan as of December 31, 2021, and the changes in its net assets available for benefits for the year then ended, in accordance with accounting principles generally accepted in the United States of America.

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern 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.

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Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.

- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.

- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

Our audit were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year) as of December 31, 2021, and the Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions for the year ended December 31, 2021, 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 (DOL) 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 has been subjected to the auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

In forming our opinion on the supplemental schedules, we evaluated whether the supplemental schedules, including their form and content, are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

In our opinion, the information in the accompanying schedules is fairly stated, in all material respects, in relation to the financial statements as a whole, and the form and content are presented in conformity with the DOL's Rules and Regulations for Reporting and Disclosure under ERISA.

Baker Tilly US, LLP

Plano, Texas
October 10, 2023

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Statements of Net Assets Available for Benefits
December 31, 2021, 2020, 2019, and 2018 (Restated)

	2021	2020	2019	2018 (Restated)
Assets				
Investments at fair value				
Mutual funds of registered investment companies	$ -	$ 4,431,675	$ 3,826,017	$ 1,695,593
Money market fund	-	103,652	163,375	79,447
Common collective trusts	5,193,244	-	-	-
Pooled separate account	58,304	-	-	-
Total investments at fair value	5,251,548	4,535,327	3,989,392	1,775,040
Receivables:				
Notes receivable from participants	32,196	66,203	54,529	2,178
Participant contributions	-	11,409	19,829	16,345
Company contributions	-	4,718	8,009	7,268
Qualified nonelective contributions (Note 8)	270,054	305,474	211,071	105,120
Total receivables	302,250	387,804	293,438	130,911
Net assets available for benefits	$ 5,553,798	$ 4,923,131	$ 4,282,830	$ 1,905,951

See notes to financial statements

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Statements of Changes in Net Assets Available for Benefits
Years Ended December 31, 2021, 2020, 2019, and 2018 (Restated)

	2021	2020	2019	2018 (Restated)
Additions				
Investment income (loss):				
Interest and dividends	$ 11,271	$ 130,450	$ 129,795	$ 67,942
Net appreciation (depreciation) of fair value of investments	509,365	522,714	342,435	(177,877)
Other income	-	-	6,847	-
Total net investment income (loss)	520,636	653,164	479,077	(109,935)
Interest income on notes receivable from participants	2,032	2,553	1,063	126
Contributions:				
Participants	244,729	280,111	358,302	306,765
Rollovers and other	-	-	-	43,624
Company, net	32,174	3,528	143,549	119,580
Qualified nonelective (Note 8)	76,560	123,420	105,951	105,120
Total contributions	353,463	407,059	607,802	575,089
Total additions	876,131	1,062,776	1,087,942	465,280
Deductions				
Benefits paid directly to participants	231,478	406,767	365,807	142,230
Administrative expenses, net	13,986	15,708	7,810	6,970
Total deductions	245,464	422,475	373,617	149,200
Net increase	630,667	640,301	714,325	316,080
Transfer In From Affiliated Plan (Note 1)	-	-	1,662,554	-
Net Assets Available for Benefits				
Beginning of year	4,923,131	4,282,830	1,905,951	1,589,871
End of year	$ 5,553,798	$ 4,923,131	$ 4,282,830	$ 1,905,951

See notes to financial statements

1. Description of the Plan

General

The SSCP Management Group 401(k) Plan (formerly known as Apple Texas Group 401(k) Plan) (the Plan), established January 1, 2014, and amended and restated November 4, 2016 and November 1, 2021, is a defined contribution plan, subject to the provisions of the Employee Retirement Income Security Act of 1974, as amended (ERISA). The Plan covers substantially all employees of the Plan's Sponsor, SSCP Management, Inc. and affiliates (the Company or Plan Administrator). Through October 31, 2021, Capital Group Companies Inc. served as the Plan's custodian (Capital Group). Effective November 1, 2021, Ameritas Life Insurance Corporation serves as the Plan's Custodian (Ameritas). Collectively, Capital Group and Ameritas are the Plan's Custodians. The following description provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

Effective December 11, 2018, a special plan entry date of January 1, 2019, allowed former employees of Apple Gilroy, Inc., who were eligible under the Apple Gilroy, Inc. 401(k) Plan, to participate, and Apple Gilroy, Inc. was identified as a predecessor employer for vesting purposes.

