

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

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.

Department of Labor Employee Benefits Security Administration

Pension Benefit Guaranty Corporation

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... [X] an amended return/report [ ] a short plan year return/report... C If the plan is a collectively-bargained plan, check here... [ ] D Check box if filing under: [X] Form 5558 [ ] automatic extension [ ] the DFVC program... [ ] special extension... 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: EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN
1b Three-digit plan number (PN): 002
1c Effective date of plan: 08/01/2008
2a Plan sponsor's name (employer, if for a single-employer plan): EMPRES HEALTHCARE GROUP, INC
2b Employer Identification Number (EIN): 26-3018337
2c Plan Sponsor's telephone number: 360-892-6628
2d Business code (see instructions): 623000

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 entries for plan administrator and employer/plan sponsor.

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

Form 5500 (2024) v. 240311

|   |  |      |
|---|--|------|
| <b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor  | <b>3b</b> Administrator's EIN              |      |
|   | <b>3c</b> Administrator's telephone number |      |
| <b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report:<br><b>a</b> Sponsor's name<br><b>c</b> Plan Name  | <b>4b</b> EIN                              |      |
|   | <b>4d</b> PN                               |      |
| <b>5</b> Total number of participants at the beginning of the plan year   | <b>5</b>                                   | 3247 |
| <b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ).<br><b>a(1)</b> Total number of active participants at the beginning of the plan year .....<br><b>a(2)</b> Total number of active participants at the end of the plan year .....<br><b>b</b> Retired or separated participants receiving benefits.....<br><b>c</b> Other retired or separated participants entitled to future benefits .....<br><b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> .....<br><b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. ....<br><b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> .....<br><b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) .....<br><b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) .....<br><b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested..... | <b>6a(1)</b>                               | 788  |
|   | <b>6a(2)</b>                               | 642  |
|   | <b>6b</b>                                  | 1    |
|   | <b>6c</b>                                  | 154  |
|   | <b>6d</b>                                  | 797  |
|   | <b>6e</b>                                  | 23   |
|   | <b>6f</b>                                  | 820  |
|   | <b>6g(1)</b>                               | 3043 |
| <b>6g(2)</b>  | 792  |      |
| <b>6h</b>   | 109  |      |
| <b>7</b> Enter the total number of employers obligated to contribute to the plan (only multiemployer plans complete this item) .....  | <b>7</b>                                   |      |

**8a** If the plan provides pension benefits, enter the applicable pension feature codes from the List of Plan Characteristics Codes in the instructions:  
2I 2P 2Q 3H 3I

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

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

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

**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 0
- (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)

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

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

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

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

**11c** Enter the Receipt Confirmation Code for the 2024 Form M-1 annual report. If the plan was not required to file the 2024 Form M-1 annual report, enter the Receipt Confirmation Code for the most recent Form M-1 that was required to be filed under the Form M-1 filing requirements. (Failure to enter a valid Receipt Confirmation Code will subject the Form 5500 filing to rejection as incomplete.)

Receipt Confirmation Code \_\_\_\_\_

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

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

|  |  |            |
|--|--|------------|
| <b>A</b> Name of plan<br><b>EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN</b>          | <b>B</b> Three-digit plan number (PN) ▶                            | <b>002</b> |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><b>EMPRES HEALTHCARE GROUP, INC</b> | <b>D</b> Employer Identification Number (EIN)<br><b>26-3018337</b> |            |

**Part I Service Provider Information (see instructions)**

You must complete this Part, in accordance with the instructions, to report the information required for **each person** who received, directly or indirectly, \$5,000 or more in total compensation (i.e., money or anything else of monetary value) in connection with services rendered to the plan or the person's position with the plan during the plan year. If a person received **only** eligible indirect compensation for which the plan received the required disclosures, you are required to answer line 1 but are not required to include that person when completing the remainder of this Part.

**1 Information on Persons Receiving Only Eligible Indirect Compensation**

**a** Check "Yes" or "No" to indicate whether you are excluding a person from the remainder of this Part because they received only eligible indirect compensation for which the plan received the required disclosures (see instructions for definitions and conditions).....  Yes  No

**b** If you answered line 1a "Yes," enter the name and EIN or address of each person providing the required disclosures for the service providers who received only eligible indirect compensation. Complete as many entries as needed (see instructions).

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

|                       |  |
|-----------------------|--|
| <b>MICHAEL MILLER</b> | <b>4601 N 77TH AVENUE SUITE 300<br/>VANCOUVER, WA 98662-6736</b> |
|-----------------------|--|

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

|                       |  |
|-----------------------|--|
| <b>MICHAEL MILLER</b> | <b>4601 N 77TH AVENUE SUITE 300<br/>VANCOUVER, WA 98662-6736</b> |
|-----------------------|--|

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

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

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

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

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

**Part I Service Provider Information (continued)**

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

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

**Part II Service Providers Who Fail or Refuse to Provide Information**

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

|  |  |  |
|--|--|--|
| <b>SCHEDULE H</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Financial Information</b><br><br>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).<br><br><b>▶ File as an attachment to Form 5500.</b> | <small>OMB No. 1210-0110</small><br><br><b>2024</b><br><br><b>This Form is Open to Public Inspection</b> |
|--|--|--|

|  |  |
|--|--|
| For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b> |  |
| <b>A</b> Name of plan<br><b>EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN</b>              | <b>B</b> Three-digit plan number (PN) ▶ <b>002</b>                 |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><b>EMPRES HEALTHCARE GROUP, INC</b>     | <b>D</b> Employer Identification Number (EIN)<br><b>26-3018337</b> |

|               |                                      |
|---------------|--------------------------------------|
| <b>Part I</b> | <b>Asset and Liability Statement</b> |
|---------------|--------------------------------------|

**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              |
|--|-----------------------|------------------------------|
| <b>a</b> Total noninterest-bearing cash .....  | <b>1a</b>             |                              |
| <b>b</b> Receivables (less allowance for doubtful accounts):                                       |                       |                              |
| <b>(1)</b> Employer contributions .....  | <b>1b(1)</b>          |                              |
| <b>(2)</b> Participant contributions .....   | <b>1b(2)</b>          |                              |
| <b>(3)</b> Other .....   | <b>1b(3)</b>          | 10                      2482 |
| <b>c</b> General investments:  |                       |                              |
| <b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....   | <b>1c(1)</b>          | 4                      12    |
| <b>(2)</b> U.S. Government securities .....  | <b>1c(2)</b>          |                              |
| <b>(3)</b> Corporate debt instruments (other than employer securities):                            |                       |                              |
| <b>(A)</b> Preferred .....   | <b>1c(3)(A)</b>       |                              |
| <b>(B)</b> All other .....   | <b>1c(3)(B)</b>       |                              |
| <b>(4)</b> Corporate stocks (other than employer securities):                                      |                       |                              |
| <b>(A)</b> Preferred .....   | <b>1c(4)(A)</b>       |                              |
| <b>(B)</b> Common .....  | <b>1c(4)(B)</b>       |                              |
| <b>(5)</b> Partnership/joint venture interests .....   | <b>1c(5)</b>          |                              |
| <b>(6)</b> Real estate (other than employer real property) .....                                   | <b>1c(6)</b>          |                              |
| <b>(7)</b> Loans (other than to participants) .....  | <b>1c(7)</b>          |                              |
| <b>(8)</b> Participant loans .....   | <b>1c(8)</b>          |                              |
| <b>(9)</b> Value of interest in common/collective trusts .....                                     | <b>1c(9)</b>          |                              |
| <b>(10)</b> Value of interest in pooled separate accounts .....                                    | <b>1c(10)</b>         |                              |
| <b>(11)</b> Value of interest in master trust investment accounts .....                            | <b>1c(11)</b>         |                              |
| <b>(12)</b> Value of interest in 103-12 investment entities .....                                  | <b>1c(12)</b>         |                              |
| <b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....        | <b>1c(13)</b>         |                              |
| <b>(14)</b> Value of funds held in insurance company general account (unallocated contracts) ..... | <b>1c(14)</b>         |                              |
| <b>(15)</b> Other .....  | <b>1c(15)</b>         |                              |

| 1d Employer-related investments:                                  |       | (a) Beginning of Year | (b) End of Year |
|---|-------|-----------------------|-----------------|
| (1) Employer securities.....                                      | 1d(1) | 7385141               | 6607757         |
| (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    | 7385155               | 6610251         |
| <b>Liabilities</b>  |       |                       |                 |
| g Benefit claims payable.....                                     | 1g    |                       |                 |
| h Operating payables.....   | 1h    |                       |                 |
| i Acquisition indebtedness.....                                   | 1i    |                       |                 |
| j Other liabilities.....  | 1j    | 12888707              | 14594280        |
| k Total liabilities (add all amounts in lines 1g through 1j)..... | 1k    | 12888707              | 14594280        |
| <b>Net Assets</b>   |       |                       |                 |
| l Net assets (subtract line 1k from line 1f).....                 | 1l    | -5503552              | -7984029        |

**Part II Income and Expense Statement**

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

| <b>Income</b>  |          | (a) Amount | (b) Total |
|--|----------|------------|-----------|
| <b>a Contributions:</b>  |          |            |           |
| (1) Received or receivable in cash from: (A) Employers.....                                  | 2a(1)(A) | 882741     |           |
| (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)    |            | 882741    |
| <b>b Earnings on investments:</b>  |          |            |           |
| (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) |            | 0         |
| (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) |            | 0         |
| (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) | -7823      |           |
| (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 .....                              | <b>2b(6)</b>  |            |           |
| (7) Net investment gain (loss) from pooled separate accounts .....                              | <b>2b(7)</b>  |            |           |
| (8) Net investment gain (loss) from master trust investment accounts .....                      | <b>2b(8)</b>  |            |           |
| (9) Net investment gain (loss) from 103-12 investment entities .....                            | <b>2b(9)</b>  |            |           |
| (10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) ..... | <b>2b(10)</b> |            |           |
| <b>c</b> Other income .....   | <b>2c</b>     |            | 2482      |
| <b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total.....         | <b>2d</b>     |            | 877400    |

**Expenses**

|  |               |         |         |
|--|---------------|---------|---------|
| <b>e</b> Benefit payment and payments to provide benefits:                                 |               |         |         |
| (1) Directly to participants or beneficiaries, including direct rollovers.....             | <b>2e(1)</b>  | 3133613 |         |
| (2) To insurance carriers for the provision of benefits .....                              | <b>2e(2)</b>  |         |         |
| (3) Other.....   | <b>2e(3)</b>  |         |         |
| (4) Total benefit payments. Add lines <b>2e(1)</b> through <b>(3)</b> .....                | <b>2e(4)</b>  |         | 3133613 |
| <b>f</b> Corrective distributions (see instructions) .....                                 | <b>2f</b>     |         |         |
| <b>g</b> Certain deemed distributions of participant loans (see instructions).....         | <b>2g</b>     |         |         |
| <b>h</b> Interest expense.....   | <b>2h</b>     |         | 224264  |
| <b>i</b> Administrative expenses:  |               |         |         |
| (1) Salaries and allowances .....  | <b>2i(1)</b>  |         |         |
| (2) Contract administrator fees .....  | <b>2i(2)</b>  |         |         |
| (3) Recordkeeping fees .....   | <b>2i(3)</b>  |         |         |
| (4) IQPA audit fees .....  | <b>2i(4)</b>  |         |         |
| (5) Investment advisory and investment management fees .....                               | <b>2i(5)</b>  |         |         |
| (6) Bank or trust company trustee/custodial fees .....                                     | <b>2i(6)</b>  |         |         |
| (7) Actuarial fees .....   | <b>2i(7)</b>  |         |         |
| (8) Legal fees .....   | <b>2i(8)</b>  |         |         |
| (9) Valuation/appraisal fees .....   | <b>2i(9)</b>  |         |         |
| (10) Other trustee fees and expenses .....   | <b>2i(10)</b> |         |         |
| (11) Other expenses.....   | <b>2i(11)</b> |         |         |
| (12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....       | <b>2i(12)</b> |         | 0       |
| <b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total..... | <b>2j</b>     |         | 3357877 |

**Net Income and Reconciliation**

|   |              |  |          |
|---|--------------|--|----------|
| <b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> ..... | <b>2k</b>    |  | -2480477 |
| <b>l</b> Transfers of assets:   |              |  |          |
| (1) To this plan.....   | <b>2l(1)</b> |  |          |
| (2) From this plan .....  | <b>2l(2)</b> |  |          |

**Part III Accountant's Opinion**

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

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

(1)  Unmodified (2)  Qualified (3)  Disclaimer (4)  Adverse

**b** Check the appropriate box(es) to indicate whether the IQPA performed an ERISA section 103(a)(3)(C) audit. Check both boxes (1) and (2) if the audit was performed pursuant to both 29 CFR 2520.103-8 and 29 CFR 2520.103-12(d). Check box (3) if pursuant to neither.

