

Form 5500

Department of the Treasury  
Internal Revenue Service

Department of Labor  
Employee Benefits Security  
Administration

Pension Benefit Guaranty Corporation

Annual Return/Report of Employee Benefit Plan

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

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

OMB Nos. 1210-0110  
1210-0089

2024

This Form is Open to Public Inspection

Part I Annual Report Identification Information

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

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

Part II Basic Plan Information—enter all requested information

1a Name of plan ALLSOURCE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN & TRUST
1b Three-digit plan number (PN) 001
1c Effective date of plan 01/01/2015
2a Plan sponsor's name (employer, if for a single-employer plan) Mailing address (include room, apt., suite no. and street, or P.O. Box) City or town, state or province, country, and ZIP or foreign postal code (if foreign, see instructions) ALLSOURCE ENTERPRISES LLC 5031 HIGHWAY 153 EASLEY, SC 29642-9164
2b Employer Identification Number (EIN) 20-2653111
2c Plan Sponsor's telephone number 864-671-2225
2d Business code (see instructions) 541990

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

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

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

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

Form 5500 (2024) v. 240311

<b>3a</b> Plan administrator's name and address <input checked="" type="checkbox"/> Same as Plan Sponsor	<b>3b</b> Administrator's EIN	
	<b>3c</b> Administrator's telephone number	
<b>4</b> If the name and/or EIN of the plan sponsor or the plan name has changed since the last return/report filed for this plan, enter the plan sponsor's name, EIN, the plan name and the plan number from the last return/report: <b>a</b> Sponsor's name <b>c</b> Plan Name	<b>4b</b> EIN	
	<b>4d</b> PN	
<b>5</b> Total number of participants at the beginning of the plan year	<b>5</b>	262
<b>6</b> Number of participants as of the end of the plan year unless otherwise stated (welfare plans complete only lines <b>6a(1)</b> , <b>6a(2)</b> , <b>6b</b> , <b>6c</b> , and <b>6d</b> ). <b>a(1)</b> Total number of active participants at the beginning of the plan year ..... <b>a(2)</b> Total number of active participants at the end of the plan year ..... <b>b</b> Retired or separated participants receiving benefits..... <b>c</b> Other retired or separated participants entitled to future benefits ..... <b>d</b> Subtotal. Add lines <b>6a(2)</b> , <b>6b</b> , and <b>6c</b> ..... <b>e</b> Deceased participants whose beneficiaries are receiving or are entitled to receive benefits. .... <b>f</b> Total. Add lines <b>6d</b> and <b>6e</b> ..... <b>g(1)</b> Number of participants with account balances as of the beginning of the plan year (only defined contribution plans complete this item) ..... <b>g(2)</b> Number of participants with account balances as of the end of the plan year (only defined contribution plans complete this item) ..... <b>h</b> Number of participants who terminated employment during the plan year with accrued benefits that were less than 100% vested.....	<b>6a(1)</b>	154
	<b>6a(2)</b>	217
	<b>6b</b>	0
	<b>6c</b>	135
	<b>6d</b>	352
	<b>6e</b>	0
	<b>6f</b>	352
	<b>6g(1)</b>	246
<b>6g(2)</b>	348	
<b>6h</b>	5	
<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:  
 2E 2F 2G 2J 2K 2S 2T 3D 3H

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

**b General Schedules**

- (1)  **H** (Financial Information)
- (2)  **I** (Financial Information – Small Plan)
- (3)  **A** (Insurance Information) – Number Attached 0
- (4)  **C** (Service Provider Information)
- (5)  **D** (DFE/Participating Plan Information)
- (6)  **G** (Financial Transaction Schedules)

---

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

---

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

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

---

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

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

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

---

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

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

<b>A</b> Name of plan <b>ALLSOURCE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN &amp; TRUST</b>	<b>B</b> Three-digit plan number (PN) ▶	<b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ALLSOURCE ENTERPRISES LLC</b>	<b>D</b> Employer Identification Number (EIN) <b>20-2653111</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)** Enter name and EIN or address of person who provided you disclosures on eligible indirect compensation

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

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

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

---

---

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

---

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

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

MATCH GRADE ADVISORS, LLC

400 PETTIGRU STREET  
GREENVILLE, SC 29601

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
26	ADVISOR	23304	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

PAYCHEX, INC.

911 PANORAMA TRAIL S  
ROCHESTER, NY 14625

16-1124166

(b) Service Code(s)	(c) Relationship to employer, employee organization, or person known to be a party-in-interest	(d) Enter direct compensation paid by the plan. If none, enter -0-.	(e) Did service provider receive indirect compensation? (sources other than plan or plan sponsor)	(f) Did indirect compensation include eligible indirect compensation, for which the plan received the required disclosures?	(g) Enter total indirect compensation received by service provider excluding eligible indirect compensation for which you answered "Yes" to element (f). If none, enter -0-.	(h) Did the service provider give you a formula instead of an amount or estimated amount?
15	RECORDKEEPER	15389	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

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

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

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

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

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

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

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

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

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

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

Explanation:

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

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

<b>A</b> Name of plan <u>ALLSOURCE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN &amp; TRUST</u>	<b>B</b> Three-digit plan number (PN)	<u>001</u>
<b>C</b> Plan or DFE sponsor's name as shown on line 2a of Form 5500 <u>ALLSOURCE ENTERPRISES LLC</u>	<b>D</b> Employer Identification Number (EIN) <u>20-2653111</u>	

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

<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE: <u>THE STANDARD STABLE ASSET II</u>		
<b>b</b> Name of sponsor of entity listed in (a): <u>STANDARD INSURANCE COMPANY</u>		
<b>c</b> EIN-PN <u>93-0242990-690</u>	<b>d</b> Entity code <u>C</u>	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions) <u>43307</u>
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)
<b>a</b> Name of MTIA, CCT, PSA, or 103-12 IE:		
<b>b</b> Name of sponsor of entity listed in (a):		
<b>c</b> EIN-PN	<b>d</b> Entity code	<b>e</b> Dollar value of interest in MTIA, CCT, PSA, or 103-12 IE at end of year (see instructions)

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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

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

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

**c** EIN-PN

**d** Entity code

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



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

For calendar plan year 2024 or fiscal plan year beginning <b>01/01/2024</b> and ending <b>12/31/2024</b>	
<b>A</b> Name of plan <b>ALLSOURCE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN &amp; TRUST</b>	<b>B</b> Three-digit plan number (PN) ▶ <b>001</b>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <b>ALLSOURCE ENTERPRISES LLC</b>	<b>D</b> Employer Identification Number (EIN) <b>20-2653111</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> 0	
<b>b</b> Receivables (less allowance for doubtful accounts):		
<b>(1)</b> Employer contributions .....	<b>1b(1)</b> 0	0
<b>(2)</b> Participant contributions .....	<b>1b(2)</b> 0	0
<b>(3)</b> Other .....	<b>1b(3)</b> 0	0
<b>c</b> General investments:		
<b>(1)</b> Interest-bearing cash (include money market accounts & certificates of deposit) .....	<b>1c(1)</b> 0	0
<b>(2)</b> U.S. Government securities .....	<b>1c(2)</b> 0	
<b>(3)</b> Corporate debt instruments (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(3)(A)</b> 0	
<b>(B)</b> All other .....	<b>1c(3)(B)</b> 0	
<b>(4)</b> Corporate stocks (other than employer securities):		
<b>(A)</b> Preferred .....	<b>1c(4)(A)</b> 0	
<b>(B)</b> Common .....	<b>1c(4)(B)</b> 0	
<b>(5)</b> Partnership/joint venture interests .....	<b>1c(5)</b> 0	
<b>(6)</b> Real estate (other than employer real property) .....	<b>1c(6)</b> 0	
<b>(7)</b> Loans (other than to participants) .....	<b>1c(7)</b> 0	
<b>(8)</b> Participant loans .....	<b>1c(8)</b> 58221	51978
<b>(9)</b> Value of interest in common/collective trusts .....	<b>1c(9)</b> 64594	43307
<b>(10)</b> Value of interest in pooled separate accounts .....	<b>1c(10)</b> 0	0
<b>(11)</b> Value of interest in master trust investment accounts .....	<b>1c(11)</b> 0	0
<b>(12)</b> Value of interest in 103-12 investment entities .....	<b>1c(12)</b> 0	0
<b>(13)</b> Value of interest in registered investment companies (e.g., mutual funds) .....	<b>1c(13)</b> 3823156	5766905
<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> 0	0

