

Form 5500

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security  
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110  
1210-0089

2024

This Form is Open to Public Inspection

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.) [x] a single-employer plan [ ] a DFE (specify) \_\_\_\_
B This return/report is: [ ] the first return/report [ ] the final return/report [ ] an amended return/report [ ] a short plan year return/report (less than 12 months)
C If the plan is a collectively-bargained plan, check here. . . . . [ ]
D Check box if filing under: [x] Form 5558 [ ] automatic extension [ ] the DFVC program [ ] special extension (enter description)
E If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . . [ ]

Part II Basic Plan Information—enter all requested information

1a Name of plan: GHA TECHNOLOGIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN
1b Three-digit plan number (PN): 002
1c Effective date of plan: 01/01/2011
2a Plan sponsor's name (employer, if for a single-employer plan): GHA TECHNOLOGIES, INC.
2b Employer Identification Number (EIN): 86-0971967
2c Plan Sponsor's telephone number: 480-951-0036
2d Business code (see instructions): 541519

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.

Table with 4 columns: SIGN HERE, Signature of plan administrator, Date, Enter name of individual signing as plan administrator. Includes rows for employer/plan sponsor and DFE.

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

Form 5500 (2024) v. 240311

<p><b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor</p> <p>GHA TECHNOLOGIES, INC.</p> <p>8998 E. RAINTREE DRIVE SCOTTSDALE, AZ 85260</p>	<p><b>3b</b> Administrator's EIN 86-0971967</p> <p><b>3c</b> Administrator's telephone number 480-951-0036</p>
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<p><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:</p> <p><b>a</b> Sponsor's name</p> <p><b>c</b> Plan Name</p>	<p><b>4b</b> EIN</p> <p><b>4d</b> PN</p>
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<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	288
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<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>6a(1)</b>	211
<b>a(2)</b> Total number of active participants at the end of the plan year .....	<b>6a(2)</b>	165
<b>b</b> Retired or separated participants receiving benefits.....	<b>6b</b>	35
<b>c</b> Other retired or separated participants entitled to future benefits .....	<b>6c</b>	38
<b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....	<b>6d</b>	238
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....	<b>6e</b>	3
<b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....	<b>6f</b>	241
<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>6g(1)</b>	224
<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>6g(2)</b>	240
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6h</b>	21

<b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....	<b>7</b>	
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**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
20 2Q

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

<p><b>9a</b> Plan funding arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>	<p><b>9b</b> Plan benefit arrangement (check all that apply)</p> <p>(1) <input type="checkbox"/> Insurance</p> <p>(2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts</p> <p>(3) <input checked="" type="checkbox"/> Trust</p> <p>(4) <input type="checkbox"/> General assets of the sponsor</p>
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**10** Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

**a Pension Schedules**

(1)  **R** (Retirement Plan Information)

(2)  **MB** (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary

(3)  **SB** (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary

(4)  **DCG** (Individual Plan Information) – Number Attached \_\_\_\_\_

(5)  **MEP** (Multiple-Employer Retirement Plan Information)

**b General Schedules**

(1)  **H** (Financial Information)

(2)  **I** (Financial Information – Small Plan)

(3)  **A** (Insurance Information) – Number Attached 0

(4)  **C** (Service Provider Information)

(5)  **D** (DFE/Participating Plan Information)

(6)  **G** (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 <b>GHA TECHNOLOGIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>002</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>GHA TECHNOLOGIES, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>86-0971967</b>	

**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

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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)

MERRILL A BANK OF AMERICA COMPANY

14636 N. SCOTTSDALE RD STE 325  
SCOTTSDALE, AZ 85254

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
28	WEALTH MANAGER	42159	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)

(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"/>

(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.

<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> Describe the indirect compensation, including any formula used to determine the service provider's eligibility for or the amount of the indirect compensation.	
<b>(a)</b> Enter service provider name as it appears on line 2	<b>(b)</b> Service Codes (see instructions)	<b>(c)</b> Enter amount of indirect compensation
<b>(d)</b> Enter name and EIN (address) of source of indirect compensation	<b>(e)</b> 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>GHA TECHNOLOGIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>002</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>GHA TECHNOLOGIES, INC.</b>	<b>D</b> Employer Identification Number (EIN) <b>86-0971967</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>	1324	12481
<b>b</b> Receivables (less allowance for doubtful accounts):			
<b>(1)</b> Employer contributions .....	<b>1b(1)</b>	0	72000
<b>(2)</b> Participant contributions .....	<b>1b(2)</b>		
<b>(3)</b> Other .....	<b>1b(3)</b>		
<b>c</b> General investments:			
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b>	8703463	7233893
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b>	63453	67729
<b>(3)</b> Corporate debt instruments (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b>		
<b>(B)</b> All other .....	<b>1c(3)(B)</b>		
<b>(4)</b> Corporate stocks (other than employer securities):			
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b>		
<b>(B)</b> Common .....	<b>1c(4)(B)</b>	4058651	8281978
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b>		
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b>		
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b>		
<b>(8)</b> Participant loans .....	<b>1c(8)</b>		
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b>		
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b>		
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b>		
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b>		
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b>	1242098	2129419
<b>(14)</b> Value of funds held in insurance company general account (unallocated contracts).....	<b>1c(14)</b>		
<b>(15)</b> Other.....	<b>1c(15)</b>	1191193	2627113

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	<b>1d(1)</b>	10592595	18290034
(2) Employer real property.....	<b>1d(2)</b>		
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>		
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	25852777	38714647
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>		
<b>h</b> Operating payables.....	<b>1h</b>	0	0
<b>i</b> Acquisition indebtedness.....	<b>1i</b>		
<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>	25852777	38714647

**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>	2696624	
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>		
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>		
(2) Noncash contributions.....	<b>2a(2)</b>		2696624
(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>	311234	311234
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>		
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>		
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		311234
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		317486
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>	317486	
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>		
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		317486
<b>(3)</b> Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>		
<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>		
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		10146827
<b>(B)</b> Other.....	<b>2b(5)(B)</b>	10146827	
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total.....	<b>2d</b>		13472171

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	<b>2e(1)</b>	568150	
(2) To insurance carriers for the provision of benefits .....	<b>2e(2)</b>		
(3) Other.....	<b>2e(3)</b>		
(4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....	<b>2e(4)</b>		568150
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		
<b>g</b> Certain deemed distributions of participant loans (see instructions).....	<b>2g</b>		
<b>h</b> Interest expense.....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>		
(3) Recordkeeping fees .....	<b>2i(3)</b>		
(4) IQPA audit fees .....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	42151	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>		
(7) Actuarial fees .....	<b>2i(7)</b>		
(8) Legal fees .....	<b>2i(8)</b>		
(9) Valuation/appraisal fees .....	<b>2i(9)</b>		
(10) Other trustee fees and expenses .....	<b>2i(10)</b>		
(11) Other expenses.....	<b>2i(11)</b>		
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		42151
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....	<b>2j</b>		610301

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		12861870
<b>l</b> Transfers of assets:			
(1) To this plan.....	<b>2l(1)</b>		
(2) From this plan .....	<b>2l(2)</b>		

**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: **JOHNSON LAWDAHL ENDRES, PLLC**

(2) EIN: **47-1615122**

**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		1000000
<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.			

**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>	OMB No. 1210-0110  <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 <u>GHA TECHNOLOGIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>002</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>GHA TECHNOLOGIES, INC.</u>	<b>D</b> Employer Identification Number (EIN) <u>86-0971967</u>	

<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.....	1	0
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**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):  
 EIN(s): \_\_\_\_\_

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

<b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....	3	
--	---	--

<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.)
----------------	---

**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) .....	6a	
<b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....	6b	
<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).....	6c	

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

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

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

<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.
----------------	---

**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 \_\_\_/\_\_\_/\_\_\_\_ (MM/DD/YYYY) and the Opinion Letter serial number \_\_\_\_\_.