Effective January 1, 2019, the Apple Gilroy, Inc. 401(k) Plan merged into the Plan. This has been recorded as a Transfer In from Affiliated Plan of $1,662,554 in the Statement of Changes in Net Assets Available for Benefits for the year ended December 31, 2019.

Effective January 1, 2019, bonus compensation was excluded from the definition of compensation.

Effective November 1, 2021, the Plan was amended and restated due to a new Internal Revenue Service (IRS) determination letter dated June 30, 2020, Ameritas Life Insurance Corporation serves as the Plan's Custodian, and the Plan name changed to SSCP Management Group 401(k) Plan.

Correction of Error in Previously Issued Financial Statements

The Company identified an error impacting the Plan's financial statements as of and for the year ended December 31, 2018. Specifically, the Plan recorded a receivable as mentioned in Note 8 failures (i) and (ii). The Plan financial statements were adjusted to correct this failure by recording qualified non-elective contributions receivable and qualified non-elective contributions. The qualified non-elective contributions receivable and related contributions were presented separately and were additionally recorded as Company contributions receivable on the Statement of Net Assets available for Benefits, and as Company contributions on the Statement of Changes in Net Assets Available for Benefits. The error resulted in an overstatement in Company contributions receivable, Company contributions, and net assets available for benefits of $105,120. The Company has restated Company contributions receivable, Company contributions, and net assets available for benefits as of December 31, 2018, as reported in the accompanying Statements of Net Assets Available for Benefits as of December 31, 2021, 2020, 2019, and 2018, to reflect the correction of this error. Such revision resulted in a decrease in net assets available for benefits as of December 31, 2018, in the amount of $105,120.

Eligibility and Participant Accounts

All qualifying employees of the Company, which excludes hourly employees, highly compensated employees, union employees, leased employees, and residents of Puerto Rico, as defined by the plan document, who have attained the age of 21 and have completed three months of service, are eligible to participate in the Plan on the first of the month after attainment of aforementioned eligibility. Subject to certain limitations on annual additions, each participant's account is credited with participant elective deferrals, Company matching contributions, and Company discretionary nonelective contributions, an allocation of Plan earnings, and charged with certain administrative expenses. The allocations are based on participant account balances, as defined. Participants may modify investment elections, transfer existing account balances, and obtain information regarding the investments on a daily basis.

Contributions

The Plan is funded through participant pre-tax elective deferrals, Roth deferrals, rollover contributions, Company matching contributions, and Company discretionary nonelective contributions. Each year participants may contribute a percentage of his or her pre-tax compensation, subject to certain Plan defined exclusions and maximum limitations imposed by the Internal Revenue Code (IRC) ($19,500, $19,500, $19,000, and $18,500 for 2021, 2020, 2019, and 2018, respectively). Employees who are eligible to make elective deferrals under the Plan and who have attained the age of 50 before the close of the Plan year are also eligible to make catch-up contributions of his or her compensation, subject to the maximum limitation imposed by the IRC ($6,500, $6,500, $6,000 and $6,000 for 2021, 2020, 2019, and 2018, respectively). Rollover contributions, representing distributions from other qualified defined benefit or contribution plans, are permitted by the Plan, and may be made prior to meeting the eligibility requirements for participation in the Plan.

The Plan had an automatic enrollment deferral feature for new and existing participants set at 1%, unless opted-out by the participants. Effective May 1, 2020, the Plan was amended to remove the automatic enrollment feature.

The Plan also allows for Company matching contributions of 50% of participant elective deferrals, up to a maximum of $1,500 of elective deferrals ($750). There were no Company discretionary nonelective contributions for the years ended December 31, 2021, 2020, 2019, and 2018.

Investment Options

The Plan provides for participants to direct both participant contributions and Company contributions into a variety of mutual funds of registered investment companies, common collective trusts, a pooled separate account and a money market fund in accordance with participant investment elections and the provisions of the Custodial agreement. Participants should refer to the Plan website for additional fund information.

