

<p style="text-align: center;"><b>Form 5500</b></p> <p style="font-size: small;">Department of the Treasury Internal Revenue Service</p> <hr/> <p style="font-size: small;">Department of Labor Employee Benefits Security Administration</p> <hr/> <p style="font-size: x-small;">Pension Benefit Guaranty Corporation</p>	<p><b>Annual Return/Report of Employee Benefit Plan</b></p> <p style="font-size: x-small;">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).</p> <p style="text-align: center;"><b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b></p>	<p style="font-size: x-small;">OMB Nos. 1210-0110 1210-0089</p> <hr/> <p style="font-size: large; font-weight: bold; text-align: center;">2024</p> <hr/> <p style="text-align: center; font-weight: bold;">This Form is Open to Public Inspection</p>
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**Part I Annual Report Identification Information**  
 For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

**A** This return/report is for:  a multiemployer plan  a multiple-employer plan (Filers checking this box must provide 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**

<p><b>1a</b> Name of plan <u>ACQUIA, INC. 401(K) PLAN</u></p>	<p><b>1b</b> Three-digit plan number (PN) ▶ <u>001</u></p>
<p><b>2a</b> 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>ACQUIA, INC.</u></p> <p><u>53 STATE STREET</u> <u>10TH FLOOR</u> <u>BOSTON, MA 02109</u></p>	<p><b>1c</b> Effective date of plan <u>08/01/2008</u></p> <p><b>2b</b> Employer Identification Number (EIN) <u>26-0493001</u></p> <p><b>2c</b> Plan Sponsor's telephone number <u>888-922-7842</u></p> <p><b>2d</b> Business code (see instructions) <u>541990</u></p>

**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.

<b>SIGN HERE</b>	Filed with authorized/valid electronic signature.	07/25/2025	CARRIE MILLER
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
<b>SIGN HERE</b>			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
<b>SIGN HERE</b>			
	Signature of DFE	Date	Enter name of individual signing as DFE

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> 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: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	971
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	573
	<b>6a(2)</b>	514
	<b>6b</b>	0
	<b>6c</b>	419
	<b>6d</b>	933
	<b>6e</b>	1
	<b>6f</b>	934
	<b>6g(1)</b>	945
<b>6g(2)</b>	919	
<b>6h</b>	0	
<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
2G 2F 2J 2T 3D 2R

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

<b>9a</b> Plan funding arrangement (check all that apply)	<b>9b</b> Plan benefit arrangement (check all that apply)
(1) <input type="checkbox"/> Insurance	(1) <input type="checkbox"/> Insurance
(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts	(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts
(3) <input checked="" type="checkbox"/> Trust	(3) <input checked="" type="checkbox"/> Trust
(4) <input type="checkbox"/> General assets of the sponsor	(4) <input type="checkbox"/> 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)

<b>a Pension Schedules</b>	<b>b General Schedules</b>
(1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information)
(2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan)
(3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached <u>0</u>
(4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider Information)
(5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	(5) <input type="checkbox"/> <b>D</b> (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> <b>G</b> (Financial Transaction Schedules)

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

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**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.

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**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 2024 Form M-1 annual report. If the plan was not required to file the 2024 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 \_\_\_\_\_

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<b>SCHEDULE C</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Service Provider Information</b>  This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<b>A</b> Name of plan ACQUIA, INC. 401(K) PLAN	<b>B</b> Three-digit plan number (PN) ▶	001
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 ACQUIA, INC.	<b>D</b> Employer Identification Number (EIN) 26-0493001	

**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).....  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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**(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)

ONEDIGITAL INVESTMENT ADVISORS LLC

43-1451524

(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?
27	ADVISOR	95769	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

(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	78150	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	0	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

(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 <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>

**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 T - JANUS HENDERSON 151 DETROIT STREET DENVER, CO 80206	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.	
VICTORY S ESTB VAL A - FIS INVESTO 14785 PRESTON ROAD SUITE 1000 DALLAS, TX 75254	0.50%	
(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.	
PFG AMERICAN FDS GROWTH STRAT CL 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	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.	
PFG AMERICAN FDS CONS INC STRAT CL 777 108TH AVE NE STE 2100 BELLEVUE, WA 98004	0.40%	
(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.

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

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

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

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

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

<b>(a)</b> Enter name and EIN or address of service provider (see instructions)	<b>(b)</b> Nature of Service Code(s)	<b>(c)</b> 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)

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>a</b> Name:	<b>b</b> EIN:
<b>c</b> Position:	
<b>d</b> Address:	<b>e</b> Telephone:

Explanation:

<b>SCHEDULE H</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Financial Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>ACQUIA, INC. 401(K) PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ACQUIA, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>26-0493001</b>

<b>Part I</b>	<b>Asset and Liability Statement</b>
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**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.

		(a) Beginning of Year	(b) End of Year
<b>Assets</b>			
<b>a</b> Total noninterest-bearing cash .....	<b>1a</b>	0	0
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	1037868	485128
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>	0	0
<b>(3)</b> Other .....	<b>1b(3)</b>	0	0
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	541974	823407
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	0	0
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>	0	0
<b>(B)</b> All other .....	<b>1c(3)(B)</b>	0	0
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>	0	0
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	5226	13248
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>	0	0
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>	0	0
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>	0	0
<b>(8)</b> Participant loans .....	<b>1c(8)</b>	208356	441322
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>	0	0
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>	0	0
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>	0	0
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>	0	0
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	67304952	77719425
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) .....	<b>1c(14)</b>	0	0
<b>(15)</b> Other .....	<b>1c(15)</b>	0	0

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	<b>1d(1)</b>	0	0
(2) Employer real property.....	<b>1d(2)</b>	0	0
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>	0	0
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	69098376	79482530
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>	0	0
<b>h</b> Operating payables.....	<b>1h</b>	0	0
<b>i</b> Acquisition indebtedness.....	<b>1i</b>	0	0
<b>j</b> Other liabilities.....	<b>1j</b>	0	0
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	0	0
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	69098376	79482530

