

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

2024

This Form is Open to Public Inspection

Department of the Treasury Internal Revenue Service

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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.

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... [X] a single-employer plan [] a DFE... B This return/report is: [] the first return/report [] the final return/report... C If the plan is a collectively-bargained plan, check here... D Check box if filing under: [X] Form 5558 [] automatic extension... 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: PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 05/01/1992
2a Plan sponsor's name (employer, if for a single-employer plan): PLAID ENTERPRISES, INC.
2b Employer Identification Number (EIN): 58-1989103
2c Plan Sponsor's telephone number: 678-291-8244
2d Business code (see instructions): 339900

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

| | |
|--|--|
| 3a Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor | 3b Administrator's EIN |
| | 3c Administrator's telephone number |

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

| | | |
|---|----------|-----|
| 5 Total number of participants at the beginning of the plan year | 5 | 523 |
|---|----------|-----|

| | | |
|--|--------------|-----|
| 6 Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines 6a(1) , 6a(2) , 6b , 6c , and 6d). | | |
| a(1) Total number of active participants at the beginning of the plan year | 6a(1) | 378 |
| a(2) Total number of active participants at the end of the plan year | 6a(2) | 396 |
| b Retired or separated participants receiving benefits..... | 6b | 0 |
| c Other retired or separated participants entitled to future benefits | 6c | 113 |
| d Subtotal. Add lines 6a(2) , 6b , and 6c | 6d | 509 |
| e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. | 6e | 3 |
| f Total. Add lines 6d and 6e | 6f | 512 |
| g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) | 6g(1) | 501 |
| g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) | 6g(2) | 505 |
| h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... | 6h | 26 |

| | | |
|--|----------|--|
| 7 Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) | 7 | |
|--|----------|--|

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

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

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

10 Check all applicable boxes in 10a and 10b to indicate which schedules are attached, and, where indicated, enter the number attached. (See instructions)

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 _____
- (4) **C** (Service Provider Information)
- (5) **D** (DFE/Participating Plan Information)
- (6) **G** (Financial Transaction Schedules)

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

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

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

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

11c Enter the Receipt Confirmation Code for the 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 _____

| | | |
|--|--|---|
| SCHEDULE C (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small> | Service Provider Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. | <small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection. |
|--|--|---|

For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

| | | |
|--|---|-----|
| A Name of plan PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN | B Three-digit plan number (PN) ▶ | 001 |
| C Plan sponsor's name as shown on line 2a of Form 5500 PLAID ENTERPRISES, INC. | D Employer Identification Number (EIN) 58-1989103 | |

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

THE VANGUARD GROUP, INC

23-1945930

(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

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)

THE VANGUARD GROUP, INC.

23-1945930

| (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? |
|----------------------------|---|--|--|--|---|--|
| 99 15 64 37 50 52 68 | NONE | 52389 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | 0 | Yes <input type="checkbox"/> No <input checked="" 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.

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

Part II Service Providers Who Fail or Refuse to Provide Information

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

| | | |
|---|--|---|
| SCHEDULE D (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> | DFE/Participating Plan Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA). ▶ File as an attachment to Form 5500. | <small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection. |
|---|--|---|

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

| | | |
|--|--|------------|
| A Name of plan <u>PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN</u> | B Three-digit plan number (PN) ▶ | <u>001</u> |
| C Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>PLAID ENTERPRISES, INC.</u> | D Employer Identification Number (EIN) <u>58-1989103</u> | |

| | |
|---------------|--|
| Part I | Information on interests in MTIAs, CCTs, PSAs, and 103-12 IEs (to be completed by plans and DFEs) (Complete as many entries as needed to report all interests in DFEs) |
|---------------|--|

| | | |
|---|-------------------------------|--|
| a Name of MTIA, CCT, PSA, or 103-12 IE: <u>VANGUARD RETIREMENT SAVINGS TRUST V</u> | | |
| b Name of sponsor of entity listed in (a): <u>VANGUARD RST FUNDS</u> | | |
| c EIN-PN <u>23-2186884-010</u> | d Entity code <u>C</u> | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>7155682</u> |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |
| a Name of MTIA, CCT, PSA, or 103-12 IE: | | |
| b Name of sponsor of entity listed in (a): | | |
| c EIN-PN | d Entity code | e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) |

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

a Name of MTIA, CCT, PSA, or 103-12 IE:

b Name of sponsor of entity listed in (a):

c EIN-PN

d Entity code

e Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

| | | |
|--|--|--|
| SCHEDULE H (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small> | Financial Information This schedule is required to be filed under section 104 of the Employee Retirement Income Security Act of 1974 (ERISA), and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500. | <small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection |
|--|--|--|

| | |
|--|--|
| For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024 | |
| A Name of plan PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN | B Three-digit plan number (PN) ▶ 001 |
| C Plan sponsor's name as shown on line 2a of Form 5500 PLAID ENTERPRISES, INC. | D Employer Identification Number (EIN) 58-1989103 |

| | |
|---------------|--------------------------------------|
| Part I | Asset and Liability Statement |
|---------------|--------------------------------------|

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

| | | (a) Beginning of Year | (b) End of Year |
|--|-----------------|-----------------------|-----------------|
| Assets | | | |
| a Total noninterest-bearing cash | 1a | | |
| b Receivables (less allowance for doubtful accounts): | | | |
| (1) Employer contributions | 1b(1) | 587505 | 624369 |
| (2) Participant contributions | 1b(2) | 48707 | 0 |
| (3) Other | 1b(3) | | |
| c General investments: | | | |
| (1) Interest-bearing cash (include money market accounts & certificates of deposit) | 1c(1) | | 0 |
| (2) U.S. Government securities | 1c(2) | | |
| (3) Corporate debt instruments (other than employer securities): | | | |
| (A) Preferred | 1c(3)(A) | | |
| (B) All other | 1c(3)(B) | | |
| (4) Corporate stocks (other than employer securities): | | | |
| (A) Preferred | 1c(4)(A) | | |
| (B) Common | 1c(4)(B) | | |
| (5) Partnership/joint venture interests | 1c(5) | | |
| (6) Real estate (other than employer real property) | 1c(6) | | |
| (7) Loans (other than to participants) | 1c(7) | | |
| (8) Participant loans | 1c(8) | 567628 | 691824 |
| (9) Value of interest in common/collective trusts | 1c(9) | 7723095 | 7155682 |
| (10) Value of interest in pooled separate accounts | 1c(10) | | |
| (11) Value of interest in master trust investment accounts | 1c(11) | | |
| (12) Value of interest in 103-12 investment entities | 1c(12) | | |
| (13) Value of interest in registered investment companies (e.g., mutual funds) | 1c(13) | 24955849 | 29303794 |
| (14) Value of funds held in insurance company general account (unallocated contracts) | 1c(14) | | |
| (15) Other | 1c(15) | | |

| 1d Employer-related investments: | | (a) Beginning of Year | (b) End of Year |
|--|--------------|-----------------------|-----------------|
| (1) Employer securities..... | 1d(1) | | |
| (2) Employer real property..... | 1d(2) | | |
| e Buildings and other property used in plan operation..... | 1e | | |
| f Total assets (add all amounts in lines 1a through 1e)..... | 1f | 33882784 | 37775669 |
| Liabilities | | | |
| g Benefit claims payable..... | 1g | | |
| h Operating payables..... | 1h | | |
| i Acquisition indebtedness..... | 1i | | |
| j Other liabilities..... | 1j | | |
| k Total liabilities (add all amounts in lines 1g through 1j)..... | 1k | 0 | 0 |
| Net Assets | | | |
| l Net assets (subtract line 1k from line 1f)..... | 1l | 33882784 | 37775669 |