Benefits Paid to Participants

Upon normal retirement age, death, disability, or termination, a participant's benefits may be payable in a lump-sum amount equal to 100% of the participant's vested account balance. Participants may also make hardship withdrawals on the balance of their account related to their vested account balance. Such withdrawals are subject to meeting hardship guidelines established by Internal Revenue Service (IRS). For vested account balances greater than $5,000, participants may elect a distribution in the form of a single lump sum payment. Upon termination, vested account balances less than $5,000 may be distributed to the applicable terminated participant within a reasonable time after termination or rolled over to an individual retirement account selected by the Plan Administrator.

Vesting

Participants are fully vested in both participant contributions, rollover contributions, and actual earnings thereon. Vesting in the Company's contributions, plus actual earnings thereon, is based on 1,000 hours of continuous service. The participant is vested 20% per year beginning after two years of qualified service, and is 100% vested after 6 years of qualified service or upon occurrence of the participant's retirement, death, or disability, as defined by the Plan document.

Forfeitures

Forfeitures of terminated participants' nonvested accounts are used to reduce Company contributions or to pay Plan administrative expenses. These forfeitures are shown as a component of net assets available for benefits. At December 31, 2021, 2020, 2019, and 2018, forfeited nonvested accounts available totaled $58,304, $74,741, $117,802, and $79,133, respectively. During 2021, 2020, 2019, and 2018, forfeitures in the amount of $51,670, $107,393, $0, and $0, respectively, were utilized to reduce Company contributions and pay administrative expenses.

Revenue Sharing

The Plan has a revenue sharing account, which is funded by the Trustee. Revenue sharing accounts are used to pay administrative expenses or are reallocated to participant accounts. At December 31, 2021, 2020, 2019, and 2018, there was $0, $11,153, $6,768, and $0, respectively, of revenue sharing account balance available. For the years ended December 31, 2021, 2020, 2019, and 2018, revenue sharing funds of $46,575, $24,827, $0, and $0, respectively, were used to pay administrative expense.

Notes Receivable From Participants

Notes receivable from participants are limited to a minimum of $1,000 up to a maximum of the lesser of $50,000 or 50% of their vested account balance, subject to certain restrictions as defined by the IRS. The participant can only have one note receivable outstanding at any time. The notes are secured by the balance in the participant's account and bear interest at a rate of the prime rate plus 2% or determined reasonable by the Plan Administrator. Through August 31, 2019, terms were limited to a maximum of five years unless for the purchase of a principal residence. Effective September 1, 2019, the Plan was amended to not allow loan payments to exceed five years, for the purchase of a principal residence. Repayments are made through payroll deductions and are reinvested in the participant accounts according to individual investment elections. At December 31, 2021, the notes receivable balances have a maturity date range of January 2022 to July 2025 and have an interest rate range of 5.25% to 7.50%. At December 31, 2020, the notes receivable balances have a maturity date range of January 2021 to August 2025 and have an interest rate range of 5.25% to 7.25%. At December 31, 2019, the notes receivable balances have a maturity date range of May 2020 to October 2023 and have an interest rate range of 6.75% to 7.50%. At December 31, 2018, the note receivable balance has a maturity date of August 2023 and has an interest rate of 7.00%.

Expenses

Certain expenses of maintaining the Plan are paid by the Plan, unless otherwise paid by the Company. Expenses that are paid by the Company are excluded from these financial statements. Fees related to the administration of notes receivable from participants and fees paid related to benefits paid are charged directly to the participant's account and are included in administrative expenses. Investment related expenses are included in net appreciation (depreciation) of fair value of investments.

Plan Termination

Although it has not expressed any intent to do so, the Company reserves the right to terminate the Plan at any time, subject to the provisions of ERISA. In the event the Plan is terminated, each of the participants will become 100% vested in their account including all Company contributions, subject to payment of liquidation costs and expenses.