(1)  DOL Regulation 2520.103-8 (2)  DOL Regulation 2520.103-12(d) (3)  neither DOL Regulation 2520.103-8 nor DOL Regulation 2520.103-12(d).

**c** Enter the name and EIN of the accountant (or accounting firm) below:

(1) Name: JONES & ROTH, P.C.

(2) EIN: 93-0819646

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

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

**Part IV Compliance Questions**

**4** CCTs and PSAs do not complete Part IV. MTIAs, 103-12 IEs, and GIAs do not complete lines 4a, 4e, 4f, 4g, 4h, 4k, 4m, 4n, or 5. 103-12 IEs also do not complete lines 4j and 4l. MTIAs also do not complete line 4l. DCGs do not complete lines 4e, 4f, 4k, 4l, and 5, and DCGs generally complete the rest of Part IV collectively for all plans in the DCG, except as otherwise provided (see instructions).

During the plan year:

|  | Yes | No | Amount  |
|--|-----|----|---------|
| <b>a</b> Was there a failure to transmit to the plan any participant contributions within the time period described in 29 CFR 2510.3-102? Continue to answer "Yes" for any prior year failures until fully corrected. (See instructions and DOL's Voluntary Fiduciary Correction Program.)                 |     | X  |         |
| <b>b</b> Were any loans by the plan or fixed income obligations due the plan in default as of the close of the plan year or classified during the year as uncollectible? Disregard participant loans secured by participant's account balance. (Attach Schedule G (Form 5500) Part I if "Yes" is checked.) |     | X  |         |
| <b>c</b> Were any leases to which the plan was a party in default or classified during the year as uncollectible? (Attach Schedule G (Form 5500) Part II if "Yes" is checked.)   |     | X  |         |
| <b>d</b> Were there any nonexempt transactions with any party-in-interest? (Do not include transactions reported on line 4a. Attach Schedule G (Form 5500) Part III if "Yes" is checked.)  |     | X  |         |
| <b>e</b> Was this plan covered by a fidelity bond?   | X   |    | 5000000 |
| <b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?  |     | X  |         |
| <b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?   |     | X  |         |
| <b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?   |     | X  |         |
| <b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)   | X   |    |         |
| <b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)   | X   |    |         |
| <b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?  |     | X  |         |
| <b>l</b> Has the plan failed to provide any benefit when due under the plan?   |     | X  |         |
| <b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)   |     | X  |         |
| <b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.  |     |    |         |

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

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

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

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

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

|  |   |   |
|--|---|---|
| <b>SCHEDULE R</b><br><b>(Form 5500)</b><br><br><small>Department of the Treasury<br/>Internal Revenue Service</small><br><br><small>Department of Labor<br/>Employee Benefits Security Administration</small><br><br><small>Pension Benefit Guaranty Corporation</small> | <b>Retirement Plan Information</b><br><br>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).<br><br><b>▶ File as an attachment to Form 5500.</b> | <small>OMB No. 1210-0110</small><br><br><b>2024</b><br><br><b>This Form is Open to Public Inspection.</b> |
|--|---|---|

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

|  |  |            |
|--|--|------------|
| <b>A</b> Name of plan<br><u>EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN</u>          | <b>B</b> Three-digit plan number (PN) ▶                            | <u>002</u> |
| <b>C</b> Plan sponsor's name as shown on line 2a of Form 5500<br><u>EMPRES HEALTHCARE GROUP, INC</u> | <b>D</b> Employer Identification Number (EIN)<br><u>26-3018337</u> |            |

|               |                      |
|---------------|----------------------|
| <b>Part I</b> | <b>Distributions</b> |
|---------------|----------------------|

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

|  |   |         |
|--|---|---------|
| <b>1</b> Total value of distributions paid in property other than in cash or the forms of property specified in the instructions.....  | 1 | 3133211 |
| <b>2</b> Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):<br>EIN(s): <u>42-0127290</u> |   |         |
| <b>Profit-sharing plans, ESOPs, and stock bonus plans, skip line 3.</b>  |   |         |
| <b>3</b> Number of participants (living or deceased) whose benefits were distributed in a single sum, during the plan year .....   | 3 |         |

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

|   |                              |                             |                              |
|---|------------------------------|-----------------------------|------------------------------|
| <b>4</b> Is the plan administrator making an election under Code section 412(d)(2) or ERISA section 302(d)(2)? .....  | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| <b>If the plan is a defined benefit plan, go to line 8.</b>   |                              |                             |                              |
| <b>5</b> 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. <b>Date:</b> Month _____ Day _____ Year _____<br><b>If you completed line 5, complete lines 3, 9, and 10 of Schedule MB and do not complete the remainder of this schedule.</b> |                              |                             |                              |
| <b>6 a</b> Enter the minimum required contribution for this plan year (include any prior year accumulated funding deficiency not waived) .....  | 6a                           |                             |                              |
| <b>b</b> Enter the amount contributed by the employer to the plan for this plan year .....  | 6b                           |                             |                              |
| <b>c</b> Subtract the amount in line 6b from the amount in line 6a. Enter the result (enter a minus sign to the left of a negative amount).....   | 6c                           |                             |                              |
| <b>If you completed line 6c, skip lines 8 and 9.</b>  |                              |                             |                              |
| <b>7</b> Will the minimum funding amount reported on line 6c be met by the funding deadline?.....   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |
| <b>8</b> 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? .....   | <input type="checkbox"/> Yes | <input type="checkbox"/> No | <input type="checkbox"/> N/A |

|                 |                   |
|-----------------|-------------------|
| <b>Part III</b> | <b>Amendments</b> |
|-----------------|-------------------|

|  |                                   |                                   |                               |                             |
|--|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|
| <b>9</b> 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..... | <input type="checkbox"/> Increase | <input type="checkbox"/> Decrease | <input type="checkbox"/> Both | <input type="checkbox"/> No |
|--|-----------------------------------|-----------------------------------|-------------------------------|-----------------------------|

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

|  |   |  |
|--|---|--|
| <b>10</b> Were unallocated employer securities or proceeds from the sale of unallocated securities used to repay any exempt loan? .....  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>11 a</b> Does the ESOP hold any preferred stock? .....  | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>b</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.) ..... | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| <b>12</b> Does the ESOP hold any stock that is not readily tradable on an established securities market? .....   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |

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

**13** Enter the following information for each employer that (1) contributed more than 5% of total contributions to the plan during the plan year or (2) was one of the top-ten highest contributors (measured in dollars). See instructions. Complete as many entries as needed to report all applicable employers.

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**a** Name of contributing employer \_\_\_\_\_

**b** EIN \_\_\_\_\_ **c** Dollar amount contributed by employer \_\_\_\_\_

**d** Date collective bargaining agreement expires (If employer contributes under more than one collective bargaining agreement, check box  and see instructions regarding required attachment. Otherwise, enter the applicable date.) Month \_\_\_\_\_ Day \_\_\_\_\_ Year \_\_\_\_\_

**e** Contribution rate information (If more than one rate applies, check this box  and see instructions regarding required attachment. Otherwise, complete lines 13e(1) and 13e(2).)

(1) Contribution rate (in dollars and cents) \_\_\_\_\_

(2) Base unit measure:  Hourly  Weekly  Unit of production  Other (specify): \_\_\_\_\_

**14** Enter the number of deferred vested and retired participants (inactive participants), as of the beginning of the plan year, whose contributing employer is no longer making contributions to the plan for:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Part VII IRS Compliance Questions**

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

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

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

**EMPRES HEALTHCARE GROUP, INC.  
EMPLOYEE STOCK OWNERSHIP PLAN**

**FINANCIAL STATEMENTS AND  
SUPPLEMENTAL SCHEDULES**

**For the Years Ended December 31, 2024 and 2023**

*Jones & Roth*

CPAs & Business Advisors

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES  
For the Years Ended December 31, 2024 and 2023

TABLE OF CONTENTS

|   | <u>Page</u> |
|---|-------------|
| Independent Auditor's Report  | 1 - 3       |
| Financial Statements:   |             |
| Statements of Net Assets Available for Benefits                       | 4 - 5       |
| Statements of Changes in Net Assets Available for Benefits            | 6 - 7       |
| Notes to Financial Statements   | 8 - 17      |
| Supplemental Schedules:   |             |
| Schedule of Assets Held for Investment Purposes - Schedule H, Line 4i | 18          |
| Schedule of Reportable Transactions – Schedule H, Line 4j             | 19          |

## INDEPENDENT AUDITOR'S REPORT

To the Trustee and Plan Administrator  
EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan  
Vancouver, Washington

### Opinion

We have audited the accompanying financial statements of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 EmpRes Healthcare Group, Inc. Employee Stock Ownership 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 audit opinion.

### Responsibilities of Management for the Financial Statements

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

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

**The Right People Beside You.**

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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**

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 generally accepted auditing standards 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 generally accepted auditing standards, we—

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

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

### **Supplemental Schedules Required by ERISA**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, as listed in the table of contents, as of and for the year ending December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

A handwritten signature in cursive script that reads "Jones & Roth P.C.".

Jones & Roth, P.C.  
Hillsboro, Oregon  
October 13, 2025

## FINANCIAL STATEMENTS

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS  
December 31, 2024 and 2023

|  | 2024                |                       |                       |
|--|---------------------|-----------------------|-----------------------|
|  | Allocated           | Unallocated           | Total                 |
| <b>Assets</b>  |                     |                       |                       |
| Investment in EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | \$ 1,535,839        | \$ 5,071,918          | \$ 6,607,757          |
| Other receivables  | 2,482               | -                     | 2,482                 |
| Cash equivalents   | 12                  | -                     | 12                    |
| Total assets   | 1,538,333           | 5,071,918             | 6,610,251             |
| <b>Liabilities</b>   |                     |                       |                       |
| ESOP loan payable  | -                   | 14,594,280            | 14,594,280            |
| <b>Net assets (deficit) available for benefits</b>                                   | <b>\$ 1,538,333</b> | <b>\$ (9,522,362)</b> | <b>\$ (7,984,029)</b> |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 4,691,274        | \$ 2,693,867           | \$ 7,385,141          |
| 10                  | -                      | 10                    |
| <u>4</u>            | <u>-</u>               | <u>4</u>              |
| <u>4,691,288</u>    | <u>2,693,867</u>       | <u>7,385,155</u>      |
| <u>-</u>            | <u>12,888,707</u>      | <u>12,888,707</u>     |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
For the Years Ended December 31, 2024 and 2023

|  | 2024         |                | Total          |
|--|--------------|----------------|----------------|
|  | Allocated    | Unallocated    |                |
| <b>Additions to net assets attributed to</b>   |              |                |                |
| Investment income (loss):  |              |                |                |
| Net unrealized change in estimated<br>fair value of investments  | \$ (164,006) | \$ 156,183     | \$ (7,823)     |
| Other income   | 2,482        | -              | 2,482          |
| Interest income  | -            | -              | -              |
| Total investment income (loss)   | (161,524)    | 156,183        | (5,341)        |
| Employer contributions   | 400          | 882,341        | 882,741        |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | 141,782      | -              | 141,782        |
| Total additions  | (19,342)     | 1,038,524      | 1,019,182      |
| <b>Deductions from net assets attributed to</b>  |              |                |                |
| Interest expense   | -            | 224,264        | 224,264        |
| Distributions paid to participants   | 3,133,613    | -              | 3,133,613      |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | -            | 141,782        | 141,782        |
| Total deductions   | 3,133,613    | 366,046        | 3,499,659      |
| <b>Net increase (decrease) in assets<br/>available for benefits</b>  | (3,152,955)  | 672,478        | (2,480,477)    |
| Net assets (deficit) available for benefits,<br>beginning of year  | 4,691,288    | (10,194,840)   | (5,503,552)    |
| <b>Net assets (deficit) available for benefits,<br/>end of year</b>  | \$ 1,538,333 | \$ (9,522,362) | \$ (7,984,029) |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 3,499,012        | \$ 2,201,798           | \$ 5,700,810          |
| -                   | -                      | -                     |
| <u>10</u>           | <u>-</u>               | <u>10</u>             |
| 3,499,022           | 2,201,798              | 5,700,820             |
| 67,369              | 882,341                | 949,710               |
| <u>158,463</u>      | <u>-</u>               | <u>158,463</u>        |
| <u>3,724,854</u>    | <u>3,084,139</u>       | <u>6,808,993</u>      |
| -                   | 235,518                | 235,518               |
| 237,657             | -                      | 237,657               |
| <u>-</u>            | <u>158,463</u>         | <u>158,463</u>        |
| <u>237,657</u>      | <u>393,981</u>         | <u>631,638</u>        |
| 3,487,197           | 2,690,158              | 6,177,355             |
| <u>1,204,091</u>    | <u>(12,884,998)</u>    | <u>(11,680,907)</u>   |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