Part II Income and Expense Statement

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

| Income | | (a) Amount | (b) Total |
|--|-----------------|------------|-----------|
| a Contributions: | | | |
| (1) Received or receivable in cash from: (A) Employers..... | 2a(1)(A) | 1440477 | |
| (B) Participants..... | 2a(1)(B) | 1810294 | |
| (C) Others (including rollovers)..... | 2a(1)(C) | 281001 | |
| (2) Noncash contributions..... | 2a(2) | | |
| (3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2) | 2a(3) | | 3531772 |
| b Earnings on investments: | | | |
| (1) Interest: | | | |
| (A) Interest-bearing cash (including money market accounts and certificates of deposit)..... | 2b(1)(A) | 155116 | |
| (B) U.S. Government securities..... | 2b(1)(B) | | |
| (C) Corporate debt instruments..... | 2b(1)(C) | | |
| (D) Loans (other than to participants)..... | 2b(1)(D) | 0 | |
| (E) Participant loans..... | 2b(1)(E) | 47593 | |
| (F) Other..... | 2b(1)(F) | | |
| (G) Total interest. Add lines 2b(1)(A) through (F) | 2b(1)(G) | | 202709 |
| (2) Dividends: | | | |
| (A) Preferred stock..... | 2b(2)(A) | | |
| (B) Common stock..... | 2b(2)(B) | | |
| (C) Registered investment company shares (e.g. mutual funds)..... | 2b(2)(C) | 690495 | |
| (D) Total dividends. Add lines 2b(2)(A) , (B) , and (C) | 2b(2)(D) | | 690495 |
| (3) Rents..... | 2b(3) | | |
| (4) Net gain (loss) on sale of assets: | | | |
| (A) Aggregate proceeds..... | 2b(4)(A) | | |
| (B) Aggregate carrying amount (see instructions)..... | 2b(4)(B) | | |
| (C) Subtract line 2b(4)(B) from line 2b(4)(A) and enter result..... | 2b(4)(C) | | |
| (5) Unrealized appreciation (depreciation) of assets: | | | |
| (A) Real estate..... | 2b(5)(A) | | |
| (B) Other..... | 2b(5)(B) | | |
| (C) Total unrealized appreciation of assets. Add lines 2b(5)(A) and (B) | 2b(5)(C) | | |

| | | (a) Amount | (b) Total |
|---|--------|------------|-----------|
| (6) Net investment gain (loss) from common/collective trusts | 2b(6) | | 180753 |
| (7) Net investment gain (loss) from pooled separate accounts | 2b(7) | | |
| (8) Net investment gain (loss) from master trust investment accounts | 2b(8) | | |
| (9) Net investment gain (loss) from 103-12 investment entities | 2b(9) | | |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) | 2b(10) | | 2743694 |
| c Other income | 2c | | |
| d Total income. Add all income amounts in column (b) and enter total..... | 2d | | 7349423 |

Expenses

| | | | |
|--|--------|---------|---------|
| e Benefit payment and payments to provide benefits: | | | |
| (1) Directly to participants or beneficiaries, including direct rollovers..... | 2e(1) | 3382598 | |
| (2) To insurance carriers for the provision of benefits | 2e(2) | | |
| (3) Other..... | 2e(3) | | |
| (4) Total benefit payments. Add lines 2e(1) through (3) | 2e(4) | | 3382598 |
| f Corrective distributions (see instructions) | 2f | | 21551 |
| g Certain deemed distributions of participant loans (see instructions)..... | 2g | | |
| h Interest expense..... | 2h | | |
| i Administrative expenses: | | | |
| (1) Salaries and allowances | 2i(1) | | |
| (2) Contract administrator fees | 2i(2) | 52389 | |
| (3) Recordkeeping fees | 2i(3) | | |
| (4) IQPA audit fees | 2i(4) | | |
| (5) Investment advisory and investment management fees | 2i(5) | | |
| (6) Bank or trust company trustee/custodial fees | 2i(6) | | |
| (7) Actuarial fees | 2i(7) | | |
| (8) Legal fees | 2i(8) | | |
| (9) Valuation/appraisal fees | 2i(9) | | |
| (10) Other trustee fees and expenses | 2i(10) | | |
| (11) Other expenses..... | 2i(11) | | |
| (12) Total administrative expenses. Add lines 2i(1) through (11) | 2i(12) | | 52389 |
| j Total expenses. Add all expense amounts in column (b) and enter total..... | 2j | | 3456538 |

Net Income and Reconciliation

| | | | |
|--|-------|--|---------|
| k Net income (loss). Subtract line 2j from line 2d..... | 2k | | 3892885 |
| l Transfers of assets: | | | |
| (1) To this plan..... | 2l(1) | | |
| (2) From this plan | 2l(2) | | |

Part III Accountant's Opinion

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

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

(1) 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: **WILLIAMS, BENATOR AND LIBBY LLP**

(2) EIN: **58-1460137**

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 |
|--|-------------------------------------|-------------------------------------|--------|
| a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 16418 |
| 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.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| e Was this plan covered by a fidelity bond? | <input checked="" type="checkbox"/> | <input type="checkbox"/> | 500000 |
| f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | <input checked="" type="checkbox"/> | <input type="checkbox"/> | |
| j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| l Has the plan failed to provide any benefit when due under the plan? | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | <input type="checkbox"/> | <input checked="" type="checkbox"/> | |
| n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | <input type="checkbox"/> | <input type="checkbox"/> | |

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

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

| 5b(1) Name of plan(s) | 5b(2) EIN(s) | 5b(3) PN(s) |
|------------------------------|---------------------|--------------------|
| | | |
| | | |
| | | |
| | | |

5c Was the plan a defined benefit plan covered under the PBGC insurance program at any time during this plan year? (See ERISA section 4021 and instructions.) Yes No Not determined

If "Yes" is checked, enter the My PAA confirmation number from the PBGC premium filing for this plan year _____.

| | | |
|--|---|---|
| SCHEDULE R (Form 5500) <small>Department of the Treasury Internal Revenue Service</small> <small>Department of Labor Employee Benefits Security Administration</small> <small>Pension Benefit Guaranty Corporation</small> | Retirement Plan Information This schedule is required to be filed under sections 104 and 4065 of the Employee Retirement Income Security Act of 1974 (ERISA) and section 6058(a) of the Internal Revenue Code (the Code). ▶ File as an attachment to Form 5500. | <small>OMB No. 1210-0110</small> 2024 This Form is Open to Public Inspection. |
|--|---|---|

For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

| | | |
|---|--|------------|
| A Name of plan <u>PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN</u> | B Three-digit plan number (PN) ▶ | <u>001</u> |
| C Plan sponsor's name as shown on line 2a of Form 5500 <u>PLAID ENTERPRISES, INC.</u> | D Employer Identification Number (EIN) <u>58-1989103</u> | |

| | |
|---------------|----------------------|
| Part I | Distributions |
|---------------|----------------------|

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

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

| | | |
|---|--|---|
| 1 | | 0 |
|---|--|---|

2 Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):
 EIN(s): 45-0404698

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

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

| | |
|---|--|
| 3 | |
|---|--|

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

4 Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? Yes No N/A
If the plan is a defined benefit plan, go to line 8.