<b>1d</b> Employer-related investments:		(a) Beginning of Year	(b) End of Year
(1) Employer securities.....	<b>1d(1)</b>	0	
(2) Employer real property.....	<b>1d(2)</b>	0	
<b>e</b> Buildings and other property used in plan operation.....	<b>1e</b>	0	
<b>f</b> Total assets (add all amounts in lines 1a through 1e).....	<b>1f</b>	3945971	5862190
<b>Liabilities</b>			
<b>g</b> Benefit claims payable.....	<b>1g</b>	0	
<b>h</b> Operating payables.....	<b>1h</b>	0	
<b>i</b> Acquisition indebtedness.....	<b>1i</b>	0	
<b>j</b> Other liabilities.....	<b>1j</b>	0	
<b>k</b> Total liabilities (add all amounts in lines 1g through 1j).....	<b>1k</b>	0	0
<b>Net Assets</b>			
<b>l</b> Net assets (subtract line 1k from line 1f).....	<b>1l</b>	3945971	5862190

**Part II Income and Expense Statement**

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

<b>Income</b>		(a) Amount	(b) Total
<b>a Contributions:</b>			
(1) Received or receivable in cash from: <b>(A)</b> Employers.....	<b>2a(1)(A)</b>	659139	
<b>(B)</b> Participants.....	<b>2a(1)(B)</b>	794005	
<b>(C)</b> Others (including rollovers).....	<b>2a(1)(C)</b>	237278	
(2) Noncash contributions.....	<b>2a(2)</b>		
(3) Total contributions. Add lines <b>2a(1)(A)</b> , <b>(B)</b> , <b>(C)</b> , and line <b>2a(2)</b> .....	<b>2a(3)</b>		1690422
<b>b Earnings on investments:</b>			
<b>(1) Interest:</b>			
<b>(A)</b> Interest-bearing cash (including money market accounts and certificates of deposit).....	<b>2b(1)(A)</b>	0	
<b>(B)</b> U.S. Government securities.....	<b>2b(1)(B)</b>		
<b>(C)</b> Corporate debt instruments.....	<b>2b(1)(C)</b>		
<b>(D)</b> Loans (other than to participants).....	<b>2b(1)(D)</b>		
<b>(E)</b> Participant loans.....	<b>2b(1)(E)</b>	4882	
<b>(F)</b> Other.....	<b>2b(1)(F)</b>		
<b>(G)</b> Total interest. Add lines <b>2b(1)(A)</b> through <b>(F)</b> .....	<b>2b(1)(G)</b>		4882
<b>(2) Dividends:</b>			
<b>(A)</b> Preferred stock.....	<b>2b(2)(A)</b>		
<b>(B)</b> Common stock.....	<b>2b(2)(B)</b>		
<b>(C)</b> Registered investment company shares (e.g. mutual funds).....	<b>2b(2)(C)</b>	167407	
<b>(D)</b> Total dividends. Add lines <b>2b(2)(A)</b> , <b>(B)</b> , and <b>(C)</b> .....	<b>2b(2)(D)</b>		167407
<b>(3)</b> Rents.....	<b>2b(3)</b>		
<b>(4) Net gain (loss) on sale of assets:</b>			
<b>(A)</b> Aggregate proceeds.....	<b>2b(4)(A)</b>		
<b>(B)</b> Aggregate carrying amount (see instructions).....	<b>2b(4)(B)</b>		
<b>(C)</b> Subtract line <b>2b(4)(B)</b> from line <b>2b(4)(A)</b> and enter result.....	<b>2b(4)(C)</b>		
<b>(5) Unrealized appreciation (depreciation) of assets:</b>			
<b>(A)</b> Real estate.....	<b>2b(5)(A)</b>		
<b>(B)</b> Other.....	<b>2b(5)(B)</b>		
<b>(C)</b> Total unrealized appreciation of assets. Add lines <b>2b(5)(A)</b> and <b>(B)</b> .....	<b>2b(5)(C)</b>		

		(a) Amount	(b) Total
(6) Net investment gain (loss) from common/collective trusts .....	<b>2b(6)</b>		0
(7) Net investment gain (loss) from pooled separate accounts .....	<b>2b(7)</b>		0
(8) Net investment gain (loss) from master trust investment accounts .....	<b>2b(8)</b>		0
(9) Net investment gain (loss) from 103-12 investment entities .....	<b>2b(9)</b>		0
(10) Net investment gain (loss) from registered investment companies (e.g., mutual funds) .....	<b>2b(10)</b>		443564
<b>c</b> Other income .....	<b>2c</b>		
<b>d</b> Total income. Add all <b>income</b> amounts in column (b) and enter total.....	<b>2d</b>		2306275

**Expenses**

<b>e</b> Benefit payment and payments to provide benefits:			
(1) Directly to participants or beneficiaries, including direct rollovers.....	<b>2e(1)</b>	349336	
(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>		349336
<b>f</b> Corrective distributions (see instructions) .....	<b>2f</b>		0
<b>g</b> Certain deemed distributions of participant loans (see instructions).....	<b>2g</b>		2027
<b>h</b> Interest expense.....	<b>2h</b>		
<b>i</b> Administrative expenses:			
(1) Salaries and allowances .....	<b>2i(1)</b>		
(2) Contract administrator fees .....	<b>2i(2)</b>	15389	
(3) Recordkeeping fees .....	<b>2i(3)</b>	0	
(4) IQPA audit fees .....	<b>2i(4)</b>		
(5) Investment advisory and investment management fees .....	<b>2i(5)</b>	23304	
(6) Bank or trust company trustee/custodial fees .....	<b>2i(6)</b>	0	
(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>	0	
(12) Total administrative expenses. Add lines <b>2i(1)</b> through <b>(11)</b> .....	<b>2i(12)</b>		38693
<b>j</b> Total expenses. Add all <b>expense</b> amounts in column (b) and enter total.....	<b>2j</b>		390056

**Net Income and Reconciliation**

<b>k</b> Net income (loss). Subtract line <b>2j</b> from line <b>2d</b> .....	<b>2k</b>		1916219
<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: **BAUKNIGHT PIETRAS & STORMER P.A.**