## 1. Plan Description

The following description of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan (the Plan) is provided for general purposes only. Participants should refer to the Employee Stock Ownership Plan (ESOP) Plan Document for a complete description of the Plan's provisions. The Plan's most recent restatement was effective January 1, 2013. The Plan's most recent amendment was effective January 1, 2024.

### General

EmpRes Healthcare Group, Inc. (dba Eden Health) established the Plan effective August 1, 2008. The Plan was designed, amended, and operates, in relevant part, as a leveraged ESOP and is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code (IRC) of 1986, as amended, and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Plan is administered by the Company. The former sole stockholder of the Company served as the Plan's trustee through September 15, 2011. Effective September 15, 2011, a committee consisting of one of the Company's executives, one of the Company's external directors, and a directed external trustee served collectively as the Plan's trustee through December 31, 2016. Effective May 9, 2017, the directed external trustee became the sole trustee of the Plan.

The Plan purchased the Company common shares through a seller-financed note (see Note 7) guaranteed by the Company and holds the stock in a trust established under the Plan. The note was to be repaid over a period of 10 years by fully deductible Company contributions to the trust fund. This note was modified and replaced, as further described in Note 7, with a note payable to the Company. The Plan repurchased redeemed shares in 2024 via a new note payable to the Company in a re-leveraging transaction. The note will be repaid over 20 years, as further described in Note 7. As the Plan makes each payment of debt service, an appropriate percentage of stock will be allocated to eligible employees' accounts in accordance with applicable regulations under the IRC. Shares vest fully with respect to the Plan upon allocation.

The borrowing is collateralized by the unallocated shares of stock. The creditor has no rights against shares once they are allocated under the ESOP. Accordingly, the financial statements of the Plan as of December 31, 2024 and 2023, and for the years then ended, present separately the assets and liabilities and changes therein pertaining to the accounts of employees with vested rights in allocated stock (allocated), and stock not yet allocated to employees (unallocated).

### Eligibility

Employees of the Company and its participating subsidiaries, other than ineligible employees as defined by the Plan, are eligible to participate in the Plan after one year of service providing they worked at least 1,000 hours during such Plan year. Participants who do not have at least 1,000 hours of service during such Plan year or are not employed on the last working day of a Plan year are not eligible for an allocation of Company contributions for such year. For the initial five-month Plan year ended December 31, 2008, the hours of service requirement was prorated at 416 hours.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Contributions**

The Company is generally obligated to make contributions in cash to the Plan which, when aggregated with the Plan's dividends and interest earnings, equal the amount necessary to enable the Plan to make its regularly scheduled payments of principal and interest due on its term loan. However, contributions are only permitted to the extent that the Company remains in compliance with the terms and conditions of any senior credit agreement between the Company and any third party lender. Employee contributions are not permitted.

**Payments of Benefits**

No distributions from the Plan, other than diversification payments, will be made until a participant retires, dies (in which case, payment shall be made to their beneficiary or, if none, their legal representatives), or otherwise terminates employment with the Company and its participating subsidiaries. Because the Company is an S corporation for federal income tax purposes, the distribution of a participant's vested interest may be made entirely in cash without granting the participant the right to demand distribution in Company stock. Alternatively, Company stock may be distributed subject to the requirement that it be resold to the trust under the Plan.

As of December 31, 2024 and 2023, the vested account values of employees who had terminated employment but not yet received distributions totaled \$553,823 and \$3,654,851, respectively.

The trustee may determine to distribute a participant's vested interest in substantially equal installments over a period not to exceed five years if the vested interest exceeds \$5,000. The Plan was amended effective January 1, 2024 to increase this threshold to \$7,000. If the participant's vested interest exceeds \$935,000, up to a maximum of five additional years of substantially equal installments may be elected. If a participant consents in writing, the portion of their account consisting of Company stock acquired through the ESOP loan will not begin installment payment until the year that the ESOP loan is paid in full.

Under the provisions of the Plan, the Company is obligated to redeem or repurchase participating shares which have been distributed under the terms of the Plan as long as the shares are not publicly traded or if the shares are subject to trading limitations. The Company redeemed 5,496,861 and 1,309,907 shares during the years ended December 31, 2024 and 2023, respectively.

**Voting Rights**

Each participant is entitled to exercise voting rights attributable to the shares allocated to their account on any corporate matter involving the approval or disapproval of any merger, consolidation, recapitalization, reclassification, liquidation, dissolution, sale of substantially all assets of a trade or business, or similar transaction specified in regulations under Section 409(e)(3) of the IRC and is notified by the trustee prior to the time that such rights are to be exercised. The trustee may vote allocated shares for which voting direction is not provided together with unallocated shares. The trustee is required, however, to vote any unallocated shares on behalf of the collective best interest of Plan participants and beneficiaries. Under certain unusual conditions, the trustee may override the voting directions and vote allocated shares at their own discretion, but only if in the best interest of all the participants.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Segregation**

The Plan was amended effective January 1, 2024 to allow the Plan Administrator to exchange cash allocated to active participants for Employer common stock allocated to inactive participants. In any Plan Year that an inactive participant has share of Employer stock credited to their account, the Plan Administrator may determine whether to exchange cash that exceeds the amount reasonably necessary to satisfy obligations of the Plan for shares of Employer stock that are credited to the Employer stock accounts of inactive participants, at their fair market value, in accordance with Plan provisions.

**Plan Termination**

The Company reserves the right to terminate the Plan at any time, subject to Plan provisions. Upon such termination of the Plan, the interest of each participant in the trust fund will be distributed to such participant or their beneficiary at the time prescribed by the Plan terms and the IRC. Upon termination of the Plan, the Plan Administrator shall direct the trustee to pay all liabilities and expenses of the trust fund and to sell shares of financed stock held in the loan suspense account to the extent it determines such sale to be necessary in order to repay the loan.

In August 2023, EmpRes Healthcare Group Inc. (dba Eden Health) exited its Skilled Nursing and Assisted Living operations to focus on the Home Services line of business. Over 20 percent of the Plan participants were involuntarily terminated due to this change of business direction, resulting in a partial plan termination. All affected participants were granted 100 percent vesting of their accounts. In connection with this event, the Plan was amended to allow participants who terminated employment on or before December 31, 2023 to make a one-time election during the 2024 Plan year to have their vested account balance distributed to them in one lump-sum.

**Participant Accounts**

The Plan is a defined contribution plan under which a separate individual account is established for each participant. Each participant's account is credited as of the last day of each Plan year with an allocation of shares of the Company's common stock released by the trustee from the unallocated account and forfeitures of terminated participants' nonvested accounts. Only those participants who are eligible employees of the Company as of the last day of the Plan year will receive an allocation. Allocations are based on a participant's eligible compensation, relative to total eligible compensation. Plan earnings are allocated to each participant's account based on the ratio of the participant's beginning of the year account balance to all participants' beginning of the year account balances.

**Vesting**

If a participant's employment with the Company ends for any reason other than retirement, permanent disability, or death, they will vest in the balances in their account based on total years of service with the Company. Beginning with their second year of credited service, participants vest 20 percent per year of service and are 100 percent vested after six years of service. In the event that a participant is severed as the result of a facility's closing, that participant will become fully vested at the date of severance.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Diversification**

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company stock into investments which are more diversified. Participants who are at least age 55 with at least ten years of participation in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25 percent of the number of shares allocated to their account, less any shares previously diversified. In the sixth year, the percentage changes to 50 percent. Participants who elect to diversify receive the option of a cash distribution or the opportunity to invest in one of three investment funds in the Plan or in another plan sponsored by the Company.

**Forfeitures**

Plan forfeitures are allocated to each participant's account based upon the relation of the participant's compensation to total eligible compensation for the Plan year. Forfeitures of terminated nonvested account balances allocated to remaining participants at December 31, 2024 and 2023, totaled 43,966 shares and \$1 in cash and 237,547 shares and \$-0- in cash, respectively.

**Put Option**

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

**2. Summary of Significant Accounting Policies**

**Basis of Accounting**

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

**Use of Estimates**

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP) requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

**Allocations**

The financial statements of the Plan present separately the assets and liabilities and changes therein pertaining to (a) the accounts of employees with rights in allocated stock ("allocated") and (b) stock not yet allocated to employees ("unallocated"), including shares that are committed to be released. Shares are released from collateral and become allocated generally in the period in which debt service is actually paid.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**2. Summary of Significant Accounting Policies, continued**

**Investment Valuation and Income Recognition**

The shares of Company common stock are reported at estimated fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

Interest income is recorded on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses from security transactions are reported on the average cost method. Net unrealized change in estimated fair value of investments includes the Plan's gains or losses on Company stock bought and sold as well as held during the year.

**Benefit Payments**

Benefits are recorded when paid.

**Administrative Expenses**

Substantially all expenses of maintaining the Plan are paid by the Company and therefore are excluded from these financial statements. Certain administrative expenses may be paid from Plan assets at the Plan Administrator's discretion.

**Recent Accounting Standard Adopted**

On January 1, 2023, the Plan adopted Accounting Standards Update (ASU) 2016-13 Financial Instruments – Credit Losses (Topic 326): *Measurement of Credit Losses on Financial Instruments, and all related amendments* (Accounting Standards Codification (ASC) 326), which replaced the incurred loss methodology for recognizing credit losses with an expected loss methodology that is referred to as the current expected credit loss (CECL) methodology. CECL requires an estimate of lifetime expected credit losses to be recognized for financial assets based on historical experience, current conditions, and reasonable and supportable forecasts, and for the financial assets to be presented at the net amount expected to be collected on the statements of net assets available for benefits. The financial assets held by the Plan that are subject to ASC 326 are other receivables. The Plan adopted ASC 326 effective January 1, 2023. There was no impact to the financial statements as a result of adopting this standard.

**3. Tax Status**

The Plan, as amended and restated effective January 1, 2013, has received a determination letter dated January 14, 2013, in which the Internal Revenue Service (IRS) stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's legal counsel believe that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax exempt.

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

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**4. Administration of Plan Assets**

The Plan's assets, which consist principally of Company common shares, are held by the Employee Stock Ownership Trust under the Plan. Company contributions are held and managed by the trustee, who invests cash received, interest, and dividend income, if any, and makes distributions to participants. The trustee also administers the payment of interest and principal on the ESOP loan.