Coronavirus Aid Relief and Economic Security Act

On March 27, 2020, the Coronavirus Aid Relief and Economic Security (CARES) Act was signed into law. This aid package was designed to help the economy from the effects of the coronavirus pandemic, several of the provisions of CARES Act affected employee benefit plans. The provisions of the CARES Act were optional. During 2020, the Plan opted into the following provisions of the CARES Act:

- Hardship distributions - Qualified plan participants were permitted to take a coronavirus-related distribution of up to $100,000 from the Plan without a 10% early withdrawal penalty. Eligible distributions were permitted to be taken up until December 30, 2020. Distributions may be repaid within three years or a participant may elect these distributions to be included in taxable income on a pro rata basis over three years.

- Participant loans - Qualified plan participants with loans outstanding were permitted to defer payment on the loans that were due during 2020 to after January 1, 2021.

- Participant loans - Qualified plan participants may have borrowed up to $100,000 during 2020 (an increase from $50,000 previously permitted), these repayments may be delayed to 2021.

- Required minimum distributions (RMDs) - A temporary waiver of required minimum distributions rules permitted participants to suspend their RMDs for 2020 for participants that turned 70 ½ in 2019 and 72 in 2020.

2. Summary of Significant Accounting Policies

Basis of Accounting

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

Use of Estimates

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

Payment of Benefits

Benefits are recorded when paid.

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. See Note 3, Fair Value Measurements. Purchases and sales of securities are recorded on a trade-date basis. Interest income is recorded on the accrual basis. Dividends are recorded on the ex-dividend date. The income or loss earned on participant accounts is allocated on a daily basis using the previous day's ending account balance. Net appreciation (depreciation) of fair value of investments includes the Plan's gains and losses on investments bought and sold, as well as held during the year.

Notes Receivable From Participants

Notes receivable from participants are measured at their unpaid principal balances plus any accrued unpaid interest. Interest income is recognized on the accrual basis. Delinquent notes receivable from participants are reclassified as distributions based upon terms of the Plan document or note policy of the Plan. Notes receivable are valued at amortized cost, which approximates fair value. No allowance for credit losses has been recorded as of December 31, 2021, 2020, 2019, or 2018.

3. Fair Value Measurements

The framework for measuring fair value provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (Level 1) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under authoritative guidance 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 other than quoted prices included within Level 1 that are observable for the asset or liability, either directly or indirectly, such as:

- quoted prices for similar assets or liabilities in active markets;
- quoted prices for identical or similar assets or liabilities in inactive markets;
- inputs other than quoted prices that are observable 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 observables and minimize the use of unobservable inputs.

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2021, 2020, 2019, and 2018.

Mutual funds of registered investment companies are valued at the net asset value (NAV) or quoted market prices of shared held by the Plan at year-end.

Money market fund is valued at cost of $1 per unit, which represents the NAV at year-end.

Pooled separate account is valued at the NAV of shares held by the Plan at year end, as determined by the Custodian. The NAV is based on the fair value of the underlying investments held by the fund less its liabilities. This NAV is not used when it is determined to be probable that the fund will sell the investment for an amount different than the reported NAV. The Custodian reserves the right to temporarily delay withdrawals from the trust in order to ensure that securities liquidations will be carried out in an orderly business manner.

Common collective trusts are valued at the NAV of shares held by the Plan at year end, as determined by the Custodian. The NAV is based on the fair value of the underlying investments held by the funds less its liabilities. This NAV is not used when it is determined to be probable that the funds will sell the investment for an amount different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the common collective trusts, the Custodian reserves the right to temporarily delay withdrawals from the trusts in order to ensure that securities liquidations will be carried out in an orderly business manner.

The following table sets forth by level, within the fair value hierarchy the Plan's assets at fair value as of December 31, 2021, 2020, 2019, and 2018:

	Assets at Fair Value as of December 31, 2021			
	Level 1	**Level 2**	**Level 3**	**Total**
Common collective trusts	$ -	$ 5,193,244	$ -	$ 5,193,244
Pooled separate account	-	58,304	-	58,304
Total investments at fair value	$ -	$ 5,251,548	$ -	$ 5,251,548

	Assets at Fair Value as of December 31, 2020			
	Level 1	**Level 2**	**Level 3**	**Total**
Mutual funds of registered investment companies	$ 4,431,675	$ -	$ -	$ 4,431,675
Money market fund	103,652	-	-	103,652
Total investments at fair value	$ 4,535,327	$ -	$ -	$ 4,535,327