**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.

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>	485128	
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>	6737723	
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>	1011972	
(2) Noncash contributions.....	<b>2a(2)</b>	0	8234823
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>	28296	
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>	0	
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>	0	
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>	0	
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>	33656	
<b>(F)</b> Other.....	<b>2b(1)(F)</b>	0	
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		61952
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>	0	
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>	111	
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>	2398109	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		2398220
<b>(3)</b> Rents.....	<b>2b(3)</b>		0
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>	50926	
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>	49313	
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		1613
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>	0	
<b>(B)</b> Other.....	<b>2b(5)(B)</b>	2498	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		2498

	(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)	8610553
<b>c</b> Other income .....	2c	0
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total .....	2d	19309659

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:		
(1) Directly to participants or beneficiaries, including direct rollovers .....	2e(1)	8747495
(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)	8747495
<b>f</b> Corrective distributions (see instructions) .....	2f	4091
<b>g</b> Certain deemed distributions of participant loans (see instructions) .....	2g	0
<b>h</b> Interest expense .....	2h	0
<b>i</b> Administrative expenses:		
(1) Salaries and allowances .....	2i(1)	0
(2) Contract administrator fees .....	2i(2)	0
(3) Recordkeeping fees .....	2i(3)	78150
(4) IQPA audit fees .....	2i(4)	0
(5) Investment advisory and investment management fees .....	2i(5)	95769
(6) Bank or trust company trustee/custodial fees .....	2i(6)	0
(7) Actuarial fees .....	2i(7)	0
(8) Legal fees .....	2i(8)	0
(9) Valuation/appraisal fees .....	2i(9)	0
(10) Other trustee fees and expenses .....	2i(10)	0
(11) Other expenses .....	2i(11)	0
(12) Total administrative expenses. Add lines 2i(1) through (11) .....	2i(12)	173919
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total .....	2j	8925505

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line 2j from line 2d .....	2k	10384154
<b>l</b> 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: CBIZ CPAS P.C.

(2) EIN: 43-1947695

**d** The opinion of an independent qualified public accountant is **not attached** as part of Schedule H because:

(1)  This form is filed for a CCT, PSA, DCG 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. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

	Yes	No	Amount
<b>a</b> 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.)		X	
<b>b</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.)		X	
<b>c</b> 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.)		X	
<b>d</b> 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.)		X	
<b>e</b> Was this plan covered by a fidelity bond?	X		500000
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> 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	
<b>h</b> 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	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> 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	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> 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	

**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.)

<b>5b(1)</b> Name of plan(s)	<b>5b(2)</b> EIN(s)	<b>5b(3)</b> 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 \_\_\_\_\_.

<b>SCHEDULE R</b> <b>(Form 5500)</b>  <small>Department of the Treasury Internal Revenue Service</small>  <small>Department of Labor Employee Benefits Security Administration</small>  <small>Pension Benefit Guaranty Corporation</small>	<b>Retirement Plan Information</b>  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).  <b>▶ File as an attachment to Form 5500.</b>	<small>OMB No. 1210-0110</small>  <b>2024</b>  <b>This Form is Open to Public Inspection.</b>
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

<b>A</b> Name of plan <b>ACQUIA, INC. 401(K) PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ACQUIA, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>26-0493001</b>	

<b>Part I</b>	<b>Distributions</b>
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**All references to distributions relate only to payments of benefits during the plan year.**

<b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....	<b>1</b>	
<b>2</b> 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): <u>04-6568107</u>		
<b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>		
<b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....	<b>3</b>	

<b>Part II</b>	<b>Funding Information</b> (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.**

<b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....	<b>6a</b>	
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....	<b>6b</b>	
<b>c</b> 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).....	<b>6c</b>	

**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

<b>Part III</b>	<b>Amendments</b>
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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

<b>Part IV</b>	<b>ESOPs</b> (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

**Part V Additional Information for Multiemployer Defined Benefit Pension Plans**

**13** Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (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:

<b>a</b> The current plan year. Check the box to indicate the counting method used to determine the number of inactive participants: <input type="checkbox"/> last contributing employer <input type="checkbox"/> alternative <input type="checkbox"/> reasonable approximation (see instructions for required attachment).....	<b>14a</b>	
<b>b</b> The plan year immediately preceding the current plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14b</b>	
<b>c</b> The second preceding plan year. <input type="checkbox"/> Check the box if the number reported is a change from what was previously reported (see instructions for required attachment).....	<b>14c</b>	

**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:

<b>a</b> The corresponding number for the plan year immediately preceding the current plan year .....	<b>15a</b>	
<b>b</b> The corresponding number for the second preceding plan year .....	<b>15b</b>	

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

<b>a</b> Enter the number of employers who withdrew during the preceding plan year .....	<b>16a</b>	
<b>b</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.....	<b>16b</b>	

**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) and (b):

**a** Enter the percentage of plan assets held as:  
 Public Equity: \_\_\_\_\_% Private Equity: \_\_\_\_\_% Investment-Grade Debt and Interest Rate Hedging Assets: \_\_\_\_\_%  
 High-Yield Debt: \_\_\_\_\_% Real Assets: \_\_\_\_\_% Cash or Cash Equivalents: \_\_\_\_\_% Other: \_\_\_\_\_%

**b** Provide the average duration of the Investment-Grade Debt and Interest Rate Hedging Assets:  
 0-5 years  5-10 years  10-15 years  15 years or more

**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: \_\_\_\_\_

**Part VII IRS Compliance Questions**

**21a** Does the plan satisfy the coverage and nondiscrimination tests of Code sections 410(b) and 401(a)(4) by combining this plan with any other plans under the permissive aggregation rules?  Yes  No

**21b** If this is a Code section 401(k) plan, check all boxes that apply to indicate how the plan is intended to satisfy the nondiscrimination requirements for employee deferrals and employer matching contributions (as applicable) under Code sections 401(k)(3) and 401(m)(2).  
 Design-based safe harbor method  
 "Prior year" ADP test  
 "Current year" ADP test  
 N/A

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q702438A.