**GHA Technologies, Inc.**  
**Employee Stock Ownership Plan**

Financial Statements  
With Supplemental Schedules

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For the Year Ended December 31, 2024  
and  
Independent Auditors' Report

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# **Johnson Lawdahl Endres, PLLC**

*Certified Public Accountants and Consultants*

3420 E. Shea Blvd., Suite 152

Phoenix, Arizona 85028

Telephone: 602-667-6041 – Facsimile: 602-667-6039

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## Independent Auditors' Report

To the Trustee and Plan Committee  
GHA Technologies, Inc. Employee Stock Ownership Plan  
Scottsdale, Arizona

### Opinion

We have audited the financial statements of GHA Technologies, Inc. Employee Stock Ownership Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974, which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, and 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.

In our opinion, the accompanying financial statements present fairly, in all material respects, the net assets available for benefits of GHA Technologies, Inc. Employee Stock Ownership Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the year ended December 31, 2024, in accordance with accounting principles generally accepted in the United States of America.

### 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 GHA Technologies, Inc. Employee Stock Ownership Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

### Responsibilities of Management for the Financial Statements

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

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 GHA Technologies, Inc. Employee Stock Ownership Plan's ability to continue as a going concern for a period of one year from the date the financial statements were 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

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

In performing an audit in accordance with GAAS, we:

- Exercise professional judgment and maintain professional skepticism throughout the audit.
- Identify and assess the risk 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 GHA Technologies, Inc. Employee Stock Ownership 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 GHA Technologies, Inc. Employee Stock Ownership Plan's ability to continue as a going concern for a reasonable period of time.

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

### Supplemental Schedules Required by ERISA

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules of Assets (Held at End of Year) and Assets (Acquired and Disposed of Within Year) as of and for the year ended December 31, 2024 are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with GAAS.

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

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

*Johnson Lawdahl Endres, PLLC*  
Phoenix, Arizona  
September 3, 2025

**GHA Technologies, Inc. Employee Stock Ownership Plan**  
**Statements of Net Assets Available for Benefits**  
**December 31, 2024 and 2023**

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	<u>2024</u>	<u>2023</u>
<b>Assets</b>		
Investments, <i>at fair value</i> :		
Sponsor company common stock	\$ 18,290,034	\$ 10,592,595
Marketable equity securities	8,281,978	4,058,651
Registered investment companies	2,129,419	1,242,098
U.S. Government securities	67,729	63,453
Non-publicly traded equity securities	2,627,113	1,191,193
Interest bearing bank deposits	7,233,893	8,703,463
	<u>38,630,166</u>	<u>25,851,453</u>
Receivables:		
Employer contributions receivable	72,000	--
Cash	12,481	1,324
Total assets	<u>38,714,647</u>	<u>25,852,777</u>
<b>Liabilities</b>	<u>--</u>	<u>--</u>
<b>Net Assets Available for Benefits</b>	<u><u>\$ 38,714,647</u></u>	<u><u>\$ 25,852,777</u></u>

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See notes to financial statements.

**GHA Technologies, Inc. Employee Stock Ownership Plan**  
Statement of Changes in Net Assets Available for Benefits  
For the Year Ended December 31, 2024

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**Additions:**

Investment Income

Net increase in fair value of investments:

Sponsor company common stock	\$ 7,697,439
Marketable investment portfolio	2,449,388
Dividends	317,486
Interest	311,234
	<u>10,775,547</u>

Employer contributions 2,696,624

Total additions 13,472,171

**Deductions:**

Distributions to participants	568,150
Administrative expenses	42,151
Total deductions	<u>610,301</u>

Net increase 12,861,870

Net Assets Available For Benefits

Beginning of year 25,852,777

End of year \$ 38,714,647

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 1: Description of Plan**

The following brief description of GHA Technologies, Inc. Employee Stock Ownership 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 an employee stock ownership plan, established January 1, 2011, covering all employees of GHA Technologies, Inc. (the "Company"), who have completed 1,000 hours of service. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 (ERISA).

An expansion of Setting Every Community Up for Retirement Enhancement Act of 2019 ("SECURE 2.0") was signed into law as part of the Consolidated Appropriations Act of 2023. The Plan has been formally amended to adopt these provisions effective January 1, 2024.

#### Contributions

Employer contributions are discretionary as decided annually by the Company's board of directors and may be paid in cash, shares of Company Stock or any combination of both. Participants who have completed 1,000 hours of service during the plan year are eligible for an allocation of employer contribution. Contributions are allocated to participants in the ratio of each participant's covered compensation to total aggregate covered compensation of all participants. Covered compensation, limited by IRC Section 401(a)(17) adjusted annually for inflation, is defined by the Plan as gross compensation, including 401(k) Plan and Code Section 125 deferrals, but excluding expense reimbursements, moving expenses and fringe benefits. The maximum compensation for 2024 is \$345,000.

Employee contributions are not permitted.

#### Participant Accounts

Each participant's account is credited with the Company's contributions and Plan earnings, and charged for withdrawals, management, custodial and other administrative fees not paid by the Company, and allocated Plan losses. Plan earnings, losses and fees paid by the Plan are allocated to participant accounts based upon the ratio of cumulative number of shares in each participant's Company Stock Account as of the previous anniversary date to total number of cumulative shares in the Participant Stock Account.

#### Allocated Stock

The Plan is a non-leveraged ESOP. Accordingly, there are no unallocated shares of company stock.

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 1: Description of Plan, *continued***

#### Voting Rights

Except as noted below, the Trustee, as directed by the Plan Committee, shall vote shares of Company Stock held as part of the Trust Fund.

Participant and/or beneficiaries shall be entitled to direct the voting of any voting shares of Company Stock allocated to their individual account with respect to any vote required for the approval or disapproval of any corporate merger or consolidation, recapitalization, reclassification, liquidation, dissolution, sale of substantially all the assets of a trade or business, or other similar transactions prescribed by Treasury Department regulations.

#### Vesting

Vesting is based on years of service. A participant is 20% vested after two years of service and subsequently, 20% per year until fully vested after six years of service.

Forfeitures of all non-vested account balances are allocated to all other remaining participants in the same manner as contributions. Forfeitures of terminated non-vested account balances allocated to remaining participants at December 31, 2024 and 2023 amounted to \$51,376 and \$122,414, respectively.