(2) EIN: **57-0940019**

**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		394597
<b>f</b> Did the plan have a loss, whether or not reimbursed by the plan's fidelity bond, that was caused by fraud or dishonesty?		X	
<b>g</b> Did the plan hold any assets whose current value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>h</b> Did the plan receive any noncash contributions whose value was neither readily determinable on an established market nor set by an independent third party appraiser?		X	
<b>i</b> Did the plan have assets held for investment? (Attach schedule(s) of assets if "Yes" is checked, and see instructions for format requirements.)	X		
<b>j</b> Were any plan transactions or series of transactions in excess of 5% of the current value of plan assets? (Attach schedule of transactions if "Yes" is checked and see instructions for format requirements.)		X	
<b>k</b> Were all the plan assets either distributed to participants or beneficiaries, transferred to another plan, or brought under the control of the PBGC?		X	
<b>l</b> Has the plan failed to provide any benefit when due under the plan?		X	
<b>m</b> If this is an individual account plan, was there a blackout period? (See instructions and 29 CFR 2520.101-3.)		X	
<b>n</b> If 4m was answered "Yes," check the "Yes" box if you either provided the required notice or one of the exceptions to providing the notice applied under 29 CFR 2520.101-3.		X	

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

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

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

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

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

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

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

<b>A</b> Name of plan <u>ALLSOURCE ENTERPRISES LLC 401(K) PROFIT SHARING PLAN &amp; TRUST</u>	<b>B</b> Three-digit plan number (PN) ▶	<u>001</u>
<b>C</b> Plan sponsor's name as shown on line 2a of Form 5500 <u>ALLSOURCE ENTERPRISES LLC</u>	<b>D</b> Employer Identification Number (EIN) <u>20-2653111</u>	

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

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

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

1	
---	--

**2** Enter the EIN(s) of payor(s) who paid benefits on behalf of the plan to participants or beneficiaries during the year (if more than two, enter EINs of the two payors who paid the greatest dollar amounts of benefits):  
EIN(s): 27-3169253

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

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

3	
---	--

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

**Part VII IRS Compliance Questions**

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

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

**22** If the plan sponsor is an adopter of a pre-approved plan that received a favorable IRS Opinion Letter, enter the date of the Opinion Letter 08 / 31 / 2020 (MM/DD/YYYY) and the Opinion Letter serial number Q704150A.

The information in this electronic document is confidential and may be legally privileged. It is intended solely for the specified recipients. Access to this document by anyone else is unauthorized.

Bauknight Pietras & Stormer, P.A. shall have no liability, and shall pursue all available legal and equitable remedies against any recipients, for the unauthorized use or distribution of this document.

If you are not the intended recipient of this document, any disclosure, copying, distribution or any action taken or omitted to be taken in reliance on it, is prohibited and may be unlawful. When addressed to our clients, any opinions or advice contained in this document are subject to the terms and conditions expressed in the governing Bauknight Pietras & Stormer, P.A. client engagement letter (or as otherwise agreed to with our clients).

Financial Statements  
and Supplemental Schedule

Allsource Enterprises LLC  
401(k) Profit Sharing Plan and Trust

*Years Ended December 31, 2024 (Audited) and 2023 (Compiled)  
with Report of Independent Auditors*

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Financial Statements and Supplemental Schedule  
Years Ended December 31, 2024 (Audited) and 2023 (Compiled)

**Contents**

Report of Independent Auditors ..... 1-5

Audited Financial Statements

Statements of Net Assets Available for Plan Benefits..... 6

Statements of Changes in Net Assets Available for Plan Benefits ..... 7

Notes to Financial Statements..... 8-14

Supplemental Schedule

Schedule H, Part IV Line 4i - Schedule of Assets (Held at End of Year) ..... 15

## Report of Independent Auditors

Administrative Committee  
Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Scope and Nature of the Employee Retirement Income Security Act of 1974 (“ERISA”) Section 103(a)(3)(C) Audit of the 2024 Financial Statements**

We have performed an audit of the 2024 financial statements of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust (the “Plan”), an employee benefit plan subject to ERISA, as permitted by ERISA Section 103(a)(3)(C) (“ERISA Section 103(a)(3)(C) audit”). The financial statements comprise the statement of net assets available for plan benefits as of December 31, 2024, and the related statement of changes in net assets available for plan benefits for the year then ended, and the related notes to the financial statements (“2024 Financial Statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan’s 2024 Financial Statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s (“DOL”) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (“investment information”) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA (“qualified institution”).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

### **Opinion on the 2024 Financial Statements**

In our opinion, based on our audit and on the procedures performed as described in the Auditors’ Responsibilities for the Audit of the 2024 Financial Statements section of our report:

- The amounts and disclosures in the accompanying 2024 Financial Statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States.

Administrative Committee

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Opinion on the 2024 Financial Statements (continued)**

- The information in the accompanying 2024 Financial Statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

### **Basis for Opinion on the 2024 Financial Statements**

We conducted our audit in accordance with auditing standards generally accepted in the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the 2024 Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

### **Responsibilities of Management for the 2024 Financial Statements**

Management is responsible for the preparation and fair presentation of the 2024 financial statements in accordance with accounting principles generally accepted in the United States, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Administrative Committee  
Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Auditors' Responsibilities for the Audit of the 2024 Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2024 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States 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 auditing standards generally accepted in the United States, we:

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

Administrative Committee

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Auditors' Responsibilities for the Audit of the 2024 Financial Statements (continued)**

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2024 Financial Statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2024 Financial Statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States.

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

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

The supplemental schedule, as listed in the table of contents, is presented for the purpose of additional analysis and is not a required part of the 2024 Financial Statements but is supplementary information required by the DOL'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 2024 Financial Statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the 2024 Financial Statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2024 Financial Statements or to the 2024 Financial Statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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



**BPS**

Tax / Assurance / Consulting

Administrative Committee

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

**Other Matter - Supplemental Schedule Required by ERISA (continued)**

In our opinion:

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

**Accountants' Compilation Report on the 2023 Financial Statement**

Management is responsible for the accompanying 2023 financial statement of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust, which comprises the statement of net assets available for plan benefits as of December 31, 2023, and the related notes to the 2023 financial statement in accordance with accounting principles generally accepted in the United States. We have performed a compilation engagement in accordance with *Statements on Standards for Accounting and Review Services* promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the 2023 financial statement nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the 2023 financial statement.

*Baumight Pietros & Stone, P.A.*

Columbia, South Carolina

October 14, 2025

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Statements of Net Assets Available for Plan Benefits

	December 31,	
	2024 (Audited)	2023 (Compiled)
<b>Assets</b>		
Investments, at fair value:		
Mutual funds	\$ 5,766,905	\$ 3,845,799
Collective trust	43,307	41,951
Total investments	5,810,212	3,887,750
Employer contributions receivable	11,685	--
Participant contributions receivable	14,754	--
Notes receivable from participants	51,978	58,221
Total assets	5,888,629	3,945,971
<b>Liabilities</b>		
Plan liabilities	--	--
Net assets available for plan benefits	\$ 5,888,629	\$ 3,945,971

*See accompanying notes.*

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Statement of Changes in Net Assets Available for Plan Benefits  
Year Ended December 31, 2024

**Additions to net assets attributed to:**

Investment income:

Net appreciation in fair value of investments	\$	443,566
Interest and dividends		167,407
		610,973

Interest on participant notes receivable		4,036
--	--	-------

Contributions:

Participant, including rollovers		1,046,037
Employer contributions		670,824
Total additions		2,331,870

**Deductions from net assets attributed to:**

Benefits paid to participants, including rollovers		349,336
Deemed distributions		2,027
Administrative expenses		37,849
Total deductions		389,212

Net change		1,942,658
------------	--	-----------

Net assets available for plan benefits, beginning		3,945,971
---	--	-----------

Net assets available for plan benefits, ending	\$	5,888,629
--	----	-----------

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

## 1. Description of Plan

The following description of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants may refer to the Plan document for a more complete description of the Plan's provisions.