5 If a waiver of the minimum funding standard for a prior year is being amortized in this plan year, see instructions and enter the date of the ruling letter granting the waiver. **Date:** Month _____ Day _____ Year _____
If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.

| | | |
|---|-----------|--|
| 6 a Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) | 6a | |
| b Enter the amount contributed by the employer to the plan for this plan year | 6b | |
| c Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount)..... | 6c | |

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

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

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

| | |
|-----------------|-------------------|
| Part III | Amendments |
|-----------------|-------------------|

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

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

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

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

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

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

Part V Additional Information for Multiemployer Defined Benefit Pension Plans

13 Enter the following information for each employer that (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:

| | | |
|---|------------|--|
| a 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)..... | 14a | |
| 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)..... | 14b | |
| c 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)..... | 14c | |

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

| | | |
|---|------------|--|
| a The corresponding number for the plan year immediately preceding the current plan year | 15a | |
| b The corresponding number for the second preceding plan year | 15b | |

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

| | | |
|---|------------|--|
| a Enter the number of employers who withdrew during the preceding plan year | 16a | |
| b If line 16a is greater than 0, enter the aggregate amount of withdrawal liability assessed or estimated to be assessed against such withdrawn employers..... | 16b | |

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

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

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

19 If the total number of participants is 1,000 or more, complete lines (a) and (b):

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

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

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

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

b If line 20a is "Yes," has PBGC been notified as required by ERISA sections 4043(c)(5) and/or 303(k)(4)? Check the applicable box:
 Yes.
 No. Reporting was waived under 29 CFR 4043.25(c)(2) because contributions equal to or exceeding the unpaid minimum required contribution were made by the 30th day after the due date.
 No. The 30-day period referenced in 29 CFR 4043.25(c)(2) has not yet ended, and the sponsor intends to make a contribution equal to or exceeding the unpaid minimum required contribution by the 30th day after the due date.
 No. Other. Provide explanation: _____

Part VII IRS Compliance Questions

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

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

22 If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 06 / 30 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q703678A.

PLAID ENTERPRISES, INC.
401(k) RETIREMENT SAVINGS PLAN

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

DECEMBER 31, 2024

with

INDEPENDENT AUDITOR'S REPORT

Audited Financial Statements and Supplemental Schedules

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

December 31, 2024

Audited Financial Statements

Independent Auditor's Report 1
Statements of Net Assets Available for Benefits 5
Statement of Changes in Net Assets Available for Benefits 6
Notes to Financial Statements 7

Supplemental Schedules

Schedule H, Line 4a--Schedule of Delinquent Participant Contributions 14
Schedule H, Line 4i--Schedule of Assets (Held at End of Year) 15

INDEPENDENT AUDITOR'S REPORT

Plan Administrator
Plaid Enterprises, Inc. 401(k) Retirement Savings Plan
Norcross, Georgia

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

We have performed audits of the financial statements of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the 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.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note I to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

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

Basis for Opinion

We conducted our audits in accordance with the auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Plaid Enterprises, Inc. 401(k) Retirement Savings Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 could reasonably be expected to influence the economic decisions of users made on the basis of these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgement and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting polices used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter--Supplemental Schedules Required by ERISA

The supplemental schedules H, line 4i--schedule of assets (held at end of year) and schedule H, line 4a--schedule of delinquent participant contributions as of 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 included in the supplemental schedules, other than that

agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Williams Benator + Libby, LLP

Atlanta, Georgia
September 18, 2025

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

| | December 31 | |
|--------------------------------------|----------------------|----------------------|
| | 2024 | 2023 |
| ASSETS | | |
| INVESTMENTS | | |
| Mutual funds--Note C | \$ 29,303,794 | \$ 24,955,849 |
| Collective investment trusts--Note C | <u>7,155,682</u> | <u>7,723,095</u> |
| | 36,459,476 | 32,678,944 |
| RECEIVABLES | | |
| Participants' contributions | -0- | 48,707 |
| Employer's contributions | 624,369 | 587,505 |
| Notes receivable from participants | <u>691,824</u> | <u>567,628</u> |
| | 1,316,193 | 1,203,840 |
| NET ASSETS AVAILABLE FOR BENEFITS | <u>\$ 37,775,669</u> | <u>\$ 33,882,784</u> |

See independent auditor's report and notes to financial statements.

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

PLAID ENTERPRISES, INC. 401 (K) RETIREMENT SAVINGS PLAN

Year Ended December 31, 2024

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income:

| | |
|---|----------------|
| Net appreciation in fair value of investments | \$ 2,924,447 |
| Interest and dividend income | <u>845,611</u> |
| | 3,770,058 |

| | |
|---|--------|
| Interest income on notes receivable from participants | 47,593 |
|---|--------|

Contributions:

| | |
|--------------|------------------|
| Employer | 1,440,477 |
| Participants | 1,810,294 |
| Rollover | <u>281,001</u> |
| | <u>3,531,772</u> |

| | |
|-----------------|-----------|
| TOTAL ADDITIONS | 7,349,423 |
|-----------------|-----------|

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

| | |
|-----------------------------------|---------------|
| Benefits paid to participants | 3,404,149 |
| Administrative and other expenses | <u>52,389</u> |

| | |
|------------------|------------------|
| TOTAL DEDUCTIONS | <u>3,456,538</u> |
|------------------|------------------|

| | |
|--------------|-----------|
| NET INCREASE | 3,892,885 |
|--------------|-----------|

| | |
|--|-------------------|
| Net assets available for benefits at beginning of year | <u>33,882,784</u> |
|--|-------------------|

| | |
|--|---------------------|
| NET ASSETS AVAILABLE FOR BENEFITS AT END OF YEAR | <u>\$37,775,669</u> |
|--|---------------------|

See independent auditor's report and notes to financial statements.

NOTES TO FINANCIAL STATEMENTS

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

December 31, 2024

NOTE A--DESCRIPTION OF PLAN

The following description of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan ("the Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of Plaid Enterprises, Inc. ("Plaid", "the Employer" and "Plan Administrator"). Employees who have attained nineteen years of age with no required service period are eligible to participate in the Plan. Employees are not eligible to participate if they are nonresident aliens employed at a location outside the United States, or if they are covered under a collective bargaining agreement for which retirement benefits were the subject of good faith negotiations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions: The Plan provides for a discretionary tax deferred contribution by the Employer and an employee elective contribution with an Employer matching provision. Plan participants were able contribute from their pre-tax and/or after-tax compensation, up to 100% of their compensation, not to exceed the Federal statutory maximum. Employees are eligible for a discretionary match contribution after attaining the age of 21 and completing two months of service with a quarterly entry date. The Employer matched 95% of each participant's annual contribution, up to the first \$2,000 of the participant's contribution, 55% of each participant's annual contribution from \$2,001 to \$5,500, and 10% of each participant's annual contribution from \$5,501 to \$8,000, for a maximum Employer match of \$4,075 per year during the year ended December 31, 2024. Additionally, the Employer may make an additional matching contribution at the end of the Plan year. No additional matching contribution was made for the year ended December 31, 2024.

The Plan includes an automatic salary deferral feature. The Employer automatically withholds 3% of the employee's compensation as an employee elective contribution. Employees that have been automatically enrolled may request no deferral of compensation or may elect an alternative deferral percentage.

The Plan provides for a discretionary, non-elective Employer profit-sharing contribution for all Plan participants with one year of service who were employed as of the last day of the plan year. Allocation of the annual contribution is made based on the ratio that each participant's base compensation, as defined, bears to the total annual base compensation for all participants. A discretionary contribution in the amount of \$624,369 was made for the year ended December 31, 2024.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE A--DESCRIPTION OF PLAN--Continued

Participant Accounts: Each participant's account is credited with their contributions, the Employer's matching contributions, their account's earnings or losses, any allocated forfeitures, and the Employer discretionary profit-sharing contribution. All investments are participant directed. Participants may change their investment options daily.

Investments: Participants may allocate their contributions and employer contributions among a selection of money market, equity and fixed income mutual funds, and a collective investment trust fund.

Vesting: Participants are immediately vested in their voluntary contributions and allocated earnings thereon. Employer contributions and earnings thereon vest at the rate of 20% per year. A participant becomes fully vested after five years of credited service, or in the event of death, disability or normal retirement. Forfeited amounts can be used to reduce future Employer obligations to the Plan, pay administrative expenses of the Plan, or be allocated to participants.

Administration: The Plan is administered by the Employer. All funds in the Plan were held by the Plan's custodians, Ascensus Trust Company ("the Custodian"). Ascensus Trust Company is also the trustee of the Plan. The Plan's Custodian invested participants' contributions, as directed by the participants.

Withdrawals: A participant may withdraw his vested contributions plus earnings thereon and rollover contributions in the case of a financial hardship. Withdrawals are taxable in the year received by the participant and may be subject to a penalty tax. A participant may not make elective deferrals or other contributions for a period of twelve months following a hardship withdrawal.

