

Form 5500

Annual Return/Report of Employee Benefit Plan

OMB Nos. 1210-0110 1210-0089

Department of the Treasury Internal Revenue Service

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).

2024

Department of Labor Employee Benefits Security Administration

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

Pension Benefit Guaranty Corporation

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

- A This return/report is for: [] a multiemployer plan [] a multiple-employer plan... [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: STARK & STARK EMPLOYEES' PROFIT SHARING PLAN
1b Three-digit plan number (PN): 001
1c Effective date of plan: 12/22/1976
2a Plan sponsor's name (employer, if for a single-employer plan): STARK & STARK, PC
2b Employer Identification Number (EIN): 22-2092476
2c Plan Sponsor's telephone number: 609-896-9060
2d Business code (see instructions): 541110

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	316
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 a(2) Total number of active participants at the end of the plan year b Retired or separated participants receiving benefits..... c Other retired or separated participants entitled to future benefits d Subtotal. Add lines 6a(2) , 6b , and 6c e Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. f Total. Add lines 6d and 6e g(1) Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) g(2) Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) h Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	6a(1)	232
	6a(2)	226
	6b	8
	6c	69
	6d	303
	6e	2
	6f	305
	6g(1)	311
	6g(2)	303
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:
2E 2G 2J 2A 2R 2T 2F 2S 3D

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

9a Plan funding arrangement (check all that apply)	9b Plan benefit arrangement (check all that apply)
(1) <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	b General Schedules
(1) <input checked="" type="checkbox"/> R (Retirement Plan Information)	(1) <input checked="" type="checkbox"/> H (Financial Information)
(2) <input type="checkbox"/> MB (Multiemployer Defined Benefit Plan and Certain Money Purchase Plan Actuarial Information) - signed by the plan actuary	(2) <input type="checkbox"/> I (Financial Information – Small Plan)
(3) <input type="checkbox"/> SB (Single-Employer Defined Benefit Plan Actuarial Information) - signed by the plan actuary	(3) <input type="checkbox"/> A (Insurance Information) – Number Attached <u>0</u>
(4) <input type="checkbox"/> DCG (Individual Plan Information) – Number Attached _____	(4) <input checked="" type="checkbox"/> C (Service Provider Information)
(5) <input type="checkbox"/> MEP (Multiple-Employer Retirement Plan Information)	(5) <input checked="" type="checkbox"/> D (DFE/Participating Plan Information)
	(6) <input type="checkbox"/> 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.
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For calendar plan year 2024 or fiscal plan year beginning **01/01/2024** and ending **12/31/2024**

A Name of plan STARK & STARK EMPLOYEES' PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶	001
C Plan sponsor's name as shown on line 2a of Form 5500 STARK & STARK, PC	D Employer Identification Number (EIN) 22-2092476	

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

BOKF, NA **P.O. BOX 880**
TULSA, OK 74101

73-0780382

(b) Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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2. Information on Other Service Providers Receiving Direct or Indirect Compensation. Except for those persons for whom you answered "Yes" to line 1a above, complete as many entries as needed to list each person receiving, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of value) in connection with services rendered to the plan or their position with the plan during the plan year. (See instructions).

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

BOKF, NA

P.O. BOX 880
TULSA, OK 74101

(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?
19 21 25 27 52 59 60 62 63 64 68 37	TRUSTEE	64951	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	6292	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.
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024

A Name of plan <u>STARK & STARK EMPLOYEES' PROFIT SHARING 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>STARK & STARK, PC</u>	D Employer Identification Number (EIN) <u>22-2092476</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)
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a Name of MTIA, CCT, PSA, or 103-12 IE:	<u>MAP POOLED INVESTMENT TRUST</u>		
b Name of sponsor of entity listed in (a):	<u>BOKF, NA</u>		
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)	
<u>73-0780382-005</u>	<u>C</u>		<u>27494233</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)	

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
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For calendar plan year 2024 or fiscal plan year beginning 01/01/2024 and ending 12/31/2024	
A Name of plan STARK & STARK EMPLOYEES' PROFIT SHARING PLAN	B Three-digit plan number (PN) ▶ 001
C Plan sponsor's name as shown on line 2a of Form 5500 STARK & STARK, PC	D Employer Identification Number (EIN) 22-2092476

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

		(a) Beginning of Year	(b) End of Year
Assets			
a Total noninterest-bearing cash	1a		
b Receivables (less allowance for doubtful accounts):			
(1) Employer contributions	1b(1)	2454216	2500241
(2) Participant contributions	1b(2)	0	573167
(3) Other	1b(3)	45256	68619
c General investments:			
(1) Interest-bearing cash (include money market accounts & certificates of deposit)	1c(1)	404842	55
(2) U.S. Government securities	1c(2)	199869	0
(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)	58292	308475
(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)	235001	295890
(9) Value of interest in common/collective trusts	1c(9)	24796429	27494233
(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)	85379972	99056474
(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	113573877	130297154
Liabilities			
g Benefit claims payable.....	1g	0	0
h Operating payables.....	1h		
i Acquisition indebtedness.....	1i		
j Other liabilities.....	1j	368529	0
k Total liabilities (add all amounts in lines 1g through 1j).....	1k	368529	0
Net Assets			
l Net assets (subtract line 1k from line 1f).....	1l	113205348	130297154