**Financial Statements  
and Supplemental Schedule**

**Acquia, Inc. 401(k) Plan**

**December 31, 2024 and 2023**

# ACQUIA, INC. 401(k) PLAN

## *Financial Statements and Supplemental Schedule*

### *Table of Contents*

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#### ***Supplemental Schedule (2024 only):***

Schedule H, Line 4i - Schedule of Assets (Held at End of Year)	14-15
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## *Independent Auditors' Report*

The Plan Administrator  
Acquia, Inc. 401(k) Plan  
Boston, Massachusetts

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

We have performed the audits of the financial statements of the Acquia, Inc. 401(k) Plan (the "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, 2024 and 2023, the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the 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 audits 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 certifications from a qualified institution as of December 31, 2024 and 2023 and for the year ended December 31, 2024, 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 audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section:

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

### ***Basis for Opinion***

We conducted our audits 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 audits. 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 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. 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 the Plan’s ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

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

### ***Auditors’ Responsibilities for the Audit of the Financial Statements***

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors’ report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 these 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.

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

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

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

***Other Matter - Supplemental Schedule Required by ERISA***

The supplemental schedule, Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.



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

In our opinion:

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

*CBIZ CPAs P.C.*

Boston, Massachusetts  
July 24, 2025

ACQUIA, INC. 401(k) PLAN

*Statements of Net Assets Available for Benefits*

	<i>December 31,</i>	
	<i>2024</i>	<i>2023</i>
<b>Assets</b>		
Investments at fair value	\$ <u>78,556,080</u>	\$ <u>67,852,152</u>
Receivables:		
Notes receivable from participants	441,322	208,356
Employer's discretionary matching contributions	<u>485,128</u>	<u>1,037,868</u>
<b>Total receivables</b>	<b><u>926,450</u></b>	<b><u>1,246,224</u></b>
<b>Net assets available for benefits</b>	<b>\$ <u><u>79,482,530</u></u></b>	<b>\$ <u><u>69,098,376</u></u></b>

## ACQUIA, INC. 401(k) PLAN

### Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2024

#### Additions to net assets attributed to:

Net appreciation in fair value of investments	\$ 8,628,436
Interest and dividend income	<u>2,412,656</u>

Total investment income 11,041,092

Other income	47,560
Interest income on notes receivable from participants	<u>33,656</u>

Total income 11,122,308

#### Contributions:

Participant deferrals	6,737,723
Employer discretionary matching	485,128
Rollovers	<u>1,011,972</u>

Total contributions 8,234,823

**Total additions to net assets 19,357,131**

#### Deductions from net assets attributed to:

Benefits paid to participants	8,751,586
Administrative expenses	<u>221,391</u>

**Total deductions from net assets 8,972,977**

**Net increase in net assets available for benefits 10,384,154**

Net assets available for benefits, beginning of year 69,098,376

**Net assets available for benefits, end of year \$ 79,482,530**

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### **Note 1 - Description of Plan**

The following description of the Acquia, Inc. 401(k) Plan (the “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 Acquia, Inc. (the “Employer”). Employees become eligible upon the first day of the month following the date of hire and attaining the age of 21. Employees covered by a collective bargaining agreement, leased employees and certain non-resident aliens are not eligible for the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended. The Plan administrator is responsible for oversight of the Plan. Substantially all investments are participant-directed.

#### ***Participant Contributions***

The Plan has an auto enroll feature. Unless a participant affirmatively elects otherwise, an initial deferral contribution of 3% will be implemented on their behalf and commence the first day of the month subsequent to their date of hire. Subsequent to year end, effective January 1, 2025, the initial deferral contribution changed to 6%. Each year, participants may contribute up to 60% of their compensation, as defined by the Plan, subject to the Internal Revenue Code (“IRC”) limitations. Participants who have reached the age of 50 by the end of the Plan year are eligible to make additional catch-up contributions. Participants may also contribute amounts to the Plan representing distributions for other qualified plans (“Participant Rollovers”). Participants direct the investment of their contributions into various investment options offered by the Plan.

#### ***Employer Discretionary Matching Contributions***

The Plan was amended on December 7, 2023 to allow for an Employer discretionary matching contribution beginning in 2024. The Employer matching contributions to the Plan are determined each Plan year. For the year ended December 31, 2024, the Employer elected to contribute a matching contribution equal to 50% of the first 6% of participants’ contributions up to \$1,000. In order to be eligible for the Employer discretionary matching contribution, a participant must be employed on the last day of the Plan year.

#### ***Participant Accounts***

Each participant’s account is credited with the participant’s contributions, Employer contribution, actual investment earnings/losses and reduced by administrative expenses and any loan or distribution related fees, as applicable. Allocations are based on participant earnings, account balances or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the Participant’s vested account.

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### **Note 1 - Description of Plan (Continued)**

#### ***Vesting***

Participants are immediately vested 100% in their contributions and Employer discretionary matching contributions plus actual earnings thereon.

#### ***Payment of Benefits***

In-service withdrawals from all participant accounts are permitted upon reaching age 59½. Hardship withdrawals are permitted from a participant's deferral contribution account only. The minimum hardship withdrawal is \$500. Upon termination of service, a participant will receive a lump-sum amount equal to the value of his or her account. If the participant's vested account is greater than \$1,000 but less than \$5,000, the Plan administrator, after notification, may distribute the entire non-forfeited account balance to the Participant in the form of an IRA rollover account. Participants whose account balances exceed \$5,000 may elect a lump-sum distribution or may leave their entire vested balance in the Plan. During 2024, additional withdrawal options associated with federally declared disasters, emergency savings, domestic abuse, and qualified births or adoptions have been added to the Plan as a result of the Secure Act 2.0, which became effective during the year.