### General

The Plan is a defined contribution plan sponsored by Allsource Enterprises, LLC (the "Plan Sponsor") to cover Safe Industries, LLC and Fire Plus, LLC (the "Companies"), both of which have the same owner. The Plan provides retirement benefits to eligible employees of both companies. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

### Eligibility

Employees may become participants in the 401(k) employee deferral and employer matching portion of the Plan upon attainment of age eighteen. On the first day of the month following the employee meeting the eligibility requirement, participants become automatically enrolled in the Plan at five percent of the participants' eligible compensation, unless the employee specifically elects to decline to participate. Employees are eligible to receive profit sharing contributions after attaining age twenty-one. Employees are required to complete 1,000 hours of service during the Plan year and be employed by the Companies on the last day of the Plan year to receive profit sharing contributions.

### Contributions

Participants may contribute between one and ninety percent of their pre-tax annual compensation to the 401(k) portion of their account or between one and ninety percent of their after-tax annual compensation to the ROTH 401(k) portion of their account, as defined by the Plan document, subject to contribution limitations specified by applicable laws and regulations. Participants who have attained age fifty before the end of the Plan year are eligible to make catch-up contributions, up to the maximum annual amount permitted by statute. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or contribution plans.

During the year ended December 31, 2024, the Plan Sponsor made matching contributions equal to one hundred percent of up to five percent of participants' eligible compensation (as defined by the Plan document), which were contributed as safe harbor matching contributions. The Plan Sponsor also has the option to make employer profit sharing contributions, which are allocated to individual participants' accounts based on the ratio that their compensation bears to the total compensation of all participants eligible for a share of the contribution. The Plan Sponsor made no employer profit sharing contributions for the year ended December 31, 2024.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**1. Description of Plan (continued)**

**Participant Accounts**

Each participant's 401(k) portion of their account is credited with the participant's elected deferral contributions and employer contributions, and is charged with an allocation of any administrative expenses paid by the Plan. Participants may elect to allocate current contributions among a variety of fund options. The allocations remain in effect until a new election is made.

Earnings or losses are allocated by fund based on the ratio of a participant's account invested in a particular fund to all participants' investments in that fund. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

**Participant Notes Receivable**

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 95% of one-half of their vested account balance, excluding the Roth Elective Deferral balance. The notes are collateralized by the balance in the participant's accounts and bear interest at the prime rate plus 1%. Interest rates ranged from 8.50% to 9.50% at December 31, 2024. Notes receivable are required to be repaid within five years, except for loans made for the purchase of a primary residence. A participant may have no more than two notes due to the Plan at any time. Principal and interest are paid ratably through payroll deductions.

**Vesting**

Participants are immediately 100% vested in their elective deferral and matching contributions, plus actual earnings thereon. Vesting in the Plan Sponsor's employer profit sharing contributions is based on years of continuous service. Participants become 20% vested in employer profit sharing contributions upon completion of two years of continuous service. During the next four-year period of service, participants vest 20% per year in profit sharing contributions such that, upon the completion of six years of continuous service, participants are 100% vested in the profit sharing contributions.

Participants will be considered 100% vested in employer profit sharing contributions in the event of retirement on or after age sixty-five, death, disability, or plan termination. If an employee is terminated from the Plan prior to becoming 100% vested in employer profit sharing contributions, the non-vested portion will be allocated to the Plan's forfeitures account.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**1. Description of Plan (continued)**

**Forfeitures**

In accordance with the Plan document, available forfeitures may be used first to offset employer contributions, and any remaining forfeitures may be used to offset plan administrative expenses. Any remaining forfeited amounts are then reallocated back to active participants. As of December 31, 2024 and 2023, unallocated forfeitures totaled approximately \$21,000 and \$23,000, respectively. Forfeitures of approximately \$2,000 were used to reduce employer matching contributions for the year ended December 31, 2024.

**Administrative Expenses**

Certain administrative expenses are charged to individual participant accounts. The Plan pays recordkeeping and certain professional fees. All administrative fees not paid by the Plan are paid by the Plan Sponsor.

**Payment of Benefits**

Upon retirement, disability, attainment of age 59 ½, death, or termination of employment, a participant or their designated beneficiary may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or as installment payments over a period of time not to exceed the expected future lifetime of the participant and their beneficiary. Subject to certain conditions, participants are permitted to make withdrawals from their vested account balance in the Plan in cases of severe financial hardship while employed. Account balances that exceed \$5,000 for terminated participants are automatically distributed to participants.

**Plan Termination**

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

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

## **2. Basis of Presentation and Summary of Significant Accounting Policies**

### **Basis of Accounting**

The accompanying financial statements are prepared in accordance with accounting principles generally accepted in the United States ("US GAAP").

### **Estimates**

The preparation of financial statements in conformity with US GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

### **Participant Notes Receivable**

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest, which approximates fair value. Interest income is recorded on the accrual basis. Related fees are charged directly to the participant's account and are included in administrative expenses when incurred. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a distribution based on the terms of the Plan document.

### **Investment Valuation and Income Recognition**

Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

### **Risks and Uncertainties**

The Plan invests in investment securities that are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the 2024 statement of net assets available for plan benefits.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**2. Basis of Presentation and Summary of Significant Accounting Policies (continued)**

**Payment of Benefits**

Benefit payments are recorded when paid.

**3. Custodian Certification**

Information disclosed in the accompanying financial statements as of and for the year ended December 31, 2024, related to investments, net appreciation in fair values of investments, and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Mid Atlantic Trust Company.

**4. Fair Value Measurements**

GAAP establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable inputs other than quoted prices for identical assets; and Level 3 inputs to the valuation methodology are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. All of the Plan's mutual fund investments are valued using Level 1 inputs, which are based on quoted market prices of the shares held by the Plan.

The Plan's investments also include The Standard Stable Asset Fund II ("SSAF"), a collective trust which invests its assets in a variety of bank, insurance plan sponsor, and other financial institution investment contracts. SSAF is considered a stable value fund that is valued at the net asset value ("NAV") of units of the accounts. The NAV, as provided by the issuer, is used as a practical expedient to estimate fair value. The NAV of the account is based on the fair value of the underlying investments held less the account's liabilities. The use of NAV as fair value is deemed appropriate as the collective trust does not have a finite life, unfunded commitments relating to these types of investments, or significant restrictions on redemptions. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount significantly different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the account, the account provider reserves the right to temporarily delay withdrawal from the account in order to ensure that security liquidations are carried out in an orderly business manner.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**4. Fair Value Measurements (continued)**

The methods used to measure fair values may produce amounts that may not be indicative of net realizable values or reflective of future fair values. Furthermore, although Plan management believes the valuation methods used are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair values of certain financial instruments could result in a different fair value measurement at the reporting date.