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)	2508137	
(B) Participants.....	2a(1)(B)	2465117	
(C) Others (including rollovers).....	2a(1)(C)	148944	
(2) Noncash contributions.....	2a(2)		
(3) Total contributions. Add lines 2a(1)(A) , (B) , (C) , and line 2a(2)	2a(3)		5122198
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)	9242	
(C) Corporate debt instruments.....	2b(1)(C)		
(D) Loans (other than to participants).....	2b(1)(D)		
(E) Participant loans.....	2b(1)(E)	22145	
(F) Other.....	2b(1)(F)		
(G) Total interest. Add lines 2b(1)(A) through (F)	2b(1)(G)		31387
(2) Dividends:			
(A) Preferred stock.....	2b(2)(A)		
(B) Common stock.....	2b(2)(B)	636	
(C) Registered investment company shares (e.g. mutual funds).....	2b(2)(C)	1631541	
(D) Total dividends. Add lines 2b(2)(A) , (B) , and (C)	2b(2)(D)		1632177
(3) Rents.....	2b(3)		
(4) Net gain (loss) on sale of assets:			
(A) Aggregate proceeds.....	2b(4)(A)	8676922	
(B) Aggregate carrying amount (see instructions).....	2b(4)(B)	5830655	
(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)	13126936	
(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		65333
d Total income. Add all income amounts in column (b) and enter total	2d		22824298

Expenses

e Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers	2e(1)	5668225	
(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)		5668225
f Corrective distributions (see instructions)	2f		0
g Certain deemed distributions of participant loans (see instructions)	2g		0
h Interest expense	2h		
i Administrative expenses:			
(1) Salaries and allowances	2i(1)		
(2) Contract administrator fees	2i(2)		
(3) Recordkeeping fees	2i(3)	40051	
(4) IQPA audit fees	2i(4)		
(5) Investment advisory and investment management fees	2i(5)	21761	
(6) Bank or trust company trustee/custodial fees	2i(6)	800	
(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)	1655	
(12) Total administrative expenses. Add lines 2i(1) through (11)	2i(12)		64267
j Total expenses. Add all expense amounts in column (b) and enter total	2j		5732492

Net Income and Reconciliation

k Net income (loss). Subtract line 2j from line 2d	2k		17091806
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: **MERCADIEN, P.C.**

(2) EIN: **22-3271712**

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.)		X	
b Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.)		X	
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.)		X	
d Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)		X	
e Was this plan covered by a fidelity bond?	X		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?		X	
g Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
h Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
i Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
j Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
k Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
l Has the plan failed to provide any benefit when due under the plan?		X	
m If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
n If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.			

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>STARK & STARK EMPLOYEES' PROFIT SHARING 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>STARK & STARK, PC</u>	D Employer Identification Number (EIN) <u>22-2092476</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): 73-6210970

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 Q703970A.

**STARK & STARK EMPLOYEES' PROFIT
SHARING PLAN**

FINANCIAL STATEMENTS
AND
SUPPLEMENTAL INFORMATION

December 31, 2024

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

TABLE OF CONTENTS

December 31, 2024

	<u>Page Number</u>
Independent Auditors' Report	1
Financial Statements	
Statements of Net Assets Available for Benefits	5
Statement of Changes in Net Assets Available for Benefits.....	6
Notes to Financial Statements	7
Supplemental Information	
Form 5500, Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year).....	13

INDEPENDENT AUDITORS' REPORT

To the Trustees of the
Stark & Stark Employees' Profit Sharing Plan

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

We have performed audits of the accompanying financial statements of Stark & Stark Employees' Profit Sharing Plan (the "Plan"), an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), as permitted by ERISA Section 103(a)(3)(C) ("ERISA Section 103(a)(3)(C) audit"). The financial statements comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, 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 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 a certification 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 C to the financial statements, is complete and accurate.

Opinion

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

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

INDEPENDENT AUDITORS' REPORT (CONTINUED)

Basis for Opinion

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

Responsibilities of Management for the Financial Statements

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

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

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

Auditors' Responsibilities for the Audit of the Financial Statements

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

In performing an audit in accordance with GAAS, we:

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

INDEPENDENT AUDITORS' REPORT (CONTINUED)

Auditors' Responsibilities for the Audit of the Financial Statements (Continued)

- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the Plan's internal control. Accordingly, no such opinion is expressed.
- Evaluate the appropriateness of accounting policies used and the reasonableness of significant accounting estimates made by management, as well as evaluate the overall presentation of the financial statements.
- Conclude whether, in our judgment, there are conditions or events, considered in the aggregate, that raise substantial doubt about the Plan's ability to continue as a going concern for a reasonable period of time.

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

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

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

Other Matter

Supplemental Schedule Required by ERISA

The supplemental schedule, Form 5500, Schedule H, Line 4(i) – Schedule of Assets (Held at End of Year), is presented for purposes of additional analysis and is not a required part of the financial statements but is supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the 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 schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

INDEPENDENT AUDITORS' REPORT (CONTINUED)

Supplemental Schedule Required by ERISA (Continued)

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

In our opinion:

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

Mercedien, P.C.