#### ***Notes Receivable from Participants***

Participants may borrow a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Loan terms are generally up to five years (up to ten years for the purchase of a primary residence). Participants may only have one loan outstanding at a time. Loans are secured by the vested balance in the Participant's account and bear interest at a rate commensurate with local prevailing rates charged by other lenders for loans which would be made under similar circumstances. Principal and interest are paid ratably through payroll deductions.

#### ***Plan Administration***

The Employer is the Plan administrator and has the authority to appoint person(s) or entities to carry out the operation of the Plan. Fidelity Management Trust Company ("Fidelity") is the Plan's trustee, custodian and recordkeeper.

#### ***Administrative Expenses***

Plan expenses are paid either by the Plan or the Employer. Expenses that are paid directly by the Employer are excluded from these financial statements. Individual participant accounts are charged directly for notes receivable from participants' recordkeeping and benefit disbursement processing fees, if applicable, and terminated participants pay an annual maintenance fee. In addition, certain investment related expenses are included in net appreciation in fair value of investments.

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### *Note 2 - Summary of Significant Accounting Policies*

#### ***Basis of Accounting***

The financial statements of the Plan are prepared under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

#### ***Investments, 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. The Plan administrator determines the Plan's valuation policies utilizing information provided by Fidelity.

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

#### ***Notes Receivable from Participants***

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

#### ***Benefits Paid***

Benefits are recorded when paid.

#### ***Use of Estimates***

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

#### ***Subsequent Events***

The Plan administrator has evaluated subsequent events through July 24, 2025, the date that the financial statements were available to be issued. No significant matters were identified for disclosure during this evaluation.

# ACQUIA, INC. 401(k) PLAN

## ***Notes to Financial Statements***

### ***Note 3 - Information Certified by Trustee and Custodian***

Plan investments are held by the Plan's trustee and custodian, Fidelity Management Trust Company, ("Fidelity"). The fair value of investments as of December 31, 2024 and 2023, and all investment transactions for the year ended December 31, 2024, including interest and dividends, and net appreciation in fair values, are reported to the Plan and certified as complete and accurate by Fidelity. Information included in the supplemental Schedule of Assets (Held at End of Year) and notes receivable from participants have also been derived from information certified by Fidelity. The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and the supplemental Schedule of Assets (Held at End of Year).

The Plan offers investment choices to allow participants to create a diversified portfolio of assets based on a participant's risk tolerance. Participants may direct contributions to a variety of investment options that consist of shares of mutual funds. Additionally, participants may manage their own assets in self-directed brokerage accounts.

### ***Note 4 - 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 I) and the lowest priority to unobservable inputs (Level III). Valuation techniques maximize the use of observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy are described below:

Level I – Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access at the measurement date.

Level II – Inputs to the valuation methodology include quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in inactive markets; inputs other than quoted market prices that are observable for the asset or liability; and 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 II input must be observable for substantially the full term of the asset or liability.

Level III – Inputs to the valuation methodology are unobservable and significant to the fair value measurements.

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.

# ACQUIA, INC. 401(k) PLAN

## Notes to Financial Statements

### Note 4 - Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

#### **Mutual Funds and Money Market Fund**

Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily Net Asset Value (“NAV”) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

#### **Self-Directed Brokerage**

Self-directed brokerage accounts consist primarily of exchange traded funds and other Level I investments as noted below in the tables. Mutual funds and exchange traded funds are valued at the NAV of shares held by the Plan at year end, as quoted in the active market, and are classified within Level I of the valuation hierarchy. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded and are classified as Level I.

The following tables set forth by level, within the fair value hierarchy, the Plan’s assets at fair value as of December 31, 2024 and 2023:

<b>Description</b>	<b>Assets at Fair Value as of December 31, 2024</b>			
	<b>Level I</b>	<b>Level II</b>	<b>Level III</b>	<b>Total</b>
Mutual funds	\$ 77,373,310	\$ -	\$ -	\$ 77,373,310
Self-directed brokerage assets:				
Exchange traded funds	1,134,984	-	-	1,134,984
Common stock	13,248	-	-	13,248
Money market fund	<u>34,538</u>	<u>-</u>	<u>-</u>	<u>34,538</u>
<b>Total investments in the fair value hierarchy</b>	<b>\$ <u>78,556,080</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>78,556,080</u></b>

# ACQUIA, INC. 401(k) PLAN

## Notes to Financial Statements

### Note 4 - Fair Value Measurements (Continued)

Description	Assets at Fair Value as of December 31, 2023			
	Level I	Level II	Level III	Total
Mutual funds	\$ 67,584,192	\$ -	\$ -	\$ 67,584,192
Self-directed brokerage assets:				
Exchange traded funds	232,743	-	-	232,743
Common stock	5,226	-	-	5,226
Money market fund	<u>29,991</u>	<u>-</u>	<u>-</u>	<u>29,991</u>
<b>Total investments in the fair value hierarchy</b>	<b>\$ <u>67,852,152</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>67,852,152</u></b>

### Note 5 - 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. Market risks include global events such as an 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.

### Note 6 - Related Party Transactions and Exempt Party-in-Interest Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity. Fidelity is the trustee and custodian, as defined by the Plan, and, therefore, these transactions qualify as exempt party-in-interest transactions. During the Plan year ended December 31, 2024, \$221,392 of administrative expenses were incurred by the Plan for services provided by Fidelity. During the Plan year ended December 31, 2024, the Plan received revenue credits of \$47,560 from Fidelity. The revenue credits are reported as other income on the Statement of Changes in Net Assets Available for Benefits. The revenue credits are used to pay or offset Plan expenses. Notes receivable from participants are also deemed to be exempt party-in-interest transactions.