#### Plan Benefits

##### *Upon Death, Disability or Retirement:*

For participant accounts in excess of \$7,000, beginning no later than one year after the Plan year in which death, disability or retirement occurs, the participant's account balance will be paid in equal annual installments over five years. Benefits are paid in lump sum for account balances less than \$7,000.

##### *All Other Employment Terminations:*

For participant accounts in excess of \$7,000, beginning no later than five years after the Plan year in which an event of termination occurs, the participant's account balance will be paid in equal annual installments over the following five years. Benefits are paid in lump sum during the Plan year following the year of termination for account balances less than \$7,000.

#### Put Option

Under federal income tax regulations, the Company Stock that is held by the Plan and its participants and is not readily tradeable on an established market, or is subject to limitations, include a put option. The put option is the right to demand that the Company buy any shares of its stock distributed to participants for which there is no market. The put price is representative of the current value of the stock. The Company can pay for the purchase with interest over a period of five years. The purpose of the put option is to ensure that participants have the ability to ultimately obtain cash.

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 1: Description of Plan, *continued***

#### Diversification

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company Stock into investments which are more diversified.

Participants who are at least age 55, with at least 10 years of participation in the plan, may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25% of the number of shares allocated to their account, less any share previously diversified. In the sixth year, a participant may diversify up to 50%. Participants who elect to diversify will receive cash distributions.

#### Plan Committee

The Company has appointed a Plan Committee, which consists of such number of people as shall from time to time be decided by the Company.

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

#### Basis of Accounting

The financial statements of the Plan are prepared on the accrual basis of accounting in conformity with accounting principles generally accepted in the United States of America, except that benefits paid to plan participants are recorded on the cash basis.

#### Contributions Receivable

Contributions receivable represent contributions elected by the Plan sponsor's board of directors for the Plan year, unpaid as of Plan year end. All contributions receivable were paid subsequent to December 31, 2024.

#### Fair Value of Financial Instruments

See note 3 for discussion of fair value measurements for investments.

#### Income Recognition

Dividend income is accrued on the ex-dividend date. Purchases and sales of securities are recorded on a trade-date basis. Net increase or decrease in fair value of investments includes the Plan's gain or loss on investments bought and sold during the year.

#### Income Tax Status

The Internal Revenue Service ("IRS") has determined and informed the Company by a letter dated October 17, 2013, that the Plan and related trust are designed in accordance with applicable sections of the Internal Revenue Code ("IRC"). Although the Plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 2: Summary of Significant Accounting Policies, *continued***

compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

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 if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by the IRS, however, there are currently no audits for any tax periods in progress.

#### Estimates

The preparation of financial statements in conformity with U.S. generally accepted accounting principles requires the plan trustee to make estimates and assumptions that affect the reported amounts assets, liabilities, and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results may differ from those estimates.

#### Risks and Uncertainties

Material Plan investments consist of investment in the sponsor company's common stock, marketable securities, non-publicly traded equity securities and interest-bearing demand deposits. These investments are exposed to various risks such as interest rate, market and credit risk. Valuation of the Plan's investment in non-marketable sponsor company's common stock is determined in part on assumptions based on earnings, cash flows and/or other such techniques.

### **Note 3: Investments**

#### Fair Value Measurements

Financial Accounting Standards Board (FASB) *Accounting Standards Codification* (ASC) 820, *Fair Value Measurements and Disclosures*, provides the framework for measuring fair value. That framework provides a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. The hierarchy gives the highest priority to unadjusted quoted prices in active markets for identical assets or liabilities (level 1 measurements) and the lowest priority to unobservable inputs (level 3 measurements). The three levels of the fair value under FASB ASC 820 are as follows:

Level 1 inputs: Inputs to the valuation methodology are unadjusted quoted prices for identical assets in active markets that the plan has the ability to access.

Level 2 inputs: Inputs to the valuation methodology included: (a) quoted prices for similar assets in active markets; (b) quoted prices for identical or similar assets in markets that are not active; (c) inputs other than quoted prices that are observable for the asset; (d) inputs that are derived principally from or corroborated by observable market data by correlation or other means.

**GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

**Note 3: Investments, continued**

Level 3 inputs: Inputs to the valuation methodology are unobservable and are significant to the fair value measurement. Such inputs that reflect management's own assumptions about the assumptions market participants would use in pricing the asset based on the best information available in the circumstances. That is, internally derived assumptions surrounding the timing and amount of expected cash flows.

The following tables set forth within the fair value hierarchy the Plan's investments at fair values as of December 31, 2024 and 2023:

	2024			Total
	Level 1 Inputs	Level 2 Inputs	Level 3 Inputs	
Sponsor company common stock	\$ --	\$ --	\$18,290,034	\$ 18,290,034
Marketable equity securities	8,281,978	--	--	8,281,978
Registered investment companies	2,129,419	--	--	2,129,419
U.S. Government securities	--	67,729	--	67,729
Interest-bearing cash	--	7,233,893	--	7,233,893
	<u>\$10,411,397</u>	<u>\$ 7,301,622</u>	<u>\$18,290,034</u>	<u>36,003,053</u>
Equity securities measured at NAV				<u>2,627,113</u>
				<u>\$ 38,630,166</u>

  

	2023			Total
	Level 1 Inputs	Level 2 Inputs	Level 3 Inputs	
Sponsor company common stock	\$ --	\$ --	\$10,592,595	\$ 10,592,595
Marketable equity securities	4,058,651	--	--	4,058,651
Registered investment companies	1,242,098	--	--	1,242,098
U.S. Government securities	--	63,453	--	63,453
Interest-bearing cash	--	8,703,463	--	8,703,463
	<u>\$ 5,300,749</u>	<u>\$ 8,766,916</u>	<u>\$10,592,595</u>	<u>24,660,260</u>
Equity security measured at NAV				<u>1,191,193</u>
				<u>\$ 25,851,453</u>

**Changes in Fair Value of Level 3 Assets:**

The following table sets forth a summary of changes in the fair value of the Plan's Level 3 asset for the year ended December 31, 2024:

Balance, beginning of the year	\$ 10,592,595
Net increase in fair value	<u>7,697,439</u>
Balance, end of year	<u>\$ 18,290,034</u>

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 3: Investments, *continued***

The following are descriptions of the valuation methodologies used to determine estimated fair value of investments.

#### *Investment in Non-Marketable Sponsor Company Common Stock*

Investment in sponsor company common stock held by the Plan is valued at fair value based upon an independent appraisal. This appraisal was based upon a combination of the income and market valuation techniques. Unobservable inputs used in these respective valuation techniques are discussed below.

Unobservable level 3 inputs used in the income valuation technique include: (a) earnings before interest, taxes, depreciation and amortization (EBITDA); (b) net income; (c) "normalizing" adjustments; (d) discount rate; (e) estimated long-term growth rate; and (f) discounts for lack of marketability and control.

Unobservable level 3 inputs used in the market valuation technique include: (a) public company comparables; (b) revenue multiplier; (c) EBITDA multiplier; and (d) discounts for lack of marketability and control.

The valuation process involves plan management's selection of an independent appraiser. Plan management accumulates the data for the appraiser from historical and projected financial information of the Company. The appraiser prepares a preliminary report of estimated per share value, which plan management, along with the Plan trustee, reviews in detail, discusses and approves.