	Assets at Fair Value as of December 31, 2019			
	Level 1	**Level 2**	**Level 3**	**Total**
Mutual funds of registered investment companies	$ 3,826,017	$ -	$ -	$ 3,826,017
Money market fund	163,375	-	-	163,375
Total investments at fair value	$ 3,989,392	$ -	$ -	$ 3,989,392

	Assets at Fair Value as of December 31, 2018			
	Level 1	**Level 2**	**Level 3**	**Total**
Mutual funds of registered investment companies	$ 1,695,593	$ -	$ -	$ 1,695,593
Money market fund	79,447	-	-	79,447
Total investments at fair value	$ 1,775,040	$ -	$ -	$ 1,775,040

4. Tax Status

The Plan was based on a volume submitter profit sharing plan with CODA, from David W. Ralston, LLC, which received a favorable opinion letter dated March 31, 2014, from the IRS stating that the volume submitter profit sharing plan with CODA constituted a qualified plan under Section 401 of the IRC. Effective November 1, 2021, the Plan is based on a non-standardized pre-approved profit sharing/money purchase/CODA plan, from Ameritas Life Insurance Corporation, which received a favorable opinion letter dated June 30, 2020, from the IRS stating that the non-standardize pre-approved profit sharing/money purchase/CODA plan constitutes a qualified plan under Section 401 of the IRC. The Plan Administrator believes the Plan, as adopted and amended, is operating within the guidelines of the IRC and continues to be tax exempt. Accordingly, no provision for federal income taxes has been provided in the accompanying financial statements.

U.S. GAAP requires Plan management to evaluate tax positions taken by the Plan and recognize a tax liability (or asset) if the organization has taken an uncertain position that more likely than not would not be sustained upon examination by the Department of Labor (DOL) or IRS. The Plan is subject to routine audits by taxing jurisdictions; however, the Plan is currently under DOL review covering the period January 1, 2018 through the present date.

5. Risks and Uncertainties

Investment securities are exposed to various risks, such as interest rate, concentration, market, and credit risks. Market risks include global events such as a pandemic or international conflict which could impact the value of investment securities. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the Statements of Net Assets Available for Benefits.

6. Related-Party and Party in Interest Transactions

Certain of the Plan's investments are managed by the Custodian or an affiliate of the Custodian; therefore, these transactions qualify as party in interest transactions. The Plan issues notes receivable to participants, which are secured by the participant's account balances. These transactions also qualify as party in interest transactions.

Certain administrative functions of the Plan are performed by an officer or employees of the Company. No such officer or employee receives compensation from the Plan.

7. Delinquent Contributions

During 2021, 2020, 2019, 2018, and 2015, participant withholdings in the amount of $97,691, $189,642, $170,406, $7,290, and $71,695, respectively, were unintentionally late in being transferred to the Plan. The Company plans to correct these late remittances with lost earnings and interest calculated using the DOL's guidelines for late remittances.

8. Qualified Nonelective Contributions Receivable

The Company identified certain failures relating to (i) eligible compensation related to certain participants, (ii) the Plan's eligibility requirements and the operation of these eligibility requirements, (iii) improper vesting, (iv) non-remittance of participant deferrals and matching contributions, (v) improper match formula for certain participants, and (vi) improper application of participant deferral elections. The Company will submit an application under the Voluntary Correction Program (VCP) to the IRS pursuant to the Employee Plans Compliance Resolution System (EPCRS), which will outline the foregoing failures and proposed corrective actions related to such failures. The Company has recorded corrective qualified nonelective contributions receivable as of December 31, 2021, 2020, 2019, and 2018, in the accompanying Statements of Net Assets Available for Benefits, based on calculations for the failures. This receivable reflects the corrections to be made to correct above failures. These amounts will be remitted in 2023 by the Company and credited to participant accounts within the time frame required under the EPCRS. No provision for income taxes has been included in the Plan's financial statements related to the foregoing matters because the Company believes that the Plan continues to be qualified, and the tax status of the Plan continues to be tax-exempt.