### Note 7 - Plan Termination

The Employer, at its discretion, may amend or terminate the Plan at any time, subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Employer may determine.

## ACQUIA, INC. 401(k) PLAN

### *Notes to Financial Statements*

#### **Note 8 - Tax Status**

The Plan adopted the volume submitter profit sharing plan of Fidelity Management and Research Company. The volume submitter profit sharing plan sponsor received a favorable opinion letter dated June 30, 2020, in which the Internal Revenue Service stated that the form of the volume submitter profit sharing plan was in compliance with the applicable requirements of the Internal Revenue Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes is included in the Plan's financial statements.

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

***Supplemental Schedule***

**ACQUIA, INC. 401(k) PLAN**

*(E.I.N. 26-0493001 - Plan Number 001)*

**Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2024**

<b>(a)</b>	<b>(b)</b> <i>Identity of Issue</i>	<b>(c)</b> <i>Description of Investment</i>	<b>(d)</b> <b>Cost</b>	<b>(e)</b> <b>Current Value</b>
*	FID 500 INDEX	Mutual Fund		\$ 13,016,436
*	FID FDM IDX 2050 IPR	Mutual Fund		7,619,271
*	FID FDM IDX 2045 IPR	Mutual Fund		6,339,650
*	FID FDM IDX 2055 IPR	Mutual Fund		6,311,450
*	FID GROWTH DISC	Mutual Fund		6,105,466
*	FID FDM IDX 2040 IPR	Mutual Fund		5,876,554
*	FID FDM IDX 2035 IPR	Mutual Fund		4,599,705
*	FID FDM IDX 2060 IPR	Mutual Fund		3,811,561
*	FID BALANCED	Mutual Fund		2,764,641
*	FID FDM IDX 2030 IPR	Mutual Fund		2,533,789
	AF EUROPAC GROWTH R6	Mutual Fund		1,985,981
*	FID EXTD MKT IDX	Mutual Fund		1,892,694
*	FID SMALL CAP GROWTH	Mutual Fund		1,857,615
	DFA US LG CAP VAL	Mutual Fund		1,490,651
	DFA US TARGET VAL I	Mutual Fund		1,490,565
*	FID INTL INDEX	Mutual Fund		1,107,739
*	FID FDM IDX 2065 IPR	Mutual Fund		917,369
*	FID SEL TECHNOLOGY	Mutual Fund		800,362
	AF BOND FD AMER R6	Mutual Fund		795,348
	VANG VMMR-FED MMKT	Mutual Fund		788,869
*	FID CAPITAL & INCOME	Mutual Fund		756,958
*	FID EMERGING MKTS	Mutual Fund		740,687
	VICTORY S ESTB VAL A	Mutual Fund		676,738
	J H ENTERPRISE T	Mutual Fund		490,651
*	FID FDM IDX 2025 IPR	Mutual Fund		386,510
*	FID SEL HEALTHCARE	Mutual Fund		279,553
*	FID US BOND IDX	Mutual Fund		252,325
*	FID FDM IDX 2020 IPR	Mutual Fund		215,992
	DFA INF PRT SEC PORT	Mutual Fund		202,917
	DFA ITM GVT FXINC I	Mutual Fund		191,342
*	FID FDM IDX 2015 IPR	Mutual Fund		155,271
*	FID EMRG MKTS IDX	Mutual Fund		132,334
*	FID FDM IDX INC IPR	Mutual Fund		123,232
	VANG ST INV GR ADM	Mutual Fund		115,534
	DFA INTL VALUE I	Mutual Fund		109,970
*	FID SEL CONS STAPLES	Mutual Fund		99,692
*	FID SEL UTILITIES	Mutual Fund		81,095
*	FID SEL TELECOMM	Mutual Fund		74,384
*	FID SEL CONS DISCR	Mutual Fund		61,648
<b>Total this page</b>				<b>\$ 77,252,549</b>

\* Party-in-interest as defined by ERISA.

See Independent Auditors' Report.

**ACQUIA, INC. 401(k) PLAN**

*(E.I.N. 26-0493001 - Plan Number 001)*

**Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2024**

<b>(a)</b>	<b>(b)</b> <i>Identity of Issue</i>	<b>(c)</b> <i>Description of Investment</i>	<b>(d)</b> <b>Cost</b>	<b>(e)</b> <b>Current Value</b>
	Balance from previous page			\$ 77,252,549
	VT INTL SM CAP R6	Mutual Fund		32,370
*	FID SEL ENERGY	Mutual Fund		27,603
*	FID SEL GOLD	Mutual Fund		25,803
*	FIDELITY FINANCIALS	Mutual Fund		13,330
*	FID SEL MATERIALS	Mutual Fund		11,700
*	FID SEL INDUSTRIALS	Mutual Fund		9,955
	Self-Directed Brokerage	Self-Directed Brokerage Account		1,182,770
	Participant Loans	Loans (Interest Rate 5.25% - 10.50%)	0	<u>441,322</u>
				<b><u>\$ 78,997,402</u></b>

\* Party-in-interest as defined by ERISA.



**Financial Statements  
and Supplemental Schedule**

**Acquia, Inc. 401(k) Plan**

**December 31, 2024 and 2023**

# ACQUIA, INC. 401(k) PLAN

## *Financial Statements and Supplemental Schedule*

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#### ***Supplemental Schedule (2024 only):***

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## *Independent Auditors' Report*

The Plan Administrator  
Acquia, Inc. 401(k) Plan  
Boston, Massachusetts

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

We have performed the audits of the financial statements of the Acquia, Inc. 401(k) Plan (the "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, 2024 and 2023, the related statement of changes in net assets available for benefits for the year ended December 31, 2024, and the related notes to the financial statements.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the 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 audits 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 certifications from a qualified institution as of December 31, 2024 and 2023 and for the year ended December 31, 2024, 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 audits and on the procedures performed as described in the Auditors' Responsibilities for the Audit of the Financial Statements section:

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

### ***Basis for Opinion***

We conducted our audits 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 audits. 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 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. 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 the Plan’s ability to continue as a going concern within one year after the date that the financial statements are issued or available to be issued.