#### *Investments in Marketable Securities*

Marketable Equity Securities: Valued at the year-end closing price of the securities. Marketable securities held by the Plan are registered with the U.S. Securities and Exchange Commission and are actively traded over public market exchanges. Accordingly, shares can readily be traded at any time when markets are open for trading.

Registered Investment Companies: consisting of mutual funds (MFs) and indexed exchange traded funds (ETFs), are valued at the year-end closing price as reported by the fund. ETFs and MFs held by the Plan are registered with the U.S. Securities and Exchange Commission. These funds are required to publish their daily net asset value (NAV) and to transact at that price. The ETFs and MFs held by the Company are actively traded over public market exchanges. Accordingly, shares can readily be traded/redeemed at any time when markets are open for trading.

U.S. Government Securities: consisting of two Treasury Bills held at December 31, 2024 and 2023 that matured January and February, 2025, and January and April, 2024, respectively, are valued using pricing models maximizing the use of observable inputs for similar securities.

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 3: Investments, *continued***

#### *Investments in Non-Publicly Traded Common Stock*

##### Blue Owl Credit Income Corp.

The Plan holds shares of common stock designated as Class S in Blue Owl Credit Income Corp. (formerly known as Owl Rock Core Income Corp.). Blue Owl is an externally managed closed-end management investment company that has elected to be regulated as a business development company under the Investment Company Act of 1940. Accordingly, it is required to file an annual Form 10-K with the U.S. Securities and Exchange Commission, which includes its financial statements audited by an independent registered public accounting firm.

Blue Owl makes loans to and makes debt and equity investments in U.S. middle market companies. The objective is to generate current income and to a lesser extent, capital appreciation by targeting investment opportunities with favorable risk-adjusted returns. The companies in which Blue Owl loans to and invests in are primarily U.S. privately held entities. Consequently, the majority of Blue Owl's investments are valued using unobservable inputs under the fair value hierarchy level 3.

All three designated classes of shares of common stock of Blue Owl are not traded in the secondary market over a public market exchange. Accordingly, the Plan has applied the practical expedient provided for under FASB ASC 820 to estimate the fair value of its investment in Blue Owl at net asset value (NAV) as published by Blue Owl.

As there is no secondary market for shares of common stock in Blue Owl, the plan can only dispose of its shares through redemption by the investee. Redemptions generally are restricted to a thirty-day application window on a quarterly basis. Periodic share redemptions are wholly at the discretion of the board of directors. The redemption price per share is the net asset value of the class of shares as of the most recent quarter end.

As of December 31, 2024, Blue Owl had unfunded loan commitments in the amount of approximately \$3,192,745,000 (rounded to thousands).

##### Blackstone Private Credit Fund

The Plan holds shares of common stock designated as Class S in Blackstone Private Credit Fund. Blackstone is an externally managed closed-end non-diversified investment company that has elected to be regulated as a business development company under the Investment Company Act of 1940. Accordingly, it is required to file an annual Form 10-K with the U.S. Securities and Exchange Commission, which includes its financial statements audited by an independent registered public accounting firm.

Blackstone is a private lender providing loans primarily to U.S. private companies. The objective is to generate current income and to a lesser extent, capital appreciation by targeting investment opportunities with favorable risk-adjusted returns. The companies in which Blackstone loans to are primarily U.S. private companies. Consequently, the majority of Blackstone's investments are valued using unobservable inputs under the fair value hierarchy level 3.

## GHA Technologies, Inc. Employee Stock Ownership Plan

Notes to Financial Statements

For the Year Ended December 31, 2024

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### Note 3: Investments, *continued*

All three designated classes of shares of common stock of Blackstone are not traded in the secondary market over a public market exchange. Accordingly, the Plan has applied the practical expedient provided for under FASB ASC 820 to estimate the fair value of its investment in Blackstone at net asset value (NAV) as published by Blackstone.

As there is no secondary market for shares of common stock in Blackstone, the plan can only dispose of its shares through redemption by the investee. Redemptions generally are restricted to a sixty-day application window on a quarterly basis. Periodic share redemptions are wholly at the discretion of the board of directors. The redemption price per share is the net asset value of the class of shares as of the most recent quarter end.

As of December 31, 2024, Blackstone had unfunded loan commitments in the amount of approximately \$10,804,045,000 (rounded to thousands).

### *Cash*

#### Interest-Bearing

Interest-bearing cash consists of amounts on deposit with a bank in savings and/or money market accounts. These accounts are carried at cost which management believes approximates fair value based on observable inputs for similar bank accounts and the creditworthiness of the bank. These deposits are insured by the Federal Deposit Insurance Corporation to a limit of \$250,000 per plan participant. No individual participant's cash account balance on deposit with the bank exceeded the insured limit at December 31, 2024 and 2023.

#### Non-Interest-Bearing

Non-interest-bearing cash consists of amounts on deposit in brokerage accounts with the Plan's marketable investments asset custodian and advisor. These accounts are carried at cost which management believes approximates fair value based on observable inputs for similar brokerage accounts and the creditworthiness of the broker. These deposits are insured by the Securities Investor Protection Corporation to a limit of \$250,000 per plan participant.

The Plan has not experienced any losses in these accounts. Due to the high credit quality of the financial institutions in which the Plan places its deposits, management believes the Plan is not exposed to any significant credit risk on deposits held by financial institutions.

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

## **GHA Technologies, Inc. Employee Stock Ownership Plan**

Notes to Financial Statements

For the Year Ended December 31, 2024

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### **Note 4: Administration of the Plan**

The Plan's assets are managed by the trustee of the Plan. This includes investment of Company contributions, interest and dividend income and the payment of distributions to participants. All Plan assets are non-participant directed.

The Plan's marketable investment portfolio, interest and non-interest-bearing cash accounts are held by an asset custodian in a managed investment advisory portfolio under the direction and control of the Plan trustee. The investment advisor has certain autonomy in determining the portfolio composition and trading activity.

The Plan pays investment advisory and other fees associated with the administration of the Plan's marketable investment portfolio. All other administrative expenses, including professional fees paid to third party administrator, auditors, independent business valuation specialist and legal counsel, are paid by the Plan's sponsor. Furthermore, certain administrative functions are performed by officers or employees of the Company on behalf of the Plan. No such officers or employees of the Company receive compensation from the Plan.

### **Note 5: Plan Termination**

The Plan is intended to be permanent. However, the Company's board of directors may elect to terminate the Plan or completely discontinue further contributions. Upon termination of the Plan, the Plan Committee, in its sole discretion, may elect to terminate the trust agreement. In such event, each participant's account may be paid in one lump sum to each participant as soon as practicable after the calculation of the value of the participants' account balances or may be paid in accordance with plan benefit payment requirements as discussed on page 7. In the event of Plan termination, participants will become 100% vested.

### **Note 6: Subsequent Events**

Employer cash contributions in the amount of \$2,354,100 have been made to the Plan subsequent to December 31, 2024.

Distributions to participants in the amount of \$1,275,846 have been paid subsequent to December 31, 2024.

Subsequent events have been evaluated by management for possible adjustment to and/or disclosure in the accompanying financial statements through September 3, 2025, the date the financial statements were available to be issued.