9. Reconciliation of Financial Statements to Form 5500

The following is a reconciliation of net assets available for benefits per the financial statements to the Form 5500 at December 31:

	2021	2020	2019	2018
Net assets available for benefits per the financial statements	$ 5,553,798	$ 4,923,131	$ 4,282,830	$ 1,905,951
Less qualified nonelective contributions receivable	(270,054)	(305,474)	(211,071)	(105,120)
Less participant contributions receivable	-	(11,409)	(19,829)	(16,345)
Less Company contributions receivable	-	(4,718)	(8,009)	(7,268)
Net assets available for benefits per Form 5500	$ 5,283,744	$ 4,601,530	$ 4,043,921	$ 1,777,218

The following is a reconciliation of the net increase in net assets available for benefits per the financial statements to the Form 5500 for the years ended December 31:

	2021	2020	2019	2018
Net increase in net assets available for benefits per the financial statements	$ 630,667	$ 640,301	$ 714,325	$ 316,080
Less current year qualified nonelective contributions receivable	(270,054)	(305,474)	(211,071)	(105,120)
Less current year participant contributions receivable	-	(11,409)	(19,829)	(16,345)
Less current year Company contributions receivable	-	(4,718)	(8,009)	(7,268)
Add prior year qualified nonelective contributions receivable	305,474	211,071	105,120	-
Less prior year participant contributions receivable	11,409	19,829	16,345	-
Less prior year Company contributions receivable	4,718	8,009	7,268	-
Net increase in net assets available for benefits per Form 5500	$ 682,214	$ 557,609	$ 604,149	$ 187,347

10. Subsequent Events

In accordance with Financial Accounting Standards Board (FASB) Accounting Standards Codification (ASC) 855, *Subsequent Events*, the Plan has evaluated events or transactions occurring after December 31, 2021, the Statements of Net Assets Available for Benefits date, through October 10, 2023, the date the financial statements were ready to be issued, and determined there were no events or transactions, except for noted below, that would impact the financial statements as of and for the year ended December 31, 2021.

The SECURE 2.0 Act of 2022 was signed into law on December 29, 2022. This legislation includes a vast array of provisional changes to retirement plans, becoming effective in 2023 and beyond. Plan management is evaluating the impact of the adoption and implementation of this legislation on the Plan.

Effective June 19, 2023, the Plan was restated due to a new favorable opinion letter from the IRS for CCH Incorporated, DBA ftwilliam.com, dated June 30, 2020. The Plan now allows for highly compensated employees and hourly employees, excluding hourly employees of OS Pacific, LLC that are not titled as Sous Chefs or Private Dining Managers, to participate in the Plan. In additional, the Plan was amended to make the Company matching formula discretionary up to $1,500.

Effective February 2023, the Cici Enterprise, L.P. and Affiliates 401(k) Plan merged into the Plan.

Effective September 26, 2023, the Plan was amended and restated to limit Company discretionary contributions to $750 annually.

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions
EIN: 27-4937438 Plan Number: 001
Year Ended December 31, 2021

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to the Plan (1)	**Contributions Not Corrected**	**Contributions Corrected Outside of VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**
$ 536,724	$ 536,724	$ -	$ -	$ -

(1) Amount includes participant loan repayments.

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions
EIN: 27-4937438 Plan Number: 001
Year Ended December 31, 2020

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to the Plan (1)	**Contributions Not Corrected**	**Contributions Corrected Outside of VFCP**	**Contributions Pending Correction in VFCP**	**Total Fully Corrected Under VFCP and PTE 2002-51**
$ 439,033	$ 439,033	$ -	$ -	$ -

(1) Amount includes participant loan repayments.

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(a) - Schedule of Delinquent Participant Contributions
EIN: 27-4937438 Plan Number: 001
Year Ended December 31, 2019

	Total That Constitutes Nonexempt Prohibited Transactions			
Participant Contributions Transferred Late to the Plan (1)	Contributions Not Corrected	Contributions Corrected Outside of VFCP	Contributions Pending Correction in VFCP	Total Fully Corrected Under VFCP and PTE 2002-51
$ 249,391	$ 249,391	$ -	$ -	$ -

(1) Amount includes participant loan repayments.