Certified Public Accountants

October 1, 2025

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS December 31, 2024 and 2023

	<u>2024</u>	<u>2023</u>
ASSETS		
Investments, at fair value		
Cash and temporary investments	\$ 55	\$ 404,842
Mutual funds	99,056,474	85,379,972
U.S. government securities - treasury bills	-	199,869
Common stock	308,475	58,292
Common collective trusts	<u>27,494,233</u>	<u>24,796,429</u>
Total Investments	<u>126,859,237</u>	<u>110,839,404</u>
Receivables		
Notes receivable from participants	295,890	235,001
Employer contributions	2,500,241	2,454,216
Participant contributions	573,167	-
Accrued interest and dividends	<u>68,619</u>	<u>45,256</u>
Total Receivables	<u>3,437,917</u>	<u>2,734,473</u>
Total Assets	<u>130,297,154</u>	<u>113,573,877</u>
LIABILITIES		
Due to brokers/unsettled trades	<u>-</u>	<u>368,529</u>
Net assets available for benefits	<u>\$ 130,297,154</u>	<u>\$ 113,205,348</u>

The accompanying notes are an integral part of the financial statements.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

STATEMENT OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS Year Ended December 31, 2024

Additions to net assets attributed to	
Investment income	
Net realized and unrealized appreciation in fair value of investments	\$ 15,990,103
Interest and dividend income	<u>1,664,214</u>
Total investment income	<u>17,654,317</u>
Interest income on notes receivable from participants	<u>27,369</u>
Contributions	
Employer	2,508,137
Participants	2,465,117
Rollovers	<u>148,944</u>
Total contributions	<u>5,122,198</u>
Other income	<u>73,123</u>
Total additions	<u>22,877,007</u>
Deductions from net assets attributed to	
Benefits paid to participants	5,720,301
Administrative expenses	<u>64,900</u>
Total deductions	<u>5,785,201</u>
Net change in net assets available for benefits	17,091,806
Net assets available for benefits, beginning of year	<u>113,205,348</u>
Net assets available for benefits, end of year	<u>\$ 130,297,154</u>

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

A. DESCRIPTION OF PLAN

The following description of Stark & Stark Employees' Profit Sharing 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 all full-time employees of Stark & Stark, P.C. (the "Plan Sponsor") who have at least six months of continuous employment. Full-time employees are eligible to participate in the Plan beginning on the first day of the following month they are hired unless they are hired on the first day of the month in which case they are immediately eligible, subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA"). BOKF, N.A. (the "Custodian") is the custodian of the Plan. The Plan was amended during 2020 to comply with the provisions of the CARES Act. The Plan was restated effective June 1, 2022.

Contributions

Contributions to the Plan by the Plan Sponsor are determined annually by management of the Plan Sponsor. In addition, the Plan Sponsor, depending upon certain discrimination tests, provides all participants with the option of salary deferral contributions of up to the maximum amount allowable, subject to the Internal Revenue Service's (the "IRS") specified limits, of wages paid by the Plan Sponsor to such participant while such participant is a member of the Plan. The allocation formula for employer contributions uses non-discrimination testing techniques under Internal Revenue Code ("IRC") Section 401(a)(4). Effective January 1, 2006, the Plan was amended to allow for Roth deferral contributions on an after-tax basis, which are subject to the same contribution limitations as stated above. Effective January 1, 2016, the Plan was amended to permit in-plan Roth transfers. Effective September 1, 2016, the Plan adopted an automatic contribution arrangement. Under the terms of the arrangement, a participant who fails to opt out of the Plan shall be deemed to have made a pre-tax deferral election equal to 3% of compensation. The automatic deferral percentage shall be increased by 1% on July 1 of each plan year, subject to a maximum of 6%. An employee must have been employed for at least six months for the initial escalation to commence.

The investment committee has relied on certain actuarial computations made by the Custodian or an independent actuary to demonstrate satisfaction of the non-discrimination tests. In these financial statements, the Plan has relied on the actuarial computations determined by the Custodian for the years ended December 31, 2024 and 2023, respectively.

Participant Accounts

Each participant's account is credited with the participant's contribution and an allocation of (a) the Plan Sponsor's contribution and (b) Plan earnings and investment expenses. Allocations are based on participant earnings or account balances, as defined. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account balance.

Vesting

Participants are immediately vested in their voluntary contributions plus actual earnings thereon. Vesting in the Plan Sponsor's contribution portion of their accounts plus earnings thereon is based on years of continuous service. A participant is 100% vested after six years of credited service or upon attaining normal retirement age, disability, or death.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

A. DESCRIPTION OF PLAN (CONTINUED)

Payment of Benefits

On termination of service due to disability, retirement or any other reason except death, a participant will receive an amount equal to the value of the participant's vested interest in his or her account in a lump-sum amount. For termination of service due to death, the account becomes fully vested and a participant's spouse or named beneficiary will receive the value of the entire interest in the decedent's account in the form of a lump-sum distribution or an annuity paid out over the life expectancy of the surviving spouse.