**5. Income Tax Status**

The Plan is a non-standardized profit sharing plan designed to be in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The non-standardized profit sharing plan obtained its latest determination letter on August 31, 2020, in which the Internal Revenue Service ("IRS") determined that the pre-approved plan document and related trust are designed in accordance with applicable sections of the IRC. Although the non-standardized profit sharing plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

The Plan had operational errors during the years ended December 31, 2022 and 2024 that resulted in an underpayment of contributions and lost earnings to the Plan. Management is also reviewing activity for the year ended December 31, 2023 for potential errors. As of the date the financial statements were available to be issued, management has not completely determined the extent of the errors and has not quantified the impact on the Plan's financial statements. Management will take the necessary steps to correct any errors and preserve the Plan's qualified tax status.

US GAAP requires the Plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. No such liabilities were identified at December 31, 2024 or 2023. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

**6. Party-in-Interest Transactions**

Fees paid by the Plan to Mid Atlantic Trust Company for investment management and administrative services amounted to approximately \$38,000 for the year ended December 31, 2024, and are included as a reduction of the return earned on each fund. The Plan also has participant notes receivable. These transactions qualify as party-in-interest transactions and are exempt from the prohibited transaction rules of ERISA.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**7. Reconciliation of Audited Financial Statements to Schedule H of Form 5500**

The following is a reconciliation of net assets available for plan benefits per the accompanying financial statements to Schedule H of Form 5500 as of December 31, 2024 and 2023:

	<b>December 31,</b>	
	<b>2024</b>	<b>2023</b>
	<b>(Audited)</b>	<b>(Compiled)</b>
Net assets available for plan benefits per the financial statements	<b>\$ 5,888,629</b>	\$ 3,945,971
Employer contributions receivable	<b>(11,685)</b>	--
Employee contributions receivable	<b>(14,754)</b>	--
Net assets available for plan benefits per Schedule H of Form 5500	<b>\$ 5,862,190</b>	\$ 3,945,971

The following is a reconciliation of the change in net assets available for plan benefits per the accompanying financial statement to Schedule H of Form 5500 for the year ended December 31, 2024:

Net change in assets available for plan benefits per the financial statement	<b>\$ 1,942,658</b>
Employer contributions	<b>(11,685)</b>
Employee contributions	<b>(14,754)</b>
Net change in assets available for plan benefits per Schedule H of Form 5500	<b>\$ 1,916,219</b>

**8. Subsequent Events**

Management evaluated events and transactions after December 31, 2024 through October 14, 2025, the date the financial statements were available to be issued, for subsequent events, and determined that there were no subsequent events to report.

**SUPPLEMENTAL SCHEDULE**

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Employer ID # 20-2653111 Plan # 001  
Schedule H, Part IV Line 4i - Schedule of Assets (Held at End of Year)  
December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment, including maturity date rate of interest, collateral, par, or maturity value	Cost	Current value	
<b>Mutual funds:</b>				
Vanguard Target Retirement 2035 Fund	Mutual fund	\$ --	\$ 1,034,001	
Vanguard Target Retirement 2055 Fund	Mutual fund	--	742,581	
Vanguard Target Retirement 2040 Fund	Mutual fund	--	680,006	
Vanguard Target Retirement 2030 Fund	Mutual fund	--	550,754	
Vanguard Target Retirement 2050 Fund	Mutual fund	--	509,203	
Vanguard Target Retirement 2045 Fund	Mutual fund	--	385,046	
Vanguard Target Retirement 2060 Fund	Mutual fund	--	361,647	
Vanguard Growth Index Fund Admiral	Mutual fund	--	277,628	
Vanguard Target Retirement 2065 Fund	Mutual fund	--	261,161	
American Funds Washington Mutual - R6	Mutual fund	--	210,515	
Vanguard Target Retirement 2025 Fund	Mutual fund	--	166,628	
Franklin Small Cap Growth R6	Mutual fund	--	89,454	
State Street Equity 500 Index K	Mutual fund	--	87,808	
T Rowe Price Dividend Growth I	Mutual fund	--	84,158	
Vanguard Small Cap Value Index Adm	Mutual fund	--	61,035	
American Funds American Balanced - R6	Mutual fund	--	60,760	
Vanguard Target Retirement 2070 Fund	Mutual fund	--	41,313	
Vanguard Target Retirement 2020 Fund	Mutual fund	--	37,601	
Vanguard Small Cap Index Fund Admiral	Mutual fund	--	34,347	
Vanguard Emerging Markets Fund Admiral	Mutual fund	--	25,071	
AMC Real Estate Fund - R6	Mutual fund	--	20,196	
American Funds Inflation Linked Bond - R6	Mutual fund	--	10,599	
T Rowe Price Overseas Stock	Mutual fund	--	9,744	
iShares Russell Midcap Index K	Mutual fund	--	8,371	
Vanguard Target Retirement Income Fund	Mutual fund	--	8,233	
iShares MSCI EAFE International Index K	Mutual fund	--	5,633	
Lord Abbett High Yield Fund R6	Mutual fund	--	2,840	
BlackRock Total Return K	Mutual fund	--	572	
		\$ --	\$ 5,766,905	
<b>Collective trust:</b>				
The Standard Stable Asset Fund II	Collective trust	\$ --	\$ 43,307	
* <b>Participant notes receivable</b>	Varying maturity dates and interest rates ranging from 8.50%-9.50%	\$ --	\$ 51,978	

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

Note: The above information was derived from information certified by the Plan's trustee. Cost information has been omitted for all participant-directed funds.

The information in this electronic document is confidential and may be legally privileged. It is intended solely for the specified recipients. Access to this document by anyone else is unauthorized.

Bauknight Pietras & Stormer, P.A. shall have no liability, and shall pursue all available legal and equitable remedies against any recipients, for the unauthorized use or distribution of this document.

If you are not the intended recipient of this document, any disclosure, copying, distribution or any action taken or omitted to be taken in reliance on it, is prohibited and may be unlawful. When addressed to our clients, any opinions or advice contained in this document are subject to the terms and conditions expressed in the governing Bauknight Pietras & Stormer, P.A. client engagement letter (or as otherwise agreed to with our clients).

Financial Statements  
and Supplemental Schedule

Allsource Enterprises LLC  
401(k) Profit Sharing Plan and Trust

*Years Ended December 31, 2024 (Audited) and 2023 (Compiled)  
with Report of Independent Auditors*

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Financial Statements and Supplemental Schedule  
Years Ended December 31, 2024 (Audited) and 2023 (Compiled)

**Contents**

Report of Independent Auditors .....	1-5
Audited Financial Statements	
Statements of Net Assets Available for Plan Benefits.....	6
Statements of Changes in Net Assets Available for Plan Benefits .....	7
Notes to Financial Statements.....	8-14
Supplemental Schedule	
Schedule H, Part IV Line 4i - Schedule of Assets (Held at End of Year) .....	15

## Report of Independent Auditors

Administrative Committee  
Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Scope and Nature of the Employee Retirement Income Security Act of 1974 (“ERISA”) Section 103(a)(3)(C) Audit of the 2024 Financial Statements**

We have performed an audit of the 2024 financial statements of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust (the “Plan”), an employee benefit plan subject to ERISA, as permitted by ERISA Section 103(a)(3)(C) (“ERISA Section 103(a)(3)(C) audit”). The financial statements comprise the statement of net assets available for plan benefits as of December 31, 2024, and the related statement of changes in net assets available for plan benefits for the year then ended, and the related notes to the financial statements (“2024 Financial Statements”).