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
EIN: 27-4937438 Plan Number: 001
December 31, 2021

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Pooled Separate Account			
*	Ameritas Life Insurance	Ameritas Life Insurance Corp Separate Account G	N/R	$ 58,304
	Common Collective Trusts			
	Wilmington Trust, N.A	Wilmington Trust CIT FlexPath Index Moderate 2025 Fund Class I1	N/R	698,570
	Wilmington Trust, N.A	Wilmington Trust CIT FlexPath Index Moderate 2035 Fund Class I1	N/R	1,490,888
	Wilmington Trust, N.A	Wilmington Trust CIT FlexPath Index Moderate 2045 Fund Class I1	N/R	1,510,373
	Wilmington Trust, N.A	Wilmington Trust CIT FlexPath Index Moderate 2055 Fund Class I1	N/R	1,474,569
	Wilmington Trust, N.A	Wilmington Trust CIT Flexpath Index Moderate Retirement Fund Class I1	N/R	18,844
		Total common collective trusts		5,193,244
		Total investments at fair value		5,251,548
*	**Participant Loans**	Interest rate: 5.25% - 7.50%	$0	32,196
		Total		$ 5,283,744

* A party in interest as defined by ERISA
N/R - cost omitted for participant directed investments

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
EIN: 27-4937438 Plan Number: 001
December 31, 2020

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Money Market Fund			
*	American Funds	American Funds US Government Money Market Fund R2	N/R	$ 103,652
	Mutual Funds of Registered Investment Companies			
*	American Funds	American Funds American Mutual R2	N/R	6,812
*	American Funds	American Funds Investment Company of America R2	N/R	25,546
*	American Funds	American Funds Growth Fund of America R2	N/R	40,376
*	American Funds	American Funds Income Fund of America R2	N/R	25,178
*	American Funds	American Funds American Balanced R2	N/R	9,719
*	American Funds	American Funds 2010 Target Date Retirement R2	N/R	759
*	American Funds	American Funds 2015 Target Date Retirement R2	N/R	13,377
*	American Funds	American Funds 2020 Target Date Retirement R2	N/R	135,952
*	American Funds	American Funds 2025 Target Date Retirement R2	N/R	272,676
*	American Funds	American Funds 2030 Target Date Retirement R2	N/R	509,634
*	American Funds	American Funds 2035 Target Date Retirement R2	N/R	567,554
*	American Funds	American Funds 2040 Target Date Retirement R2	N/R	566,540
*	American Funds	American Funds 2045 Target Date Retirement R2	N/R	674,106
*	American Funds	American Funds 2050 Target Date Retirement R2	N/R	725,177
*	American Funds	American Funds 2055 Target Date Retirement R2	N/R	551,912
*	American Funds	American Funds 2065 Target Date Retirement R2	N/R	5,422
*	American Funds	American Funds AMCAP R2	N/R	5,349
*	American Funds	American Funds Europacific Growth R2	N/R	9,658
*	American Funds	American Funds Intermediate Bond Fund of America R2	N/R	76
*	American Funds	American Funds US Government Securities Fund R2	N/R	1,757
*	American Funds	American Funds 2060 Target Date Retirement R2	N/R	284,095
		Total mutual funds of registered investment companies		4,431,675
		Total investments at fair value		4,535,327
*	**Participant Loans**	Interest rate: 5.25% - 7.25%	$0	66,203
		Total		$ 4,601,530

* A party in interest as defined by ERISA
N/R - cost omitted for participant directed investments

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
EIN: 27-4937438 Plan Number: 001
December 31, 2019