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Administrative expenses for the trustee's fees are paid directly by the Company. Additionally, an appointed third-party recordkeeper, Principal Financial Group, performs various administrative and recordkeeping functions for the Plan.

**5. Investments**

The Plan's investments at December 31, 2024 and 2023 are presented in the following tables:

|  | 2024          |               |
|--|---------------|---------------|
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 3,011,449     | 9,944,938     |
| Cost   | \$ 9,367,700  | \$ 16,191,292 |
| Estimated fair value                         | \$ 1,535,839  | \$ 5,071,918  |
|  |               |               |
|  | 2023          |               |
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 8,230,305     | 4,726,082     |
| Cost   | \$ 25,595,551 | \$ 14,692,087 |
| Estimated fair value                         | \$ 4,691,274  | \$ 2,693,867  |

**6. Fair Value Measurements**

Financial Accounting Standards Board (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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under professional standards 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 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.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

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 their 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.

*Company common stock:* The fair value of the Company stock held by the Plan is determined by an annual independent appraisal. This appraisal was based upon a combination of the market and income valuation methods consistent with prior years. The appraiser took into account unobservable inputs, including historical and projected cash flow and net income, weighted average cost of capital, return on assets, return on equity, market comparables, estimated fair value of Company assets and liabilities, applicable discounts and premiums, and other relevant factors. Plan management accumulates the necessary data for the appraiser from the financial statements of the Company prepared by management. The appraiser prepares a preliminary report which management and the trustee, under the supervision of the Company's Board of Directors, reviews in detail and approves.

*Cash equivalents:* Valued at the net asset value (NAV) of the cash equivalent fund, which is stated at contract value and approximates fair value.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair value. 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 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 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               |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -         | \$ 6,607,757        | \$ 6,607,757        |
| Cash equivalents                              | -  | 12           | -                   | 12                  |
| Total assets at fair value                    | <u>\$ -</u>                                  | <u>\$ 12</u> | <u>\$ 6,607,757</u> | <u>\$ 6,607,769</u> |

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

|   | Assets at Fair Value as of December 31, 2023 |         |              |              |
|---|--|---------|--------------|--------------|
|   | Level 1                                      | Level 2 | Level 3      | Total        |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -    | \$ 7,385,141 | \$ 7,385,141 |
| Cash equivalents                              | -  | 4       | -            | 4            |
| Total assets at fair value                    | \$ -   | \$ 4    | \$ 7,385,141 | \$ 7,385,145 |

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2024 and 2023. Realized and unrealized gains and losses are reported in the statements of changes in net assets available for benefits as net unrealized change in estimated fair value of investments.

|  | EmpRes Healthcare Group, Inc.<br>(dba Eden Health)<br>Common Stock |              |
|--|--|--------------|
|  | 2024   | 2023         |
| Balance, beginning of year   | \$ 7,385,141   | \$ 1,854,618 |
| Unrealized gain (loss) relating to stock<br>held at reporting date | (7,823)  | 5,700,810    |
| Redemptions, at estimated fair value, net of adjustments           | (3,133,211)  | (170,287)    |
| Purchase of stock by trust in re-leveraging                        | 2,363,650  | -            |
| Balance, end of year   | \$ 6,607,757   | \$ 7,385,141 |

**7. ESOP Loan Payable**

In 2008, the Plan entered into a \$48,600,000 term purchase note agreement with the former sole stockholder of the Company to purchase 100 percent of the Company's common stock. The total purchase price was \$58,600,000, with a \$10,000,000 down payment made. Unallocated shares are collateral for the loan. Subsequent to December 31, 2010, the note holder and an independent fiduciary appointed by the Company's Board of Directors agreed to an updated note amortization. In 2014, the note holder and Company agreed that only interest would be paid and the respective scheduled principal payments would be deferred. Effective September 30, 2015, the agreement was amended to extend the loan terms for an additional two years with a balloon maturity at December 15, 2020. In 2020, the Company did not make any interest or principal payments on the note because such contributions would have caused a covenant default under the Company's senior debt agreements. The Plan was in default under the ESOP loan agreement in effect as of December 31, 2020 and into 2021.

In order to remedy this, effective October 1, 2021, the Plan entered into an ESOP loan modification agreement with the loan noteholder and the Company, which replaced the existing note to the former noteholder with a note payable to the Company, reduced the loan amount to \$15,000,000, and eliminated all accrued interest on the note as of that date.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**7. ESOP Loan Payable**, continued

Cancellation of debt income related to this modification was recorded in 2021 and was comprised of \$11,958,030 in forgiven principal and \$6,515,514 in forgiven accrued interest. The cancellation of principal resulted in a retroactive adjustment to the historical cost of shares. The maturity date of the modified ESOP loan is December 15, 2040 and the loan bears an interest rate of 1.74 percent. This loan will be repaid in annual principal and interest installments of \$882,340 beginning December 15, 2021.

In 2024, in connection with the stock buy-out and re-leveraging transaction, the Plan entered into a note payable to the Company to repurchase 5,496,861 shares of stock in exchange for a \$2,363,650 note. The note is payable in 20 annual principal and interest payments of \$182,181, including interest at 4.53 percent, commencing December 15, 2025. The note matures in December 2044.

The scheduled amortization of the note principal under this agreement for the next five years and thereafter is as follows:

|            |                      |
|------------|----------------------|
| 2025       | \$ 744,635           |
| 2026       | 759,688              |
| 2027       | 775,097              |
| 2028       | 790,873              |
| 2029       | 807,027              |
| Thereafter | <u>10,716,960</u>    |
| Total      | <u>\$ 14,594,280</u> |

**8. Related Party and Party-in-Interest Transactions**

The Company is the holder of the ESOP loans payable that all debt service payments are made to, as described in Note 7.

Certain administrative fees may be paid from Plan assets at the Plan Administrator's discretion. These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA. Certain administrative functions are performed by officers or employees of the Company or its subsidiaries. No such officer or employee receives compensation from the Plan.

**9. Risks and Uncertainties**

The Plan investments consist primarily of the Company's common stock, which is exposed to various risks such as interest rate, market and credit risks, as well as valuation assumptions based on earnings, cash flows and/or other such techniques. Due to the level of risk associated with the investment in the common stock and to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in the value of the common stock will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**10. Subsequent Events**

Management evaluates events and transactions that occur after the statement of net assets available for benefits date as potential subsequent events. Management has performed this evaluation through the date of the independent auditor's report.

SUPPLEMENTAL SCHEDULES

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - Schedule H, Line 4i  
December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a) | (b)<br>Identity of Issuer, Borrower,<br>Lessor, or Similar Party | (c)<br>Description of Investment<br>Including Maturity Date,<br>Rate of Interest, Collateral,<br>Maturity Value | (d)<br>Cost          | (e)<br>Current<br>Value |
|-----|--|---|----------------------|-------------------------|
| *   | EmpRes Healthcare Group, Inc.                                    | Common stock<br>(12,956,387 shares)   | <u>\$ 25,558,992</u> | ** <u>\$ 6,607,757</u>  |
|     | Goldman Sachs Fin Sq Govt Fund                                   | Cash equivalents  | <u>\$ 12</u>         | <u>\$ 12</u>            |

\* The issuer of this stock is the sponsor of the Plan and thus is considered a party-in-interest.

\*\* This figure represents original acquisition cost and is not equivalent to the adjusted basis of the S corporation stock.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF REPORTABLE TRANSACTIONS - Schedule H, Line 4j  
For the Year Ended December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a)<br>Identity of Party Involved | (b)<br>Description of Asset                  | (c), (g)<br>Purchase<br>Price and<br>Original Cost | (d), (h)<br>Sale Price | (i)<br>Net<br>Realized Loss |
|-----------------------------------|--|--|------------------------|-----------------------------|
| Empres Healthcare Group Inc.      | Common stock redeemed<br>(5,496,861 shares)  | \$ 17,092,296                                      | \$ 3,133,613           | \$ (13,958,683)             |
| Empres Healthcare Group Inc.      | Common stock purchased<br>(5,496,861 shares) | \$ 2,363,650                                       | N/A                    | N/A                         |

Note: This schedule includes any transaction or series of transactions made during the Plan period that total more than 5 percent of the assets at the beginning of the period.

**EMPRES HEALTHCARE GROUP, INC.  
EMPLOYEE STOCK OWNERSHIP PLAN**

**FINANCIAL STATEMENTS AND  
SUPPLEMENTAL SCHEDULES**

**For the Years Ended December 31, 2024 and 2023**



EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES  
For the Years Ended December 31, 2024 and 2023

TABLE OF CONTENTS

|   | <u>Page</u> |
|---|-------------|
| Independent Auditor's Report  | 1 - 3       |
| Financial Statements:   |             |
| Statements of Net Assets Available for Benefits                       | 4 - 5       |
| Statements of Changes in Net Assets Available for Benefits            | 6 - 7       |
| Notes to Financial Statements   | 8 - 17      |
| Supplemental Schedules:   |             |
| Schedule of Assets Held for Investment Purposes - Schedule H, Line 4i | 18          |
| Schedule of Reportable Transactions – Schedule H, Line 4j             | 19          |

## INDEPENDENT AUDITOR'S REPORT

To the Trustee and Plan Administrator  
EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan  
Vancouver, Washington

### Opinion

We have audited the accompanying financial statements of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 EmpRes Healthcare Group, Inc. Employee Stock Ownership 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 audit opinion.

### Responsibilities of Management for the Financial Statements

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

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

**The Right People Beside You.**

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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**

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 generally accepted auditing standards 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 generally accepted auditing standards, we—

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

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

### **Supplemental Schedules Required by ERISA**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, as listed in the table of contents, as of and for the year ending December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

A handwritten signature in cursive script that reads "Jones & Roth P.C.".

Jones & Roth, P.C.  
Hillsboro, Oregon  
October 13, 2025

## FINANCIAL STATEMENTS

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
 STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS  
 December 31, 2024 and 2023

|  | 2024                |                       |                       |
|--|---------------------|-----------------------|-----------------------|
|  | Allocated           | Unallocated           | Total                 |
| <b>Assets</b>  |                     |                       |                       |
| Investment in EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | \$ 1,535,839        | \$ 5,071,918          | \$ 6,607,757          |
| Other receivables  | 2,482               | -                     | 2,482                 |
| Cash equivalents   | 12                  | -                     | 12                    |
| Total assets   | 1,538,333           | 5,071,918             | 6,610,251             |
| <b>Liabilities</b>   |                     |                       |                       |
| ESOP loan payable  | -                   | 14,594,280            | 14,594,280            |
| <b>Net assets (deficit) available for benefits</b>                                   | <b>\$ 1,538,333</b> | <b>\$ (9,522,362)</b> | <b>\$ (7,984,029)</b> |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 4,691,274        | \$ 2,693,867           | \$ 7,385,141          |
| 10                  | -                      | 10                    |
| <u>4</u>            | <u>-</u>               | <u>4</u>              |
| <u>4,691,288</u>    | <u>2,693,867</u>       | <u>7,385,155</u>      |
| <u>-</u>            | <u>12,888,707</u>      | <u>12,888,707</u>     |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
For the Years Ended December 31, 2024 and 2023

|  | 2024         |                |                |
|--|--------------|----------------|----------------|
|  | Allocated    | Unallocated    | Total          |
| <b>Additions to net assets attributed to</b>   |              |                |                |
| Investment income (loss):  |              |                |                |
| Net unrealized change in estimated<br>fair value of investments  | \$ (164,006) | \$ 156,183     | \$ (7,823)     |
| Other income   | 2,482        | -              | 2,482          |
| Interest income  | -            | -              | -              |
| Total investment income (loss)   | (161,524)    | 156,183        | (5,341)        |
| Employer contributions   | 400          | 882,341        | 882,741        |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | 141,782      | -              | 141,782        |
| Total additions  | (19,342)     | 1,038,524      | 1,019,182      |
| <b>Deductions from net assets attributed to</b>  |              |                |                |
| Interest expense   | -            | 224,264        | 224,264        |
| Distributions paid to participants   | 3,133,613    | -              | 3,133,613      |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | -            | 141,782        | 141,782        |
| Total deductions   | 3,133,613    | 366,046        | 3,499,659      |
| <b>Net increase (decrease) in assets<br/>available for benefits</b>  | (3,152,955)  | 672,478        | (2,480,477)    |
| Net assets (deficit) available for benefits,<br>beginning of year  | 4,691,288    | (10,194,840)   | (5,503,552)    |
| <b>Net assets (deficit) available for benefits,<br/>end of year</b>  | \$ 1,538,333 | \$ (9,522,362) | \$ (7,984,029) |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 3,499,012        | \$ 2,201,798           | \$ 5,700,810          |
| -                   | -                      | -                     |
| <u>10</u>           | <u>-</u>               | <u>10</u>             |
| 3,499,022           | 2,201,798              | 5,700,820             |
| 67,369              | 882,341                | 949,710               |
| <u>158,463</u>      | <u>-</u>               | <u>158,463</u>        |
| <u>3,724,854</u>    | <u>3,084,139</u>       | <u>6,808,993</u>      |
| -                   | 235,518                | 235,518               |
| 237,657             | -                      | 237,657               |
| <u>-</u>            | <u>158,463</u>         | <u>158,463</u>        |
| <u>237,657</u>      | <u>393,981</u>         | <u>631,638</u>        |
| 3,487,197           | 2,690,158              | 6,177,355             |
| <u>1,204,091</u>    | <u>(12,884,998)</u>    | <u>(11,680,907)</u>   |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