For termination of service due to the death of a married participant where the participant has elected beneficiaries other than his or her spouse and where the spouse has agreed to this election, the participant's named beneficiaries may receive the vested interest in the decedent's account in a lump-sum amount. For termination of service due to death of an unmarried participant, the participant's named beneficiaries, or if no beneficiaries are named, his or her estate may receive the vested interest in the decedent's account in a lump-sum amount.

Forfeited Accounts

At December 31, 2024 and 2023, forfeited non-vested accounts totaled \$107,930 and \$64,410, respectively. As of each anniversary date, any amount that became forfeited during the plan year may be used by the Plan for several purposes such as payment of plan expenses or to reduce employer contributions to the Plan. Any forfeitures not used by the Plan will be allocated to participants eligible to share in the employer contribution in the same proportion that their wages bear to total wages of all such participants. During the year ended December 31, 2024, \$63,451 of forfeitures were used to pay plan expenses.

Expenses of the Plan

The Plan's administrative expenses are paid by the Plan Sponsor, as provided by the Plan document.

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES

Basis of Accounting

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

Use of Estimates

The preparation of financial statements in conformity with accounting principles generally accepted in the United States of America ("U.S. GAAP") requires management to make estimates and assumptions that affect the reported amounts of net assets available for benefits and changes therein. Actual results could differ from those estimates.

Investment Valuation and Income Recognition

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

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

B. SUMMARY OF SIGNIFICANT ACCOUNTING POLICIES (CONTINUED)

Investment Valuation and Income Recognition (Continued)

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

Payment of Benefits

Benefit payments to participants are recorded upon distribution.

Notes Receivable from Participants

Effective November 1, 2018, participants were permitted to take loans (notes receivable from participants) from the Plan. Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest. Delinquent notes receivable are treated as distributions based upon the terms of the Plan document. Participants may borrow from their account a minimum of \$1,000 and up to a maximum amount equal to the lesser of 50% of their vested account balance, or \$50,000 minus the difference between the highest outstanding balance of loans in the past 12 months and the outstanding balance of loans from the Plan on the date the loan is made. The notes receivable are secured by the vested balance in the participants' accounts and must bear a reasonable rate of interest at the time of the borrowing. Principal and interest are paid over a period of up to five years, with equal installments no less frequently than quarterly. Loans up to 15 years are permitted for the purchase of a principal residence. Participants are permitted to have a maximum of one outstanding note receivable at any time. The interest rate on notes receivable from participants ranged from 5.25% to 10.50% at December 31, 2024 and 2023.

Subsequent Events

Management has evaluated subsequent events for potential recognition and disclosure through October 1, 2025, the date the financial statements were available to be issued. No items were determined by management to require disclosure.

C. INFORMATION CERTIFIED BY CUSTODIAN

The plan administrator has elected the method of annual reporting compliance permitted by 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. Accordingly, BOKF, N.A., a qualified institution, has certified that the following investment information included in the accompanying financial statements and ERISA-required supplemental schedule is complete and accurate:

- Investments and notes receivable from participants as shown in the statements of net assets available for benefits as of December 31, 2024 and 2023.
- Total investment income and interest income on notes receivable from participants as shown in the statement of changes in net assets available for benefits for the year ended December 31, 2024.
- Investment information, and notes receivable from participants, included in the schedule of assets (held at end of year) as of December 31, 2024, as shown on the ERISA-required supplemental schedule.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

C. INFORMATION CERTIFIED BY CUSTODIAN (CONTINUED)

At the request of the Plan administrator, the Plan's independent auditors did not perform auditing procedures with respect to this certified investment information, except for comparing such certified investment information to the related investment information included in the financial statements and ERISA-required schedule.

D. FAIR VALUE MEASUREMENTS

FASB ASC 820, *Fair Value Measurements and Disclosures*, 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) and the lowest priority to unobservable inputs (Level 3). The three levels of the fair value hierarchy under FASB ASC 820 are described below:

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

Level 2 Inputs to the valuation methodology include:

- Quoted prices for similar assets or liabilities in active markets;
- Quoted prices for identical or similar assets or liabilities in less active markets;
- Inputs other than quoted prices that are observable for the asset or liability; and
- Inputs that are derived principally from, or corroborated by, observable market data by correlation or other means.

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

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

The asset'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.

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

Mutual funds: Valued at the net asset value ("NAV") of shares held by the Plan at year end. The NAV is calculated as of the close of the New York Stock Exchange ("NYSE") each day the NYSE is open.

U.S. government securities – treasury bills: Valued at the market price of the treasury bills held by the Plan as of the close of the NYSE each day the NYSE is open.

Common stock – Valued at the market price of the underlying shares of stock held by the Plan as of the close of the NYSE each day the NYSE is open.

Common collective trust: Stated at NAV as reported to the Plan by the Custodian based on the market values of the underlying investments of the fund. The fund is not required to publish a daily NAV, therefore the NAV is a practical expedient in determining the fair value of the fund.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

D. FAIR VALUE MEASUREMENTS (CONTINUED)

The methods 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.