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Money Market Fund			
*	American Funds	American Funds US Government Money Market Fund R2	N/R	$ 163,375
	Mutual Funds of Registered Investment Companies			
*	American Funds	American Funds American Mutual R2	N/R	11,710
*	American Funds	American Funds Investment Company of America R2	N/R	25,708
*	American Funds	American Funds Growth Fund of America R2	N/R	43,062
*	American Funds	American Funds Income Fund of America R2	N/R	29,905
*	American Funds	American Funds American Balanced R2	N/R	9,677
*	American Funds	American Funds 2010 Target Date Retirement R2	N/R	123
*	American Funds	American Funds 2015 Target Date Retirement R2	N/R	19,011
*	American Funds	American Funds 2020 Target Date Retirement R2	N/R	121,505
*	American Funds	American Funds 2025 Target Date Retirement R2	N/R	224,205
*	American Funds	American Funds 2030 Target Date Retirement R2	N/R	434,440
*	American Funds	American Funds 2035 Target Date Retirement R2	N/R	470,709
*	American Funds	American Funds 2040 Target Date Retirement R2	N/R	514,547
*	American Funds	American Funds 2045 Target Date Retirement R2	N/R	618,387
*	American Funds	American Funds 2050 Target Date Retirement R2	N/R	631,048
*	American Funds	American Funds 2055 Target Date Retirement R2	N/R	438,109
*	American Funds	American Funds AMCAP R2	N/R	3,298
*	American Funds	American Funds Europacific Growth R2	N/R	3,663
*	American Funds	American Funds Intermediate Bond Fund of America R2	N/R	1,651
*	American Funds	American Funds US Government Securities Fund R2	N/R	413
*	American Funds	American Funds 2060 Target Date Retirement R2	N/R	217,264
*	American Funds	American Funds Short-Term Tax-Exempt Bond Fund R2	N/R	7,582
		Total mutual funds of registered investment companies		3,826,017
		Total investments at fair value		3,989,392
*	**Participant Loans**	Interest rate: 6.75% - 7.50%	$0	54,529
		Total		$ 4,043,921

* A party in interest as defined by ERISA
N/R - cost omitted for participant directed investments

SSCP Management Group 401(k) Plan
(formerly known as Apple Texas Group 401(k) Plan)

Schedule H, Line 4(i) - Schedule of Assets (Held at End of Year)
EIN: 27-4937438 Plan Number: 001
December 31, 2020

(a)	(b) Identity of Issuer, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(d) Cost	(e) Current Value
	Money Market Fund			
*	American Funds	American Funds US Government Money Market Fund R2	N/R	$ 103,652
	Mutual Funds of Registered Investment Companies			
*	American Funds	American Funds American Mutual R2	N/R	6,812
*	American Funds	American Funds Investment Company of America R2	N/R	25,546
*	American Funds	American Funds Growth Fund of America R2	N/R	40,376
*	American Funds	American Funds Income Fund of America R2	N/R	25,178
*	American Funds	American Funds American Balanced R2	N/R	9,719
*	American Funds	American Funds 2010 Target Date Retirement R2	N/R	759
*	American Funds	American Funds 2015 Target Date Retirement R2	N/R	13,377
*	American Funds	American Funds 2020 Target Date Retirement R2	N/R	135,952
*	American Funds	American Funds 2025 Target Date Retirement R2	N/R	272,676
*	American Funds	American Funds 2030 Target Date Retirement R2	N/R	509,634
*	American Funds	American Funds 2035 Target Date Retirement R2	N/R	567,554
*	American Funds	American Funds 2040 Target Date Retirement R2	N/R	566,540
*	American Funds	American Funds 2045 Target Date Retirement R2	N/R	674,106
*	American Funds	American Funds 2050 Target Date Retirement R2	N/R	725,177
*	American Funds	American Funds 2055 Target Date Retirement R2	N/R	551,912
*	American Funds	American Funds 2065 Target Date Retirement R2	N/R	5,422
*	American Funds	American Funds AMCAP R2	N/R	5,349
*	American Funds	American Funds Europacific Growth R2	N/R	9,658
*	American Funds	American Funds Intermediate Bond Fund of America R2	N/R	76
*	American Funds	American Funds US Government Securities Fund R2	N/R	1,757
*	American Funds	American Funds 2060 Target Date Retirement R2	N/R	284,095
		Total mutual funds of registered investment companies		4,431,675
		Total investments at fair value		4,535,327
*	**Participant Loans**	Interest rate: 5.25% - 7.25%	$0	66,203
		Total		$ 4,601,530

* A party in interest as defined by ERISA
N/R - cost omitted for participant directed investments