Management, having determined it is permissible in the circumstances, has elected to have the audit of the Plan’s 2024 Financial Statements performed in accordance with ERISA Section 103(a)(3)(C) pursuant to 29 CFR 2520.103-8 of the Department of Labor’s (“DOL”) Rules and Regulations for Reporting and Disclosure under ERISA. As permitted by ERISA Section 103(a)(3)(C), our audit need not extend to any statements or information related to assets held for investment of the Plan (“investment information”) by a bank or similar institution or insurance carrier that is regulated, supervised, and subject to periodic examination by a state or federal agency, provided that the statements or information regarding assets so held are prepared and certified to by the bank or similar institution or insurance carrier in accordance with 29 CFR 2520.103-5 of the DOL’s Rules and Regulations for Reporting and Disclosure under ERISA (“qualified institution”).

Management has obtained a certification from a qualified institution as of and for the year ended December 31, 2024, stating that the certified investment information, as described in Note 3 to the financial statements, is complete and accurate.

### **Opinion on the 2024 Financial Statements**

In our opinion, based on our audit and on the procedures performed as described in the Auditors’ Responsibilities for the Audit of the 2024 Financial Statements section of our report:

- The amounts and disclosures in the accompanying 2024 Financial Statements, other than those agreed to or derived from the certified investment information, are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States.

Administrative Committee

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Opinion on the 2024 Financial Statements (continued)**

- The information in the accompanying 2024 Financial Statements related to assets held by and certified to by a qualified institution agrees to, or is derived from, in all material respects, the information prepared and certified by an institution that management determined meets the requirements of ERISA Section 103(a)(3)(C).

### **Basis for Opinion on the 2024 Financial Statements**

We conducted our audit in accordance with auditing standards generally accepted in the United States. Our responsibilities under those standards are further described in the Auditors' Responsibilities for the Audit of the 2024 Financial Statements section of our report. We are required to be independent of the Plan and to meet our other ethical responsibilities in accordance with the relevant ethical requirements relating to our audit. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our ERISA Section 103(a)(3)(C) audit opinion.

### **Responsibilities of Management for the 2024 Financial Statements**

Management is responsible for the preparation and fair presentation of the 2024 financial statements in accordance with accounting principles generally accepted in the United States, and for the design, implementation, and maintenance of internal control relevant to the preparation and fair presentation of financial statements that are free from material misstatement, whether due to fraud or error. Management's election of the ERISA Section 103(a)(3)(C) audit does not affect management's responsibility for the financial statements.

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

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

Administrative Committee  
Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Auditors' Responsibilities for the Audit of the 2024 Financial Statements**

Except as described in the Scope and Nature of the ERISA Section 103(a)(3)(C) Audit of the 2024 Financial Statements section of our report, our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditors' report that includes our opinion. Reasonable assurance is a high level of assurance but is not absolute assurance and therefore is not a guarantee that an audit conducted in accordance with auditing standards generally accepted in the United States 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 auditing standards generally accepted in the United States, we:

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

Administrative Committee  
Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

### **Auditors' Responsibilities for the Audit of the 2024 Financial Statements (continued)**

Our audit did not extend to the certified investment information, except for obtaining and reading the certification, comparing the certified investment information with the related information presented and disclosed in the 2024 Financial Statements, and reading the disclosures relating to the certified investment information to assess whether they are in accordance with the presentation and disclosure requirements of accounting principles generally accepted in the United States.

Accordingly, the objective of an ERISA Section 103(a)(3)(C) audit is not to express an opinion about whether the 2024 Financial Statements as a whole are presented fairly, in all material respects, in accordance with accounting principles generally accepted in the United States.

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

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

The supplemental schedule, as listed in the table of contents, is presented for the purpose of additional analysis and is not a required part of the 2024 Financial Statements but is supplementary information required by the DOL'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 2024 Financial Statements. The information included in the supplemental schedule, other than that agreed to or derived from the certified investment information, has been subjected to auditing procedures applied in the audit of the 2024 Financial Statements and certain additional procedures, including comparing and reconciling such information directly to the underlying accounting and other records used to prepare the 2024 Financial Statements or to the 2024 Financial Statements themselves, and other additional procedures in accordance with auditing standards generally accepted in the United States. For information included in the supplemental schedule that agreed to or is derived from the certified investment information, we compared such information to the related certified investment information.

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



**BPS**

Tax / Assurance / Consulting

Administrative Committee

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust

**Other Matter - Supplemental Schedule Required by ERISA (continued)**

In our opinion:

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

**Accountants' Compilation Report on the 2023 Financial Statement**

Management is responsible for the accompanying 2023 financial statement of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust, which comprises the statement of net assets available for plan benefits as of December 31, 2023, and the related notes to the 2023 financial statement in accordance with accounting principles generally accepted in the United States. We have performed a compilation engagement in accordance with *Statements on Standards for Accounting and Review Services* promulgated by the Accounting and Review Services Committee of the American Institute of Certified Public Accountants. We did not audit or review the 2023 financial statement nor were we required to perform any procedures to verify the accuracy or completeness of the information provided by management. Accordingly, we do not express an opinion, a conclusion, nor provide any form of assurance on the 2023 financial statement.

*Baumight Pietros & Stone, P.A.*

Columbia, South Carolina

October 14, 2025

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Statements of Net Assets Available for Plan Benefits

	December 31,	
	2024 (Audited)	2023 (Compiled)
<b>Assets</b>		
Investments, at fair value:		
Mutual funds	\$ 5,766,905	\$ 3,845,799
Collective trust	43,307	41,951
Total investments	5,810,212	3,887,750
Employer contributions receivable	11,685	--
Participant contributions receivable	14,754	--
Notes receivable from participants	51,978	58,221
Total assets	5,888,629	3,945,971
<b>Liabilities</b>		
Plan liabilities	--	--
Net assets available for plan benefits	\$ 5,888,629	\$ 3,945,971

*See accompanying notes.*

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Statement of Changes in Net Assets Available for Plan Benefits  
Year Ended December 31, 2024

**Additions to net assets attributed to:**

Investment income:

Net appreciation in fair value of investments	\$	443,566
Interest and dividends		167,407
		610,973

Interest on participant notes receivable		4,036
--	--	-------

Contributions:

Participant, including rollovers		1,046,037
Employer contributions		670,824
Total additions		2,331,870

**Deductions from net assets attributed to:**

Benefits paid to participants, including rollovers		349,336
Deemed distributions		2,027
Administrative expenses		37,849
Total deductions		389,212

Net change		1,942,658
------------	--	-----------

Net assets available for plan benefits, beginning		3,945,971
---	--	-----------

Net assets available for plan benefits, ending	\$	5,888,629
--	----	-----------

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

## 1. Description of Plan

The following description of the Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust (the "Plan") provides only general information. Participants may refer to the Plan document for a more complete description of the Plan's provisions.

### General

The Plan is a defined contribution plan sponsored by Allsource Enterprises, LLC (the "Plan Sponsor") to cover Safe Industries, LLC and Fire Plus, LLC (the "Companies"), both of which have the same owner. The Plan provides retirement benefits to eligible employees of both companies. The Plan is subject to the provisions of the Employee Retirement Income Security Act of 1974 ("ERISA").