Payment of Benefits: Upon a participant's termination of employment with the Employer, reaching the age of 59 and a half, or becoming disabled, the participant is entitled to receive a distribution of his vested account balance. The participant may elect to receive a distribution in the form of an annuity or, in certain situations, installment payments as provided for in the Plan document. If the participant dies prior to receiving his vested account balance, the balance will be paid to the participant's beneficiary or estate. Participants may also make in-service withdrawals under certain "hardship" conditions if approved by the Custodian of the Plan.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE A--DESCRIPTION OF PLAN--Continued

Notes Receivable from Participants: Participants may borrow from their accounts up to a maximum of \$50,000, or 50% of their vested account balance, whichever is less. Participants may only have one loan outstanding at any given time. Loans are repaid through payroll deductions over periods ranging up to 120 months or by direct payments made between the participant and the Plan. The loans are secured by the vested balance in the participant's account and bear interest at 4.25% to 9.50%, which is commensurate with local prevailing rates as determined quarterly by the Plan Administrator.

NOTE B--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Plan follows the Financial Accounting Standards Board Accounting Standards Codification as its sole source of authoritative guidance.

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

Contributions are recorded on the accrual basis, which recognizes participants' contributions and the related Employer matching contributions at the time the participants' contributions are withheld from their wages. Employer discretionary profit-sharing contributions are recorded in the period recognized in the Employer's financial statements.

Benefits are recorded when paid. At December 31, 2024 and 2023, there were no net assets available for benefits that were not paid.

The participants are responsible for the payment of all administrative expenses. However, the Employer may elect to pay portions of these expenses.

The Plan's mutual fund and collective investment trust investments are stated at fair value as further described in Note C. Investment securities are exposed to various risks, including credit, interest, and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is possible that changes in values of investment securities will occur and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE B--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES--Continued

Loans to participants are reported separately from plan investments as notes receivable. These loans are recorded at their unpaid balance, plus all accrued and unpaid interest.

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and the disclosure of contingent assets and liabilities, at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Subsequent events have been evaluated through September 18, 2025, which is the date the financial statements were available to be issued.

NOTE C--FAIR VALUE MEASUREMENTS

Current accounting guidance establishes a 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 hierarchy under the accounting guidance are described below:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets and liabilities in active markets that the Plan has the ability to access.

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE C--FAIR VALUE MEASUREMENTS--Continued

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

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds: Valued at the quoted market price, which represents the net asset value of shares held by the Plan at year end.

Collective investment trust funds: Valued based on the market value of its underlying investments. The common collective investment trust funds do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions.

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes in the methodologies used at December 31, 2024 and 2023.

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

| | Assets at Fair Value as of December 31, 2024 | | | |
|------------------------------|--|---------------------|---------------|----------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual Funds | \$ 29,303,794 | \$ -0- | \$ -0- | \$ 29,303,794 |
| Collective Investment Trusts | <u>-0-</u> | <u>7,155,682</u> | <u>-0-</u> | <u>7,155,682</u> |
| Total assets at fair value | <u>\$ 29,303,794</u> | <u>\$ 7,155,682</u> | <u>\$ -0-</u> | <u>\$ 36,459,476</u> |

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

NOTE C--FAIR VALUE MEASUREMENTS--Continued

| | Assets at Fair Value as of December 31, 2023 | | | |
|------------------------------|--|---------------------|---------------|----------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual Funds | \$ 24,955,849 | \$ -0- | \$ -0- | \$ 24,955,849 |
| Collective Investment Trusts | <u>-0-</u> | <u>7,723,095</u> | <u>-0-</u> | <u>7,723,095</u> |
| Total assets at fair value | <u>\$ 24,955,849</u> | <u>\$ 7,723,095</u> | <u>\$ -0-</u> | <u>\$ 32,678,944</u> |

NOTE D--TRANSACTIONS WITH PARTIES IN INTEREST

The Plan has an agreement with the Custodian to maintain the investments of the Plan. For the year ended December 31, 2024, contributions to the Plan of \$3,543,615 were deposited with the Custodian for investment, and participants of the Plan received distributions of \$3,404,149 from funds held by the Custodian. Additionally, for the year ended December 31, 2024, the Plan recorded \$52,389 in administrative expenses paid to the Custodian, affiliates of the Custodian or other service providers. At December 31, 2024 and 2023, the Plan had \$37,151,300 and \$33,246,572, respectively, of assets under the Custodian's custody.

NOTE E--TAX STATUS

The Plan is intended to satisfy the tax qualification requirements under Section 401(a) of the Internal Revenue Code; therefore, the trust funds of the Plan are intended to be exempt from Federal income taxes. The amended Plan has not requested a favorable determination letter from the Internal Revenue Service since the prototype on which the Plan is based has been determined to be qualified under Section 401(a) of the Internal Revenue Code.

NOTE F--FORFEITED NON-VESTED ACCOUNTS

At December 31, 2024 and 2023, the investments included \$44,778 and \$93,761 of unused forfeitures, respectively. Forfeitures may be used to reduce the Employer contribution, pay administrative expenses, or be allocated to participants. During the year ended December 31, 2024, \$97,631 in forfeiture were allocated to participants.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE G--PLAN TERMINATION

Although it has not expressed any intent to do so, the Employer has the right under the Plan to discontinue contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their accounts.

NOTE H--RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

For the year ended December 31, 2024, there were no significant differences between the financial statements and Internal Revenue Service Form 5500.

NOTE I--SUMMARY OF INFORMATION CERTIFIED BY PLAN CUSTODIAN

The total current value of the Plan's net assets was \$37,775,669 and \$33,882,784 at December 31, 2024 and 2023, respectively. With the exception of contributions receivable, the Plan's Custodian has supplied the Plan Administrator with certifications as to the completeness and accuracy of all information presented in the accompanying statements of net assets available for benefits as of December 31, 2024 and 2023, and in the statement of changes in net assets available for benefits for the year ended December 31, 2024, with regard to investment activity.

The Plan's independent auditor did not perform auditing procedures with respect to this information except for comparing such information to the related information included in the financial statements and supplemental schedules.

SUPPLEMENTAL INFORMATION REQUIRED BY ERISA

SCHEDULE H, LINE 4a--SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| Participant Contributions Transferred Late to Plan* | Total that Constitute Nonexempt Prohibited Transactions | | | Total Fully Corrected Under VFCP and PTE 2002-51* |
|---|---|---------------------------------------|---|---|
| | Contributions Not Corrected* | Contributions Corrected Outside VFCP* | Contributions Pending Correction in VFCP* | |
| \$ 16,418 | \$ -0- | \$ 16,418 | \$ -0- | \$ -0- |

*Late participant loan repayments are included.

See independent auditor's report.