## 1. Plan Description

The following description of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan (the Plan) is provided for general purposes only. Participants should refer to the Employee Stock Ownership Plan (ESOP) Plan Document for a complete description of the Plan's provisions. The Plan's most recent restatement was effective January 1, 2013. The Plan's most recent amendment was effective January 1, 2024.

### General

EmpRes Healthcare Group, Inc. (dba Eden Health) established the Plan effective August 1, 2008. The Plan was designed, amended, and operates, in relevant part, as a leveraged ESOP and is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code (IRC) of 1986, as amended, and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Plan is administered by the Company. The former sole stockholder of the Company served as the Plan's trustee through September 15, 2011. Effective September 15, 2011, a committee consisting of one of the Company's executives, one of the Company's external directors, and a directed external trustee served collectively as the Plan's trustee through December 31, 2016. Effective May 9, 2017, the directed external trustee became the sole trustee of the Plan.

The Plan purchased the Company common shares through a seller-financed note (see Note 7) guaranteed by the Company and holds the stock in a trust established under the Plan. The note was to be repaid over a period of 10 years by fully deductible Company contributions to the trust fund. This note was modified and replaced, as further described in Note 7, with a note payable to the Company. The Plan repurchased redeemed shares in 2024 via a new note payable to the Company in a re-leveraging transaction. The note will be repaid over 20 years, as further described in Note 7. As the Plan makes each payment of debt service, an appropriate percentage of stock will be allocated to eligible employees' accounts in accordance with applicable regulations under the IRC. Shares vest fully with respect to the Plan upon allocation.

The borrowing is collateralized by the unallocated shares of stock. The creditor has no rights against shares once they are allocated under the ESOP. Accordingly, the financial statements of the Plan as of December 31, 2024 and 2023, and for the years then ended, present separately the assets and liabilities and changes therein pertaining to the accounts of employees with vested rights in allocated stock (allocated), and stock not yet allocated to employees (unallocated).

### Eligibility

Employees of the Company and its participating subsidiaries, other than ineligible employees as defined by the Plan, are eligible to participate in the Plan after one year of service providing they worked at least 1,000 hours during such Plan year. Participants who do not have at least 1,000 hours of service during such Plan year or are not employed on the last working day of a Plan year are not eligible for an allocation of Company contributions for such year. For the initial five-month Plan year ended December 31, 2008, the hours of service requirement was prorated at 416 hours.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Contributions**

The Company is generally obligated to make contributions in cash to the Plan which, when aggregated with the Plan's dividends and interest earnings, equal the amount necessary to enable the Plan to make its regularly scheduled payments of principal and interest due on its term loan. However, contributions are only permitted to the extent that the Company remains in compliance with the terms and conditions of any senior credit agreement between the Company and any third party lender. Employee contributions are not permitted.

**Payments of Benefits**

No distributions from the Plan, other than diversification payments, will be made until a participant retires, dies (in which case, payment shall be made to their beneficiary or, if none, their legal representatives), or otherwise terminates employment with the Company and its participating subsidiaries. Because the Company is an S corporation for federal income tax purposes, the distribution of a participant's vested interest may be made entirely in cash without granting the participant the right to demand distribution in Company stock. Alternatively, Company stock may be distributed subject to the requirement that it be resold to the trust under the Plan.

As of December 31, 2024 and 2023, the vested account values of employees who had terminated employment but not yet received distributions totaled \$553,823 and \$3,654,851, respectively.

The trustee may determine to distribute a participant's vested interest in substantially equal installments over a period not to exceed five years if the vested interest exceeds \$5,000. The Plan was amended effective January 1, 2024 to increase this threshold to \$7,000. If the participant's vested interest exceeds \$935,000, up to a maximum of five additional years of substantially equal installments may be elected. If a participant consents in writing, the portion of their account consisting of Company stock acquired through the ESOP loan will not begin installment payment until the year that the ESOP loan is paid in full.

Under the provisions of the Plan, the Company is obligated to redeem or repurchase participating shares which have been distributed under the terms of the Plan as long as the shares are not publicly traded or if the shares are subject to trading limitations. The Company redeemed 5,496,861 and 1,309,907 shares during the years ended December 31, 2024 and 2023, respectively.

**Voting Rights**

Each participant is entitled to exercise voting rights attributable to the shares allocated to their account on any corporate matter involving the approval or disapproval of any merger, consolidation, recapitalization, reclassification, liquidation, dissolution, sale of substantially all assets of a trade or business, or similar transaction specified in regulations under Section 409(e)(3) of the IRC and is notified by the trustee prior to the time that such rights are to be exercised. The trustee may vote allocated shares for which voting direction is not provided together with unallocated shares. The trustee is required, however, to vote any unallocated shares on behalf of the collective best interest of Plan participants and beneficiaries. Under certain unusual conditions, the trustee may override the voting directions and vote allocated shares at their own discretion, but only if in the best interest of all the participants.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Segregation**

The Plan was amended effective January 1, 2024 to allow the Plan Administrator to exchange cash allocated to active participants for Employer common stock allocated to inactive participants. In any Plan Year that an inactive participant has share of Employer stock credited to their account, the Plan Administrator may determine whether to exchange cash that exceeds the amount reasonably necessary to satisfy obligations of the Plan for shares of Employer stock that are credited to the Employer stock accounts of inactive participants, at their fair market value, in accordance with Plan provisions.

**Plan Termination**

The Company reserves the right to terminate the Plan at any time, subject to Plan provisions. Upon such termination of the Plan, the interest of each participant in the trust fund will be distributed to such participant or their beneficiary at the time prescribed by the Plan terms and the IRC. Upon termination of the Plan, the Plan Administrator shall direct the trustee to pay all liabilities and expenses of the trust fund and to sell shares of financed stock held in the loan suspense account to the extent it determines such sale to be necessary in order to repay the loan.

In August 2023, EmpRes Healthcare Group Inc. (dba Eden Health) exited its Skilled Nursing and Assisted Living operations to focus on the Home Services line of business. Over 20 percent of the Plan participants were involuntarily terminated due to this change of business direction, resulting in a partial plan termination. All affected participants were granted 100 percent vesting of their accounts. In connection with this event, the Plan was amended to allow participants who terminated employment on or before December 31, 2023 to make a one-time election during the 2024 Plan year to have their vested account balance distributed to them in one lump-sum.

**Participant Accounts**

The Plan is a defined contribution plan under which a separate individual account is established for each participant. Each participant's account is credited as of the last day of each Plan year with an allocation of shares of the Company's common stock released by the trustee from the unallocated account and forfeitures of terminated participants' nonvested accounts. Only those participants who are eligible employees of the Company as of the last day of the Plan year will receive an allocation. Allocations are based on a participant's eligible compensation, relative to total eligible compensation. Plan earnings are allocated to each participant's account based on the ratio of the participant's beginning of the year account balance to all participants' beginning of the year account balances.

**Vesting**

If a participant's employment with the Company ends for any reason other than retirement, permanent disability, or death, they will vest in the balances in their account based on total years of service with the Company. Beginning with their second year of credited service, participants vest 20 percent per year of service and are 100 percent vested after six years of service. In the event that a participant is severed as the result of a facility's closing, that participant will become fully vested at the date of severance.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Diversification**

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company stock into investments which are more diversified. Participants who are at least age 55 with at least ten years of participation in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25 percent of the number of shares allocated to their account, less any shares previously diversified. In the sixth year, the percentage changes to 50 percent. Participants who elect to diversify receive the option of a cash distribution or the opportunity to invest in one of three investment funds in the Plan or in another plan sponsored by the Company.

**Forfeitures**

Plan forfeitures are allocated to each participant's account based upon the relation of the participant's compensation to total eligible compensation for the Plan year. Forfeitures of terminated nonvested account balances allocated to remaining participants at December 31, 2024 and 2023, totaled 43,966 shares and \$1 in cash and 237,547 shares and \$-0- in cash, respectively.

**Put Option**

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

**2. Summary of Significant Accounting Policies**

**Basis of Accounting**

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

**Use of Estimates**

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP) requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

**Allocations**

The financial statements of the Plan present separately the assets and liabilities and changes therein pertaining to (a) the accounts of employees with rights in allocated stock ("allocated") and (b) stock not yet allocated to employees ("unallocated"), including shares that are committed to be released. Shares are released from collateral and become allocated generally in the period in which debt service is actually paid.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**2. Summary of Significant Accounting Policies, continued**

**Investment Valuation and Income Recognition**

The shares of Company common stock are reported at estimated fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

Interest income is recorded on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses from security transactions are reported on the average cost method. Net unrealized change in estimated fair value of investments includes the Plan's gains or losses on Company stock bought and sold as well as held during the year.

**Benefit Payments**

Benefits are recorded when paid.

**Administrative Expenses**

Substantially all expenses of maintaining the Plan are paid by the Company and therefore are excluded from these financial statements. Certain administrative expenses may be paid from Plan assets at the Plan Administrator's discretion.

**Recent Accounting Standard Adopted**

On January 1, 2023, the Plan adopted Accounting Standards Update (ASU) 2016-13 Financial Instruments – Credit Losses (Topic 326): *Measurement of Credit Losses on Financial Instruments, and all related amendments* (Accounting Standards Codification (ASC) 326), which replaced the incurred loss methodology for recognizing credit losses with an expected loss methodology that is referred to as the current expected credit loss (CECL) methodology. CECL requires an estimate of lifetime expected credit losses to be recognized for financial assets based on historical experience, current conditions, and reasonable and supportable forecasts, and for the financial assets to be presented at the net amount expected to be collected on the statements of net assets available for benefits. The financial assets held by the Plan that are subject to ASC 326 are other receivables. The Plan adopted ASC 326 effective January 1, 2023. There was no impact to the financial statements as a result of adopting this standard.

**3. Tax Status**

The Plan, as amended and restated effective January 1, 2013, has received a determination letter dated January 14, 2013, in which the Internal Revenue Service (IRS) stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's legal counsel believe that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax exempt.

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

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**4. Administration of Plan Assets**

The Plan's assets, which consist principally of Company common shares, are held by the Employee Stock Ownership Trust under the Plan. Company contributions are held and managed by the trustee, who invests cash received, interest, and dividend income, if any, and makes distributions to participants. The trustee also administers the payment of interest and principal on the ESOP loan.

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Administrative expenses for the trustee's fees are paid directly by the Company. Additionally, an appointed third-party recordkeeper, Principal Financial Group, performs various administrative and recordkeeping functions for the Plan.