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

	Investments at Fair Value as of December 31, 2024			
	Level 1	Level 2	Level 3	Total
Cash and temporary investments	\$ 55	\$ -	\$ -	\$ 55
Mutual funds	99,056,474	-	-	99,056,474
Common stock	308,475	-	-	308,475
Total investments at fair value	<u>\$ 99,365,004</u>	<u>\$ -</u>	<u>\$ -</u>	<u>99,365,004</u>
Investments at NAV				27,494,233
Total investments at fair value				<u>\$ 126,859,237</u>

	Investments at Fair Value as of December 31, 2023			
	Level 1	Level 2	Level 3	Total
Cash and temporary investments	\$ 404,842	\$ -	\$ -	\$ 404,842
Mutual funds	85,379,972	-	-	85,379,972
U.S. government securities - treasury bills	199,869	-	-	199,869
Common stock	58,292	-	-	58,292
Total investments at fair value	<u>\$ 86,042,975</u>	<u>\$ -</u>	<u>\$ -</u>	<u>86,042,975</u>
Investments at NAV				24,796,429
Total investments at fair value				<u>\$ 110,839,404</u>

Fair Value Estimated Using Net Asset Value per Share

The following table summarizes investments measured at fair value based on NAV per share as a practical expedient as of December 31, 2024 and 2023:

	Fair Value Using Net Asset Value per Share				
	Fair Value at December 31, 2024	Fair Value at December 31, 2023	Unfunded Commitment	Redemption Frequency	Redemption Notice Period
Common collective trust	<u>\$ 27,494,233</u>	<u>\$ 24,796,429</u>	<u>\$ -</u>	Immediate	None

Changes in Fair Value Levels

To assess the appropriate classification of investments within the fair value hierarchy, the availability of market data is monitored. Changes in economic conditions or valuation techniques may require the transfer of investments from one fair value level to another. In such instances, the transfer is reported at the end of the reporting period.

The Plan evaluates the significance of transfers between levels based upon the nature of the investment and size of the transfer relative to total net assets available for benefits. For the years ended December 31, 2024 and 2023, there were no transfers between levels.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

NOTES TO FINANCIAL STATEMENTS

E. PLAN TERMINATION

Although it has not expressed any intent to do so, the Plan Sponsor reserves the right to discontinue its contributions at any time and to terminate the Plan subject to the provisions of ERISA. In the event of Plan termination, participants will become 100% vested in their accounts.

F. CONCENTRATION OF CREDIT RISK AND UNCERTAINTIES

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

G. TRANSACTIONS WITH PARTIES-IN-INTEREST

Stark & Stark, P.C. is the Plan Sponsor and administrator and pays certain administrative costs including accounting, legal and consulting fees on behalf of the Plan. Some of the trustees are also participants of the Plan.

H. TAX STATUS

The IRS has determined and informed the Plan by a letter dated June 30, 2020, that the Plan and related trust are designed in accordance with applicable sections of the IRC. The Plan has been amended since receiving the determination letter. However, the Plan Administrator and the Plan's tax counsel believe that the Plan is currently designed and being operated in compliance with the applicable requirements of the IRC.

U.S. GAAP requires plan management to evaluate tax positions taken by the Plan and recognize a tax liability if the Plan has taken an uncertain position that more likely than not would not be sustained upon examination by the IRS. The Plan is subject to routine audits by taxing jurisdictions; however, there are currently no audits for any tax periods in progress.

SUPPLEMENTAL INFORMATION

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Cash	Cash and Temporary Investments	\$ 55
	Mutual Funds		
	Amer Europacific Grth-R6	Mutual Fund	1,662,807
	Fidelity Contrafund Inc	Mutual Fund	21,842,882
	Fidelity Sel Med Eq & Sys	Mutual Fund	10,488
	Neub Berm Genesis - Inst	Mutual Fund	2,047,505
	American New World Fd-F	Mutual Fund	39,259
	Vanguard Energy-Inv	Mutual Fund	1,508
	Vanguard Div Grwth-Inv	Mutual Fund	37,474
	Vanguard Equity Income-Inv	Mutual Fund	1,806
	Vanguard Balanced Index-Inv	Mutual Fund	2,049
	Vanguard Wellington-Inv	Mutual Fund	1,737
	Vanguard Midcap Val Indx-Adm	Mutual Fund	49,856
	Vanguard Wellesley Inc-Inv	Mutual Fund	1,725
	Vanguard High Div Yld Invst	Mutual Fund	1,734
	Vanguard S/C Indx - Adm	Mutual Fund	6,569,499
	Vanguard Mid Cap Index - Adm	Mutual Fund	5,969,685
	Vanguard Tot Stk Mkt Indx - Inst	Mutual Fund	17,671,491
	Vanguard Tot Stk Mkt Indx - Adm	Mutual Fund	104,703
	Vanguard S/C Val Indx	Mutual Fund	118,867
	Vanguard Div Apprec Indx-Adm	Mutual Fund	403,287
	Met West Tot Ret Bd - I	Mutual Fund	4,357,192
	John Hancock III DS MC R6 FD	Mutual Fund	1,020,090
	Vanguard Health Care - Adm	Mutual Fund	36,810
	PIMCO Inc - Instl	Mutual Fund	11,091
	Vanguard Interm-Term Treas-Adm	Mutual Fund	37
	Vanguard S/T Bd Indx - Adm	Mutual Fund	6,177,899
	Invesco Govt&agency-Inst	Mutual Fund	1,734,098
	Cavanal Hill Govt Sec Mmkt-Admin	Mutual Fund	28,527
	Dodge & Cox Global Stock	Mutual Fund	564,625
	Massmutual Sel M/C Gr Eq II-I	Mutual Fund	2,180,306
	Pfg Br Target Alloc Eq Strat-R	Mutual Fund	348,465
	Vanguard Health Care - Inv	Mutual Fund	46,024
	Vanguard Intl High Div Adm	Mutual Fund	1,564
	Vanguard Intl Prot Secs-Adm	Mutual Fund	65,344
	Vanguard Intrmd Bd Indx Adm	Mutual Fund	254,321
	Vanguard S/T Corp Bd Indx-Adm	Mutual Fund	516,288
	Vanguard S/T Treasury-Adm	Mutual Fund	342,759
	Fidelity Sel Semiconductors Ret	Mutual Fund	529,260
	Fidelity Select Pharm Fd	Mutual Fund	20,918
	Fidelity Select Tech - Ret	Mutual Fund	545,470
	Fidelity Trend Fd Inc	Mutual Fund	139,386
	Franklin Dynatech Adv	Mutual Fund	35,164
	Invesco Steelpath MLP Sict	Mutual Fund	1,640
	PFG AMER GRWTH STRAT-R	Mutual Fund	267,679
	Pfg Eq Indx Focused-R	Mutual Fund	267,239
	Pfg Sector Eq Business Cyc-R	Mutual Fund	278,502
	T Rowe Blue Chip grwth-Inv	Mutual Fund	84,505
	Vanguard Utilities Indx-Adm	Mutual Fund	1,878