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

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| (a) | (b) | (c) | (e) |
|--------------------------|--|--|------------------|
| Party- in interest | Identity of Issuer, Borrower, Lessor, or Similar Party | Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Current Value |
| * | Vanguard 500 Index Adm | Mutual Fund | \$ 620,508 |
| * | Vanguard Core Bond Adm | Mutual Fund | 550,984 |
| * | Vanguard Emerging Mkts Stock Idx Adm | Mutual Fund | 21,104 |
| * | Vanguard Energy Index Adm | Mutual Fund | 129,026 |
| * | Vanguard Equity Income Adm | Mutual Fund | 287,739 |
| * | Vanguard European Stock Index Inv | Mutual Fund | 1,265 |
| * | Vanguard Federal Money Market Inv | Mutual Fund | 3,174,137 |
| * | Vanguard FTSE Social Index Adm | Mutual Fund | 416,104 |
| * | Vanguard Growth and Income Adm | Mutual Fund | 251,995 |
| * | Vanguard High Yield Corp Adm | Mutual Fund | 63,312 |
| * | Vanguard Inflation-Protected Sec Adm | Mutual Fund | 8,252 |
| * | Vanguard Information Tech Index Adm | Mutual Fund | 582,132 |
| * | Vanguard Institutional Index Instl | Mutual Fund | 7,004,539 |
| * | Vanguard International Growth Adm | Mutual Fund | 459,430 |
| * | Vanguard Long-Term Investment Grade Adm | Mutual Fund | 13,890 |
| * | Vanguard Mid Cap Index Adm | Mutual Fund | 1,215,990 |
| * | Vanguard Retirement Savings Trust V | Collective Investment Trust | 7,155,682 |
| * | Vanguard Russell 1000 Growth ETF | Mutual Fund | 245,570 |
| * | Vanguard S&P Small-Cap 600 Index ETF | Mutual Fund | 125,136 |
| * | Vanguard Short-Term Federal Adm | Mutual Fund | 25,755 |
| * | Vanguard Small-Cap Index Adm | Mutual Fund | 3,608,976 |
| * | Vanguard Target Retirement 2020 Fund | Mutual Fund | 23,582 |
| * | Vanguard Target Retirement 2025 Fund | Mutual Fund | 51,397 |
| * | Vanguard Target Retirement 2030 Fund | Mutual Fund | 91,994 |
| * | Vanguard Target Retirement 2035 Fund | Mutual Fund | 683,303 |
| * | Vanguard Target Retirement 2040 Fund | Mutual Fund | 236,985 |
| * | Vanguard Target Retirement 2045 Fund | Mutual Fund | 171,210 |
| * | Vanguard Target Retirement 2050 Fund | Mutual Fund | 235,028 |
| * | Vanguard Target Retirement 2055 Fund | Mutual Fund | 220,175 |
| * | Vanguard Target Retirement 2060 Fund | Mutual Fund | 123,454 |
| * | Vanguard Target Retirement 2065 Fund | Mutual Fund | 39,456 |
| * | Vanguard Target Retirement 2070 Fund | Mutual Fund | 1,084 |
| * | Vanguard Target Retirement Income Fund | Mutual Fund | 355,867 |

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

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| (a) | (b) | (c) | (e) |
|--------------------------|--|--|----------------------|
| Party- in interest | Identity of Issuer, Borrower, Lessor, or Similar Party | Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Current Value |
| * | Vanguard Total Bond Market Index Adm | Mutual Fund | 2,612,765 |
| * | Vanguard Total Intl Stock Index Adm | Mutual Fund | 3,324,448 |
| * | Vanguard U.S. Growth Adm | Mutual Fund | 1,353,842 |
| * | Vanguard U.S. Minimum Volatility ETF | Mutual Fund | 1,197 |
| * | Vanguard Wellesley Income Adm | Mutual Fund | 10,485 |
| * | Vanguard Wellington Admiral | Mutual Fund | 524,666 |
| * | Vanguard Wellington Inv | Mutual Fund | 25,699 |
| * | Vanguard Windsor II Adm | Mutual Fund | 411,313 |
| * | Participant Loans | Interest rates ranging from 4.25% to 9.5% with maturities ranging from January 2025 through December 2029 | <u>691,824</u> |
| | | | <u>\$ 37,151,300</u> |

* Designates party-in-interest.

See independent auditor's report.

PLAID ENTERPRISES, INC.
401(k) RETIREMENT SAVINGS PLAN

AUDITED FINANCIAL STATEMENTS
AND SUPPLEMENTAL SCHEDULES

DECEMBER 31, 2024

with

INDEPENDENT AUDITOR'S REPORT

Audited Financial Statements and Supplemental Schedules

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

December 31, 2024

Audited Financial Statements

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Supplemental Schedules

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INDEPENDENT AUDITOR'S REPORT

Plan Administrator
Plaid Enterprises, Inc. 401(k) Retirement Savings Plan
Norcross, Georgia

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

We have performed audits of the financial statements of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) (ERISA Section 103(a)(3)(C) audit). The financial statements comprise the 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.

Management, having determined it is permissible in the circumstances, has elected to have the audits of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's financial statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audits need not extend to any statements or information related to assets held for investment of the plan (investment information) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA (qualified institution).

Management has obtained certifications from a qualified institution as of December 31, 2024 and 2023, and for the year ended December 31, 2024, stating that the certified investment information, as described in Note I to the financial statements, is complete and accurate.

Opinion

In our opinion, based on our audits and on the procedures performed as described in the Auditor's Responsibilities for the Audit of the Financial Statements section:

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

Basis for Opinion

We conducted our audits in accordance with the auditing standards generally accepted in the United States of America (GAAS). Our responsibilities under those standards are further described in the Auditor's Responsibilities for the Audit of the Financial Statements section of our report. We are required to be independent of Plaid Enterprises, Inc. 401(k) Retirement Savings Plan and to meet our other ethical responsibilities, in accordance with the relevant ethical requirements related to our audits. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

Responsibilities of Management for the Financial Statements

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

In preparing the financial statements, management is required to evaluate whether there are conditions or events, considered in the aggregate, that raise substantial doubt about Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's ability to continue as a going concern for one year after the date that the financial statements are issued.

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

Auditor's Responsibilities for the Audit of the Financial Statements

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with 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 could reasonably be expected to influence the economic decisions of users made on the basis of these financial statements.

In performing an audit in accordance with GAAS, we:

- Exercise professional judgement and maintain professional skepticism throughout the audit.
- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, and design and perform audit procedures responsive to those risks. Such procedures include examining, on a test basis, evidence regarding the amounts and disclosures in the financial statements.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting polices used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgement, there are conditions or events, considered in the aggregate, that raise substantial doubt about Plaid Enterprises, Inc. 401(k) Retirement Savings Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter--Supplemental Schedules Required by ERISA

The supplemental schedules H, line 4i--schedule of assets (held at end of year) and schedule H, line 4a--schedule of delinquent participant contributions as of 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 included in the supplemental schedules, other than that

agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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. For information included in the supplemental schedules that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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

In our opinion:

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

Williams Benator + Libby, LLP

Atlanta, Georgia
September 18, 2025

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

| | December 31 | |
|--------------------------------------|----------------------|----------------------|
| | 2024 | 2023 |
| ASSETS | | |
| INVESTMENTS | | |
| Mutual funds--Note C | \$ 29,303,794 | \$ 24,955,849 |
| Collective investment trusts--Note C | <u>7,155,682</u> | <u>7,723,095</u> |
| | 36,459,476 | 32,678,944 |
| RECEIVABLES | | |
| Participants' contributions | -0- | 48,707 |
| Employer's contributions | 624,369 | 587,505 |
| Notes receivable from participants | <u>691,824</u> | <u>567,628</u> |
| | 1,316,193 | 1,203,840 |
| NET ASSETS AVAILABLE FOR BENEFITS | <u>\$ 37,775,669</u> | <u>\$ 33,882,784</u> |

See independent auditor's report and notes to financial statements.

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS

PLAID ENTERPRISES, INC. 401 (K) RETIREMENT SAVINGS PLAN

Year Ended December 31, 2024

ADDITIONS TO NET ASSETS ATTRIBUTED TO:

Investment income:

| | |
|---|----------------|
| Net appreciation in fair value of investments | \$ 2,924,447 |
| Interest and dividend income | <u>845,611</u> |
| | 3,770,058 |

| | |
|---|--------|
| Interest income on notes receivable from participants | 47,593 |
|---|--------|

Contributions:

| | |
|--------------|------------------|
| Employer | 1,440,477 |
| Participants | 1,810,294 |
| Rollover | <u>281,001</u> |
| | <u>3,531,772</u> |

| | |
|-----------------|-----------|
| TOTAL ADDITIONS | 7,349,423 |
|-----------------|-----------|

DEDUCTIONS FROM NET ASSETS ATTRIBUTED TO:

| | |
|-----------------------------------|---------------|
| Benefits paid to participants | 3,404,149 |
| Administrative and other expenses | <u>52,389</u> |

| | |
|------------------|------------------|
| TOTAL DEDUCTIONS | <u>3,456,538</u> |
|------------------|------------------|

| | |
|--------------|-----------|
| NET INCREASE | 3,892,885 |
|--------------|-----------|

| | |
|--|-------------------|
| Net assets available for benefits at beginning of year | <u>33,882,784</u> |
|--|-------------------|

| | |
|--|---------------------|
| NET ASSETS AVAILABLE FOR BENEFITS AT END OF YEAR | <u>\$37,775,669</u> |
|--|---------------------|

See independent auditor's report and notes to financial statements.