**5. Investments**

The Plan's investments at December 31, 2024 and 2023 are presented in the following tables:

|  | 2024          |               |
|--|---------------|---------------|
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 3,011,449     | 9,944,938     |
| Cost   | \$ 9,367,700  | \$ 16,191,292 |
| Estimated fair value                         | \$ 1,535,839  | \$ 5,071,918  |
|  | 2023          |               |
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 8,230,305     | 4,726,082     |
| Cost   | \$ 25,595,551 | \$ 14,692,087 |
| Estimated fair value                         | \$ 4,691,274  | \$ 2,693,867  |

**6. Fair Value Measurements**

Financial Accounting Standards Board (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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under professional standards 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 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.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

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 their 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.

*Company common stock:* The fair value of the Company stock held by the Plan is determined by an annual independent appraisal. This appraisal was based upon a combination of the market and income valuation methods consistent with prior years. The appraiser took into account unobservable inputs, including historical and projected cash flow and net income, weighted average cost of capital, return on assets, return on equity, market comparables, estimated fair value of Company assets and liabilities, applicable discounts and premiums, and other relevant factors. Plan management accumulates the necessary data for the appraiser from the financial statements of the Company prepared by management. The appraiser prepares a preliminary report which management and the trustee, under the supervision of the Company's Board of Directors, reviews in detail and approves.

*Cash equivalents:* Valued at the net asset value (NAV) of the cash equivalent fund, which is stated at contract value and approximates fair value.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair value. 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 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 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               |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -         | \$ 6,607,757        | \$ 6,607,757        |
| Cash equivalents                              | -  | 12           | -                   | 12                  |
| Total assets at fair value                    | <u>\$ -</u>                                  | <u>\$ 12</u> | <u>\$ 6,607,757</u> | <u>\$ 6,607,769</u> |

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

|   | Assets at Fair Value as of December 31, 2023 |         |              |              |
|---|--|---------|--------------|--------------|
|   | Level 1                                      | Level 2 | Level 3      | Total        |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -    | \$ 7,385,141 | \$ 7,385,141 |
| Cash equivalents                              | -  | 4       | -            | 4            |
| Total assets at fair value                    | \$ -   | \$ 4    | \$ 7,385,141 | \$ 7,385,145 |

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2024 and 2023. Realized and unrealized gains and losses are reported in the statements of changes in net assets available for benefits as net unrealized change in estimated fair value of investments.

|  | EmpRes Healthcare Group, Inc.<br>(dba Eden Health)<br>Common Stock |              |
|--|--|--------------|
|  | 2024   | 2023         |
| Balance, beginning of year   | \$ 7,385,141   | \$ 1,854,618 |
| Unrealized gain (loss) relating to stock<br>held at reporting date | (7,823)  | 5,700,810    |
| Redemptions, at estimated fair value, net of adjustments           | (3,133,211)  | (170,287)    |
| Purchase of stock by trust in re-leveraging                        | 2,363,650  | -            |
| Balance, end of year   | \$ 6,607,757   | \$ 7,385,141 |

**7. ESOP Loan Payable**

In 2008, the Plan entered into a \$48,600,000 term purchase note agreement with the former sole stockholder of the Company to purchase 100 percent of the Company's common stock. The total purchase price was \$58,600,000, with a \$10,000,000 down payment made. Unallocated shares are collateral for the loan. Subsequent to December 31, 2010, the note holder and an independent fiduciary appointed by the Company's Board of Directors agreed to an updated note amortization. In 2014, the note holder and Company agreed that only interest would be paid and the respective scheduled principal payments would be deferred. Effective September 30, 2015, the agreement was amended to extend the loan terms for an additional two years with a balloon maturity at December 15, 2020. In 2020, the Company did not make any interest or principal payments on the note because such contributions would have caused a covenant default under the Company's senior debt agreements. The Plan was in default under the ESOP loan agreement in effect as of December 31, 2020 and into 2021.

In order to remedy this, effective October 1, 2021, the Plan entered into an ESOP loan modification agreement with the loan noteholder and the Company, which replaced the existing note to the former noteholder with a note payable to the Company, reduced the loan amount to \$15,000,000, and eliminated all accrued interest on the note as of that date.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**7. ESOP Loan Payable**, continued

Cancellation of debt income related to this modification was recorded in 2021 and was comprised of \$11,958,030 in forgiven principal and \$6,515,514 in forgiven accrued interest. The cancellation of principal resulted in a retroactive adjustment to the historical cost of shares. The maturity date of the modified ESOP loan is December 15, 2040 and the loan bears an interest rate of 1.74 percent. This loan will be repaid in annual principal and interest installments of \$882,340 beginning December 15, 2021.

In 2024, in connection with the stock buy-out and re-leveraging transaction, the Plan entered into a note payable to the Company to repurchase 5,496,861 shares of stock in exchange for a \$2,363,650 note. The note is payable in 20 annual principal and interest payments of \$182,181, including interest at 4.53 percent, commencing December 15, 2025. The note matures in December 2044.

The scheduled amortization of the note principal under this agreement for the next five years and thereafter is as follows:

|            |                      |
|------------|----------------------|
| 2025       | \$ 744,635           |
| 2026       | 759,688              |
| 2027       | 775,097              |
| 2028       | 790,873              |
| 2029       | 807,027              |
| Thereafter | <u>10,716,960</u>    |
| Total      | <u>\$ 14,594,280</u> |

**8. Related Party and Party-in-Interest Transactions**

The Company is the holder of the ESOP loans payable that all debt service payments are made to, as described in Note 7.

Certain administrative fees may be paid from Plan assets at the Plan Administrator's discretion. These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA. Certain administrative functions are performed by officers or employees of the Company or its subsidiaries. No such officer or employee receives compensation from the Plan.

**9. Risks and Uncertainties**

The Plan investments consist primarily of the Company's common stock, which is exposed to various risks such as interest rate, market and credit risks, as well as valuation assumptions based on earnings, cash flows and/or other such techniques. Due to the level of risk associated with the investment in the common stock and to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in the value of the common stock will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**10. Subsequent Events**

Management evaluates events and transactions that occur after the statement of net assets available for benefits date as potential subsequent events. Management has performed this evaluation through the date of the independent auditor's report.

SUPPLEMENTAL SCHEDULES

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - Schedule H, Line 4i  
December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a) | (b)<br>Identity of Issuer, Borrower,<br>Lessor, or Similar Party | (c)<br>Description of Investment<br>Including Maturity Date,<br>Rate of Interest, Collateral,<br>Maturity Value | (d)<br>Cost          | (e)<br>Current<br>Value |
|-----|--|---|----------------------|-------------------------|
| *   | EmpRes Healthcare Group, Inc.                                    | Common stock<br>(12,956,387 shares)   | <u>\$ 25,558,992</u> | ** <u>\$ 6,607,757</u>  |
|     | Goldman Sachs Fin Sq Govt Fund                                   | Cash equivalents  | <u>\$ 12</u>         | <u>\$ 12</u>            |

\* The issuer of this stock is the sponsor of the Plan and thus is considered a party-in-interest.

\*\* This figure represents original acquisition cost and is not equivalent to the adjusted basis of the S corporation stock.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF REPORTABLE TRANSACTIONS - Schedule H, Line 4j  
For the Year Ended December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a)<br>Identity of Party Involved | (b)<br>Description of Asset                  | (c), (g)<br>Purchase<br>Price and<br>Original Cost | (d), (h)<br>Sale Price | (i)<br>Net<br>Realized Loss |
|-----------------------------------|--|--|------------------------|-----------------------------|
| Empres Healthcare Group Inc.      | Common stock redeemed<br>(5,496,861 shares)  | \$ 17,092,296                                      | \$ 3,133,613           | \$ (13,958,683)             |
| Empres Healthcare Group Inc.      | Common stock purchased<br>(5,496,861 shares) | \$ 2,363,650                                       | N/A                    | N/A                         |

Note: This schedule includes any transaction or series of transactions made during the Plan period that total more than 5 percent of the assets at the beginning of the period.

**EMPRES HEALTHCARE GROUP, INC.  
EMPLOYEE STOCK OWNERSHIP PLAN**

**FINANCIAL STATEMENTS AND  
SUPPLEMENTAL SCHEDULES**

**For the Years Ended December 31, 2024 and 2023**



EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
FINANCIAL STATEMENTS AND SUPPLEMENTAL SCHEDULES  
For the Years Ended December 31, 2024 and 2023

TABLE OF CONTENTS

|   | <u>Page</u> |
|---|-------------|
| Independent Auditor's Report  | 1 - 3       |
| Financial Statements:   |             |
| Statements of Net Assets Available for Benefits                       | 4 - 5       |
| Statements of Changes in Net Assets Available for Benefits            | 6 - 7       |
| Notes to Financial Statements   | 8 - 17      |
| Supplemental Schedules:   |             |
| Schedule of Assets Held for Investment Purposes - Schedule H, Line 4i | 18          |
| Schedule of Reportable Transactions – Schedule H, Line 4j             | 19          |

## INDEPENDENT AUDITOR'S REPORT

To the Trustee and Plan Administrator  
EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan  
Vancouver, Washington

### Opinion

We have audited the accompanying financial statements of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan, an employee benefit plan subject to the Employee Retirement Income Security Act of 1974 (ERISA), which comprise the statements of net assets available for benefits as of December 31, 2024 and 2023, the related statements of changes in net assets available for benefits for the years then ended, and the related notes to the financial statements.

In our opinion, the financial statements referred to above present fairly, in all material respects, the net assets available for benefits of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan as of December 31, 2024 and 2023, and the changes in its net assets available for benefits for the years then ended, in accordance with accounting principles generally accepted in the United States of America.

### Basis for Opinion

We conducted our audits in accordance with auditing standards generally accepted in the United States of America. 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 EmpRes Healthcare Group, Inc. Employee Stock Ownership 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 audit opinion.

### Responsibilities of Management for the Financial Statements

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

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

**The Right People Beside You.**

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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**

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 generally accepted auditing standards 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 generally accepted auditing standards, we—

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

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

### **Supplemental Schedules Required by ERISA**

Our audits were conducted for the purpose of forming an opinion on the financial statements as a whole. The supplemental schedules, as listed in the table of contents, as of and for the year ending December 31, 2024, are presented for purposes of additional analysis and are not a required part of the financial statements but are supplementary information required by the Department of Labor's Rules and Regulations for Reporting and Disclosure under ERISA. Such information is the responsibility of management and was derived from and relates directly to the underlying accounting and other records used to prepare the financial statements.

The information has been subjected to the auditing procedures applied in the audits of the financial statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the financial statements or to the financial statements themselves, and other additional procedures in accordance with generally accepted auditing standards.

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

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

A handwritten signature in cursive script that reads "Jones & Roth P.C.".