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

### ***Auditors’ Responsibilities for the Audit of the Financial Statements***

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors’ report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 these 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.

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

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

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

***Other Matter - Supplemental Schedule Required by ERISA***

The supplemental schedule, Schedule H, Line 4i - Schedule of Assets (Held at End of Year) as of December 31, 2024, is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.



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

In our opinion:

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

*CBIZ CPAs P.C.*

Boston, Massachusetts  
July 24, 2025

ACQUIA, INC. 401(k) PLAN

*Statements of Net Assets Available for Benefits*

	<i>December 31,</i>	
	<i>2024</i>	<i>2023</i>
<b>Assets</b>		
Investments at fair value	\$ <u>78,556,080</u>	\$ <u>67,852,152</u>
Receivables:		
Notes receivable from participants	441,322	208,356
Employer's discretionary matching contributions	<u>485,128</u>	<u>1,037,868</u>
<b>Total receivables</b>	<b><u>926,450</u></b>	<b><u>1,246,224</u></b>
<b>Net assets available for benefits</b>	<b>\$ <u><u>79,482,530</u></u></b>	<b>\$ <u><u>69,098,376</u></u></b>

## ACQUIA, INC. 401(k) PLAN

### Statement of Changes in Net Assets Available for Benefits

Year Ended December 31, 2024

#### Additions to net assets attributed to:

Net appreciation in fair value of investments	\$ 8,628,436
Interest and dividend income	<u>2,412,656</u>

Total investment income 11,041,092

Other income	47,560
Interest income on notes receivable from participants	<u>33,656</u>

Total income 11,122,308

#### Contributions:

Participant deferrals	6,737,723
Employer discretionary matching	485,128
Rollovers	<u>1,011,972</u>

Total contributions 8,234,823

**Total additions to net assets 19,357,131**

#### Deductions from net assets attributed to:

Benefits paid to participants	8,751,586
Administrative expenses	<u>221,391</u>

**Total deductions from net assets 8,972,977**

**Net increase in net assets available for benefits 10,384,154**

Net assets available for benefits, beginning of year 69,098,376

**Net assets available for benefits, end of year \$ 79,482,530**

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### **Note 1 - Description of Plan**

The following description of the Acquia, Inc. 401(k) Plan (the “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 Acquia, Inc. (the “Employer”). Employees become eligible upon the first day of the month following the date of hire and attaining the age of 21. Employees covered by a collective bargaining agreement, leased employees and certain non-resident aliens are not eligible for the Plan. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (“ERISA”), as amended. The Plan administrator is responsible for oversight of the Plan. Substantially all investments are participant-directed.

#### ***Participant Contributions***

The Plan has an auto enroll feature. Unless a participant affirmatively elects otherwise, an initial deferral contribution of 3% will be implemented on their behalf and commence the first day of the month subsequent to their date of hire. Subsequent to year end, effective January 1, 2025, the initial deferral contribution changed to 6%. Each year, participants may contribute up to 60% of their compensation, as defined by the Plan, subject to the Internal Revenue Code (“IRC”) limitations. Participants who have reached the age of 50 by the end of the Plan year are eligible to make additional catch-up contributions. Participants may also contribute amounts to the Plan representing distributions for other qualified plans (“Participant Rollovers”). Participants direct the investment of their contributions into various investment options offered by the Plan.

#### ***Employer Discretionary Matching Contributions***

The Plan was amended on December 7, 2023 to allow for an Employer discretionary matching contribution beginning in 2024. The Employer matching contributions to the Plan are determined each Plan year. For the year ended December 31, 2024, the Employer elected to contribute a matching contribution equal to 50% of the first 6% of participants’ contributions up to \$1,000. In order to be eligible for the Employer discretionary matching contribution, a participant must be employed on the last day of the Plan year.

#### ***Participant Accounts***

Each participant’s account is credited with the participant’s contributions, Employer contribution, actual investment earnings/losses and reduced by administrative expenses and any loan or distribution related fees, as applicable. Allocations are based on participant earnings, account balances or specific participant transactions, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the Participant’s vested account.

## ACQUIA, INC. 401(k) PLAN

### *Notes to Financial Statements*

#### **Note 1 - Description of Plan (Continued)**

##### ***Vesting***

Participants are immediately vested 100% in their contributions and Employer discretionary matching contributions plus actual earnings thereon.

##### ***Payment of Benefits***

In-service withdrawals from all participant accounts are permitted upon reaching age 59½. Hardship withdrawals are permitted from a participant's deferral contribution account only. The minimum hardship withdrawal is \$500. Upon termination of service, a participant will receive a lump-sum amount equal to the value of his or her account. If the participant's vested account is greater than \$1,000 but less than \$5,000, the Plan administrator, after notification, may distribute the entire non-forfeited account balance to the Participant in the form of an IRA rollover account. Participants whose account balances exceed \$5,000 may elect a lump-sum distribution or may leave their entire vested balance in the Plan. During 2024, additional withdrawal options associated with federally declared disasters, emergency savings, domestic abuse, and qualified births or adoptions have been added to the Plan as a result of the Secure Act 2.0, which became effective during the year.

##### ***Notes Receivable from Participants***

Participants may borrow a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 50% of their vested account balance. Loan terms are generally up to five years (up to ten years for the purchase of a primary residence). Participants may only have one loan outstanding at a time. Loans are secured by the vested balance in the Participant's account and bear interest at a rate commensurate with local prevailing rates charged by other lenders for loans which would be made under similar circumstances. Principal and interest are paid ratably through payroll deductions.