See independent auditors' report.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(CONTINUED)

December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Mutual Funds (Continued)		
	Vanguard Val Indx-Adm	Mutual Fund	48,918
	Vanguard 500 Indx-Adm	Mutual Fund	500,441
	PFG JP Morgan Tactical Moderate Strat I	Mutual Fund	215,008
	Pfg Meeder Tactical Strat-R	Mutual Fund	81,508
	Doubleline Total Ret Bd - I	Mutual Fund	10,742
	PFG BNY Mellon Diversifier Strategy Fund Class R	Mutual Fund	137,044
	PFG Janus Henderson Tactical Inc Stgy	Mutual Fund	89,590
	Vanguard S/T Federal-Adm	Mutual Fund	102,420
	Vanguard Ultra S/T Bd-Adm	Mutual Fund	154,663
	Vanguard REIT Indx-Adm	Mutual Fund	1,385
	Fidelity Sel Broker & Invst	Mutual Fund	19,230
	John Hancock Regional Bank-I	Mutual Fund	13,204
	Vanguard Eq Inc-Adm	Mutual Fund	6,677,364
	Vanguard Fincls Indx-Adm	Mutual Fund	13,560
	Vanguard S/C Grwth Indx-Adm	Mutual Fund	33,607
	PFG Janus Henderson Blncd Strtgy I	Mutual Fund	288,387
	Vanguard Csh Resrv Fed Mmkt-Adm	Mutual Fund	691
	PFG American Funds Cnsrvty Inc Strategy-R	Mutual Fund	65,827
	Vanguard Info Tech Indx- Adm	Mutual Fund	1,962
	Vanguard Gbl Wellesley Inc-Adm	Mutual Fund	1,248
	Vanguard Gbl Wellesley-Adm	Mutual Fund	1,325
	Vanguard Intrm Trm Corp Bd-Adm	Mutual Fund	279,113
	Vanguard S/T Invmt Grade-Inv	Mutual Fund	64
	DFA US Small Cap Growth Instl	Mutual Fund	25,385
	Dodge & Cox International Stock Fund Class X	Mutual Fund	4,513,027
	Vanguard Explorer Fund Admiral Shares	Mutual Fund	24,316
	Vanguard High-Yield Corporate Fund Admiral Shares	Mutual Fund	2,851
	Principal Real Estate Securities Fund Class R6	Mutual Fund	779,273
	Flexinsured Account MMF Cfid FDIC Mirrored Sweep	Mutual Fund	1,261,118
	Vanguard Treasury Money Market Investor	Mutual Fund	1,743,009
	Federated Hermes Institutional Prime Obligations Fund	Mutual Fund	244,946
	Federated Hermes Government Ultrashort Fund, Institutional Shares	Mutual Fund	146,223
	Fidelity Inflation-Protected Bond Index Fund - Institutional Class	Mutual Fund	145,434
	Dodge & Cox Income I	Mutual Fund	982
	Federated Hermes Total Return Bond Fund	Mutual Fund	774,454
	Federated Hermes Institutional High Yield Bond Fund	Mutual Fund	49,838
	BNY Mellon Global Fixed Income - Y	Mutual Fund	59,726
	T. Rowe Price International Bond I	Mutual Fund	59,942
	iShares J.P. Morgan USD Emerging Markets Bond ETF	Mutual Fund	63,664
	PFG PIMCO Active Core Bond Strategy Fund Class R	Mutual Fund	184,309
	PFG US Equity Index Strategy I	Mutual Fund	384,700
	Emerald Growth Fund Institutional Class	Mutual Fund	70,168
	Federated Hermes MDT Large Cap Value Fund	Mutual Fund	353,293
	Goldman Sachs International Small Cap Insights Fund	Mutual Fund	199,701
	iShares Core MSCI Emerging Markets ETF	Mutual Fund	260,943
	MFS International Equity Fund Class R6	Mutual Fund	313,294
	Nuveen Large Cap Value Index Fund R6 Class	Mutual Fund	399,930
	PFG Global Equity Index Strategy Fund Class I	Mutual Fund	75,612
	Schwab Fundamental International Equity Index Fund	Mutual Fund	336,158
	SPDR Portfolio S&P 400 Mid Cap ETF	Mutual Fund	238,175
	Vanguard Russell 1000 Growth Index Fund ETF	Mutual Fund	753,160
	iShares North American Natural Resources ETF	Mutual Fund	182,201
	Calamos Market Neutral Income Fund Institutional Class	Mutual Fund	73,989
	iShares Bitcoin Trust ETF	Mutual Fund	15,013
	Fidelity MSCI Real Estate Index ETF	Mutual Fund	188,896
	Total Mutual Funds		99,056,474