Jones & Roth, P.C.  
Hillsboro, Oregon  
October 13, 2025

## FINANCIAL STATEMENTS

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
STATEMENTS OF NET ASSETS AVAILABLE FOR BENEFITS  
December 31, 2024 and 2023

|  | 2024                |                       |                       |
|--|---------------------|-----------------------|-----------------------|
|  | Allocated           | Unallocated           | Total                 |
| <b>Assets</b>  |                     |                       |                       |
| Investment in EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | \$ 1,535,839        | \$ 5,071,918          | \$ 6,607,757          |
| Other receivables  | 2,482               | -                     | 2,482                 |
| Cash equivalents   | 12                  | -                     | 12                    |
| Total assets   | 1,538,333           | 5,071,918             | 6,610,251             |
| <b>Liabilities</b>   |                     |                       |                       |
| ESOP loan payable  | -                   | 14,594,280            | 14,594,280            |
| <b>Net assets (deficit) available for benefits</b>                                   | <b>\$ 1,538,333</b> | <b>\$ (9,522,362)</b> | <b>\$ (7,984,029)</b> |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 4,691,274        | \$ 2,693,867           | \$ 7,385,141          |
| 10                  | -                      | 10                    |
| <u>4</u>            | <u>-</u>               | <u>4</u>              |
| <u>4,691,288</u>    | <u>2,693,867</u>       | <u>7,385,155</u>      |
| <u>-</u>            | <u>12,888,707</u>      | <u>12,888,707</u>     |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
STATEMENTS OF CHANGES IN NET ASSETS AVAILABLE FOR BENEFITS  
For the Years Ended December 31, 2024 and 2023

|  | 2024         |                | Total          |
|--|--------------|----------------|----------------|
|  | Allocated    | Unallocated    |                |
| <b>Additions to net assets attributed to</b>   |              |                |                |
| Investment income (loss):  |              |                |                |
| Net unrealized change in estimated<br>fair value of investments  | \$ (164,006) | \$ 156,183     | \$ (7,823)     |
| Other income   | 2,482        | -              | 2,482          |
| Interest income  | -            | -              | -              |
| Total investment income (loss)   | (161,524)    | 156,183        | (5,341)        |
| Employer contributions   | 400          | 882,341        | 882,741        |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | 141,782      | -              | 141,782        |
| Total additions  | (19,342)     | 1,038,524      | 1,019,182      |
| <b>Deductions from net assets attributed to</b>  |              |                |                |
| Interest expense   | -            | 224,264        | 224,264        |
| Distributions paid to participants   | 3,133,613    | -              | 3,133,613      |
| Allocation of 278,005 shares in 2024 and 2023<br>of EmpRes Healthcare Group, Inc.<br>common stock, at estimated fair value | -            | 141,782        | 141,782        |
| Total deductions   | 3,133,613    | 366,046        | 3,499,659      |
| <b>Net increase (decrease) in assets<br/>available for benefits</b>  | (3,152,955)  | 672,478        | (2,480,477)    |
| Net assets (deficit) available for benefits,<br>beginning of year  | 4,691,288    | (10,194,840)   | (5,503,552)    |
| <b>Net assets (deficit) available for benefits,<br/>end of year</b>  | \$ 1,538,333 | \$ (9,522,362) | \$ (7,984,029) |

| 2023                |                        |                       |
|---------------------|------------------------|-----------------------|
| <u>Allocated</u>    | <u>Unallocated</u>     | <u>Total</u>          |
| \$ 3,499,012        | \$ 2,201,798           | \$ 5,700,810          |
| -                   | -                      | -                     |
| <u>10</u>           | <u>-</u>               | <u>10</u>             |
| 3,499,022           | 2,201,798              | 5,700,820             |
| 67,369              | 882,341                | 949,710               |
| <u>158,463</u>      | <u>-</u>               | <u>158,463</u>        |
| <u>3,724,854</u>    | <u>3,084,139</u>       | <u>6,808,993</u>      |
| -                   | 235,518                | 235,518               |
| 237,657             | -                      | 237,657               |
| <u>-</u>            | <u>158,463</u>         | <u>158,463</u>        |
| <u>237,657</u>      | <u>393,981</u>         | <u>631,638</u>        |
| 3,487,197           | 2,690,158              | 6,177,355             |
| <u>1,204,091</u>    | <u>(12,884,998)</u>    | <u>(11,680,907)</u>   |
| <u>\$ 4,691,288</u> | <u>\$ (10,194,840)</u> | <u>\$ (5,503,552)</u> |

The accompanying notes are an integral part of these statements.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

## 1. Plan Description

The following description of EmpRes Healthcare Group, Inc. Employee Stock Ownership Plan (the Plan) is provided for general purposes only. Participants should refer to the Employee Stock Ownership Plan (ESOP) Plan Document for a complete description of the Plan's provisions. The Plan's most recent restatement was effective January 1, 2013. The Plan's most recent amendment was effective January 1, 2024.

### General

EmpRes Healthcare Group, Inc. (dba Eden Health) established the Plan effective August 1, 2008. The Plan was designed, amended, and operates, in relevant part, as a leveraged ESOP and is designed to comply with Section 4975(e)(7) and the regulations thereunder of the Internal Revenue Code (IRC) of 1986, as amended, and is subject to the applicable provisions of the Employee Retirement Income Security Act of 1974 (ERISA), as amended. The Plan is administered by the Company. The former sole stockholder of the Company served as the Plan's trustee through September 15, 2011. Effective September 15, 2011, a committee consisting of one of the Company's executives, one of the Company's external directors, and a directed external trustee served collectively as the Plan's trustee through December 31, 2016. Effective May 9, 2017, the directed external trustee became the sole trustee of the Plan.

The Plan purchased the Company common shares through a seller-financed note (see Note 7) guaranteed by the Company and holds the stock in a trust established under the Plan. The note was to be repaid over a period of 10 years by fully deductible Company contributions to the trust fund. This note was modified and replaced, as further described in Note 7, with a note payable to the Company. The Plan repurchased redeemed shares in 2024 via a new note payable to the Company in a re-leveraging transaction. The note will be repaid over 20 years, as further described in Note 7. As the Plan makes each payment of debt service, an appropriate percentage of stock will be allocated to eligible employees' accounts in accordance with applicable regulations under the IRC. Shares vest fully with respect to the Plan upon allocation.

The borrowing is collateralized by the unallocated shares of stock. The creditor has no rights against shares once they are allocated under the ESOP. Accordingly, the financial statements of the Plan as of December 31, 2024 and 2023, and for the years then ended, present separately the assets and liabilities and changes therein pertaining to the accounts of employees with vested rights in allocated stock (allocated), and stock not yet allocated to employees (unallocated).

### Eligibility

Employees of the Company and its participating subsidiaries, other than ineligible employees as defined by the Plan, are eligible to participate in the Plan after one year of service providing they worked at least 1,000 hours during such Plan year. Participants who do not have at least 1,000 hours of service during such Plan year or are not employed on the last working day of a Plan year are not eligible for an allocation of Company contributions for such year. For the initial five-month Plan year ended December 31, 2008, the hours of service requirement was prorated at 416 hours.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Contributions**

The Company is generally obligated to make contributions in cash to the Plan which, when aggregated with the Plan's dividends and interest earnings, equal the amount necessary to enable the Plan to make its regularly scheduled payments of principal and interest due on its term loan. However, contributions are only permitted to the extent that the Company remains in compliance with the terms and conditions of any senior credit agreement between the Company and any third party lender. Employee contributions are not permitted.

**Payments of Benefits**

No distributions from the Plan, other than diversification payments, will be made until a participant retires, dies (in which case, payment shall be made to their beneficiary or, if none, their legal representatives), or otherwise terminates employment with the Company and its participating subsidiaries. Because the Company is an S corporation for federal income tax purposes, the distribution of a participant's vested interest may be made entirely in cash without granting the participant the right to demand distribution in Company stock. Alternatively, Company stock may be distributed subject to the requirement that it be resold to the trust under the Plan.

As of December 31, 2024 and 2023, the vested account values of employees who had terminated employment but not yet received distributions totaled \$553,823 and \$3,654,851, respectively.

The trustee may determine to distribute a participant's vested interest in substantially equal installments over a period not to exceed five years if the vested interest exceeds \$5,000. The Plan was amended effective January 1, 2024 to increase this threshold to \$7,000. If the participant's vested interest exceeds \$935,000, up to a maximum of five additional years of substantially equal installments may be elected. If a participant consents in writing, the portion of their account consisting of Company stock acquired through the ESOP loan will not begin installment payment until the year that the ESOP loan is paid in full.

Under the provisions of the Plan, the Company is obligated to redeem or repurchase participating shares which have been distributed under the terms of the Plan as long as the shares are not publicly traded or if the shares are subject to trading limitations. The Company redeemed 5,496,861 and 1,309,907 shares during the years ended December 31, 2024 and 2023, respectively.

**Voting Rights**

Each participant is entitled to exercise voting rights attributable to the shares allocated to their account on any corporate matter involving the approval or disapproval of any merger, consolidation, recapitalization, reclassification, liquidation, dissolution, sale of substantially all assets of a trade or business, or similar transaction specified in regulations under Section 409(e)(3) of the IRC and is notified by the trustee prior to the time that such rights are to be exercised. The trustee may vote allocated shares for which voting direction is not provided together with unallocated shares. The trustee is required, however, to vote any unallocated shares on behalf of the collective best interest of Plan participants and beneficiaries. Under certain unusual conditions, the trustee may override the voting directions and vote allocated shares at their own discretion, but only if in the best interest of all the participants.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Segregation**

The Plan was amended effective January 1, 2024 to allow the Plan Administrator to exchange cash allocated to active participants for Employer common stock allocated to inactive participants. In any Plan Year that an inactive participant has share of Employer stock credited to their account, the Plan Administrator may determine whether to exchange cash that exceeds the amount reasonably necessary to satisfy obligations of the Plan for shares of Employer stock that are credited to the Employer stock accounts of inactive participants, at their fair market value, in accordance with Plan provisions.

**Plan Termination**

The Company reserves the right to terminate the Plan at any time, subject to Plan provisions. Upon such termination of the Plan, the interest of each participant in the trust fund will be distributed to such participant or their beneficiary at the time prescribed by the Plan terms and the IRC. Upon termination of the Plan, the Plan Administrator shall direct the trustee to pay all liabilities and expenses of the trust fund and to sell shares of financed stock held in the loan suspense account to the extent it determines such sale to be necessary in order to repay the loan.

In August 2023, EmpRes Healthcare Group Inc. (dba Eden Health) exited its Skilled Nursing and Assisted Living operations to focus on the Home Services line of business. Over 20 percent of the Plan participants were involuntarily terminated due to this change of business direction, resulting in a partial plan termination. All affected participants were granted 100 percent vesting of their accounts. In connection with this event, the Plan was amended to allow participants who terminated employment on or before December 31, 2023 to make a one-time election during the 2024 Plan year to have their vested account balance distributed to them in one lump-sum.

**Participant Accounts**

The Plan is a defined contribution plan under which a separate individual account is established for each participant. Each participant's account is credited as of the last day of each Plan year with an allocation of shares of the Company's common stock released by the trustee from the unallocated account and forfeitures of terminated participants' nonvested accounts. Only those participants who are eligible employees of the Company as of the last day of the Plan year will receive an allocation. Allocations are based on a participant's eligible compensation, relative to total eligible compensation. Plan earnings are allocated to each participant's account based on the ratio of the participant's beginning of the year account balance to all participants' beginning of the year account balances.

**Vesting**

If a participant's employment with the Company ends for any reason other than retirement, permanent disability, or death, they will vest in the balances in their account based on total years of service with the Company. Beginning with their second year of credited service, participants vest 20 percent per year of service and are 100 percent vested after six years of service. In the event that a participant is severed as the result of a facility's closing, that participant will become fully vested at the date of severance.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**1. Plan Description, continued**

**Diversification**

Diversification is offered to participants close to retirement so that they may have the opportunity to move part of the value of their investment in Company stock into investments which are more diversified. Participants who are at least age 55 with at least ten years of participation in the Plan may elect to diversify a portion of their account. Diversification is offered to each eligible participant over a six-year period. In each of the first five years, a participant may diversify up to 25 percent of the number of shares allocated to their account, less any shares previously diversified. In the sixth year, the percentage changes to 50 percent. Participants who elect to diversify receive the option of a cash distribution or the opportunity to invest in one of three investment funds in the Plan or in another plan sponsored by the Company.

**Forfeitures**

Plan forfeitures are allocated to each participant's account based upon the relation of the participant's compensation to total eligible compensation for the Plan year. Forfeitures of terminated nonvested account balances allocated to remaining participants at December 31, 2024 and 2023, totaled 43,966 shares and \$1 in cash and 237,547 shares and \$-0- in cash, respectively.

**Put Option**

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

**2. Summary of Significant Accounting Policies**

**Basis of Accounting**

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

**Use of Estimates**

The preparation of financial statements in accordance with accounting principles generally accepted in the United States of America (U.S. GAAP) requires management to make estimates and assumptions that affect certain reported amounts and disclosures. Accordingly, actual results could differ from those estimates.