##### ***Plan Administration***

The Employer is the Plan administrator and has the authority to appoint person(s) or entities to carry out the operation of the Plan. Fidelity Management Trust Company ("Fidelity") is the Plan's trustee, custodian and recordkeeper.

##### ***Administrative Expenses***

Plan expenses are paid either by the Plan or the Employer. Expenses that are paid directly by the Employer are excluded from these financial statements. Individual participant accounts are charged directly for notes receivable from participants' recordkeeping and benefit disbursement processing fees, if applicable, and terminated participants pay an annual maintenance fee. In addition, certain investment related expenses are included in net appreciation in fair value of investments.

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### *Note 2 - Summary of Significant Accounting Policies*

#### ***Basis of Accounting***

The financial statements of the Plan are prepared under the accrual basis of accounting in accordance with accounting principles generally accepted in the United States of America.

#### ***Investments, 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. The Plan administrator determines the Plan's valuation policies utilizing information provided by Fidelity.

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

#### ***Notes Receivable from Participants***

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Interest income is recorded on the accrual basis. Related fees are recorded as administrative expenses and are expensed when they are incurred.

#### ***Benefits Paid***

Benefits are recorded when paid.

#### ***Use of Estimates***

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

#### ***Subsequent Events***

The Plan administrator has evaluated subsequent events through July 24, 2025, the date that the financial statements were available to be issued. No significant matters were identified for disclosure during this evaluation.

# ACQUIA, INC. 401(k) PLAN

## *Notes to Financial Statements*

### ***Note 3 - Information Certified by Trustee and Custodian***

Plan investments are held by the Plan's trustee and custodian, Fidelity Management Trust Company, ("Fidelity"). The fair value of investments as of December 31, 2024 and 2023, and all investment transactions for the year ended December 31, 2024, including interest and dividends, and net appreciation in fair values, are reported to the Plan and certified as complete and accurate by Fidelity. Information included in the supplemental Schedule of Assets (Held at End of Year) and notes receivable from participants have also been derived from information certified by Fidelity. The Plan's independent auditors did not perform auditing procedures with respect to this information, except for comparing such information to the related information included in the financial statements and the supplemental Schedule of Assets (Held at End of Year).

The Plan offers investment choices to allow participants to create a diversified portfolio of assets based on a participant's risk tolerance. Participants may direct contributions to a variety of investment options that consist of shares of mutual funds. Additionally, participants may manage their own assets in self-directed brokerage accounts.

### ***Note 4 - 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 I) and the lowest priority to unobservable inputs (Level III). Valuation techniques maximize the use of observable inputs and minimize the use of unobservable inputs. The three levels of the fair value hierarchy are described below:

Level I – Inputs to the valuation methodology are unadjusted quoted prices in active markets for identical assets or liabilities that the Plan has the ability to access at the measurement date.

Level II – Inputs to the valuation methodology include quoted prices for similar assets and liabilities in active markets; quoted prices for identical or similar assets and liabilities in inactive markets; inputs other than quoted market prices that are observable for the asset or liability; and 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 II input must be observable for substantially the full term of the asset or liability.

Level III – Inputs to the valuation methodology are unobservable and significant to the fair value measurements.

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.

# ACQUIA, INC. 401(k) PLAN

## Notes to Financial Statements

### Note 4 - Fair Value Measurements (Continued)

Following is a description of the valuation methodologies used for assets measured at fair value. There have been no changes in the methodologies used at December 31, 2024 and 2023.

#### **Mutual Funds and Money Market Fund**

Valued at the daily closing price as reported by the fund. Mutual funds held by the Plan are registered with the Securities and Exchange Commission. These funds are required to publish their daily Net Asset Value (“NAV”) and to transact at that price. The mutual funds held by the Plan are deemed to be actively traded.

#### **Self-Directed Brokerage**

Self-directed brokerage accounts consist primarily of exchange traded funds and other Level I investments as noted below in the tables. Mutual funds and exchange traded funds are valued at the NAV of shares held by the Plan at year end, as quoted in the active market, and are classified within Level I of the valuation hierarchy. Common stocks are valued at the closing price reported on the active market on which the individual securities are traded and are classified as Level I.

The following tables set forth by level, within the fair value hierarchy, the Plan’s assets at fair value as of December 31, 2024 and 2023:

<b>Description</b>	<b>Assets at Fair Value as of December 31, 2024</b>			
	<b>Level I</b>	<b>Level II</b>	<b>Level III</b>	<b>Total</b>
Mutual funds	\$ 77,373,310	\$ -	\$ -	\$ 77,373,310
Self-directed brokerage assets:				
Exchange traded funds	1,134,984	-	-	1,134,984
Common stock	13,248	-	-	13,248
Money market fund	<u>34,538</u>	<u>-</u>	<u>-</u>	<u>34,538</u>
<b>Total investments in the fair value hierarchy</b>	<b>\$ <u>78,556,080</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>-</u></b>	<b>\$ <u>78,556,080</u></b>

# ACQUIA, INC. 401(k) PLAN

## Notes to Financial Statements

### Note 4 - Fair Value Measurements (Continued)

Description	Assets at Fair Value as of December 31, 2023			
	Level I	Level II	Level III	Total
Mutual funds	\$ 67,584,192	\$ -	\$ -	\$ 67,584,192
Self-directed brokerage assets:				
Exchange traded funds	232,743	-	-	232,743
Common stock	5,226	-	-	5,226
Money market fund	29,991	-	-	29,991
<b>Total investments in the fair value hierarchy</b>	<b>\$ 67,852,152</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ 67,852,152</b>

### Note 5 - 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. Market risks include global events such as an 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.