NOTES TO FINANCIAL STATEMENTS

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

December 31, 2024

NOTE A--DESCRIPTION OF PLAN

The following description of the Plaid Enterprises, Inc. 401(k) Retirement Savings Plan ("the Plan") provides only general information. Participants should refer to the Plan document for a more complete description of the Plan's provisions.

General: The Plan is a defined contribution plan covering substantially all employees of Plaid Enterprises, Inc. ("Plaid", "the Employer" and "Plan Administrator"). Employees who have attained nineteen years of age with no required service period are eligible to participate in the Plan. Employees are not eligible to participate if they are nonresident aliens employed at a location outside the United States, or if they are covered under a collective bargaining agreement for which retirement benefits were the subject of good faith negotiations. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"), as amended.

Contributions: The Plan provides for a discretionary tax deferred contribution by the Employer and an employee elective contribution with an Employer matching provision. Plan participants were able contribute from their pre-tax and/or after-tax compensation, up to 100% of their compensation, not to exceed the Federal statutory maximum. Employees are eligible for a discretionary match contribution after attaining the age of 21 and completing two months of service with a quarterly entry date. The Employer matched 95% of each participant's annual contribution, up to the first \$2,000 of the participant's contribution, 55% of each participant's annual contribution from \$2,001 to \$5,500, and 10% of each participant's annual contribution from \$5,501 to \$8,000, for a maximum Employer match of \$4,075 per year during the year ended December 31, 2024. Additionally, the Employer may make an additional matching contribution at the end of the Plan year. No additional matching contribution was made for the year ended December 31, 2024.

The Plan includes an automatic salary deferral feature. The Employer automatically withholds 3% of the employee's compensation as an employee elective contribution. Employees that have been automatically enrolled may request no deferral of compensation or may elect an alternative deferral percentage.

The Plan provides for a discretionary, non-elective Employer profit-sharing contribution for all Plan participants with one year of service who were employed as of the last day of the plan year. Allocation of the annual contribution is made based on the ratio that each participant's base compensation, as defined, bears to the total annual base compensation for all participants. A discretionary contribution in the amount of \$624,369 was made for the year ended December 31, 2024.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE A--DESCRIPTION OF PLAN--Continued

Participant Accounts: Each participant's account is credited with their contributions, the Employer's matching contributions, their account's earnings or losses, any allocated forfeitures, and the Employer discretionary profit-sharing contribution. All investments are participant directed. Participants may change their investment options daily.

Investments: Participants may allocate their contributions and employer contributions among a selection of money market, equity and fixed income mutual funds, and a collective investment trust fund.

Vesting: Participants are immediately vested in their voluntary contributions and allocated earnings thereon. Employer contributions and earnings thereon vest at the rate of 20% per year. A participant becomes fully vested after five years of credited service, or in the event of death, disability or normal retirement. Forfeited amounts can be used to reduce future Employer obligations to the Plan, pay administrative expenses of the Plan, or be allocated to participants.

Administration: The Plan is administered by the Employer. All funds in the Plan were held by the Plan's custodians, Ascensus Trust Company ("the Custodian"). Ascensus Trust Company is also the trustee of the Plan. The Plan's Custodian invested participants' contributions, as directed by the participants.

Withdrawals: A participant may withdraw his vested contributions plus earnings thereon and rollover contributions in the case of a financial hardship. Withdrawals are taxable in the year received by the participant and may be subject to a penalty tax. A participant may not make elective deferrals or other contributions for a period of twelve months following a hardship withdrawal.

Payment of Benefits: Upon a participant's termination of employment with the Employer, reaching the age of 59 and a half, or becoming disabled, the participant is entitled to receive a distribution of his vested account balance. The participant may elect to receive a distribution in the form of an annuity or, in certain situations, installment payments as provided for in the Plan document. If the participant dies prior to receiving his vested account balance, the balance will be paid to the participant's beneficiary or estate. Participants may also make in-service withdrawals under certain "hardship" conditions if approved by the Custodian of the Plan.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE A--DESCRIPTION OF PLAN--Continued

Notes Receivable from Participants: Participants may borrow from their accounts up to a maximum of \$50,000, or 50% of their vested account balance, whichever is less. Participants may only have one loan outstanding at any given time. Loans are repaid through payroll deductions over periods ranging up to 120 months or by direct payments made between the participant and the Plan. The loans are secured by the vested balance in the participant's account and bear interest at 4.25% to 9.50%, which is commensurate with local prevailing rates as determined quarterly by the Plan Administrator.

NOTE B--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

The Plan follows the Financial Accounting Standards Board Accounting Standards Codification as its sole source of authoritative guidance.

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

Contributions are recorded on the accrual basis, which recognizes participants' contributions and the related Employer matching contributions at the time the participants' contributions are withheld from their wages. Employer discretionary profit-sharing contributions are recorded in the period recognized in the Employer's financial statements.

Benefits are recorded when paid. At December 31, 2024 and 2023, there were no net assets available for benefits that were not paid.

The participants are responsible for the payment of all administrative expenses. However, the Employer may elect to pay portions of these expenses.

The Plan's mutual fund and collective investment trust investments are stated at fair value as further described in Note C. Investment securities are exposed to various risks, including credit, interest, and overall market volatility risks. Due to the level of risk associated with certain investment securities, it is possible that changes in values of investment securities will occur and that such changes could materially affect the amounts reported in the statements of net assets available for plan benefits.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE B--SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES--Continued

Loans to participants are reported separately from plan investments as notes receivable. These loans are recorded at their unpaid balance, plus all accrued and unpaid interest.

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities, and the disclosure of contingent assets and liabilities, at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from those estimates.

Subsequent events have been evaluated through September 18, 2025, which is the date the financial statements were available to be issued.

NOTE C--FAIR VALUE MEASUREMENTS

Current accounting guidance establishes a 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 hierarchy under the accounting guidance are described below:

Level 1 – Inputs to the valuation methodology are unadjusted quoted prices for identical assets and liabilities in active markets that the Plan has the ability to access.

Level 2 – Inputs to the valuation methodology include quoted prices for similar assets or liabilities in active markets; quoted prices for identical or similar assets or liabilities in inactive markets; inputs other than quoted prices that are observable for the asset or liability; inputs that are derived principally from or corroborated by observable market data by correlation or other means.

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

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

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE C--FAIR VALUE MEASUREMENTS--Continued

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

The following is a description of the valuation methodologies used for assets measured at fair value:

Mutual funds: Valued at the quoted market price, which represents the net asset value of shares held by the Plan at year end.

Collective investment trust funds: Valued based on the market value of its underlying investments. The common collective investment trust funds do not have finite lives, unfunded commitments relating to these types of investments, or significant restrictions on redemptions.

The method described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair values. Furthermore, while the Plan believes its valuation methods are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair value of certain financial instruments could result in a different fair value measurement at the reporting date. There have been no changes in the methodologies used at December 31, 2024 and 2023.