### Eligibility

Employees may become participants in the 401(k) employee deferral and employer matching portion of the Plan upon attainment of age eighteen. On the first day of the month following the employee meeting the eligibility requirement, participants become automatically enrolled in the Plan at five percent of the participants' eligible compensation, unless the employee specifically elects to decline to participate. Employees are eligible to receive profit sharing contributions after attaining age twenty-one. Employees are required to complete 1,000 hours of service during the Plan year and be employed by the Companies on the last day of the Plan year to receive profit sharing contributions.

### Contributions

Participants may contribute between one and ninety percent of their pre-tax annual compensation to the 401(k) portion of their account or between one and ninety percent of their after-tax annual compensation to the ROTH 401(k) portion of their account, as defined by the Plan document, subject to contribution limitations specified by applicable laws and regulations. Participants who have attained age fifty before the end of the Plan year are eligible to make catch-up contributions, up to the maximum annual amount permitted by statute. Participants may also contribute amounts representing rollover distributions from other qualified defined benefit or contribution plans.

During the year ended December 31, 2024, the Plan Sponsor made matching contributions equal to one hundred percent of up to five percent of participants' eligible compensation (as defined by the Plan document), which were contributed as safe harbor matching contributions. The Plan Sponsor also has the option to make employer profit sharing contributions, which are allocated to individual participants' accounts based on the ratio that their compensation bears to the total compensation of all participants eligible for a share of the contribution. The Plan Sponsor made no employer profit sharing contributions for the year ended December 31, 2024.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**1. Description of Plan (continued)**

**Participant Accounts**

Each participant's 401(k) portion of their account is credited with the participant's elected deferral contributions and employer contributions, and is charged with an allocation of any administrative expenses paid by the Plan. Participants may elect to allocate current contributions among a variety of fund options. The allocations remain in effect until a new election is made.

Earnings or losses are allocated by fund based on the ratio of a participant's account invested in a particular fund to all participants' investments in that fund. The benefit to which a participant is entitled is the benefit that can be provided from the participant's vested account.

**Participant Notes Receivable**

Participants may borrow from their accounts a minimum of \$1,000 up to a maximum equal to the lesser of \$50,000 or 95% of one-half of their vested account balance, excluding the Roth Elective Deferral balance. The notes are collateralized by the balance in the participant's accounts and bear interest at the prime rate plus 1%. Interest rates ranged from 8.50% to 9.50% at December 31, 2024. Notes receivable are required to be repaid within five years, except for loans made for the purchase of a primary residence. A participant may have no more than two notes due to the Plan at any time. Principal and interest are paid ratably through payroll deductions.

**Vesting**

Participants are immediately 100% vested in their elective deferral and matching contributions, plus actual earnings thereon. Vesting in the Plan Sponsor's employer profit sharing contributions is based on years of continuous service. Participants become 20% vested in employer profit sharing contributions upon completion of two years of continuous service. During the next four-year period of service, participants vest 20% per year in profit sharing contributions such that, upon the completion of six years of continuous service, participants are 100% vested in the profit sharing contributions.

Participants will be considered 100% vested in employer profit sharing contributions in the event of retirement on or after age sixty-five, death, disability, or plan termination. If an employee is terminated from the Plan prior to becoming 100% vested in employer profit sharing contributions, the non-vested portion will be allocated to the Plan's forfeitures account.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**1. Description of Plan (continued)**

**Forfeitures**

In accordance with the Plan document, available forfeitures may be used first to offset employer contributions, and any remaining forfeitures may be used to offset plan administrative expenses. Any remaining forfeited amounts are then reallocated back to active participants. As of December 31, 2024 and 2023, unallocated forfeitures totaled approximately \$21,000 and \$23,000, respectively. Forfeitures of approximately \$2,000 were used to reduce employer matching contributions for the year ended December 31, 2024.

**Administrative Expenses**

Certain administrative expenses are charged to individual participant accounts. The Plan pays recordkeeping and certain professional fees. All administrative fees not paid by the Plan are paid by the Plan Sponsor.

**Payment of Benefits**

Upon retirement, disability, attainment of age 59 ½, death, or termination of employment, a participant or their designated beneficiary may elect to receive either a lump-sum amount equal to the value of the participant's vested interest in his or her account, or as installment payments over a period of time not to exceed the expected future lifetime of the participant and their beneficiary. Subject to certain conditions, participants are permitted to make withdrawals from their vested account balance in the Plan in cases of severe financial hardship while employed. Account balances that exceed \$5,000 for terminated participants are automatically distributed to participants.

**Plan Termination**

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

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

## **2. Basis of Presentation and Summary of Significant Accounting Policies**

### **Basis of Accounting**

The accompanying financial statements are prepared in accordance with accounting principles generally accepted in the United States ("US GAAP").

### **Estimates**

The preparation of financial statements in conformity with US GAAP requires Plan management to make estimates and assumptions that affect the reported amounts of assets and liabilities and changes therein, and disclosures of contingent assets and liabilities. Accordingly, actual results could differ from those estimates.

### **Participant Notes Receivable**

Notes receivable from participants are measured at their unpaid principal balance plus any accrued but unpaid interest, which approximates fair value. Interest income is recorded on the accrual basis. Related fees are charged directly to the participant's account and are included in administrative expenses when incurred. If a participant does not make loan repayments and the Plan administrator considers the participant loan to be in default, the loan balance is reduced, and the delinquent participant note receivable is recorded as a distribution based on the terms of the Plan document.

### **Investment Valuation and Income Recognition**

Investments are stated at fair value. Fair value is the price that would be received to sell an asset or paid to transfer a liability in an orderly transaction between market participants at the measurement date. See Note 4 for discussion of fair value measurements.

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

### **Risks and Uncertainties**

The Plan invests in investment securities that are exposed to various risks such as interest rate, market, and credit risks. Due to the level of risk associated with certain investment securities, it is at least reasonably possible that changes in the values of investment securities will occur in the near term and that such changes could materially affect participants' account balances and the amounts reported in the 2024 statement of net assets available for plan benefits.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**2. Basis of Presentation and Summary of Significant Accounting Policies (continued)**

**Payment of Benefits**

Benefit payments are recorded when paid.

**3. Custodian Certification**

Information disclosed in the accompanying financial statements as of and for the year ended December 31, 2024, related to investments, net appreciation in fair values of investments, and interest and dividends, was obtained or derived from information supplied to the Plan administrator and certified as complete and accurate by Mid Atlantic Trust Company.

**4. Fair Value Measurements**

GAAP establishes a fair value hierarchy that prioritizes the inputs to valuation techniques used to measure fair value. This hierarchy consists of three broad levels: Level 1 inputs consist of unadjusted quoted prices in active markets for identical assets and have the highest priority; Level 2 inputs consist of observable inputs other than quoted prices for identical assets; and Level 3 inputs to the valuation methodology are unobservable and have the lowest priority. The Plan uses appropriate valuation techniques based on the available inputs to measure the fair value of its investments. When available, the Plan measures fair value using Level 1 inputs because they generally provide the most reliable evidence of fair value. All of the Plan's mutual fund investments are valued using Level 1 inputs, which are based on quoted market prices of the shares held by the Plan.