**GHA Technologies, Inc.**  
**Employee Stock Ownership Plan**

Supplemental Schedules

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December 31, 2024

**GHA Technologies, Inc. Employee Stock Ownership Plan**

Schedule of Assets (Held at End of Year)

December 31, 2024

Schedule H, Line 4i

Plan Sponsor EIN 86-0971967

Plan 002

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
*	GHA Technologies, Inc.	328,249 shares common stock	\$ 6,399,996	\$18,290,034
	Blue Owl Credit Income Corp.	172,920.472 shrs. Class S common	1,617,439	1,651,391
	Blackstone Private Credit Fund	38,323.727 shrs. Class S common	974,119	975,722
			<u>2,591,558</u>	<u>2,627,113</u>
*	Merrill Lynch WCMA Account	900 shrs. C3 AI Inc.	25,159	30,987
*	Merrill Lynch WCMA Account	32,000 shrs. Dwave Quantum, Inc.	99,853	268,800
*	Merrill Lynch WCMA Account	620 shrs. IES Holdings, Inc.	99,556	124,595
*	Merrill Lynch WCMA Account	490 shrs. Powell Inds, Inc.	99,227	108,609
*	Merrill Lynch WCMA Account	350 shrs. Quanta Services, Inc.	99,519	110,617
*	Merrill Lynch WCMA Account	14,600 shrs. Quantum Computing, Inc	100,588	241,630
*	Merrill Lynch WCMA Account	32,000 shrs. Rigetti Computing, Inc.	100,599	488,320
*	Merrill Lynch WCMA Account	675 shrs. Rubrik, Inc.	49,828	44,118
*	Merrill Lynch Invest Advisory Program	235 shrs. Abbvie Inc.	25,074	41,760
*	Merrill Lynch Invest Advisory Program	300 shrs. Advanced Micro Devices	32,580	36,237
*	Merrill Lynch Invest Advisory Program	165 shrs. Albemarle Corp.	23,939	14,203
*	Merrill Lynch Invest Advisory Program	925 shrs. Alphabet	117,194	175,102
*	Merrill Lynch Invest Advisory Program	800 shrs. Amazon	134,141	175,512
*	Merrill Lynch Invest Advisory Program	825 shrs. Apple	115,118	206,596
*	Merrill Lynch Invest Advisory Program	1,500 shrs. AT&T	34,254	34,155
*	Merrill Lynch Invest Advisory Program	165 shrs. Axon Enterprises	99,825	98,063
*	Merrill Lynch Invest Advisory Program	600 shrs. BHP Group Ltd	42,433	29,298
*	Merrill Lynch Invest Advisory Program	30 shrs. Blackrock	27,610	30,753
*	Merrill Lynch Invest Advisory Program	750 shrs. Bristol-Myers Squibb	43,239	42,420
*	Merrill Lynch Invest Advisory Program	850 shrs. Broadcom	39,222	197,064
*	Merrill Lynch Invest Advisory Program	1,850 shrs. Cameco Corp	100,103	95,071
*	Merrill Lynch Invest Advisory Program	1,100 shrs. Chevron	142,551	159,324
*	Merrill Lynch Invest Advisory Program	320 shrs. Coinbase Global	98,963	79,456
*	Merrill Lynch Invest Advisory Program	2,070 shrs. Corning, Inc.	100,187	98,366
*	Merrill Lynch Invest Advisory Program	155 shrs. Crowdstrike Holdings	49,404	53,035
*	Merrill Lynch Invest Advisory Program	400 shrs. Walt Disney	56,742	44,540
*	Merrill Lynch Invest Advisory Program	300 shrs. Eaton Corp	50,373	99,561
*	Merrill Lynch Invest Advisory Program	35 shrs. Eli Lilly & Co.	22,200	27,020
*	Merrill Lynch Invest Advisory Program	500 shrs. Emerson Electric	51,765	61,965
*	Merrill Lynch Invest Advisory Program	1,740 shrs. Exxon Mobile	141,530	187,172
*	Merrill Lynch Invest Advisory Program	120 shrs. Generac Holdings	49,760	18,606
*	Merrill Lynch Invest Advisory Program	500 shrs. Intel	32,221	10,025

**GHA Technologies, Inc. Employee Stock Ownership Plan**Schedule of Assets (Held at End of Year), *continued*

December 31, 2024

Schedule H, Line 4i

Plan Sponsor EIN 86-0971967

Plan 002

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
*	Merrill Lynch Invest Advisory Program	550 shrs. IBM	76,782	120,907
*	Merrill Lynch Invest Advisory Program	45 shrs. Intuit	21,326	28,283
*	Merrill Lynch Invest Advisory Program	4,200 shrs. Kinder Morgan	64,285	115,080
*	Merrill Lynch Invest Advisory Program	2,000 shrs. Lithium Americas Corp	14,197	5,240
*	Merrill Lynch Invest Advisory Program	2,000 shrs. Lithium Americas Corp	22,443	5,940
*	Merrill Lynch Invest Advisory Program	2,225 shrs. Lucid Group	100,637	6,720
*	Merrill Lynch Invest Advisory Program	500 shrs. Marvel	24,510	55,225
*	Merrill Lynch Invest Advisory Program	500 shrs. Merck and Co	44,764	49,740
*	Merrill Lynch Invest Advisory Program	400 shrs. Meta Platforms	148,047	234,204
*	Merrill Lynch Invest Advisory Program	400 shrs. Microsoft	108,450	168,600
*	Merrill Lynch Invest Advisory Program	335 shrs. Nextera Energy	24,860	24,016
*	Merrill Lynch Invest Advisory Program	300 shrs. Novo Nordisk	33,006	25,806
*	Merrill Lynch Invest Advisory Program	400 shrs. Nucor	49,044	46,684
*	Merrill Lynch Invest Advisory Program	1,800 shrs. Nvidia	35,617	241,722
*	Merrill Lynch Invest Advisory Program	2,100 shrs. Palantir Technologies	50,179	158,823
*	Merrill Lynch Invest Advisory Program	1,000 shrs. Pfizer, Inc.	33,778	26,530
*	Merrill Lynch Invest Advisory Program	1,000 shrs. Realty Income Corp	60,035	53,410
*	Merrill Lynch Invest Advisory Program	860 shrs. Reddit, Inc.	100,104	140,558
*	Merrill Lynch Invest Advisory Program	3,325 shrs. Rivian Automotive	126,018	44,222
*	Merrill Lynch Invest Advisory Program	420 shrs. Simon Property Group	53,072	72,328
*	Merrill Lynch Invest Advisory Program	500 shrs. Super Micro Computer, Inc.	48,938	15,240
*	Merrill Lynch Invest Advisory Program	250 shrs. Taiwan Manufacturing	30,811	49,373
*	Merrill Lynch Invest Advisory Program	800 shrs. Verizon	46,320	31,992
*	Merrill Lynch Invest Advisory Program	1,050 shrs. Vertiv Holdings Co.	98,195	119,291
*	Merrill Lynch Custom Managed Advisor	996 shrs. Alphabet	142,087	188,543
*	Merrill Lynch Custom Managed Advisor	812 shrs. Amazon	126,568	178,145
*	Merrill Lynch Custom Managed Advisor	75 shrs. American Express	15,878	22,259
*	Merrill Lynch Custom Managed Advisor	1,272 shrs. Apple	201,109	318,534
*	Merrill Lynch Custom Managed Advisor	90 shrs. Applied Material	12,162	14,637
*	Merrill Lynch Custom Managed Advisor	57 shrs. Applovin Corp	3,964	18,458
*	Merrill Lynch Custom Managed Advisor	648 shrs. Astrazeneca PLC	47,911	42,457
*	Merrill Lynch Custom Managed Advisor	293 shrs. Broadcom	36,490	67,929
*	Merrill Lynch Custom Managed Advisor	75 shrs. Caterpillar Inc.	20,439	27,207
*	Merrill Lynch Custom Managed Advisor	85 shrs. Chenier Energy	13,193	18,264
*	Merrill Lynch Custom Managed Advisor	368 shrs. Consolidated Edison	33,150	32,837
*	Merrill Lynch Custom Managed Advisor	58 shrs. Costco	26,512	53,144
*	Merrill Lynch Custom Managed Advisor	68 shrs. DR Horton	10,445	9,508
*	Merrill Lynch Custom Managed Advisor	123 shrs. Datadog	12,326	17,575