### Note 6 - Related Party Transactions and Exempt Party-in-Interest Transactions

Certain Plan investments are shares of mutual funds managed by Fidelity. Fidelity is the trustee and custodian, as defined by the Plan, and, therefore, these transactions qualify as exempt party-in-interest transactions. During the Plan year ended December 31, 2024, \$221,392 of administrative expenses were incurred by the Plan for services provided by Fidelity. During the Plan year ended December 31, 2024, the Plan received revenue credits of \$47,560 from Fidelity. The revenue credits are reported as other income on the Statement of Changes in Net Assets Available for Benefits. The revenue credits are used to pay or offset Plan expenses. Notes receivable from participants are also deemed to be exempt party-in-interest transactions.

### Note 7 - Plan Termination

The Employer, at its discretion, may amend or terminate the Plan at any time, subject to the provisions of ERISA. In the event of Plan termination, participants will become fully vested in their accounts. Any unallocated assets of the Plan shall be allocated to participant accounts and distributed in such a manner as the Employer may determine.

## ACQUIA, INC. 401(k) PLAN

### *Notes to Financial Statements*

#### **Note 8 - Tax Status**

The Plan adopted the volume submitter profit sharing plan of Fidelity Management and Research Company. The volume submitter profit sharing plan sponsor received a favorable opinion letter dated June 30, 2020, in which the Internal Revenue Service stated that the form of the volume submitter profit sharing plan was in compliance with the applicable requirements of the Internal Revenue Code. Although the Plan has been amended since receiving the determination letter, the Plan administrator believes that the Plan is designed and being operated in compliance with the applicable requirements of the Internal Revenue Code. Therefore, no provision for income taxes is included in the Plan's financial statements.

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

***Supplemental Schedule***

**ACQUIA, INC. 401(k) PLAN**

*(E.I.N. 26-0493001 - Plan Number 001)*

**Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2024**

<b>(a)</b>	<b>(b)</b> <i>Identity of Issue</i>	<b>(c)</b> <i>Description of Investment</i>	<b>(d)</b> <b>Cost</b>	<b>(e)</b> <b>Current Value</b>
*	FID 500 INDEX	Mutual Fund		\$ 13,016,436
*	FID FDM IDX 2050 IPR	Mutual Fund		7,619,271
*	FID FDM IDX 2045 IPR	Mutual Fund		6,339,650
*	FID FDM IDX 2055 IPR	Mutual Fund		6,311,450
*	FID GROWTH DISC	Mutual Fund		6,105,466
*	FID FDM IDX 2040 IPR	Mutual Fund		5,876,554
*	FID FDM IDX 2035 IPR	Mutual Fund		4,599,705
*	FID FDM IDX 2060 IPR	Mutual Fund		3,811,561
*	FID BALANCED	Mutual Fund		2,764,641
*	FID FDM IDX 2030 IPR	Mutual Fund		2,533,789
	AF EUROPAC GROWTH R6	Mutual Fund		1,985,981
*	FID EXTD MKT IDX	Mutual Fund		1,892,694
*	FID SMALL CAP GROWTH	Mutual Fund		1,857,615
	DFA US LG CAP VAL	Mutual Fund		1,490,651
	DFA US TARGET VAL I	Mutual Fund		1,490,565
*	FID INTL INDEX	Mutual Fund		1,107,739
*	FID FDM IDX 2065 IPR	Mutual Fund		917,369
*	FID SEL TECHNOLOGY	Mutual Fund		800,362
	AF BOND FD AMER R6	Mutual Fund		795,348
	VANG VMMR-FED MMKT	Mutual Fund		788,869
*	FID CAPITAL & INCOME	Mutual Fund		756,958
*	FID EMERGING MKTS	Mutual Fund		740,687
	VICTORY S ESTB VAL A	Mutual Fund		676,738
	J H ENTERPRISE T	Mutual Fund		490,651
*	FID FDM IDX 2025 IPR	Mutual Fund		386,510
*	FID SEL HEALTHCARE	Mutual Fund		279,553
*	FID US BOND IDX	Mutual Fund		252,325
*	FID FDM IDX 2020 IPR	Mutual Fund		215,992
	DFA INF PRT SEC PORT	Mutual Fund		202,917
	DFA ITM GVT FXINC I	Mutual Fund		191,342
*	FID FDM IDX 2015 IPR	Mutual Fund		155,271
*	FID EMRG MKTS IDX	Mutual Fund		132,334
*	FID FDM IDX INC IPR	Mutual Fund		123,232
	VANG ST INV GR ADM	Mutual Fund		115,534
	DFA INTL VALUE I	Mutual Fund		109,970
*	FID SEL CONS STAPLES	Mutual Fund		99,692
*	FID SEL UTILITIES	Mutual Fund		81,095
*	FID SEL TELECOMM	Mutual Fund		74,384
*	FID SEL CONS DISCR	Mutual Fund		61,648
<b>Total this page</b>				<b>\$ 77,252,549</b>

\* Party-in-interest as defined by ERISA.

See Independent Auditors' Report.

**ACQUIA, INC. 401(k) PLAN**

*(E.I.N. 26-0493001 - Plan Number 001)*

**Schedule H, Line 4i - Schedule of Assets (Held at End of Year)**

**December 31, 2024**

<b>(a)</b>	<b>(b)</b> <i>Identity of Issue</i>	<b>(c)</b> <i>Description of Investment</i>	<b>(d)</b> <b>Cost</b>	<b>(e)</b> <b>Current Value</b>
	Balance from previous page			\$ 77,252,549
	VT INTL SM CAP R6	Mutual Fund		32,370
*	FID SEL ENERGY	Mutual Fund		27,603
*	FID SEL GOLD	Mutual Fund		25,803
*	FIDELITY FINANCIALS	Mutual Fund		13,330
*	FID SEL MATERIALS	Mutual Fund		11,700
*	FID SEL INDUSTRIALS	Mutual Fund		9,955
	Self-Directed Brokerage	Self-Directed Brokerage Account		1,182,770
	Participant Loans	Loans (Interest Rate 5.25% - 10.50%)	0	<u>441,322</u>
				<b><u>\$ 78,997,402</u></b>

\* Party-in-interest as defined by ERISA.