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

| | Assets at Fair Value as of December 31, 2024 | | | |
|------------------------------|--|---------------------|---------------|----------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual Funds | \$ 29,303,794 | \$ -0- | \$ -0- | \$ 29,303,794 |
| Collective Investment Trusts | <u>-0-</u> | <u>7,155,682</u> | <u>-0-</u> | <u>7,155,682</u> |
| Total assets at fair value | <u>\$ 29,303,794</u> | <u>\$ 7,155,682</u> | <u>\$ -0-</u> | <u>\$ 36,459,476</u> |

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

NOTE C--FAIR VALUE MEASUREMENTS--Continued

| | Assets at Fair Value as of December 31, 2023 | | | |
|------------------------------|--|---------------------|---------------|----------------------|
| | Level 1 | Level 2 | Level 3 | Total |
| Mutual Funds | \$ 24,955,849 | \$ -0- | \$ -0- | \$ 24,955,849 |
| Collective Investment Trusts | <u>-0-</u> | <u>7,723,095</u> | <u>-0-</u> | <u>7,723,095</u> |
| Total assets at fair value | <u>\$ 24,955,849</u> | <u>\$ 7,723,095</u> | <u>\$ -0-</u> | <u>\$ 32,678,944</u> |

NOTE D--TRANSACTIONS WITH PARTIES IN INTEREST

The Plan has an agreement with the Custodian to maintain the investments of the Plan. For the year ended December 31, 2024, contributions to the Plan of \$3,543,615 were deposited with the Custodian for investment, and participants of the Plan received distributions of \$3,404,149 from funds held by the Custodian. Additionally, for the year ended December 31, 2024, the Plan recorded \$52,389 in administrative expenses paid to the Custodian, affiliates of the Custodian or other service providers. At December 31, 2024 and 2023, the Plan had \$37,151,300 and \$33,246,572, respectively, of assets under the Custodian's custody.

NOTE E--TAX STATUS

The Plan is intended to satisfy the tax qualification requirements under Section 401(a) of the Internal Revenue Code; therefore, the trust funds of the Plan are intended to be exempt from Federal income taxes. The amended Plan has not requested a favorable determination letter from the Internal Revenue Service since the prototype on which the Plan is based has been determined to be qualified under Section 401(a) of the Internal Revenue Code.

NOTE F--FORFEITED NON-VESTED ACCOUNTS

At December 31, 2024 and 2023, the investments included \$44,778 and \$93,761 of unused forfeitures, respectively. Forfeitures may be used to reduce the Employer contribution, pay administrative expenses, or be allocated to participants. During the year ended December 31, 2024, \$97,631 in forfeiture were allocated to participants.

NOTES TO FINANCIAL STATEMENTS--Continued

PLAID ENTERPRISES, INC. 401(k) RETIREMENT SAVINGS PLAN

NOTE G--PLAN TERMINATION

Although it has not expressed any intent to do so, the Employer has the right under the Plan to discontinue contributions at any time and to terminate the Plan, subject to the provisions of ERISA. In the event of Plan termination, participants would become fully vested in their accounts.

NOTE H--RECONCILIATION OF FINANCIAL STATEMENTS TO FORM 5500

For the year ended December 31, 2024, there were no significant differences between the financial statements and Internal Revenue Service Form 5500.

NOTE I--SUMMARY OF INFORMATION CERTIFIED BY PLAN CUSTODIAN

The total current value of the Plan's net assets was \$37,775,669 and \$33,882,784 at December 31, 2024 and 2023, respectively. With the exception of contributions receivable, the Plan's Custodian has supplied the Plan Administrator with certifications as to the completeness and accuracy of all information presented in the accompanying statements of net assets available for benefits as of December 31, 2024 and 2023, and in the statement of changes in net assets available for benefits for the year ended December 31, 2024, with regard to investment activity.

The Plan's independent auditor did not perform auditing procedures with respect to this information except for comparing such information to the related information included in the financial statements and supplemental schedules.

SUPPLEMENTAL INFORMATION REQUIRED BY ERISA

SCHEDULE H, LINE 4a--SCHEDULE OF DELINQUENT PARTICIPANT CONTRIBUTIONS

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| Participant Contributions Transferred Late to Plan* | Total that Constitute Nonexempt Prohibited Transactions | | | Total Fully Corrected Under VFCP and PTE 2002-51* |
|---|---|---------------------------------------|---|---|
| | Contributions Not Corrected* | Contributions Corrected Outside VFCP* | Contributions Pending Correction in VFCP* | |
| \$ 16,418 | \$ -0- | \$ 16,418 | \$ -0- | \$ -0- |

*Late participant loan repayments are included.

See independent auditor's report.

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

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| (a) | (b) | (c) | (e) |
|--------------------------|--|--|------------------|
| Party- in interest | Identity of Issuer, Borrower, Lessor, or Similar Party | Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Current Value |
| * | Vanguard 500 Index Adm | Mutual Fund | \$ 620,508 |
| * | Vanguard Core Bond Adm | Mutual Fund | 550,984 |
| * | Vanguard Emerging Mkts Stock Idx Adm | Mutual Fund | 21,104 |
| * | Vanguard Energy Index Adm | Mutual Fund | 129,026 |
| * | Vanguard Equity Income Adm | Mutual Fund | 287,739 |
| * | Vanguard European Stock Index Inv | Mutual Fund | 1,265 |
| * | Vanguard Federal Money Market Inv | Mutual Fund | 3,174,137 |
| * | Vanguard FTSE Social Index Adm | Mutual Fund | 416,104 |
| * | Vanguard Growth and Income Adm | Mutual Fund | 251,995 |
| * | Vanguard High Yield Corp Adm | Mutual Fund | 63,312 |
| * | Vanguard Inflation-Protected Sec Adm | Mutual Fund | 8,252 |
| * | Vanguard Information Tech Index Adm | Mutual Fund | 582,132 |
| * | Vanguard Institutional Index Instl | Mutual Fund | 7,004,539 |
| * | Vanguard International Growth Adm | Mutual Fund | 459,430 |
| * | Vanguard Long-Term Investment Grade Adm | Mutual Fund | 13,890 |
| * | Vanguard Mid Cap Index Adm | Mutual Fund | 1,215,990 |
| * | Vanguard Retirement Savings Trust V | Collective Investment Trust | 7,155,682 |
| * | Vanguard Russell 1000 Growth ETF | Mutual Fund | 245,570 |
| * | Vanguard S&P Small-Cap 600 Index ETF | Mutual Fund | 125,136 |
| * | Vanguard Short-Term Federal Adm | Mutual Fund | 25,755 |
| * | Vanguard Small-Cap Index Adm | Mutual Fund | 3,608,976 |
| * | Vanguard Target Retirement 2020 Fund | Mutual Fund | 23,582 |
| * | Vanguard Target Retirement 2025 Fund | Mutual Fund | 51,397 |
| * | Vanguard Target Retirement 2030 Fund | Mutual Fund | 91,994 |
| * | Vanguard Target Retirement 2035 Fund | Mutual Fund | 683,303 |
| * | Vanguard Target Retirement 2040 Fund | Mutual Fund | 236,985 |
| * | Vanguard Target Retirement 2045 Fund | Mutual Fund | 171,210 |
| * | Vanguard Target Retirement 2050 Fund | Mutual Fund | 235,028 |
| * | Vanguard Target Retirement 2055 Fund | Mutual Fund | 220,175 |
| * | Vanguard Target Retirement 2060 Fund | Mutual Fund | 123,454 |
| * | Vanguard Target Retirement 2065 Fund | Mutual Fund | 39,456 |
| * | Vanguard Target Retirement 2070 Fund | Mutual Fund | 1,084 |
| * | Vanguard Target Retirement Income Fund | Mutual Fund | 355,867 |

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

PLAID ENTERPRISES, INC. 401 (k) RETIREMENT SAVINGS PLAN

Employer Identification Number 58-1989103, Plan 001

December 31, 2024

| (a) | (b) | (c) | (e) |
|--------------------------|--|--|----------------------|
| Party- in interest | Identity of Issuer, Borrower, Lessor, or Similar Party | Description of Investment Including Maturity Date, Rate of Interest, Collateral, Par, or Maturity Value | Current Value |
| * | Vanguard Total Bond Market Index Adm | Mutual Fund | 2,612,765 |
| * | Vanguard Total Intl Stock Index Adm | Mutual Fund | 3,324,448 |
| * | Vanguard U.S. Growth Adm | Mutual Fund | 1,353,842 |
| * | Vanguard U.S. Minimum Volatility ETF | Mutual Fund | 1,197 |
| * | Vanguard Wellesley Income Adm | Mutual Fund | 10,485 |
| * | Vanguard Wellington Admiral | Mutual Fund | 524,666 |
| * | Vanguard Wellington Inv | Mutual Fund | 25,699 |
| * | Vanguard Windsor II Adm | Mutual Fund | 411,313 |
| * | Participant Loans | Interest rates ranging from 4.25% to 9.5% with maturities ranging from January 2025 through December 2029 | <u>691,824</u> |
| | | | <u>\$ 37,151,300</u> |

* Designates party-in-interest.