**GHA Technologies, Inc. Employee Stock Ownership Plan**Schedule of Assets (Held at End of Year), *continued*

December 31, 2024

Schedule H, Line 4i

Plan Sponsor EIN 86-0971967

Plan 002

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
*	Merrill Lynch Custom Managed Advisor	74 shrs. Dell Technologies, Inc.	9,274	8,528
*	Merrill Lynch Custom Managed Advisor	53 shrs. Eaton	9,397	17,589
*	Merrill Lynch Custom Managed Advisor	140 shrs. Eli Lilly	84,881	108,080
*	Merrill Lynch Custom Managed Advisor	67 shrs. Equifax	17,371	17,075
*	Merrill Lynch Custom Managed Advisor	256 shrs. Exxon Mobile	20,748	27,538
*	Merrill Lynch Custom Managed Advisor	37 shrs. Ferrari NV	8,904	15,719
*	Merrill Lynch Custom Managed Advisor	580 shrs. Fifth Third Bank	20,574	24,522
*	Merrill Lynch Custom Managed Advisor	132 shrs. Freeport-McMoran	6,433	5,027
*	Merrill Lynch Custom Managed Advisor	54 shrs. GE Vernova, LLC	14,344	17,762
*	Merrill Lynch Custom Managed Advisor	62 shrs. General Dynamics	14,802	16,336
*	Merrill Lynch Custom Managed Advisor	240 shrs. Gilead Sciences	22,092	22,169
*	Merrill Lynch Custom Managed Advisor	36 shrs. HCA Healthcare	10,161	10,805
*	Merrill Lynch Custom Managed Advisor	28 shrs. Home Depot	9,468	10,892
*	Merrill Lynch Custom Managed Advisor	125 shrs. Interactive Brokers Group	23,390	22,084
*	Merrill Lynch Custom Managed Advisor	94 shrs. International Business Machines	13,890	20,664
*	Merrill Lynch Custom Managed Advisor	64 shrs. Intuitive Surgical	18,971	33,405
*	Merrill Lynch Custom Managed Advisor	135 shrs. JPMorgan Chase	20,988	32,361
*	Merrill Lynch Custom Managed Advisor	40 shrs. Linde PLC	13,900	16,747
*	Merrill Lynch Custom Managed Advisor	79 shrs. Lowe's	17,744	19,497
*	Merrill Lynch Custom Managed Advisor	38 shrs. Mastercard	15,009	20,010
*	Merrill Lynch Custom Managed Advisor	185 shrs. Meta Platforms	66,294	108,319
*	Merrill Lynch Custom Managed Advisor	167 shrs. Micron Technology	17,606	14,055
*	Merrill Lynch Custom Managed Advisor	735 shrs. Microsoft	228,843	309,802
*	Merrill Lynch Custom Managed Advisor	86 shrs. MongoDB Inc.	23,803	20,022
*	Merrill Lynch Custom Managed Advisor	181 shrs. Novo Nordisk	23,790	15,570
*	Merrill Lynch Custom Managed Advisor	2,319 shrs. Nvidia	147,453	311,418
*	Merrill Lynch Custom Managed Advisor	148 shrs. Oracle Corp	25,235	24,663
*	Merrill Lynch Custom Managed Advisor	86 shrs. Palo Alto Networks	12,180	15,649
*	Merrill Lynch Custom Managed Advisor	128 shrs. Pepsico	21,498	19,464
*	Merrill Lynch Custom Managed Advisor	142 shrs. Principal Financial	10,609	10,992
*	Merrill Lynch Custom Managed Advisor	161 shrs. Proctor & Gamble	25,203	26,992
*	Merrill Lynch Custom Managed Advisor	231 shrs. Progressive	40,908	55,350
*	Merrill Lynch Custom Managed Advisor	191 shrs. RTX Corp	22,374	22,102
*	Merrill Lynch Custom Managed Advisor	38 shrs. S&P Global	15,501	18,925
*	Merrill Lynch Custom Managed Advisor	214 shrs. Seagate Tech Holdings	18,411	18,470
*	Merrill Lynch Custom Managed Advisor	36 shrs. Servicenow	19,481	38,164
*	Merrill Lynch Custom Managed Advisor	76 shrs. Stryker Corp	23,842	27,364
*	Merrill Lynch Custom Managed Advisor	127 shrs. T-Mobile	19,503	28,033
*	Merrill Lynch Custom Managed Advisor	121 shrs. Take Two Inter Software	17,948	22,274