See independent auditors' report.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(CONTINUED)

December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Common Stock		
	Eli Lilly & Co	Common Stock	77,200
	Exxon Mobil Corporation	Common Stock	4,303
	Amazon.Com Inc	Common Stock	25,230
	Chewy Inc	Common Stock	1,675
	Rivian Automotive Inc	Common Stock	4,655
	Tesla Inc	Common Stock	4,038
	Yeti Holdings Inc	Common Stock	4,814
	Apple Inc Com	Common Stock	25,042
	Kinsale Capital Group Inc	Common Stock	5,582
	Novo-Nordisk A/S-Spons Adr	Common Stock	5,161
	Nvidia Corp	Common Stock	90,646
	Servicenow Inc	Common Stock	10,601
	Shopify Inc W/I	Common Stock	31,899
	Trade Desk Inc	Common Stock	17,629
	Total Common Stock		<u>308,475</u>
	Common Collective Trusts		
*	BOK Financial Retirement 2020 III	Common Collective Trust	3,925,079
*	BOK Financial Retirement 2030 III	Common Collective Trust	11,395,636
*	BOK Financial Retirement 2040 III	Common Collective Trust	4,634,702
*	BOK Financial Retirement 2050 III	Common Collective Trust	4,706,837
*	BOK Financial Retirement 2060 III	Common Collective Trust	1,106,917
*	BOK Financial Retirement 2070 III	Common Collective Trust	11,029
*	BOK Financial Retirement Conservative III	Common Collective Trust	1,091,802
*	BOK Financial Start Alternatives III	Common Collective Trust	622,231
	Total Common Collective Trusts		<u>27,494,233</u>
*	Notes receivable from participants: interest rates from 5.25% - 10.50%, maturities through November 7, 2029		<u>295,890</u>
	Total assets held at end of year		<u>\$ 127,155,127</u>

* Indicates a party-in-interest to the Plan.

Column (d) has been omitted as investments are participant directed.

The above information has been certified by BOKF, N.A, the Custodian, as complete and accurate.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)

December 31, 2024

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STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(CONTINUED)