See independent auditor's report.

**SCHEDULE H
(Form 5500)**

Department of the Treasury
Internal Revenue Service

Department of Labor
Employee Benefits Security Administration
Pension Benefit Guaranty Corporation

Financial Information

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

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

OMB No. 1210-0110

2024

This Form is Open to Public Inspection

| | | |
|---|---|------------|
| For calendar plan year 2024 or fiscal plan year beginning | | and ending |
| A Name of plan | B Three-digit plan number (PN) ▶ | |
| | | |
| C Plan sponsor's name as shown on line 2a of Form 5500 | D Employer Identification Number (EIN) | |

Part I Asset and Liability Statement

1 Current value of plan assets and liabilities at the beginning and end of the plan year. Combine the value of plan assets held in more than one trust. Report the value of the plan's interest in a commingled fund containing the assets of more than one plan on a line-by-line basis unless the value is reportable on lines 1c(9) through 1c(14). Do not enter the value of that portion of an insurance contract which guarantees, during this plan year, to pay a specific dollar benefit at a future date. **Round off amounts to the nearest dollar.** MTIAs, CCTs, PSAs, and 103-12 IEs do not complete lines 1b(1), 1b(2), 1c(8), 1g, 1h, and 1i. CCTs, PSAs, and 103-12 IEs also do not complete lines 1d and 1e. See instructions.

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

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

Part II Income and Expense Statement

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

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

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

Expenses

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

Net Income and Reconciliation

| | | | |
|---|--------------|--|--|
| k Net income (loss). Subtract line 2j from line 2d | 2k | | |
| l Transfers of assets: | | | |
| (1) To this plan..... | 2l(1) | | |
| (2) From this plan | 2l(2) | | |

Part III Accountant's Opinion

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

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

- (1) 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:

(2) EIN:

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

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

Part IV Compliance Questions

4 CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. 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 |
|--|-----|----|--------|
| a Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.) | | | |
| 4a | | | |
| b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) | | | |
| 4b | | | |
| c Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.) | | | |
| 4c | | | |
| d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.) | | | |
| 4d | | | |
| e Was this plan covered by a fidelity bond? | | | |
| 4e | | | |
| f Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty? | | | |
| 4f | | | |
| g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser? | | | |
| 4g | | | |
| h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser? | | | |
| 4h | | | |
| i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.) | | | |
| 4i | | | |
| j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.) | | | |
| 4j | | | |
| k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC? | | | |
| 4k | | | |
| l Has the plan failed to provide any benefit when due under the plan? | | | |
| 4l | | | |
| m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.) | | | |
| 4m | | | |
| n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3. | | | |
| 4n | | | |

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

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

| 5b(1) Name of plan(s) | 5b(2) EIN(s) | 5b(3) PN(s) |
|-----------------------|--------------|-------------|
| | | |
| | | |
| | | |
| | | |

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 _____.

Attachment to 2024 Form 5500
Schedule H, line 4i - Schedule of Assets (Held at End of Year)

Plan Name PLAID ENTERPRISES, INC. 401(K) RET. SAV. PLAN
Plan Sponsor's Name Plaid Enterprises, Inc.

EIN: 58-1989103
PN: 001

| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard Federal Money Market Inv | 0 | 3,174,137 |
| | Vanguard | Vanguard Retirement Savings Trust V | 0 | 7,155,682 |
| | Vanguard | Vanguard Short-Term Federal Adm | 0 | 25,755 |
| | Vanguard | Vanguard Inflation-Protected Sec Adm | 0 | 8,252 |
| | Vanguard | Vanguard Total Bond Market Index Adm | 0 | 2,612,765 |
| | Vanguard | Vanguard Core Bond Adm | 0 | 550,984 |
| | Vanguard | Vanguard Long-Term Investment Grade Adm | 0 | 13,890 |

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EIN: 58-1989103
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| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard High Yield Corp Adm | 0 | 63,312 |
| | Vanguard | Vanguard Wellesley Income Adm | 0 | 10,485 |
| | Vanguard | Vanguard Wellington Admiral | 0 | 524,666 |
| | Vanguard | Vanguard Equity Income Adm | 0 | 287,739 |
| | Vanguard | Vanguard Windsor II Adm | 0 | 411,313 |
| | Vanguard | Vanguard Institutional Index Instl | 0 | 7,004,539 |
| | Vanguard | Vanguard FTSE Social Index Adm | 0 | 416,104 |

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

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| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard Growth and Income Adm | 0 | 251,995 |
| | Vanguard | Vanguard U.S. Growth Adm | 0 | 1,353,842 |
| | Vanguard | Vanguard Mid Cap Index Adm | 0 | 1,215,990 |
| | Vanguard | Vanguard Small-Cap Index Adm | 0 | 3,608,976 |
| | Vanguard | Vanguard Total Intl Stock Index Adm | 0 | 3,324,448 |
| | Vanguard | Vanguard International Growth Adm | 0 | 459,430 |
| | Vanguard | Vanguard Emerging Mkts Stock Idx Adm | 0 | 21,104 |

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EIN: 58-1989103
PN: 001

| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard Energy Index Adm | 0 | 129,026 |
| | Vanguard | Vanguard Information Tech Index Adm | 0 | 582,132 |
| | Vanguard | Vanguard Target Retirement 2070 Fund | 0 | 1,084 |
| | Vanguard | Vanguard Target Retirement 2065 Fund | 0 | 39,456 |
| | Vanguard | Vanguard Target Retirement 2060 Fund | 0 | 123,454 |
| | Vanguard | Vanguard Target Retirement 2055 Fund | 0 | 220,175 |
| | Vanguard | Vanguard Target Retirement 2050 Fund | 0 | 235,028 |

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

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EIN: 58-1989103
PN: 001

| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard Target Retirement 2045 Fund | 0 | 171,210 |
| | Vanguard | Vanguard Target Retirement 2040 Fund | 0 | 236,985 |
| | Vanguard | Vanguard Target Retirement 2035 Fund | 0 | 683,303 |
| | Vanguard | Vanguard Target Retirement 2030 Fund | 0 | 91,994 |
| | Vanguard | Vanguard Target Retirement 2025 Fund | 0 | 51,397 |
| | Vanguard | Vanguard Target Retirement 2020 Fund | 0 | 23,582 |
| | Vanguard | Vanguard Target Retirement Income Fund | 0 | 355,867 |

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

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PN: 001

| (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 |
|-----|---|--|----------|-------------------|
| | Vanguard | Vanguard European Stock Index Inv | 0 | 1,265 |
| | Vanguard | Vanguard 500 Index Adm | 0 | 620,508 |
| | Vanguard | Vanguard U.S. Minimum Volatility ETF | 0 | 1,197 |
| | Vanguard | Vanguard S&P Small-Cap 600 Index ETF | 0 | 125,136 |
| | Vanguard | Vanguard Russell 1000 Growth ETF | 0 | 245,570 |
| | Vanguard | Vanguard Wellington Inv | 0 | 25,699 |
| | Participant's Loan Account | Various Rates and Maturities | 0 | 691,824 |