**GHA Technologies, Inc. Employee Stock Ownership Plan**

Schedule of Assets (Held at End of Year), *continued*

December 31, 2024

Schedule H, Line 4i

Plan Sponsor EIN 86-0971967

Plan 002

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
*	Merrill Lynch Custom Managed Advisor	215 shrs. Tesla	57,479	86,826
*	Merrill Lynch Custom Managed Advisor	54 shrs. Texas Instruments	9,575	10,126
*	Merrill Lynch Custom Managed Advisor	472 shrs. TJX Cos	40,335	57,022
*	Merrill Lynch Custom Managed Advisor	39 shrs. Topbuild Corp	13,700	12,142
*	Merrill Lynch Custom Managed Advisor	172 shrs. TPG Inc.	9,124	10,808
*	Merrill Lynch Custom Managed Advisor	149 shrs. The Trade Desk Inc.	19,861	17,512
*	Merrill Lynch Custom Managed Advisor	161 shrs. Uber Technologies	10,814	9,711
*	Merrill Lynch Custom Managed Advisor	33 shrs. Unitedhealth	20,160	16,693
*	Merrill Lynch Custom Managed Advisor	261 shrs. Vertiv Holdings	27,470	29,652
*	Merrill Lynch Custom Managed Advisor	114 shrs. Visa	25,950	36,029
*	Merrill Lynch Custom Managed Advisor	201 shrs. Walmart	12,496	18,160
*	Merrill Lynch Custom Managed Advisor	151 shrs. Waste Connections	23,748	25,909
*	Merrill Lynch Custom Managed Advisor	166 shrs. Welltower Inc.	21,573	20,921
*	Merrill Lynch Custom Managed Advisor	307 shrs. Williams Companies	10,316	16,615
*	Merrill Lynch Custom Managed Advisor	429 shrs. Western Digital Corp	27,522	25,581
*	Merrill Lynch Custom Managed Advisor	323 shrs. Xcel Energy	21,041	21,809
*	Merrill Lynch Custom Managed Advisor	59 shrs. Zoetis	10,380	9,613
			<u>5,936,776</u>	<u>8,281,978</u>
*	Merrill Lynch Invest Advisory Program	1,075 shrs. Vaneck Uranium ETF	100,244	87,441
*	Merrill Lynch Custom Managed Advisor	5,597 shrs. Blackrock Liquidity Fund	5,597	5,597
*	Merrill Lynch Custom Managed Advisor	1,314 shrs. ARK Autonomous Tech ETF	93,858	101,506
*	Merrill Lynch Custom Managed Advisor	2,102 shrs. ARK Genomic Revolution EFT	108,659	49,492
*	Merrill Lynch Custom Managed Advisor	1,623 shrs. ARK Innovation ETF	109,460	92,138
*	Merrill Lynch Custom Managed Advisor	1,190 shrs. ARK Next Generation ETF	104,111	128,496
*	Merrill Lynch Custom Managed Advisor	1,209 shrs. Comm Services Select Fnd	88,554	117,043
*	Merrill Lynch Custom Managed Advisor	545 shrs. Consumer Discretionary Fnd	96,486	122,271
*	Merrill Lynch Custom Managed Advisor	166 shrs. Fidelity MSCI Utilities Fnd	7,894	8,096
*	Merrill Lynch Custom Managed Advisor	259 shrs. First Trust Cloud Fund	26,028	30,852
*	Merrill Lynch Custom Managed Advisor	576 shrs. Global X Funds SHS US Fund	17,429	23,276
*	Merrill Lynch Custom Managed Advisor	736 shrs. Health Care Select Fund	96,102	101,251
*	Merrill Lynch Custom Managed Advisor	121 shrs. Invesco Aerospace AND ETF	13,288	13,882
*	Merrill Lynch Custom Managed Advisor	197 shrs. Invesco KBW Bank ETF	9,094	12,874
*	Merrill Lynch Custom Managed Advisor	195 shrs. Ishares Biotechnology EFT	29,839	25,781
*	Merrill Lynch Custom Managed Advisor	216 shrs. Ishares US Home ETF	23,854	22,332
*	Merrill Lynch Custom Managed Advisor	1,070 shrs. Ishares US Healthcare Fnd	61,914	62,349
*	Merrill Lynch Custom Managed Advisor	181 shrs. Ishares TR US ETF	7,774	8,379
*	Merrill Lynch Custom Managed Advisor	80 shrs. Pacer Data & Infra ETF	2,673	2,398

**GHA Technologies, Inc. Employee Stock Ownership Plan**

Schedule of Assets (Held at End of Year), *continued*

December 31, 2024

Schedule H, Line 4i

Plan Sponsor EIN 86-0971967

Plan 002

(a)	(b) Identity of Issue, Borrower, Lessor or Similar Party	(c) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(d) Cost	(e) Current Value
*	Merrill Lynch Custom Managed Advisor	538 shrs. Real Estate Select Fund	20,902	21,881
*	Merrill Lynch Custom Managed Advisor	3,225 shrs. Schwabb US Div Equity Fnd	82,662	88,107
*	Merrill Lynch Custom Managed Advisor	1,281 shrs. Sector SPDR Energy Fund	106,913	109,731
*	Merrill Lynch Custom Managed Advisor	1,786 shrs. SPDR US Financial Sector Fnd	64,442	86,317
*	Merrill Lynch Custom Managed Advisor	2,203 shrs. Vaneck Gold Miners ETF	71,724	74,704
*	Merrill Lynch Custom Managed Advisor	498 shrs. Vaneck Semiconductor ETF	77,324	120,601
*	Merrill Lynch Custom Managed Advisor	468 shrs. Vanguard Small Cap Value ETF	82,796	92,748
*	Merrill Lynch Custom Managed Advisor	201 shrs. Vanguard Consumer Stpls ETF	38,111	42,487
*	Merrill Lynch Custom Managed Advisor	550 shrs. Vanguard Value ETF	82,725	93,115
*	Merrill Lynch Custom Managed Advisor	294 shrs. Vanguard Material ETF	54,326	55,225
*	Merrill Lynch Custom Managed Advisor	440 shrs. Vanguard Info Tech ETF	174,460	273,592
*	Merrill Lynch Custom Managed Advisor	218 shrs. Vanguard Industrial ETF	43,963	55,457
			<u>1,903,206</u>	<u>2,129,419</u>
*	Merrill Lynch Invest Advisory Program	U.S. Treasury Bill, matures 01/23/25	35,122	35,911
*	Merrill Lynch Invest Advisory Program	U.S. Treasury Bill, matures 02/20/25	31,227	31,818
			<u>66,349</u>	<u>67,729</u>
*	Merrill Lynch WCMA	WCMA FDIC-insured	7,171,130	7,171,130
*	Merrill Lynch Invest Advisory Program	interest-bearing	23,718	23,718
*	Merrill Lynch Custom Managed Advisor	bank deposit accounts	39,045	39,045
			<u>7,233,893</u>	<u>7,233,893</u>
			<u>\$24,131,778</u>	<u>\$38,630,166</u>

\* Indicates a party-in-interest.

**GHA Technologies, Inc. Employee Stock Ownership Plan**  
**Schedule of Assets (Acquired and Disposed of Within Year)**  
**For the Year Ended December 31, 2024**