December 31, 2024

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	Vanguard 500 Indx-Adm	Mutual Fund	500,441
	PFG JP Morgan Tactical Moderate Strat I	Mutual Fund	215,008
	Pfg Meeder Tactical Strat-R	Mutual Fund	81,508
	Doubleline Total Ret Bd - I	Mutual Fund	10,742
	PFG BNY Mellon Diversifier Strategy Fund Class R	Mutual Fund	137,044
	PFG Janus Henderson Tactical Inc Stgy	Mutual Fund	89,590
	Vanguard S/T Federal-Adm	Mutual Fund	102,420
	Vanguard Ultra S/T Bd-Adm	Mutual Fund	154,663
	Vanguard REIT Indx-Adm	Mutual Fund	1,385
	Fidelity Sel Broker & Invst	Mutual Fund	19,230
	John Hancock Regional Bank-I	Mutual Fund	13,204
	Vanguard Eq Inc-Adm	Mutual Fund	6,677,364
	Vanguard Fincls Indx-Adm	Mutual Fund	13,560
	Vanguard S/C Grwth Indx-Adm	Mutual Fund	33,607
	PFG Janus Henderson Blncd Strtgy I	Mutual Fund	288,387
	Vanguard Csh Resrv Fed Mmkt-Adm	Mutual Fund	691
	PFG American Funds Cnsrvty Inc Stratgy-R	Mutual Fund	65,827
	Vanguard Info Tech Indx- Adm	Mutual Fund	1,962
	Vanguard Gbl Wellesley Inc-Adm	Mutual Fund	1,248
	Vanguard Gbl Wellesley-Adm	Mutual Fund	1,325
	Vanguard Intrm Trm Corp Bd-Adm	Mutual Fund	279,113
	Vanguard S/T Invmt Grade-Inv	Mutual Fund	64
	DFA US Small Cap Growth Instl	Mutual Fund	25,385
	Dodge & Cox International Stock Fund Class X	Mutual Fund	4,513,027
	Vanguard Explorer Fund Admiral Shares	Mutual Fund	24,316
	Vanguard High-Yield Corporate Fund Admiral Shares	Mutual Fund	2,851
	Principal Real Estate Securities Fund Class R6	Mutual Fund	779,273
	Flexinsured Account MMF Cfid FDIC Mirrored Sweep	Mutual Fund	1,261,118
	Vanguard Treasury Money Market Investor	Mutual Fund	1,743,009
	Federated Hermes Institutional Prime Obligations Fund	Mutual Fund	244,946
	Federated Hermes Government Ultrashort Fund, Institutional Shares	Mutual Fund	146,223
	Fidelity Inflation-Protected Bond Index Fund - Institutional Class	Mutual Fund	145,434
	Dodge & Cox Income I	Mutual Fund	982
	Federated Hermes Total Return Bond Fund	Mutual Fund	774,454
	Federated Hermes Institutional High Yield Bond Fund	Mutual Fund	49,838
	BNY Mellon Global Fixed Income - Y	Mutual Fund	59,726
	T. Rowe Price International Bond I	Mutual Fund	59,942
	iShares J.P. Morgan USD Emerging Markets Bond ETF	Mutual Fund	63,664
	PFG PIMCO Active Core Bond Strategy Fund Class R	Mutual Fund	184,309
	PFG US Equity Index Strategy I	Mutual Fund	384,700
	Emerald Growth Fund Institutional Class	Mutual Fund	70,168
	Federated Hermes MDT Large Cap Value Fund	Mutual Fund	353,293
	Goldman Sachs International Small Cap Insights Fund	Mutual Fund	199,701
	iShares Core MSCI Emerging Markets ETF	Mutual Fund	260,943
	MFS International Equity Fund Class R6	Mutual Fund	313,294
	Nuveen Large Cap Value Index Fund R6 Class	Mutual Fund	399,930
	PFG Global Equity Index Strategy Fund Class I	Mutual Fund	75,612
	Schwab Fundamental International Equity Index Fund	Mutual Fund	336,158
	SPDR Portfolio S&P 400 Mid Cap ETF	Mutual Fund	238,175
	Vanguard Russell 1000 Growth Index Fund ETF	Mutual Fund	753,160
	iShares North American Natural Resources ETF	Mutual Fund	182,201
	Calamos Market Neutral Income Fund Institutional Class	Mutual Fund	73,989
	iShares Bitcoin Trust ETF	Mutual Fund	15,013
	Fidelity MSCI Real Estate Index ETF	Mutual Fund	188,896
	Total Mutual Funds		99,056,474

See independent auditors' report.

STARK & STARK EMPLOYEES' PROFIT SHARING PLAN

EIN # 22-2092476 Plan # 001

FORM 5500, SCHEDULE H, LINE 4(i) - SCHEDULE OF ASSETS (HELD AT END OF YEAR)
(CONTINUED)

December 31, 2024

(a)	(b) Identity of Issuer, Borrower, Lessor, or Similar Party	(c) Description of Investment, Including Maturity Date, Rate of Interest, Collateral, Par or Maturity Value	(e) Current Value
	Common Stock		
	Eli Lilly & Co	Common Stock	77,200
	Exxon Mobil Corporation	Common Stock	4,303
	Amazon.Com Inc	Common Stock	25,230
	Chewy Inc	Common Stock	1,675
	Rivian Automotive Inc	Common Stock	4,655
	Tesla Inc	Common Stock	4,038
	Yeti Holdings Inc	Common Stock	4,814
	Apple Inc Com	Common Stock	25,042
	Kinsale Capital Group Inc	Common Stock	5,582
	Novo-Nordisk A/S-Spons Adr	Common Stock	5,161
	Nvidia Corp	Common Stock	90,646
	Servicenow Inc	Common Stock	10,601
	Shopify Inc W/I	Common Stock	31,899
	Trade Desk Inc	Common Stock	17,629
	Total Common Stock		<u>308,475</u>
	Common Collective Trusts		
*	BOK Financial Retirement 2020 III	Common Collective Trust	3,925,079
*	BOK Financial Retirement 2030 III	Common Collective Trust	11,395,636
*	BOK Financial Retirement 2040 III	Common Collective Trust	4,634,702
*	BOK Financial Retirement 2050 III	Common Collective Trust	4,706,837
*	BOK Financial Retirement 2060 III	Common Collective Trust	1,106,917
*	BOK Financial Retirement 2070 III	Common Collective Trust	11,029
*	BOK Financial Retirement Conservative III	Common Collective Trust	1,091,802
*	BOK Financial Start Alternatives III	Common Collective Trust	622,231
	Total Common Collective Trusts		<u>27,494,233</u>
*	Notes receivable from participants: interest rates from 5.25% - 10.50%, maturities through November 7, 2029		<u>295,890</u>
	Total assets held at end of year		<u>\$ 127,155,127</u>

* Indicates a party-in-interest to the Plan.

Column (d) has been omitted as investments are participant directed.

The above information has been certified by BOKF, N.A, the Custodian, as complete and accurate.