**Allocations**

The financial statements of the Plan present separately the assets and liabilities and changes therein pertaining to (a) the accounts of employees with rights in allocated stock ("allocated") and (b) stock not yet allocated to employees ("unallocated"), including shares that are committed to be released. Shares are released from collateral and become allocated generally in the period in which debt service is actually paid.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**2. Summary of Significant Accounting Policies, continued**

**Investment Valuation and Income Recognition**

The shares of Company common stock are reported at estimated fair value. Fair value is the price that would be received to sell an asset in an orderly transaction between market participants at the measurement date. See Note 6 for discussion of fair value measurements.

Interest income is recorded on the accrual basis. Purchases and sales of securities are recorded on a trade-date basis. Realized gains and losses from security transactions are reported on the average cost method. Net unrealized change in estimated fair value of investments includes the Plan's gains or losses on Company stock bought and sold as well as held during the year.

**Benefit Payments**

Benefits are recorded when paid.

**Administrative Expenses**

Substantially all expenses of maintaining the Plan are paid by the Company and therefore are excluded from these financial statements. Certain administrative expenses may be paid from Plan assets at the Plan Administrator's discretion.

**Recent Accounting Standard Adopted**

On January 1, 2023, the Plan adopted Accounting Standards Update (ASU) 2016-13 Financial Instruments – Credit Losses (Topic 326): *Measurement of Credit Losses on Financial Instruments, and all related amendments* (Accounting Standards Codification (ASC) 326), which replaced the incurred loss methodology for recognizing credit losses with an expected loss methodology that is referred to as the current expected credit loss (CECL) methodology. CECL requires an estimate of lifetime expected credit losses to be recognized for financial assets based on historical experience, current conditions, and reasonable and supportable forecasts, and for the financial assets to be presented at the net amount expected to be collected on the statements of net assets available for benefits. The financial assets held by the Plan that are subject to ASC 326 are other receivables. The Plan adopted ASC 326 effective January 1, 2023. There was no impact to the financial statements as a result of adopting this standard.

**3. Tax Status**

The Plan, as amended and restated effective January 1, 2013, has received a determination letter dated January 14, 2013, in which the Internal Revenue Service (IRS) stated that the Plan, as then designed, was in compliance with the applicable requirements of the IRC. Although the Plan has been amended since receiving the determination letter, the Plan Administrator and the Plan's legal counsel believe that the Plan is designed and currently being operated in compliance with the applicable requirements of the IRC and, therefore, believes that the Plan is qualified and the related trust is tax exempt.

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

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**4. Administration of Plan Assets**

The Plan's assets, which consist principally of Company common shares, are held by the Employee Stock Ownership Trust under the Plan. Company contributions are held and managed by the trustee, who invests cash received, interest, and dividend income, if any, and makes distributions to participants. The trustee also administers the payment of interest and principal on the ESOP loan.

Certain administrative functions are performed by officers or employees of the Company. No such officer or employee receives compensation from the Plan. Administrative expenses for the trustee's fees are paid directly by the Company. Additionally, an appointed third-party recordkeeper, Principal Financial Group, performs various administrative and recordkeeping functions for the Plan.

**5. Investments**

The Plan's investments at December 31, 2024 and 2023 are presented in the following tables:

|  | 2024          |               |
|--|---------------|---------------|
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 3,011,449     | 9,944,938     |
| Cost   | \$ 9,367,700  | \$ 16,191,292 |
| Estimated fair value                         | \$ 1,535,839  | \$ 5,071,918  |
|  | 2023          |               |
|  | Allocated     | Unallocated   |
| EmpRes Healthcare Group, Inc. common shares: |               |               |
| Number of shares                             | 8,230,305     | 4,726,082     |
| Cost   | \$ 25,595,551 | \$ 14,692,087 |
| Estimated fair value                         | \$ 4,691,274  | \$ 2,693,867  |

**6. Fair Value Measurements**

Financial Accounting Standards Board (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 measurements) and the lowest priority to unobservable inputs (Level 3 measurements). The three levels of the fair value hierarchy under professional standards 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 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.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

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 their 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.

*Company common stock:* The fair value of the Company stock held by the Plan is determined by an annual independent appraisal. This appraisal was based upon a combination of the market and income valuation methods consistent with prior years. The appraiser took into account unobservable inputs, including historical and projected cash flow and net income, weighted average cost of capital, return on assets, return on equity, market comparables, estimated fair value of Company assets and liabilities, applicable discounts and premiums, and other relevant factors. Plan management accumulates the necessary data for the appraiser from the financial statements of the Company prepared by management. The appraiser prepares a preliminary report which management and the trustee, under the supervision of the Company's Board of Directors, reviews in detail and approves.

*Cash equivalents:* Valued at the net asset value (NAV) of the cash equivalent fund, which is stated at contract value and approximates fair value.

The methods described above may produce a fair value calculation that may not be indicative of net realizable value or reflective of future fair value. 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 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 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               |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -         | \$ 6,607,757        | \$ 6,607,757        |
| Cash equivalents                              | -  | 12           | -                   | 12                  |
| Total assets at fair value                    | <u>\$ -</u>                                  | <u>\$ 12</u> | <u>\$ 6,607,757</u> | <u>\$ 6,607,769</u> |

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**6. Fair Value Measurements**, continued

|   | Assets at Fair Value as of December 31, 2023 |         |              |              |
|---|--|---------|--------------|--------------|
|   | Level 1                                      | Level 2 | Level 3      | Total        |
| EmpRes Healthcare Group, Inc.<br>common stock | \$ -   | \$ -    | \$ 7,385,141 | \$ 7,385,141 |
| Cash equivalents                              | -  | 4       | -            | 4            |
| Total assets at fair value                    | \$ -   | \$ 4    | \$ 7,385,141 | \$ 7,385,145 |

The table below sets forth a summary of changes in the fair value of the Plan's Level 3 assets for the years ended December 31, 2024 and 2023. Realized and unrealized gains and losses are reported in the statements of changes in net assets available for benefits as net unrealized change in estimated fair value of investments.

|  | EmpRes Healthcare Group, Inc.<br>(dba Eden Health)<br>Common Stock |              |
|--|--|--------------|
|  | 2024   | 2023         |
| Balance, beginning of year   | \$ 7,385,141   | \$ 1,854,618 |
| Unrealized gain (loss) relating to stock<br>held at reporting date | (7,823)  | 5,700,810    |
| Redemptions, at estimated fair value, net of adjustments           | (3,133,211)  | (170,287)    |
| Purchase of stock by trust in re-leveraging                        | 2,363,650  | -            |
| Balance, end of year   | \$ 6,607,757   | \$ 7,385,141 |

**7. ESOP Loan Payable**

In 2008, the Plan entered into a \$48,600,000 term purchase note agreement with the former sole stockholder of the Company to purchase 100 percent of the Company's common stock. The total purchase price was \$58,600,000, with a \$10,000,000 down payment made. Unallocated shares are collateral for the loan. Subsequent to December 31, 2010, the note holder and an independent fiduciary appointed by the Company's Board of Directors agreed to an updated note amortization. In 2014, the note holder and Company agreed that only interest would be paid and the respective scheduled principal payments would be deferred. Effective September 30, 2015, the agreement was amended to extend the loan terms for an additional two years with a balloon maturity at December 15, 2020. In 2020, the Company did not make any interest or principal payments on the note because such contributions would have caused a covenant default under the Company's senior debt agreements. The Plan was in default under the ESOP loan agreement in effect as of December 31, 2020 and into 2021.

In order to remedy this, effective October 1, 2021, the Plan entered into an ESOP loan modification agreement with the loan noteholder and the Company, which replaced the existing note to the former noteholder with a note payable to the Company, reduced the loan amount to \$15,000,000, and eliminated all accrued interest on the note as of that date.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**7. ESOP Loan Payable**, continued

Cancellation of debt income related to this modification was recorded in 2021 and was comprised of \$11,958,030 in forgiven principal and \$6,515,514 in forgiven accrued interest. The cancellation of principal resulted in a retroactive adjustment to the historical cost of shares. The maturity date of the modified ESOP loan is December 15, 2040 and the loan bears an interest rate of 1.74 percent. This loan will be repaid in annual principal and interest installments of \$882,340 beginning December 15, 2021.

In 2024, in connection with the stock buy-out and re-leveraging transaction, the Plan entered into a note payable to the Company to repurchase 5,496,861 shares of stock in exchange for a \$2,363,650 note. The note is payable in 20 annual principal and interest payments of \$182,181, including interest at 4.53 percent, commencing December 15, 2025. The note matures in December 2044.

The scheduled amortization of the note principal under this agreement for the next five years and thereafter is as follows:

|            |                      |
|------------|----------------------|
| 2025       | \$ 744,635           |
| 2026       | 759,688              |
| 2027       | 775,097              |
| 2028       | 790,873              |
| 2029       | 807,027              |
| Thereafter | <u>10,716,960</u>    |
| Total      | <u>\$ 14,594,280</u> |

**8. Related Party and Party-in-Interest Transactions**

The Company is the holder of the ESOP loans payable that all debt service payments are made to, as described in Note 7.

Certain administrative fees may be paid from Plan assets at the Plan Administrator's discretion. These party-in-interest transactions are exempt from the prohibited transaction rules of ERISA. Certain administrative functions are performed by officers or employees of the Company or its subsidiaries. No such officer or employee receives compensation from the Plan.

**9. Risks and Uncertainties**

The Plan investments consist primarily of the Company's common stock, which is exposed to various risks such as interest rate, market and credit risks, as well as valuation assumptions based on earnings, cash flows and/or other such techniques. Due to the level of risk associated with the investment in the common stock and to uncertainties inherent in the estimations and assumptions process, it is at least reasonably possible that changes in the value of the common stock will occur in the near term and that such changes could materially affect the amounts reported in the statement of net assets available for benefits.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
NOTES TO FINANCIAL STATEMENTS

**10. Subsequent Events**

Management evaluates events and transactions that occur after the statement of net assets available for benefits date as potential subsequent events. Management has performed this evaluation through the date of the independent auditor's report.

SUPPLEMENTAL SCHEDULES

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF ASSETS HELD FOR INVESTMENT PURPOSES - Schedule H, Line 4i  
December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a) | (b)<br>Identity of Issuer, Borrower,<br>Lessor, or Similar Party | (c)<br>Description of Investment<br>Including Maturity Date,<br>Rate of Interest, Collateral,<br>Maturity Value | (d)<br>Cost          | (e)<br>Current<br>Value |
|-----|--|---|----------------------|-------------------------|
| *   | EmpRes Healthcare Group, Inc.                                    | Common stock<br>(12,956,387 shares)   | <u>\$ 25,558,992</u> | ** <u>\$ 6,607,757</u>  |
|     | Goldman Sachs Fin Sq Govt Fund                                   | Cash equivalents  | <u>\$ 12</u>         | <u>\$ 12</u>            |

\* The issuer of this stock is the sponsor of the Plan and thus is considered a party-in-interest.

\*\* This figure represents original acquisition cost and is not equivalent to the adjusted basis of the S corporation stock.

EMPRES HEALTHCARE GROUP, INC. EMPLOYEE STOCK OWNERSHIP PLAN  
SCHEDULE OF REPORTABLE TRANSACTIONS - Schedule H, Line 4j  
For the Year Ended December 31, 2024

Employer Identification Number: 26-3018337

Plan Number: 002

| (a)<br>Identity of Party Involved | (b)<br>Description of Asset                  | (c), (g)<br>Purchase<br>Price and<br>Original Cost | (d), (h)<br>Sale Price | (i)<br>Net<br>Realized Loss |
|-----------------------------------|--|--|------------------------|-----------------------------|
| Empres Healthcare Group Inc.      | Common stock redeemed<br>(5,496,861 shares)  | \$ 17,092,296                                      | \$ 3,133,613           | \$ (13,958,683)             |
| Empres Healthcare Group Inc.      | Common stock purchased<br>(5,496,861 shares) | \$ 2,363,650                                       | N/A                    | N/A                         |

Note: This schedule includes any transaction or series of transactions made during the Plan period that total more than 5 percent of the assets at the beginning of the period.