Schedule H, Line 4i  
Plan Sponsor EIN 86-0971967  
Plan 002

(a) Identity of Issue, Borrower, Lessor or Similar Party	(b) Description of Investment Including Maturity, Date, Rate of Interest, Collateral, Par, or Maturity Value	(c) Cost of Acquisitions	(d) Proceeds of Dispositions
Merrill Lynch Custom Managed Advisor	399 shrs. Applovin	\$ 19,146	\$ 47,503
Merrill Lynch Custom Managed Advisor	8 shrs. Autodesk Inc.	2,012	1,669
Merrill Lynch Custom Managed Advisor	199 shrs. Canadian Pac Kans City	16,457	14,805
Merrill Lynch Custom Managed Advisor	104 shars. Dell Technologies	12,000	15,109
Merrill Lynch Custom Managed Advisor	5 shrs. DR Horton	762	811
Merrill Lynch Custom Managed Advisor	159 shrs. Elastic	18,732	11,419
Merrill Lynch Custom Managed Advisor	17 shrs. Extra Space Storage	2,478	2,758
Merrill Lynch Custom Managed Advisor	11 shrs. Equinix	8,587	9,591
Merrill Lynch Custom Managed Advisor	19 shrs. Equifax	4,650	5,175
Merrill Lynch Custom Managed Advisor	381 shrs. Freeport-McMoran	18,997	16,268
Merrill Lynch Custom Managed Advisor	27 shrs. iShares US Aerospace	3,336	3,846
Merrill Lynch Custom Managed Advisor	15 shrs. GE Vernova LLC	3,999	5,136
Merrill Lynch Custom Managed Advisor	6 shrs. Intuit	3,830	3,406
Merrill Lynch Custom Managed Advisor	39 shrs. Magna International	2,146	1,833
Merrill Lynch Custom Managed Advisor	6 shrs. McDonald's	1,780	1,514
Merrill Lynch Custom Managed Advisor	389 shrs. Micron Technologies	41,284	37,625
Merrill Lynch Custom Managed Advisor	10 shrs. Nvidia	607	1,209
Merrill Lynch Custom Managed Advisor	3 shrs. O'Reilly Auto Parts	3,412	2,995
Merrill Lynch Custom Managed Advisor	13 shrs. Oracle	2,206	2,509
Merrill Lynch Custom Managed Advisor	7 shrs. Rockwell Automation	2,125	1,893
Merrill Lynch Custom Managed Advisor	108 shrs. Snowflake	21,439	17,485
Merrill Lynch Custom Managed Advisor	136 shrs. Salesforce	38,843	35,242
Merrill Lynch Custom Managed Advisor	12 shrs. Welltower	1,499	1,643
Merrill Lynch Custom Managed Advisor	138 shrs. TPG Inc.	6,729	8,880
Merrill Lynch Custom Managed Advisor	3 shrs. Thermo Fisher Scientific	1,615	1,565
Merrill Lynch Custom Managed Advisor	17 shrs. Uber Technologies	1,175	967
Merrill Lynch Custom Managed Advisor	25 shrs. United Health Group	13,958	11,948
Merrill Lynch Custom Managed Advisor	23 shrs. Union Pacific	5,344	5,463
Merrill Lynch Custom Managed Advisor	71 shrs. Vertive Holdings	6,623	8,290
Merrill Lynch Custom Managed Advisor	82 shrs. Western Digital	4,804	5,220

<b>Form 5500</b>  Department of the Treasury Internal Revenue Service  Department of Labor Employee Benefits Security Administration  Pension Benefit Guaranty Corporation	<b>Annual Return/Report of Employee Benefit Plan</b>  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).  <b>▶ Complete all entries in accordance with the instructions to the Form 5500.</b>	OMB Nos. 1210-0110 1210-0089  <b>2024</b>  <b>This Form is Open to Public Inspection</b>
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<b>Part I Annual Report Identification Information</b>		
For calendar plan year 2024 or fiscal plan year beginning <u>01/01/2024</u> and ending <u>12/31/2024</u>		
<b>A</b> This return/report is for:	<input type="checkbox"/> a multiemployer plan	<input type="checkbox"/> a multiple-employer plan (Filers checking this box must provide participating employer information in accordance with the form instructions.)
	<input checked="" type="checkbox"/> a single-employer plan	<input type="checkbox"/> a DFE (specify) _____
<b>B</b> This return/report is:	<input type="checkbox"/> the first return/report	<input type="checkbox"/> the final return/report
	<input type="checkbox"/> an amended return/report	<input type="checkbox"/> a short plan year return/report (less than 12 months)
<b>C</b> If the plan is a collectively-bargained plan, check here. . . . .	<input type="checkbox"/>	
<b>D</b> Check box if filing under:	<input checked="" type="checkbox"/> Form 5558	<input type="checkbox"/> automatic extension
	<input type="checkbox"/> special extension (enter description)	<input type="checkbox"/> the DFVC program
<b>E</b> If this is a retroactively adopted plan permitted by SECURE Act section 201, check here. . . . .	<input type="checkbox"/>	

<b>Part II Basic Plan Information</b> —enter all requested information		
<b>1a</b> Name of plan GHA TECHNOLOGIES, INC. EMPLOYEE STOCK OWNERSHIP PLAN	<b>1b</b> Three-digit plan number (PN) ▶	002
	<b>1c</b> Effective date of plan	01/01/2011
<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) GHA TECHNOLOGIES, INC.  8998 E. RAINTREE DRIVE  SCOTTSDALE AZ 85260	<b>2b</b> Employer Identification Number (EIN) 86-0971967	<b>2c</b> Plan Sponsor's telephone number 480-951-0036
	<b>2d</b> Business code (see instructions) 541519	

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

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

SIGN HERE	<i>George Hertzberg</i>	9/8/25	GEORGE HERTZBERG
	Signature of plan administrator	Date	Enter name of individual signing as plan administrator
SIGN HERE			
	Signature of employer/plan sponsor	Date	Enter name of individual signing as employer or plan sponsor
SIGN HERE			
	Signature of DFE	Date	Enter name of individual signing as DFE

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

Form 5500 (2024)  
v. 240311

<b>3a</b> Plan administrator's name and address <input type="checkbox"/> Same as Plan Sponsor GHA TECHNOLOGIES, INC.  8998 E. RAINTREE DRIVE  SCOTTSDALE AZ 85260	<b>3b</b> Administrator's EIN 86-0971967  <b>3c</b> Administrator's telephone number 480-951-0036
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<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
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<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	288
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1), 6a(2), 6b, 6c, and 6d).		
<b>a(1)</b> Total number of active participants at the beginning of the plan year .....	<b>6a(1)</b>	211
<b>a(2)</b> Total number of active participants at the end of the plan year .....	<b>6a(2)</b>	165
<b>b</b> Retired or separated participants receiving benefits .....	<b>6b</b>	35
<b>c</b> Other retired or separated participants entitled to future benefits .....	<b>6c</b>	38
<b>d</b> Subtotal. Add lines 6a(2), 6b, and 6c. ....	<b>6d</b>	238
<b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....	<b>6e</b>	3
<b>f</b> Total. Add lines 6d and 6e. ....	<b>6f</b>	241
<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>6g(1)</b>	224
<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>6g(2)</b>	240
<b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested .....	<b>6h</b>	21
<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:  
 20 2Q

**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) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor	<b>9b</b> Plan benefit arrangement (check all that apply) (1) <input type="checkbox"/> Insurance (2) <input type="checkbox"/> Code section 412(e)(3) insurance contracts (3) <input checked="" type="checkbox"/> Trust (4) <input type="checkbox"/> General assets of the sponsor
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**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> (1) <input checked="" type="checkbox"/> <b>R</b> (Retirement Plan Information) (2) <input type="checkbox"/> <b>MB</b> (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary (3) <input type="checkbox"/> <b>SB</b> (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary (4) <input type="checkbox"/> <b>DCG</b> (Individual Plan Information) – Number Attached _____ (5) <input type="checkbox"/> <b>MEP</b> (Multiple-Employer Retirement Plan Information)	<b>b General Schedules</b> (1) <input checked="" type="checkbox"/> <b>H</b> (Financial Information) (2) <input type="checkbox"/> <b>I</b> (Financial Information – Small Plan) (3) <input type="checkbox"/> <b>A</b> (Insurance Information) – Number Attached _____ (4) <input checked="" type="checkbox"/> <b>C</b> (Service Provider 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

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**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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