The Plan's investments also include The Standard Stable Asset Fund II ("SSAF"), a collective trust which invests its assets in a variety of bank, insurance plan sponsor, and other financial institution investment contracts. SSAF is considered a stable value fund that is valued at the net asset value ("NAV") of units of the accounts. The NAV, as provided by the issuer, is used as a practical expedient to estimate fair value. The NAV of the account is based on the fair value of the underlying investments held less the account's liabilities. The use of NAV as fair value is deemed appropriate as the collective trust does not have a finite life, unfunded commitments relating to these types of investments, or significant restrictions on redemptions. This practical expedient is not used when it is determined to be probable that the fund will sell the investment for an amount significantly different than the reported NAV. Participant transactions (purchases and sales) may occur daily. Were the Plan to initiate a full redemption of the account, the account provider reserves the right to temporarily delay withdrawal from the account in order to ensure that security liquidations are carried out in an orderly business manner.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**4. Fair Value Measurements (continued)**

The methods used to measure fair values may produce amounts that may not be indicative of net realizable values or reflective of future fair values. Furthermore, although Plan management believes the valuation methods used are appropriate and consistent with other market participants, the use of different methodologies or assumptions to determine the fair values of certain financial instruments could result in a different fair value measurement at the reporting date.

**5. Income Tax Status**

The Plan is a non-standardized profit sharing plan designed to be in compliance with the applicable requirements of the Internal Revenue Code ("IRC"). The non-standardized profit sharing plan obtained its latest determination letter on August 31, 2020, in which the Internal Revenue Service ("IRS") determined that the pre-approved plan document and related trust are designed in accordance with applicable sections of the IRC. Although the non-standardized profit sharing plan has been amended since receiving the determination letter, the Plan administrator and the Plan's tax counsel believe that the Plan is designed, and is currently being operated, in compliance with the applicable requirements of the IRC and, therefore, believe that the Plan is qualified, and the related trust is tax-exempt.

The Plan had operational errors during the years ended December 31, 2022 and 2024 that resulted in an underpayment of contributions and lost earnings to the Plan. Management is also reviewing activity for the year ended December 31, 2023 for potential errors. As of the date the financial statements were available to be issued, management has not completely determined the extent of the errors and has not quantified the impact on the Plan's financial statements. Management will take the necessary steps to correct any errors and preserve the Plan's qualified tax status.

US GAAP requires the Plan administrator to evaluate tax positions taken by the Plan and recognize a tax liability for any uncertain position that more likely than not would not be sustained upon examination by the IRS. No such liabilities were identified at December 31, 2024 or 2023. The Plan is subject to routine audits by tax authorities; however, there are currently no audits for any tax periods in progress.

**6. Party-in-Interest Transactions**

Fees paid by the Plan to Mid Atlantic Trust Company for investment management and administrative services amounted to approximately \$38,000 for the year ended December 31, 2024, and are included as a reduction of the return earned on each fund. The Plan also has participant notes receivable. These transactions qualify as party-in-interest transactions and are exempt from the prohibited transaction rules of ERISA.

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Notes to Financial Statements  
December 31, 2024 and 2023

**7. Reconciliation of Audited Financial Statements to Schedule H of Form 5500**

The following is a reconciliation of net assets available for plan benefits per the accompanying financial statements to Schedule H of Form 5500 as of December 31, 2024 and 2023:

	<b>December 31,</b>	
	<b>2024</b>	<b>2023</b>
	<b>(Audited)</b>	<b>(Compiled)</b>
Net assets available for plan benefits per the financial statements	<b>\$ 5,888,629</b>	\$ 3,945,971
Employer contributions receivable	<b>(11,685)</b>	--
Employee contributions receivable	<b>(14,754)</b>	--
Net assets available for plan benefits per Schedule H of Form 5500	<b>\$ 5,862,190</b>	\$ 3,945,971

The following is a reconciliation of the change in net assets available for plan benefits per the accompanying financial statement to Schedule H of Form 5500 for the year ended December 31, 2024:

Net change in assets available for plan benefits per the financial statement	<b>\$ 1,942,658</b>
Employer contributions	<b>(11,685)</b>
Employee contributions	<b>(14,754)</b>
Net change in assets available for plan benefits per Schedule H of Form 5500	<b>\$ 1,916,219</b>

**8. Subsequent Events**

Management evaluated events and transactions after December 31, 2024 through October 14, 2025, the date the financial statements were available to be issued, for subsequent events, and determined that there were no subsequent events to report.

**SUPPLEMENTAL SCHEDULE**

Allsource Enterprises LLC 401(k) Profit Sharing Plan and Trust  
Employer ID # 20-2653111 Plan # 001  
Schedule H, Part IV Line 4i - Schedule of Assets (Held at End of Year)  
December 31, 2024

(a)	(b)	(c)	(d)	(e)
Identity of issue, borrower, lessor or similar party	Description of investment, including maturity date rate of interest, collateral, par, or maturity value	Cost	Current value	
<b>Mutual funds:</b>				
Vanguard Target Retirement 2035 Fund	Mutual fund	\$ --	\$ 1,034,001	
Vanguard Target Retirement 2055 Fund	Mutual fund	--	742,581	
Vanguard Target Retirement 2040 Fund	Mutual fund	--	680,006	
Vanguard Target Retirement 2030 Fund	Mutual fund	--	550,754	
Vanguard Target Retirement 2050 Fund	Mutual fund	--	509,203	
Vanguard Target Retirement 2045 Fund	Mutual fund	--	385,046	
Vanguard Target Retirement 2060 Fund	Mutual fund	--	361,647	
Vanguard Growth Index Fund Admiral	Mutual fund	--	277,628	
Vanguard Target Retirement 2065 Fund	Mutual fund	--	261,161	
American Funds Washington Mutual - R6	Mutual fund	--	210,515	
Vanguard Target Retirement 2025 Fund	Mutual fund	--	166,628	
Franklin Small Cap Growth R6	Mutual fund	--	89,454	
State Street Equity 500 Index K	Mutual fund	--	87,808	
T Rowe Price Dividend Growth I	Mutual fund	--	84,158	
Vanguard Small Cap Value Index Adm	Mutual fund	--	61,035	
American Funds American Balanced - R6	Mutual fund	--	60,760	
Vanguard Target Retirement 2070 Fund	Mutual fund	--	41,313	
Vanguard Target Retirement 2020 Fund	Mutual fund	--	37,601	
Vanguard Small Cap Index Fund Admiral	Mutual fund	--	34,347	
Vanguard Emerging Markets Fund Admiral	Mutual fund	--	25,071	
AMC Real Estate Fund - R6	Mutual fund	--	20,196	
American Funds Inflation Linked Bond - R6	Mutual fund	--	10,599	
T Rowe Price Overseas Stock	Mutual fund	--	9,744	
iShares Russell Midcap Index K	Mutual fund	--	8,371	
Vanguard Target Retirement Income Fund	Mutual fund	--	8,233	
iShares MSCI EAFE International Index K	Mutual fund	--	5,633	
Lord Abbett High Yield Fund R6	Mutual fund	--	2,840	
BlackRock Total Return K	Mutual fund	--	572	
		\$ --	\$ 5,766,905	
<b>Collective trust:</b>				
The Standard Stable Asset Fund II	Collective trust	\$ --	\$ 43,307	
* <b>Participant notes receivable</b>	Varying maturity dates and interest rates ranging from 8.50%-9.50%	\$ --	\$ 51,978	

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

Note: The above information was derived from information certified by the Plan's trustee. Cost information has been omitted for all participant-directed funds.